

Concerns, complaints & compliments policy – version 9.1

Date approved for use: 17th December 2018

Scope

- 1.1 This policy is a Dimensions Group policy. This means it applies to Dimensions (UK) Limited, Outreach 3 Way, Waymarks and Discovery.
- 1.2 The policy explains how we encourage, respond to, monitor and act on complaints, concerns and compliments received from the people we support, their representatives and others about the services we provide.
- 1.3 Its purpose is also to help employees view complaints and concerns as positively as compliments. This is as a means of increasing customer satisfaction and improving our services. It outlines the procedures we expect employees to follow to resolve complaints as quickly as possible and meet the regulatory requirements on Dimensions to monitor complaints.
- 1.4 All our employees should follow this policy. Registered managers are responsible for ensuring that the people they support, their families and representatives have the confidence and information to raise concerns, make complaints and pay compliments. Whilst remaining ultimately accountable, registered managers of domiciliary care services may delegate this responsibility to locality managers. However, they must keep a record of which responsibilities they have delegated to whom.
- 1.5 It is the head of housing management's responsibility to provide Dimensions tenants with the appropriately formatted means to raise concerns and pay compliments.
- 1.6 Information is also available for people we support, their families and representatives so that they can see how we will respond to their concern, complaint or compliment. This information is also available in different formats (see paragraph [4.3](#))
- 1.7 To go straight to the policy content click on the hyperlinked section title below:

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Policy statement

- 2.1 We are committed to providing as high quality a service as possible to the people we support, their families and representatives. We recognise that feedback of all kinds helps us to improve what we do. We will make every effort to let people know how important their feedback is to us, whether they are happy or unhappy with the services we provide.
- 2.2 This means we will provide everyone we support and their relatives with a copy of this policy or a version of it in the format of their choice and will make reasonable adjustments to ensure information is accessible to everyone. We support the principles of the NHS England 'Ask Listen Do' project, and have included these throughout this policy and associated documents.
- 2.3 As a Dimensions employee, you should understand that whilst we expect you to help others make complaints, the complaints system is not for your personal use. Should you have a concern, you should raise it with your line manager. If this does not resolve the matter, you can follow our Grievance policy or if the matter is in the public interest you can whistleblow (see the Whistleblowing policy).
- 2.4 We treat all complaints and compliments in confidence and use the information to learn from and improve our services. We will not withdraw or reduce services because someone makes a complaint in good faith.
- 2.5 Information held about complaints will be held and processed in line with the principles of the Data Protection legislation. Statistical reports will be produced to monitor trends but individuals will not be identified in these reports.

The impact of not implementing this policy

- 3.1 If you don't follow the guidance in this policy, people we support and their representatives might lose confidence in us. They might lose confidence in you

personally. They might go to another provider for support. Not following this policy may make people less likely to give honest feedback, and this would make it harder for us to improve the quality of our services.

- 3.2 You might also get us in trouble with the local authority (LA) and our other regulators. In England, this is the Care Quality Commission (CQC). In Wales, it's Care Inspectorate Wales (CIW). They might serve a requirement or warning notice. They would probably include the failing in their inspection report, and this would badly damage our reputation.
- 3.3 If you are a registered manager, you might get in trouble with our regulators personally.
- 3.4 Your actions in dealing with a complaint may be investigated by the Local Government & Social Care Ombudsman. You will need to show that you have followed this policy.

Policy content

Making it easy to complaint

- 4.1 If you are an employee, you should make sure that people who want to raise a concern or complaint find it easy to do and that you:
 - ask people about their experiences on a regular basis;
 - provide information in a format that is helpful to them;
 - put people at ease;
 - resolve the issue as quickly as possible;
 - keep people informed about the progress of investigations;
 - provide people who make complaints with full explanations and apologies when appropriate; and
 - offer opportunities for people to tell us about their experience of making a complaint, so that we can learn from this.
- 4.2 Anyone affected by the way Dimensions provides services can make a complaint. You can make a complaint or raise a concern:
 - in person;
 - through a member of our staff;

- through an advocate or representative;
- by telephone – complaints telephone line: 0300 303 9024;
- by letter;
- by email to the manager, or to the organisation’s complaints email address: complaints@dimensions-uk.org;
- You can also make a complaint via our website: <https://www.dimensions-uk.org/contact/making-complaint/>

4.3 We have an easy read guide, animation and family fact sheet too. Several of these documents are also available as appendices to the policy:

- [appendix 1: Making a complaint or speaking out easy-read booklet](#)
- appendix 2: Making a complaint or speaking out CD (request from complaints@dimensions-uk.org)
- [appendix 9: Making a complaint or speaking out animation](#)
- [appendix 3: What to do if you are unhappy with your home](#) (for Dimensions tenants).

