

The logo consists of a dark green vertical bar on the left and a light green arrow pointing right from it. The text "Well Led" is centered within the arrow.

Well Led

Complaints, Concerns and Compliments policy

Policy WL/004

Date of last review: 01/03/2022

A decorative graphic of stylized grass blades in various shades of green, located in the bottom left corner of the page.

GOSPEL STANDARD BETHESDA FUND

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Complaints, Concerns and Compliments Policy

Overview

The Gospel Standard Bethesda Fund (Bethesda) in achieving its Statement of Purpose is committed to a policy of:

operating a transparent and accessible system for identifying, receiving, recording, handling, responding, reviewing and learning from complaints, concerns and compliments received from residents, their family/representatives and other users of Bethesda's care provision.

Although Bethesda seeks to provide high quality care to our residents and others who are recipients of our services, we realise at times people may be concerned with aspects of our provision and would encourage them to raise complaints and/or concerns with us so that we can remedy the situation and improve how and what we do.

Likewise, we are pleased to receive compliments on the care that is provided as this helps us to build on this good practice.

Any complaints or concerns that we receive will be investigated in an honest, open, sensitive, inclusive and transparent manner. Bethesda will put the person(s) who has complained at the heart of our investigation. Once our investigation is complete, we will provide a response for the person(s) who has complained, which will clearly explain what action we are taking in order to address the areas raised and we will always complete the response in a timely manner.

Internally, Bethesda will regularly review, analyse and report on the themes emerging from complaints, concerns and compliments, which will allow us to learn and continually improve the quality of services that we provide; and we will share lessons learnt across the Charity.

This Policy applies to all activities across Bethesda.

For the purpose of this Policy:

- The word '*complaint*' is defined as an expression of dissatisfaction about Bethesda's services, which requires further investigation and a response in order for us to determine what has happened, how it happened, how we will resolve the issue(s) and how we can prevent a repeat of the issue(s).
- The word '*concern*' is defined as a low impact issue that is of importance, irritation or frustration to the individual, which can be resolved quickly by taking action locally and without formal investigation. Where a concern has been raised more than once regarding the same issue and by the same person, it will then be categorised as a complaint.
- The word '*compliment*' is defined as an expression of satisfaction received about our services, Homes and Staff.
- The word '*investigation*' is defined as a fair, thorough and proactive evaluation and consideration of all available facts and evidence pertaining to the complaint.

- The word '*response*' is defined as a verbal or written explanation provided to the person who has complained, which outlines how the complaint was investigated and how we have, or will address the issue(s) raised.
- The phrase 'timely manner' is defined as:
 - o A complaint will be acknowledged within 48 hours from receipt.
 - o A response to a complaint will be provided as soon as possible and no longer than 28 calendar days from receipt.
 - o A response to a concern will be provided as soon as possible and no longer than 48 hours from receipt.

In the event that a response cannot be delivered within the above timescales, due to circumstances outside of Bethesda's control, a holding letter and/or verbal update will be provided to the person who has complained, which will explain the reason for the delay. A response will follow as soon as possible thereafter.

Achieving the policy

This will be achieved by:

- ensuring any complaint received will be investigated and necessary and proportionate action taken in response to any failure identified by the complaint or investigation.

Underlying principles:

- Unless they are anonymous, all complaints will be acknowledged whether they are written or verbal.
 - No complainant will be discriminated against or victimised and neither will the care and treatment provided be affected as a result of a complaint.
 - Appropriate action must be taken without delay to respond to any failures identified by a complaint or the investigation of a complaint.
 - Information will be available to a complainant about how to take action if they are not satisfied with how Bethesda manages and/or responds to their complaint. Information should include the internal procedures that the provider must follow and should explain when complaints should/will be escalated to other appropriate bodies.
 - Where complainants escalate their complaint externally because they are dissatisfied with the local outcome, Bethesda will cooperate with any independent review or process.
- operating effective and accessible system for identifying, receiving, recording, handling and responding to complaints by residents and other persons in relation to the carrying on Bethesda's care provision

Underlying principles

- Information and guidance about how to complain must be readily available and in formats accessible to everyone who uses Bethesda.

