

COMPLAINTS POLICY/ PROCEDURE

Author:	Dawn Stephenson
Policy revised:	March 2017
Status	Approved
Document version:	3
Review:	March 2019
Document location:	Global share: Restricted Documents Quality Manual Policy and Procedures
Other related policies and procedures/documents	

Complaints Procedure

1. Introduction

- 1.1 Age UK Hammersmith and Fulham are committed to providing a range of good quality services. However, given the practices of an organisation, it is always possible for mistakes to be made, and it is important that people who feel that they have grounds for complaint are able to do so.
- 1.2 We recognise that complaints relating to our services represent only a small proportion of the total number of contacts between staff and the public, and that staff continually strive to provide the highest possible standard of health or social care. Since our service users see our services from a different perspective, their views can provide a valuable insight for an organisation committed to continuous quality improvement.
- 1.3 Therefore, it is important that Age UK Hammersmith and Fulham have an effective complaints procedure in order:
- *To enable service users to comment on weaknesses and to let the organisation know about things that have gone wrong or cause concern*
 - *To improve the quality of services provided by taking notice of the views of people affected by the services, building on what is good and changing what needs improving*
 - *To ensure that the organisation takes users' views seriously and will follow up any problems that they bring forward*
 - *To protect the interests of individual clients*
 - *To enable users, potential users and carers to challenge decisions*
 - *To protect staff and enable them to deal with complaints consistently*
 - *To provide a way of monitoring the performance of the organisation, maintaining our Quality Standards*
- 1.3 At Age UK Hammersmith and Fulham we take complaints very seriously. If something goes wrong, we like to know so we can make sure it never happens again. Therefore we will aim to:-
- Deal fairly and promptly with all complaints
 - Try to resolve complaints straight away, where possible
 - Respond to the complainant, in writing, once our investigations are complete
 - Keep complainants informed of our progress in writing

- 1.4 We are strongly committed to a listening, acting, improving approach to service user feedback and complaints that is honest and thorough. The Complaints Policy seeks to make sure that any complaints made are handled courteously, with sensitivity and without delay. No one should be discriminated against or suffer any adverse consequences as a result of making a complaint.
- 1.5 Experience has shown that prompt and sensitive handling of complaints at an early stage can prevent an issue from becoming a formal complaint. Often these are resolved simply by listening and, where appropriate, an assurance that the same circumstances will not arise again.

2. Information

- 2.1 Information (leaflets, posters, etc) should be available at Age UK Hammersmith and Fulham sites and services informing service users and their carers of their right to make a complaint and the procedures available to them.

3. Stage One: Review

- 3.1 The first stage involves Age UK Hammersmith and Fulham acknowledges the complaint and carry out a full investigation into the circumstances surrounding it. If the complaint is upheld a full apology must be given together with details of any remedial action taken by Age UK Hammersmith and Fulham. The aim is to achieve resolution at this stage.

4. Process

- 4.1 Once a complaint has been received, a [letter of acknowledgement](#) must be sent to the complainant within five working days. This should clarify the particular issues raised in the complaint as well as the outcome sought by the individual.
- 4.2 The [complaints monitoring form](#) must be sent out with the acknowledgement. The complainant must at this stage be told who is dealing with the complaint, what action is being taken and when s/he can expect to receive a full reply.
- 4.3 Details of the complaint must be recorded in the complaints monitoring file which is kept by the Chief Executive.
- 4.4 The next step is the investigation into the nature of the complaint. This would usually be undertaken by the Chief Executive or Service Coordinator (or, where the complaint was against the Chief Executive, by the Chair or a designated

member of the Trustee Board). This may require an interview with the complainant or a member of staff or volunteer.

- 4.5 Once the investigation is complete, a letter detailing the investigation and subsequent findings must be sent to the complainant. The target time for responding in full to a complaint is 20 working days. If the matter is complex and further time is required a letter should be sent to the complainant explaining the reasons why and including details of when a response can be expected.
- 4.6.1 The full response must contain sufficient information to assure complainants that their complaint has been taken seriously; if the complaint is upheld there must be a full apology for their experience; and details must be included as far as possible of action taken to prevent a recurrence of the situation complained about. The letter must also inform complainants of their right to ask for a review of the investigation if they are not satisfied with the outcome of Stage One. Details of how to do this must be provided.

5. Stage Two: review under direction of Trustee Board

- 5.1 Stage two of the Process aims to check that the investigation has been carried out fully and properly. To check that the fundamental point of the complaint has been addressed and to address any outstanding issues raised by the complainant. The ultimate aim is to achieve resolution of the complaint.

5.2 Process

- 5.2.1 The process to be followed in reviewing the complaint is similar to Stage One except that the people dealing with the issues will be different. The same target time scales for responses apply. The lead person conducting the review will be the Chair of the Trustee Board, or a designated sub-committee appointed by the Trustee Board. (If Stage 1 was carried out by a member of the Trustee Board, a different individual or individuals would have to be appointed for Stage Two).
- 5.2.2 Stage Two referrals may mean that the initial investigation has not addressed the pivotal point of the complaint. The Chair of the Trustee Board (or designated representative) must be sure that their review takes this into account and ensure that the crux of the problem has been addressed.
- 5.2.3 The response to the complainant must contain an explanation, apology if required, information about remedial actions and satisfactory assurances that the complaint has been investigated fully.

6. Checklist for good investigative practice

6.1 When reviewing a complaint the following checklist should be used:

- *Check if there have been any previous complaints from this person*
- *Contact the complainant to:
Clarify the complaint
Clarify the outcome sought – and explain the limitation of the outcomes on offer at this stage.*
- *Check whether the complainant needs support, for example interpretation and language services, advocacy, access to induction loops etc.*
- *Brief yourself on the background to the complaint and obtain relevant documents. Ask the client if there is anything they wish to add.*
- *Any interviews should be conducted in as informal and relaxed a way as possible.*
- *Separate hearsay from fact*
- *Draft a report setting out the evidence together with your conclusion.*

6.2 Note: It is important that the person undertaking the investigation is not implicated in the complaint.

Recommended format for recording Complaints

The following columns should be used to record details of complaints:

Please ensure that all entries are written in biro / ink or typed.

1. DATE

- Date (of complaint) showing day, month, year and time, if applicable.

2. COMPLAINANT

- Full name, address and telephone number of complainant.

3. COMPLAINT

- Description of complaint and signature of complainant.

4. ACTION

- Date and action taken to resolve the complaint, signature of the complainant and the local staff member.

COMPLAINTS FORM

If you wish to complain about the service you have received from AGEUKH&F, please complete the following and return the form to us.

COMPLAINANT'S DETAIL

Name:

Address:

..... **Postcode:**.....

Telephone No:..... **Mobile No:**.....

Is it all right to contact you at the above Address/Telephone No? Yes/No

Please tell us the details of your complaint:

When did it happen:

Please tell us what you feel should/should not have happened:

Who was involved?

Please tell us what you would like to happen as a result of your complaint:

You will receive a response in five working days.

Send to Age UK Hammersmith and Fulham
105 Greyhound Road, London W6 8NJ

Thank you for completing this form