4.4 We deal with anonymous complaints under the same procedure as complaints that aren’t anonymous. However, it is better if contact details are provided, so we can tell the complainant the outcome of our investigation, and ask them how well their complaint was handled.

4.5 A representative may complain on behalf of a person we support if:

- the person has given consent for the representative to act on their behalf; or
- the person cannot complain unaided and cannot give consent because they lack capacity; or
- the representative is acting in the person we support’s best interests – for example, where the matter complained about, if true, would be detrimental to the person.

4.6 If you are not satisfied that the representative is acting with the person we support’s consent or in their best interests, you must notify the representative in writing, and state the reason for its decision.

- 4.7 If someone complains on behalf of a person we support, we will involve the person as much as possible. But we will always be mindful of sharing data about a person without their consent.
- 4.8 If a person wishes to appoint an advocate, or you feel they may benefit from an advocate's help in making a complaint, you should do all you can to help them appoint one. Example national advocacy agencies include:
- SeAp (Support Empower Advocate Promote) – contact details:
www.seap.org.uk
Tel: 0330 440 9000
 - PoHWER – contact details:
www.pohwer.net
Tel: 0300 456 2370

But bear in mind, there will be smaller local agencies in your area too.

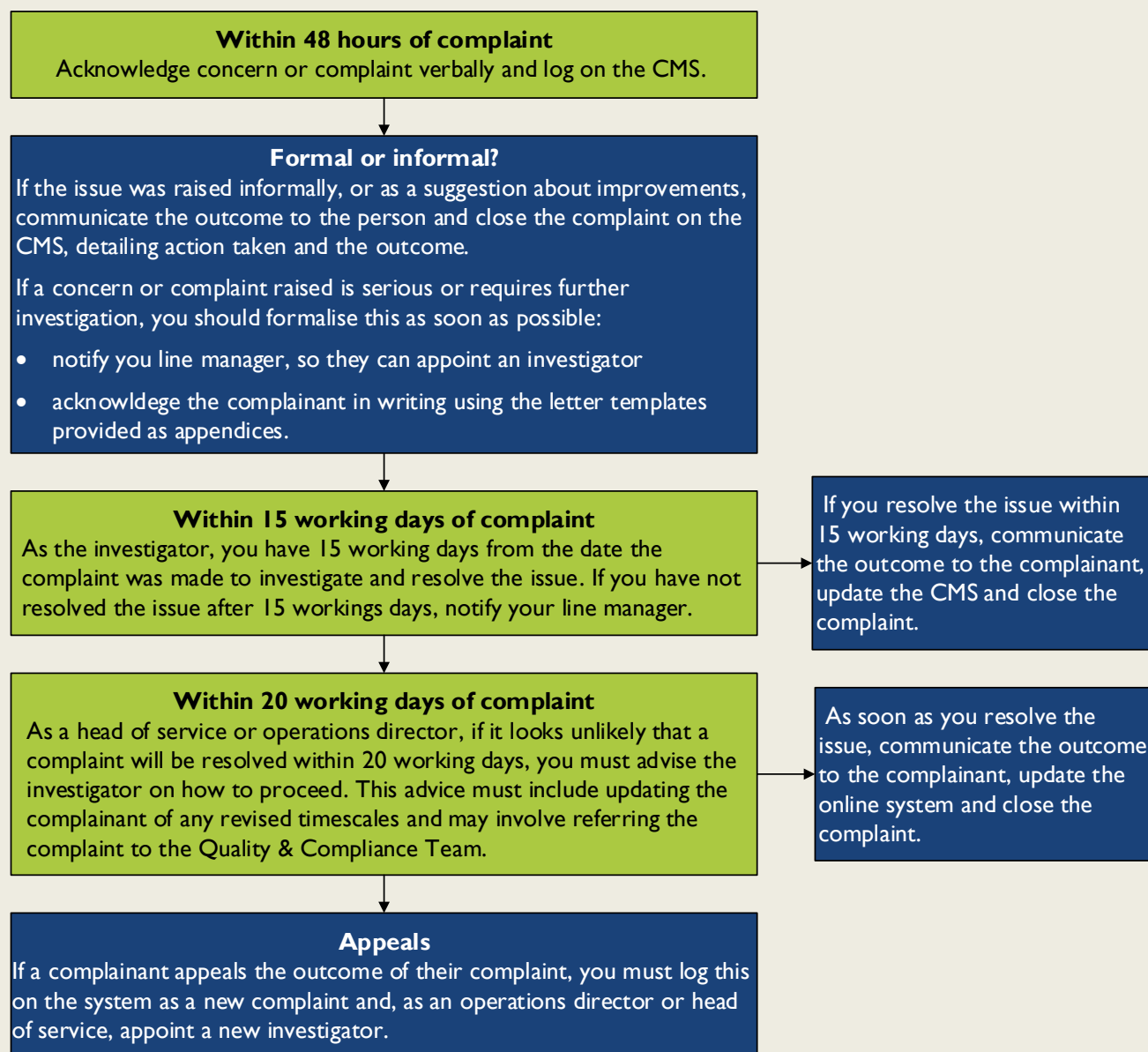
- 4.9 If a person would like to speak with someone outside of Dimensions about support with making a complaint, or needs further advice, you can also direct them to their local Healthwatch or Citizens Advice.

