

FOUNDATION COMPLIMENTS, COMMENTS AND COMPLAINTS (INCLUSIVE OF DUTY OF CANDOUR)

POLICY AND PROCEDURE

Policy: Compliments, Comments & Complaints Procedure	Issue date: August 2020	Version No: 3.0
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Policy Control/Monitoring

Version:	3.0
Approved by: (Name/Position in Organisation)	Carole Harder CEO
Date:	
Accountability: (Name/Position in Organisation)	Carole Harder CEO
Author of policy: (Name/Position in organisation)	Alison Williams Director of Business Development, Quality and Performance
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Associated Policies: (insert hyperlinks)	Adult Safeguarding Policy (Section 6: Duty of Candour)
Associated National Guidance	

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Document Status:

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The document can only be classed as 'Live' on the date of print.

Equality Impact Assessment

This document forms part of Percy Hedley's commitment to create a positive culture of respect for all staff and service users. The intention is to identify, remove or minimise discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice and value the diversity of all individuals and communities. As part of its development this document and its impact on equality has been analysed and no detriment identified.

Version Number	Date	Author/ Title	Status	Comment/Reason for Issue/Approving Body
1.0	10/04/2018	Tara Allen-Director of Support Services and Business Transformation	Approved	
2.0	17/05/2019	Tara Allen-Director of Support Services and Business Transformation	Approved	Included section on how to withdraw a complaint
3.0	24/06/2020	Alison Williams, Director of Business Development, Quality and Performance		Reference to Director of Business Development, Quality and Performance added throughout. Duty of Candour details added to Section 11. Job titles updated in Section 12. Reference to Head of Quality and Compliance added to Section 16.

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1. Introduction

We always aim to provide a high standard of care in all our services. Our service users' views and the views of their families are important to us and help to ensure our services are consistently meeting people's needs. We therefore like to hear from anyone with compliments and suggestions so we can continue to improve our services. However, if you are unhappy with any of our services it is also important that you let us know. Where any concerns are raised we aim to resolve these as quickly as possible and if this is not possible there is a clear transparent process to escalate complaints to the next level.

If a complaint alerts us to possible abuse or neglect we will deal with this through our safeguarding policies and procedures.

2. Sharing a compliment

Please share positive experiences with us and tell us when we have exceeded expectations. It would be ideal to speak to the Manager of the service or their Deputy as soon as possible. It is also possible to use the email address compliments@percyhedley.org.uk, which is managed centrally and shared with the local services as appropriate.

3. Making a suggestion or comment

Often people feel more comfortable about suggesting improvements rather than complaining formally. Anyone receiving services, and their friends/family, may make a suggestion or comment. First you should speak to the Head or Manager of the service or their Deputy. Electronic comments or suggestion boxes are available if you would rather make your suggestion that way by using the email address comments@percyhedley.org.uk. This email address will be centrally managed but suggestions will be forwarded to local services as necessary.

4. Making a complaint

We aim to handle complaints quickly, effectively and in a fair and honest way. We take all complaints seriously and use valuable information from investigating to help us improve the service we provide. Feedback is important to help us raise standards and all parties should feel that any concern can be voiced and taken seriously. We treat all complaints in confidence.

The Percy Hedley Foundation assures service users and their families that it will not withdraw or reduce services because someone makes a complaint in good faith.

The complaints procedure will:

- Encourage resolution by informal means
- Be easily accessible and publicised
- Be simple to understand and use

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- Be impartial and non- confrontational
- Ensure a full and fair investigation of the issues raised
- Respect confidentiality
- Ensure swift responses within time limits
- Feed into senior leadership discussions and quality monitoring processes

5. Who can complain?

Anyone affected by the way the Percy Hedley Foundation provides services can make a complaint including members of the public.

A representative may complain for the affected person if they:

- cannot make a complaint themselves, or
- have given consent for the representative to act on their behalf, or
- have died and you are raising a complaint on their behalf.

If you are not happy about making a complaint yourself and you do not know someone who can talk or write to us on your behalf, we will be happy to find someone to act as an advocate for you.