- Bethesda will tell people how to complain, offer support and provide the level of support needed to help them make a complaint. This may be through advocates, interpreter services and any other support identified or requested.
 - When complainants do not wish to identify themselves, Bethesda will still follow its complaints process as far as possible.
 - Bethesda has in place effective systems to make sure that all complaints are investigated without delay. This includes:
 - Undertaking a review to establish the level of investigation and immediate action required, including referral to appropriate authorities for investigation. This may include professional regulators or local authority safeguarding teams.
 - Making sure appropriate investigations are carried out to identify what might have caused the complaint and the actions required to prevent similar complaints.
 - When the complainant has identified themselves, investigating and responding to them and where relevant their family and carers without delay.
 - Bethesda will monitor complaints over time, looking for trends and areas of risk that may be addressed. This will include considering whether the process needs to be revised.
 - Staff and others who are involved in the assessment and investigation of complaints will have the right level of knowledge and skill. Bethesda will provide training that ensures staff understand the provider's complaints process and are knowledgeable about current related guidance.
 - Consent and confidentiality will not be compromised during the complaints process unless there are professional or statutory obligations that make this necessary, such as safeguarding.
 - Complainants, and those about whom complaints are made, will be kept informed of the status of their complaint and its investigation, and be advised of any changes made as a result.
 - Bethesda will maintain a record of all complaints, outcomes and actions taken in response to complaints. Where no action is taken, the reasons for this should be recorded.
 - Bethesda will act in accordance with Regulation 20: Duty of Candour in respect of complaints about care and treatment that have resulted in a notifiable safety incident.
- providing information to external agencies, when requested within the timescales required

Roles and Responsibilities

In ensuring the effective implementation and operation of this Policy:

The Trustees will:

Establish and agree with the General Manager the overall Complaints, Concerns and Compliments Policy for achieving Bethesda's purpose and approve updated versions of the policy.

Ensure the adequate provision of resources and management arrangements to deliver effectively the Policy.

Receive regular reports from the General Manager on the achievement of the Policy and lessons learnt to improve the performance of Bethesda.

Feedback to the General Manager their acceptance of the reports received and/or identify points of further clarification to provide assurance that Bethesda's purpose is being met.

The General Manager will:

Be responsible for the implementation of this Policy in its entirety and undertake audits, documentation reviews and meetings to validate the operation of the Policy within the Bethesda Homes.

Support and monitor the implementation and operation of the Policy within the Bethesda Homes.

Report to the Trustees the achievement of the Policy and lessons learnt to improve the performance of Bethesda.

Review and update the Policy for approval by the Trustees.

The Home Managers will:

Ensure all staff within the Home are aware of the Policy and keep a record that staff have read this on induction and on an eighteen month rolling period thereafter.

Ensure all audits and feedback processes, at a Home level, are carried out and the outcome shared, as appropriate, with staff, residents and their next of kin, the General Manager and external agencies.

Ensure the findings of audits and feedback processes and actions arising are addressed in a timely manner, monitored, reviewed and reported on

[The Deputy Home Manager or Assistant Home Manager is responsible for implementing this Policy in the absence of the Home Manager]

All staff will:

Be aware of the contents of the Policy and take personal responsibility for its implementation in practice.

Related policies

- Accessible Information and Communication
- Adult Safeguarding
- Consent
- Duty of Candour
- Good Governance

Related guidance


[CQC Complain about an adult social care service](#)

[Local Government & Social Care Ombudsman](#)

[Accessible Information Standard](#)

Training and development

Bethesda staff will receive training which informs them of how to welcome and promote the receipt of complaints, concerns and compliments from an individual. The training will include how to help the individual have their feedback listened to and how to react in a positive manner when in receipt of feedback.

Signed:	
Name:	Adrian J.H Topping
Position:	General Manager (nominated individual)
Date:	01/03/2022

Annex 1 - Procedure for dealing with complaints

Serious or Written Complaints

- Preliminary steps:
 - When we receive a written complaint, it is passed to the Home Manager, who records it in the complaints book and will acknowledge this verbally within 48 hours, and sends an acknowledgment letter within 5 working days to the complainant.
 - The manager also includes a copy of the complaints procedure detailing Bethesda procedure for the complainant.
 - If necessary, further details are obtained from the complainant; if the complaint is not made by the resident but on the resident's behalf, then consent of the resident, preferably in writing, must be obtained from the complainant where required.
 - If the complaint raises potentially serious matters, advice could be sought from a legal advisor. If legal action is taken at this stage, any investigation by Bethesda under the complaints procedure ceases immediately.