Dealing with & investigating a concern or complaint

- 5.1 Steps to take when receiving a complaint are summarised in the [Dealing with a complaint flowchart](#) on page 6.
- 5.2 We aim to handle concerns & complaints quickly, effectively and in a fair and honest way.
- 5.3 Often people feel more comfortable about suggesting improvements rather than complaining formally. These concerns or feedback should still be recorded on the complaints management system (CMS), to help us learn from these. However, formal letters (as per the appendices to this policy) do not need to be sent in these instances. Refer to [Dealing with a complaint flowchart](#) on page 8 for further guidance.
- 5.4 If a complainant alerts us to possible abuse, neglect or a different criminal offence, we will tell the local authority's adult safeguarding team and the police, as appropriate. The safeguarding team/police will decide how to investigate and monitor outcomes. If somebody brings such an allegation to your attention,

you must inform a more senior colleague immediately – that is, whether day or night, so they may take appropriate action.

Dealing with a complaint flowchart



- 5.5 If a complainant involves more than our organisation in their complaint (Dimensions and a local authority for example), we must work with that organisation to provide a single response to complainants. Arrangements need to be in place to agree:
- who should take the lead in co-ordinating the handling of the complaint;
 - communicating with the complainant;
 - providing information that is reasonably requested; and
 - attending any meeting reasonably required.

- 5.6 If someone complains to us, and we aren't responsible for the care or service complained about, you should:
- signpost them to the right organisation and provide the person with their contact details; and
 - offer to share their concerns with the correct organisation – you will need the person's permission to do this.
- 5.7 When you receive a concern or complaint you must:
- show sympathy to the person raising the concern;
 - write down the complainant's contact details, if you don't already have them;
 - assure the complainant that any information they give you will be shared on a need-to-know basis only, as per our Confidentiality policy;
 - reassure them that we will not treat them or others unfairly if they choose to complain;
 - ask them what they would like to happen as a result of their complaint (the outcome) and record this in your report
 - take all reasonable steps to resolve the complaint informally – that is, to their satisfaction but without the need for a full-blown investigation
 - if you cannot resolve their concern immediately, tell them what steps you are going to take to resolve it as soon as possible.
 - If you are not a manager, whether or not you immediately resolve a concern or complaint, you must inform your line manager as soon as possible and within 24 hours at most. If unable to inform your line manager within 24 hours, you must inform their line manager or the on call manager.
- 5.8 Operations directors, heads of service and their line managers are responsible for appointing investigators, including assigning them on the CMS, and where appropriate, may request the Quality & Compliance Team investigate.
- 5.9 You must appreciate that if you receive a concern or complaint that results in a safeguarding alert or even a police investigation, it does not stop being a complaint. You have the same duty to keep the complainant informed and to update the CMS.