6. How you can make a complaint

You can complain:

- in person
 - by telephone
 - through an advocate or representative
 - by e-mail to complaints@percyhedley.org.uk or your local contact in the service
- Note: this email is manned centrally and accessed by a small number of staff, however any details should be kept to a minimum to ensure appropriate confidentiality.

7. Anonymous complaints

We deal with anonymous complaints under the same procedure; however it is better if you can provide contact details so we can tell you the outcome of our investigation.

8. Responsibility

The Registered Manager, Head Teacher of school, or Principal of college would normally be the first point of contact for dealing with all complaints made about their service and they should seek to solve the problem immediately if possible.

If a complaint is related to the individual Registered Manager, Head Teacher of school, or Principal of college, refer to section 9 of this policy that shows escalation to the relevant service Director.

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9. How we handle complaints

9.1 Informal Complaints or resolving concerns

Most issues and complaints can successfully be dealt with informally and it enables us to respond as early as possible and we encourage this approach. An informal complaint is an approach by an individual to a member of the Foundation's management team, expressing dissatisfaction with some aspect of the service, its action or inaction. Informal complaints, however made, are complaints which are usually resolved quickly and simply and do not involve detailed or lengthy investigation.

If the complaint is justified, this will result in an apology, an explanation, an admission that the situation could have been handled differently or an assurance that the incident will not reoccur.

The response should be provided within a maximum of ten working days from the date of receipt verbally or in writing as deemed most appropriate. If we are unable to respond within the timescale, we will explain any reasons for the delay. People who make informal complaints will be given information regarding follow-up procedures, in the event that they are dissatisfied with the outcome of their initial complaint and wish to take the matter further through a formal complaints process. Managers may also choose to escalate the complaint at any time.

9.2 Formal Complaints

A complaint becomes formal when the person remains dissatisfied after making an informal complaint or, alternatively, when from the outset, a complaint cannot be dealt with simply and quickly and requires investigation. The formal complaint should be sent in writing marked 'Formal Complaint' to the senior manager who heard the complaint at its informal stage with instructions on preferred method of response (i.e. phone call, email, etc). An oral or written acknowledgement of the complaint will be provided within two working days and a target date of 15 working days to provide a response. If it is not possible to resolve matters in this timescale an explanation should be given with revised dates. The manager scheduled to hear the complaint will appoint the most appropriate independent person to undertake an investigation into the complaint. The findings of this investigation will be made available to the manager prior to hearing the formal complaint.

When a complaint becomes formal, care will be taken to:

- Clarify the complaint.
- Clarify the outcome sought.
- Give the complainant the name of the person dealing with the complaint
- If the complaint is being made on behalf of the service user by a representative it must first be verified that the person has permission to speak for the service user, especially if confidential information is involved. This must be done in writing, with confirmation of the representative's identity and relation to the service user. It is very easy to assume that the representative has the right or power to act for the service user when they may not. If in doubt it should be assumed that the service user's explicit permission is needed prior to discussing the complaint with the advocate.

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- Check whether the complainant needs support of any kind to understand the investigation procedure.
- Monitor the progress of the complaint by the involvement of a suitable senior manager of the Percy Hedley Foundation.
- Provide a full response in an appropriate medium within 15 working days or, where this is not possible, send a preliminary reply indicating progress to date and an estimate of time to make a full response.
- When we have finished investigating, we will arrange to meet with you to discuss the outcome and/or write to you with:
 - details of the findings;
 - any action we have taken; and
 - our proposals to resolve your complaint.

At that arranged meeting, the complainant should be advised that they may, if they wish, bring a friend or relative or a representative such as an advocate.

- Advise the complainant how to proceed if not satisfied.
- If legal action is implied, threatened or formally commenced at this stage, any response to the complainant by the Foundation under the complaints procedure should cease immediately, however the investigation will continue internally.

9.3 Formal complaints to a Governing Body

If the Governing Body or Chair receives a complaint directly they should consult the service Director or Chief Executive. They will agree the next steps which will be in line with the above formal complaints process. It is important to ensure that earlier stages of the process and steps to resolve the complaint have been exhausted.

9.4 Serious Maladministration

A complaint of serious maladministration should be progressed immediately as a formal complaint. The Chief Executive of The Percy Hedley Foundation should be the first person to approach where the matter could involve disciplinary or legal action against senior managers or if there is any suspicion of financial irregularity. If the complaint relates to the actions of the CEO the complaint should be raised with the Chair of the Foundation.