- Investigation of the complaint by Bethesda:
 - Immediately on receipt of the complaint, the Home Manager will start an investigation and within 14 days should be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned.
 - If the issues are too complex for the investigation to be completed within 28 days, the complainant will be informed of any delays.
 - Where the complaint cannot be resolved between the parties, an arbitration service will be used. This service and its findings will be final to both parties. The cost of this will be borne by Bethesda.

- Meeting:
 - If a meeting is arranged, the complainant will be advised that they may, if so desired, bring a friend, relative or a representative such as an advocate
 - At the meeting a detailed explanation of the results of the investigation will be given, in addition to an apology if deemed appropriate (an apology is not necessarily an admission of liability)
 - Such a meeting gives the management the opportunity to show the complainant that the matter has been taken seriously and investigated thoroughly.

- Follow-up action:
 - After the meeting, or if the complainant does not want a meeting, a written account of the investigation will be sent to the complainant. This includes details of how to approach the CQC if the complainant is not satisfied with the outcome, utilising the 'Your Experience' button on their website.

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- The outcomes of the investigation and the meeting are recorded in the complaints book, and any shortcomings in Bethesda's procedures will be identified and acted upon.
- The General Manager formally reviews all complaints at least every three months as part of its quality monitoring and improvement procedures to identify the lessons learned.

Vexatious Complainers

Bethesda takes seriously any comments or complaints regarding its service. However, there are residents who can be treated as "vexatious complainers" due to the inability of Bethesda to meet the outcomes of the complaints, which are never resolved. Vexatious complainers need to be dealt with by the arbitration service, so that the repeated investigations become less of a burden on Bethesda, its staff and other residents.

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Annex 2 - CHP checklist

It is important to ensure that your complaints handling procedure (CHP) contains all the relevant information needed to meet your legal obligations under sector-specific and consumer law requirements. This checklist brings together some of the key information that should be contained within your CHP and enables you to check off the requirements against the content of the CHP for your care home.

Does your CHP set out:

- How a resident, family member or other representative can make a complaint, for example, by phone, email, in person or by letter

- The types of complaint and concerns that your procedure deals with and any relevant timescales
- The types of issues that your procedure does not cover

- Some examples of the nature of complaints that your procedure covers

- How the complaint will be acknowledged and the timescale for this

- How the 'route of complaint' for a resident will differ depending on the nature of their concern (turn to Part 1, on page 11 of the *Business Companion Care home complaints booklet* for a flowchart showing the different organisations that may also need to be involved)

- How anonymous complaints will be handled

- How residents will be supported – for example, by supplying information in another format if required and any independent advocacy support available

- Who is in charge of handling complaints at your care home

- A step-by-step guide to how your internal complaints procedure works – for example, an explanation of the frontline resolution and investigation stages involved

- How long it should take for each part of the process to be completed, and when extensions to timescales may be required and how these will be handled

- A requirement for any responses or communications relating to the complaint to be easy to understand and communicated in an appropriate manner
- How a resident can raise a complaint with an external body, and when and under what circumstances they can do this – for example, the Care Inspectorate in Scotland can investigate individual complaints at any stage

- Details of the relevant sector regulator for your care home and their remit

- How a resident can take their complaint further if they, or their representative, isn't satisfied with the outcome achieved using your internal CHP – for example, how to contact the ombudsman to ask them to review the issue

CHP checklist Is your CHP:

- Simple and clear?
- Putting your residents at the heart of the procedure?
- Written in a way that does not deter residents from making a complaint?
- Written in a way that is reassuring to residents – for example, it does not imply that they will be treated less favourably, or be putting their place or the quality of care they receive at risk by making a complaint
- Objective, impartial and fair? For example, by ensuring that staff who have been complained about are not part of the investigation into the complaint
- Easily accessible and readily available, including in different formats such as braille or large print?
- Easy to find on your website?
- Highlighted in written information packs given to your residents?
- Included in your contract with residents?
- On display in your main reception area and in common sitting rooms, through notices, posters and leaflets?
- In your residents' bedrooms – for example, highlighted in a resident's booklet kept in all bedrooms?
- Being put into practice by your staff, who have all been trained on the procedure and their role within it?
- Being reviewed regularly to ensure that it is still legally compliant and fit for its purpose?