- 5.10 As a locality manager, operations director or head of service, if a team member has not resolved the complaint already, inform the team member that you will contact the complainant. Make contact as soon as possible and within two working days at most to assure them that you will deal with their complaint. Do this by sending the complaint acknowledgement letter, [appendix 6: Complaint acknowledgement letter](#). Edit it as appropriate. Tell the complainant who will be investigating their complaint. Outline the expected timescales for completing your investigation. This should be within 15 working days of the date the person first raised their complaint. Upload this letter and any other associated documents to the CMS.
- 5.11 You/the investigator should keep the person making the complaint informed about the investigation's progress, particularly if you are not able to resolve their complaint within 15 working days of the complaint being made. It is also important to record all developments on the CMS.
- 5.12 If you cannot resolve the issue within 15 working days of the complaint being made, tell your line manager for a decision on how to proceed. The longest we should take to resolve a concern or complaint is 20 working days.

If a 20-working day resolution looks unlikely or impossible for whatever reason, your line manager will advise you on what exactly to communicate, in writing, to the person making the complaint. It may be the case, that they refer the complaint to our Quality & Compliance Team. In this case, the Quality & Compliance Team will keep the person informed of any revised timescales.

- 5.13 When you have finished your investigation, set out your conclusion and recommendations for action in [appendix 7: Complaint resolution letter](#). The complaint resolution letter includes an invitation to the complainant to complete a Customer complaint satisfaction survey.

Before sending the letter to the person making the complaint, authorisation from your operations director, head of service or more senior manager is required.

- 5.14 If an apology to the complainant is appropriate, you should consider if this falls under the HSCA Duty of Candour. (See Duty of Candour policy.)
- 5.15 You may become aware of a complaint on social media. If this happens, do not attempt to address the matter yourself but inform the Marketing Team either by emailing them, marketingteam@dimensions-uk.org, or if out-of-hours, by messaging them on one of our social media accounts.

Reasons why we might not investigate a complaint

A complaint has already been investigated and resolved

- 6.1 If we have followed our complaints policy, including the appeals process, we will not reinvestigate a previous complaint made and will write to the complainant informing them of this, signposting them to the Local Government & Social Care Ombudsman.

Time limits

- 6.2 Complainants should complain as soon after the date on which the event occurred or came to their notice. If a complaint is received more than twelve months later, we may not be able to investigate properly. But we shall also consider whether there was good reason for not making the complaint sooner and whether, despite the delay, it is still possible to investigate the complaint effectively and fairly. The decision whether or not to investigate will be made by the Group Executive Team, one of whom will also inform the complainant. If the Executive Team can't come to a decision, they will refer to the chair of the Group Audit Committee to make the decision on behalf of the Board.

Unreasonable complainant behaviour

- 6.3 Unreasonable and unreasonably persistent complainants are those who, because of the nature or frequency of their contact with the organisation, hinder our consideration of their, or other people's, complaints.
- 6.4 We will not tolerate deceitful, abusive, offensive, threatening or other forms of unacceptable behaviour from complainants. When it occurs, we will take proportionate action to protect the wellbeing of our employees and the integrity of our processes.
- 6.5 In most instances when we consider someone's behaviour is unreasonable we will explain why and ask them to change it. We will also warn them that, if the behaviour continues, we may take action to restrict their contact with our offices/teams. Where the behaviour is so extreme that it threatens the immediate safety and welfare of our employees we may report the matter to the police or consider taking legal action. In such cases, we may not give the complainant prior warning.
- 6.6 The decision whether not to investigate will be made by the Group Executive Team or chair of the Group Audit Committee as per paragraph [6.2](#). They will also inform the complainant.