9.5 Organisational learning

Summary details of all complaints, the outcomes of any investigations, any shortcomings in the establishment's procedures and identified actions will be considered by the Percy Hedley Foundation's Executive team and relevant committees including Governing Bodies.

9.6 Time limits

You should complain as soon as you can after the date on which the event occurred or came to your notice. If you complain more than 12 months later, we may not be able to investigate properly. But we shall also consider whether you had good reason for not making the complaint sooner and whether, despite the delay, it is still possible to investigate the complaint effectively and fairly.

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10. Withdrawing a Complaint

Complaints may be withdrawn in writing at any time. The complainant must communicate the decision to do so via the same process as making the complaint in the first place. Or if the complaint has progressed and the complainant is dealing directly with a named person, communication to withdraw can be given to that Foundation representative.

If a complaint has been withdrawn, the Head Teacher, College Principal, Head of Service, Directors and/or Chair of Governors/Board may wish to review the issue of concern and consider whether further investigation is required through other internal management systems.

Occasionally the Foundation may regard the complaint as unreasonable when the person making the complaint:

- Repeatedly makes the same complaint and refuses to accept the findings of the investigation into that complaint
- Seeks an unrealistic outcome
- Has a history of making unreasonable complaints
- Makes frequent, lengthy, complicated and stressful contact with staff regarding the complaint.

A complaint will also be considered unreasonable if it is:

- Malicious
- Aggressive
- Includes threats, intimidation or violence
- Abusive, offensive or uses discriminatory language
- Knowingly false.

In these circumstances, the Head Teacher, College Principal, Head of Service, Director and/or Chair of Governors/Board may wish to liaise with legal services, police and/or the LA key personnel before deciding what action to take.

The presumption should be in favour of not restricting access to our services unless it is absolutely necessary. The Foundation may consider:

- Warnings/contract re future conduct
- Restricting telephone calls to a particular day/time or person
- Restrictions on methods of contact (e.g. in writing only)
- Not acknowledging future correspondence that does not present new information
- Temporary suspension of the person's access to the complaints system.

The complainant will be informed in writing of any action taken and how long the action will last. They must be advised how to contact the Local Government Ombudsman.

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11. Duty of Candour:

Note: This Section must be read in conjunction with:

“Regulation 20: Duty of Candour (March 2015) (CQC).”

The Duty of Candour forms part of the Care Quality Commissions Fundamental Standards for all care providers. There is a specific regulation - Regulation 20 which addresses the duty of candour. Healthcare professionals are also bound by an ethical duty of candour as outlined by their professional body (eg NMC).

Failure to comply with the duty of candour, may result in regulatory action from the CQC and, in the most serious or persistent cases, criminal prosecution.

The Duty of Candour is a statutory (legal) duty for providers to be open and honest with people who use services (and people acting lawfully on their behalf), and stipulates specific requirements providers must follow when something goes wrong in care and treatment, that appears to have caused or could lead to significant harm in the future.

Such specific requirements include informing people about the incident, providing reasonable support, giving truthful information and apologising when things go wrong. Providers must promote a culture that encourages candour, openness and honesty at all levels.

To meet the requirements of Regulation 20, the Foundation must:

1. Make sure it acts in an open and transparent way with relevant persons in relation to care and treatment provided to people who use services in carrying on a regulated activity
2. Tell the relevant person, in person, as soon as reasonably practicable after becoming aware that a notifiable safety incident has occurred, and provide support to them in relation to the incident, including when giving notification
3. Provide an account of the incident which, to the best of the providers knowledge, is true of all the facts the body knows about the incident as at the date of notification.
4. Advise the relevant person what further enquiries the provider believes are appropriate.
5. Offer an apology
6. Follow up the apology by giving the same information in writing, and providing an update on the enquiries
7. Keep a written record of all communications with the relevant person.

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8. Learn lessons to minimise the possibility of the incident occurring again.

Services are expected to implement suitable and appropriate support plans for communicating relevant information, as stipulated in the above requirements, to the individual concerned and their families/carers.