Check undertaken by:

Signed:

Position:

Date:

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Annex 3 - Procedure for dealing with concerns

Verbal complaints

Bethesda accepts that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.

Front-line care staff who receive a verbal complaint are expected to seek to solve the problem immediately.

If they cannot solve the problem immediately, they should offer to get the Home Manager to deal with the problem.

Staff are expected to remain polite, courteous, sympathetic and professional to the complainant. They are taught that there is nothing to be gained by adopting a defensive or aggressive attitude.

At all times in responding to the complaint, staff are encouraged to remain calm and respectful.

Staff should not make excuses or blame other staff.

If the complaint is being made on behalf of the resident by an advocate, it must first be verified that the person has permission to speak for the resident, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the resident when they may not). If in doubt it should be assumed that the resident's explicit permission is needed prior to discussing the complaint with the advocate.

After discussing the problem, the manager dealing with the complaint will suggest a means of resolving it. If this course of action is acceptable then the member of staff should clarify the agreement with the complainant and agree a way in which the results of the complaint will be communicated to the complainant (i.e. through another meeting or by letter).

If the suggested plan of action is not acceptable to the complainant, then the member of staff or manager will ask the complainant to put their complaint in writing to the Registered Manager. The complainant should be given a copy of Bethesda's complaints procedure if they do not already have one.

Details of all verbal complaints must be recorded in the concerns/minor complaints book and the resident's file.

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Annex 4 - Procedure for dealing with compliments

Compliments

In many respects, receiving compliments is just as important as complaints, as it allows the opportunity for us to build on that which we do well, as well as being good for staff morale. Therefore, if a compliment is received the following procedure should be followed:

Written compliments:

- ✓ share these with the team, and then place on the 'compliments' file.
- ✓ Ask the person making the complement if they might be willing to also comment on the CQC feedback website.

Verbal compliments:

- ✓ Make a note of what was said on the sheet provided in the 'Compliments' file, with the name of the person making the complement, relationship to the Home (i.e. relative) and date.

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Annex 5 - Useful contacts and addresses

Local Authority Complaints Manager (Adults)

LOCAL ADDRESS AND TELEPHONE
NUMBER.....

.....
.....

Social Services Local Office

LOCAL ADDRESS AND TELEPHONE NUMBER

.....
.....
.....

County Police HQ

LOCAL ADDRESS AND TELEPHONE NUMBER

.....
.....
.....

The Parliamentary and Health Service Ombudsman

Millbank Tower

Millbank

London

SW1P 4QP

Tel. 0345 015 4033

The Local Government Ombudsman

10th Floor,

Millbank Tower,

Millbank,

London

SW1P 4QP

Advice Line Tel: 0300 061 0614 [for complainants]

Out of Hours Service (Social Services) *

CONTACT NUMBER

*This service is available when social services offices are closed

To Raise Concerns, contact:

The Care Quality Commission

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

Tel. 03000 616161

They will take details of concerns and respond appropriately and proportionately to the information divulged.

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Annex 6 - Further information and additional resources

[Healthwatch Help making a complaint](#)

Healthwatch is your health and social care champion. If you use GPs and hospitals, dentists, pharmacies, care homes or other support services, we want to hear about your experiences. As an independent statutory body, we have the power to make sure NHS leaders and other decision makers listen to your feedback and improve standards of care. Last year we helped nearly a million people like you to have your say and get the information and advice you need.

[The Patients Association - Listen Learn Act](#)

Purpose: To ensure that everybody can access and benefit from the health and care they need to live well, by ensuring that services are designed and delivered through equal partnership with patients.

[Cumbria County Council Internal Reviews and Complaints](#)

This website provides useful information on making a complaint in general and contains well presented publications which are a useful benchmark for comparing material used by a provider

[Age UK Factsheet 59 How to resolve problems and complain about social care \(February 2022\)](#)

This factsheet explains what to do if you are not satisfied with any aspect of social care services you receive from, or which are arranged by, your local authority, or you want to challenge a decision they have made.

[carehome.co.uk How to complain about a care home in England](#)

This general guide is designed to help those who are disappointed or feel like something is wrong with the service that they or their loved one receive in a care home. The guidance is designed for those who are unsure of what to do, where to turn to and what to expect.

[businesscompanion trading standards law explained Care homes: complaints](#)

A one-stop webpage dealing with all the aspects of complaint handling procedures as they relate to care homes.