Appeals

- 7.1 If a person making a complaint is not happy with the outcome of their complaint, they have the right to appeal. Ideally, they should do this within two weeks of being informed of the outcome. Explain this in your resolution letter ([appendix 7: Complaint resolution letter](#)) and forward any requests for appeal to your operations director or head of service (or more senior manager, if appropriate) as soon as possible, so they may appoint an appeal investigator.
- 7.2 The investigator of an appeal should be senior to the original investigator.
- 7.3 As the investigator of an appeal, you should follow the same procedure for a first-time complaint. This means you have fifteen days to consider it. If it is going to take longer than this, you need to write to the complainant to tell them and explain why.
- 7.4 It also means recording the appeal on the CMS, making reference to complaint ID number of the original complaint.
- 7.5 If your decision is to uphold the original decision not to uphold a complaint, then you must inform the complainant in your complaint appeal resolution letter of their right to contact the relevant ombudsman to ask them to review their complaint.
- 7.6 In England, this is the Local Government & Social Care Ombudsman (LG&SCO) (NB: The LG&SCO will not normally investigate a complaint until the provider has had an opportunity to respond and resolve matters).
- www.lgo.org.uk Tel: 0300 061 0614
 - Web page: <https://www.lgo.org.uk/complaint-form>
- 7.7 In Wales, inform the complainant that they may complain to the Public Services Ombudsman for Wales (PSOW). The PSOW can look into their complaint if the complainant, or person on whose behalf they are complaining, believes they:
- have been treated unfairly or received a bad service through some failure on the part of the organisation providing it; or,
 - have been disadvantaged personally by a service failure.

Phone: 0300 790 0203

Email: ask@ombudsman-wales.org.uk

Website: www.ombudsman-wales.org.uk

Twitter: @OmbudsmanWales

Writing to: Public Services Ombudsman for Wales, 1 Ffordd yr Hen Gae,
Pencoed CF35 5LJ.

7.8 Complainants may also contact:

- Care Quality Commission

Website: www.cqc.org.uk

Tel: 0300 061 6161

Address:

CQC
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

- Care Inspectorate Wales

Website: www.careinspectorate.wales

Tel: 0300 790 0126

Address:

Welsh Government Office
Rhydycar Business Park
Merthyr Tydfil
CF48 1UZ

- the person's local authority (you **must** add its contact details to the person's accessible [appendix I: Making a complaint or speaking out booklet](#))
- the person's landlord.

7.7 Dimensions tenants or their representatives may wish to refer to the Housing Ombudsman Service if they are not happy with our response to a complaint:

- Housing Ombudsman Service

Website: www.housing-ombudsman.org.uk

Tel: 300 111 3000

Address:

PO Box 152

Recording & monitoring

- 8.1 We have to show how we have handled complaints to various statutory bodies. You should log concerns, complaints and compliments on the CMS, as quickly as possible, or ensure this has been completed. This includes uploading all relevant documents – for example written correspondence to and from complainants and investigation reports.
- 8.2 For details on how to use the CMS, see [appendix 5: Guidance - complaints/compliments management system](#).
- 8.3 All compliments should also be recorded on the CMS (see [appendix 5: Guidance - complaints/compliments management system](#)). You may do this for compliments paid verbally, but you may also offer people the opportunity to record their compliment themselves using [appendix 8: Making a compliment](#).
- 8.4 As far as we are able – that is, based on information that people making complaints provide – we will analyse Dimensions’ response to complaints in relation to diversity and address any issues of inequality we identify.
- 8.5 Where required, we will share information on complaints with our regulators but we will depersonalise data to preserve confidentiality as per Data Protection Act (2018). (See Data handling & protection policy.)

Relevant legislation, guidance & related policies & templates

Legislation

- 9.1 The Health & Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015
- 9.2 The Social Services Complaints Procedure (Wales) Regulations 2014
- 9.3 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009

Guidance

- 10.1 *Guidance for providers on meeting the regulations* (Care Quality Commission, 2015)

- 10.2 *National Minimum Standards for Domiciliary Care Agencies in Wales* (The Welsh Assembly Government, 2004)
- 10.3 *The Regulatory Standards for Social Housing in England: Tenant Involvement and Empowerment Standard* (Homes & Communities Agency, 2017)
- 10.4 *Listening, Improving, Responding: a Guide to Better Customer Care* (Department of Health, 2009)
- 10.5 *My expectations for raising concerns and complaints* (Local Government Ombudsman; Healthwatch; Parliamentary Health Ombudsman, England 2014)
- 10.6 Quality Matters - Acting on compliments, feedback and complaints about adult social care – a good practice guide for adult social care practitioners
- 10.7 NHS England – Ask Listen Do (The Ask Listen Do project is aimed at supporting organisations to learn from and improve the experiences of people with a learning disability, autism or both, their families and carers when giving feedback, raising a concern or making a complaint.)
- 10.8 Reasonable adjustments; a legal duty; GOV.UK