Procedures: Further details:

Inform the individual about what has happened and in a sensitive way and offer a verbal apology, in person. As part of this, provide all the facts known at that point in time and explain what actions are being taken and what the next steps are. This verbal apology should be conducted by a Manager and should occur as soon as staff are aware an incident has occurred. Case notes should be updated to record the verbal apology made.

Note: Should the relevant person not be contactable, case notes should be updated to reflect this. The Manager should continue to try and contact the relevant person on a daily basis, five working days on from the date of the incident. If contact still fails to be made the relevant person should be written to, providing them with an opportunity to contact the Manager.

This verbal apology should then be followed up with a written account and apology. This should again be conducted by a Manager.

The individual must be informed what will happen next, for example what enquiries or investigations will be carried out

The individual must be advised where they can obtain additional information or independent advice

The individual must be informed about the outcome of any enquiry or investigation

Documentation:

As part of such duty of candour process, clear contemporaneous records be maintained, including:

- If the relevant person cannot be contacted, case notes should be updated to reflect the attempts made to contact the relevant person
- Dates of discussions
- Time, place, dates and names of who attended any meetings/discussions
- Reference to written correspondences conducted
- Copy letters kept on file

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12. Further steps

At any stage during the process, if you are not happy with the way the service is dealing with your complaint you can contact:

Head Teacher of School or Principal of College - any issues within school and college services at the three locations, including safeguarding.

Registered Manager – any issues (including safeguarding) for residential services for children, at all locations

Head of Residential Services - any issues (including safeguarding) for residential services for adults, at all locations

Chief Executive Officer for any overall Foundation matters or any issues within school and college services that have not been dealt with by a Head Teacher of School or Principal of College.

Director of Resources – any financial, legal or business-related issues, fundraising events or activities, or Foundation-wide Estates, Facilities, and IT.”

Director of Business Development, Quality and Performance - any issues for Human Resources, Health & Safety, social media presence and communications, or data, quality and compliance issues.”

All communications can be directed to on the above Foundation representative at:

Percy Hedley Foundation
Central Services
Station Road
Forest Hall
Newcastle upon Tyne
NE12 8YY

13. Unresolved Complaints (Appeal Stage)

The papers relating to the complaint will be passed to the Chief Executive of The Percy Hedley Foundation who will decide how the complaint is to be progressed.

The Chief Executive will ensure all parties to the complaint are given an equal hearing and will work towards finding a mutually acceptable way forward.

There will be occasions when, despite all stages of the complaint procedure having been followed, the complainant remains dissatisfied. If a complainant tries to re-open the same issue, the CEO can inform them that the procedure has been completed and that the matter is now closed.

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The Foundation is committed to dealing with all complaints fairly and impartially, and to providing a high quality service to those who complain. However, we do not expect our staff to tolerate unacceptable behaviour and will take action to protect staff from that behaviour, including that which is abusive, offensive or threatening. In response to any serious incident of aggression or violence, the concerns and actions taken will be put in writing immediately and the police informed

14. Reporting

Tracking and reporting on complaints will be done routinely with reporting to the Executive Team, Governing bodies and Board of Trustees on a regular basis.

External bodies such as Ofsted, Care Quality Commission, Charity Commission, Health and Safety Executive, Information Commissioners Office (or other similar regulatory bodies) will be informed as required, given the complaint raised and as detailed in other Foundation policies.

15. Data Retention

Details of complaints will be stored and retained in line with the Data Protection Act 1998 and/or the General Data Protection Regulations, as applicable, and the Foundations Data Retention Policy.

The retention of complaints received will be dependent on the type of complaint and severity, sensitivity and complexity. The Foundation's Data Retention Schedule is available upon request from the Foundation's Data Protection Officer, contactable via email at dpo@percyhedley.org.uk.

16. Monitoring and Compliance

Overall responsibility for the operation of the policy lies with the Director of Business Development, Quality and Performance. The effectiveness of the policy will be formally reviewed and monitored to ensure that it continues to meet the requirements of The Foundation, the specific service area and that it reflects best practice and statutory legislation as appropriate.

Any queries regarding this Policy should be forwarded in the first instance to the Foundations Head of Quality and Compliance via the email address complaints@percyhedley.org.uk

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