# **MOONSTONE CARE**

DOMICILIARY CARE

# **Complaints and Compliments Policy**

# 1. Policy Statement

- 1.1 MOONSTONE CARE UK is committed to providing a quality service to service users and working in an open and accountable way that builds trust and respect of all our stakeholders. One of the ways in which we can continue to improve our service is by listening to the views of our service users and other stakeholders and in particular by responding in a positive manner to complaints which helps us to correct mistakes.
- 1.2 MOONSTONE CARE UK believes that if a service user wishes to make a complaint or register a concern they should find it easy to do so. It is company policy to welcome complaints and look upon them as an opportunity to learn, adapt, improve and provide better services. This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by service users and their relatives, carers and advocates are taken seriously.
- 1.3 The organisation supports the concept that most complaints, if dealt with early, openly and honestly, can be sorted at a local level between just the complainant and the Care Manager
- 1.4 MOONSTONE CARE UK adheres fully to Regulation 16: Receiving and acting on complaints *for Domiciliary Care Agencies* in Health and Social Care Act 2008.

# 2. **Aim**

2.1 The aim of the MOONSTONE CARE is to ensure that its complaints procedure is properly and effectively implemented, monitored and reviewed to ensure that service users feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

# 3. Goals

- 3.1 The goals of the organisation are to ensure that:
- (a) service users, carers, users and their representatives are aware of how to complain and that the organisation provides easy to use opportunities for them to register their complaints
- (b) A named person will be responsible for the administration of the procedure
- (c) Every written complaint is acknowledged within 5 working days
- (d) All complaints are investigated within 28 days of being made
- (e) All complaints are responded to in writing by the organisation within 28 days of being made
- (f) Complaints are dealt with promptly, fairly and sensitively with due regard to the upset and worry that they can cause to both staff and service users.

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# 4. Management of Complaints

4.1 The named complaints manager with responsibility for following through complaints is:

Mr Adebayo Oshuntoki – Registered Care Manager, representing MOONSTONE CARE UK

**4.2** The Directors of MOONSTONE CARE believe that, wherever possible, complaints are best dealt with on a local level between the complainant and the relevant Care Manager

## 5. Complaints Procedure

5.1 Complaints can be made orally, in person or via telephone or in writing. The complaint may be written by a friend or relative of the Service User but should be signed by the Service User. In the first instance complaints will be dealt with by a designated manager at MOONSTONE CARE in order to discuss the problem and attempt to resolve the matter in an appropriate manner.

The designated manager will endeavour to find out

- What has happened
- Where and when did it happen
- Who was there
- Which specific service is being complained about
- What does the service user expect to happen

## 5.1 Oral complaints

- a) All oral complaints, no matter how seemingly unimportant, is taken seriously.
- b) Front line care staff who receives an oral complaint should seek to solve the problem immediately.
- c) If staff cannot solve the problem immediately they should offer to get the organisation manager to deal with the problem.
- d) All contact with the complainant should be polite, courteous and sympathetic.
- e) At all times staff should remain calm and respectful.
- f) Service users should be reassured that their complaints will be dealt with in a confidential and prompt manner
- g) If the complaint is being made on behalf of the service user by an advocate it must first be verified that the person has permission to speak for the service user, especially if confidential information is involved. It is very easy to assume that the advocate has the right or power to act for the service user when they may not. If in doubt it should be

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assumed that the service user's explicit permission is needed prior to discussing the complaint with the advocate.

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- h) After talking the problem through, the Care Manager or designated manager dealing with the complaint should suggest a course of action to resolve the complaint. 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).
- i) If the suggested plan of action is not acceptable to the complainant then the member of staff or organisation manager should ask the complainant to put their complaint in writing to the organisation and give them a copy of the organisation's complaints procedure.
- j) In both cases details of the complaints should be recorded in the Complaints Book, the service user's file and in the home records.

#### 5.2 Serious or written complaints

#### Stage 1 Preliminary step:

- (a) When a complaint is referred on to an organisation manager or is received in writing it should be passed on to the named complaints manager who should record it in the Complaint Book and send an acknowledgment letter within two working days; the complaints manager will be the named person who deals with the complaint through the process.
- (b) If necessary further details are obtained from the complainant; if the complaint is not made by the service user but on the service user's behalf, then consent of the service user, preferably in writing, must be obtained from the complainant.
- (c) A leaflet detailing the organisation's procedure should be forwarded to the complainant.
- (d) If the complaint raises potentially serious matters, advice should be sought from a legal advisor to the Agency; if legal action is taken at this stage any investigation by the organisation under the complaints procedure should cease immediately.
- (e) If the complainant is not prepared to have the investigation conducted by the Agency they should be advised to contact the Care Quality Commission and be given the relevant contact details.

## Stage 2 - Investigation of the complaint by the organisation:

- (a) Immediately on receipt of the complaint the MOONSTONE CARE will launch an investigation and within 21 days the Care Manager 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.
- (b) If the issues are too complex to complete the investigation within 21 days, the complainant should be informed of any delays.

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# Stage 3 - Meeting:

- (a) If a meeting is arranged the complainant should be advised that they may if they wish bring a friend or relative or a representative such as an advocate.
- (b) At the meeting a detailed explanation of the results of the investigation should be given and also an apology if it is deemed appropriate
- (c) Such a meeting gives the organisation the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.

#### Stage 4 - Follow-up action:

- (a) After the meeting, or if the complainant does not want a meeting, a written account of the investigation should be sent to the complainant, this should include details of how to approach the Care Quality Commission, if the complainant is not satisfied with the outcome.
- (b) The outcomes of the investigation and the meeting should be recorded in the Complaint Book and any shortcomings in MOONSTONE CARE's procedures should be identified and acted upon.
- 5.3 Complaints concerning improper conduct or behaviour

These complaints should be dealt with by a senior manager or upward referral as required. In this instance continue to assure the Service User of your support and seek further advice from the designated complaints manager (or their line manager if the complaint is about them). The complaints procedure should then be activated and the Protection of Vulnerable Adults and/or Safeguard Policy as necessary.

## 6. Monitoring/Review of the Procedures

Complaints and their outcome should be discussed at a formal business meeting and the organisation complaints procedure should be audited by the Managing Director of MOONSTONE CARE every six months.

## 8. Training

7.1 The Care Manager of MOONSTONE CARE UK is responsible for organising and coordinating training for staff of MOONSTONE CARE UK Limited. Staff should be trained in dealing with and responding to complaints. Complaints policy training is included in the induction training for all new staff and in-house training sessions on handling complaints are conducted at least annually and all relevant staff should attend.

## 9 Other Bodies that a Complaint can be made to:

9.1 MOONSTONE CARE UK will endeavour to resolve and conclude all complaints within 28 days of the original complaint to the satisfaction of the Service User. All actions taken shall



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be communicated in an appropriate manner to the Service User

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9.1 If the Service User is not satisfied with the complaints procedure they have the right to escalate their complaint to the Local Authority, the industry regulator Care Quality Commission (CQC) and or United Kingdom Home Care Association (UKHCA) whose details are below:

**Local Authority** 

Name

Address

Tel No.

**Contact Person** 

**Care Quality Commission (CQC)** 

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

Tel: 03000 616161