Group policies

- 11.1 Data management, security & publications
- 11.2 Data handling & protection
- 11.3 General conditions of use of computing & network facilities
- 11.4 Records management
- 11.5 Accident & incident reporting
- 11.6 Confidentiality
- 11.7 Disciplinary
- 11.8 Whistle-blowing
- 11.9 Maintenance
- 11.10 On call
- 11.11 Professional boundaries
- 11.12 Safeguarding
- 11.13 Duty of candour

Related procedures, decision flowcharts, forms and so on

- 12.1 [Appendix 1: Making a complaint or speaking out easy-read booklet](#)
- 12.2 Appendix 2: Making a complaint or speaking out CD (email complaints@dimensions-uk.org and request a copy)

- 12.3 [Appendix 3: What to do if you are unhappy with your home](#)
- 12.4 [Appendix 4: Complaints form](#)
- 12.5 [Appendix 5: Guidance - complaints/compliments management system](#)
- 12.6 [Appendix 6: Complaint acknowledgement letter](#)
- 12.7 [Appendix 7: Complaint resolution letter](#)
- 12.8 [Appendix 8: Making a compliment](#)
- 12.9 [Appendix 9: Making a complaint or speaking out animation](#)

Equality statement

- 14.1 This policy promotes equality, diversity and human rights by directing Dimensions employees to treat complaints and concerns from people we support and their representatives in exactly the same courteous and helpful way whatever the person's race, age, gender, ethnicity, religion, disability or sexual orientation.
- 14.2 Also, by analysing the diversity of complainants where we can we will identify any pattern revealing issues of inequality and seek to address these proactively.
- 14.3 The equality impact analysis (EIA) is in the intranet's Document library. To see it, click here: [Concerns, complaints & compliments – version 9 EIA](#).

Data protection statement

- 15.1 This policy involves handling personal data. So when you carry out any procedures it describes, you should also think about what our Data handling & protection policy says.
- 15.2 Our Data handling & protection policy is our promise to handle personal data correctly under the General Data Protection Regulation (GDPR). It tells you how to keep that promise. It balances everyone's rights to data privacy with the work we do.
- 15.3 Information held about complaints will be held and processed in line with the principles of the Data Protection Act 2018 and GDPR. Statistical reports will be produced to monitor trends but individuals will not be identified in these reports.
- 15.4 For information on how we handle personal and sensitive data, please refer to the legal section of our website, or a copy can be sent, on request.

Review

- 16.1 We will review this policy two years from its original publication. But if changes in legislation, regulation or best practice mean we need to, we will review sooner.
- 16.2 If the changes are big, we will equality impact analyse (EIA) the policy again and send out to consultation in line with our Policy development & consultation policy.
- 16.3 For smaller changes, we will update this same version. We will record this in the Version control section below.

Glossary

- 17.1 Not all these words appear in this policy. But you may find other people use them when talking about complaints.
- 17.2 **Mental capacity (sometimes shortened to capacity)** – This is a person’s ability to make a particular decision at a particular time.
- 17.3 **Best interests decision** – This is a decision made on behalf of a person who is unable to make the decision for themselves because they lack the mental capacity to do so.
- 17.4 **Complaint investigator** – A person who carries out a formal review of information.
- 17.5 **Complaint management system (CMS)** – our online process for recording and monitoring complaints and compliments.
- 17.6 **Complaint outcome** – This is the result of the investigation, whether the complaint is upheld, partially upheld, or not upheld.
- 17.7 **Complaint appeal** – A request for the complaint outcome to be re-considered.
- 17.8 **Satisfaction survey** – A set of questions asking about the person’s experience of something.

17.9 **Vexatious complaints** – A complaint made without merit and with the intention of causing inconvenience, harassment or expense to others. (It’s our policy not to use this word. We will not label a complainant as vexatious.)

17.10 **Whistleblow** – Raising a concern that is in the public interest, usually about some wrongdoing in the workplace.

People & groups involved in writing & approving this policy

Policy owner:	Jackie Fletcher, Group Director of Quality, Public Affairs & Policy
Policy author/reviewer:	Tanya Emmons, Quality & Compliance Manager
People & groups consulted:	Staff Forum Policy Subgroup; Diversity Matters; Waymarks Diversity Champions.

Version control

Version number	Approved date:	Communication date:	Summary of minor changes
9	28 th Sept 2018	28 th Sept 2018	
9.1			Section 7. Appeals; Data protection statement.

Next full review due: September 2020