

Complaints and Requests Policy and Procedure

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Purpose

Any Gordon Moody stakeholder, any user of a Gordon Moody service and any member of the public, has the right to make a formal request or complaint about any aspect of a Gordon Moody service, or other matter that Gordon Moody has some control over, and has the right to receive a response to their request or complaint.

Complaints, requests and suggestions from our stakeholders are a valued source of information regarding the quality of our services and are a primary source of information regarding possible abuse.

Gordon Moody operates an effective mechanism for the receipt, recording, investigation and resolution of all requests and complaints, in order to comply with all necessary regulations.

The policy guidance as well as the procedure for making and responding to formal request or complaints is set out below.

When possible and appropriate an attempt to meet relevant requests and resolve complaints should be made prior to reverting to the formal procedure set out below.

Policy Guidance

Our guidance and procedure for complaints handling is informed by:

- Health care Standards and Regulatory Requirements (eg. CQC, BACP and governmental statutory regulations)
- Internal policies and procedures
- The Local Authority Services and National Health Services Complaints regulations 2009 and associated guidance)

Our guidance for handling any complaints is underpinned by the following five principles:

Principle one: we ensure that the complaints process is accessible for stakeholders to see, and all service users feel confident to speak up

Principle two: we ensure that the complaints process is straightforward for service users and their representatives

Principle three: we ensure that appropriate systems are in place to keep service users informed throughout the complaints process and help them feel listened to and understood

Principle four: we ensure that we use effective, transparent and appropriate communication and that the requests and complaints process is resolution focused

Principle five: we ensure that quality assurance processes are in place to enable organisational learning and service improvement from complaints and customer feedback

Gordon Moody will establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by service users and other persons in relation to the carrying on of the regulated activity.

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

In all cases requests, complaints and concerns shall be treated seriously and in a sensitive and confidential matter.

Requests, complaints and concerns shall be handled in such a way as to first of all reach a satisfactory outcome with the complaint, and to turn a potentially difficult and damaging problem into a source of quality improvement.

Where the complaint does not allege risk of harm (ie the complaint is not also a safeguarding issue) or an allegation of misconduct, then in the first instance Gordon Moody will seek an informal resolution to complaints wherever possible and provided the complainant agrees, although the complaint itself will still be recorded.

The complaint procedure should be available:

- On the Gordon Moody website;
- Clearly visible at the Gordon Moody residential centres;
- Sent out with all contracts for care; and
- Included within all Service User Guides

All employees are warned that written complaints recording rules must be complied with, and those records held where they are freely available to supervisors and managers. Any attempt to conceal a complaint may give rise to formal disciplinary action.

Where possible the complainant will be requested to examine the written records of the complaint and sign to indicate agreement with the outcome.

Management will periodically (recommended every four months) review all complaints since the previous review in order to identify trends and matters which may have appeared to be relatively minor at the time, but which indicate a deeper problem.

The recording of complaints will not be confined to “serious” or “substantial” complaints. The existence of records for complaints of an apparently minor nature is an indication of the effectiveness of the procedure, the openness of the culture of the organisation and its employees, and their vigilance in the area of abuse.

Complaints will be recorded on Service Users’ files in order to identify any pattern of complaints relating to an individual, including care or service provision in order to update and review the Care Planning process.

Complaints will be recorded centrally in order to identify any pattern of complaint relating to all or a group of Service Users. This record will contain minor complaints in addition to serious complaints and will be accessible to all members of staff where appropriate, unless this is a safeguarding issue.

The central information, with regards to complaints, suggestions and compliments, will be regularly reviewed and analysed. The summary will be regularly considered by Management for quality assurance purposes.

Compliments and suggestions will be recorded centrally and made available for all parties to read, also on the personnel file of any member of staff individually complimented.

Employees who are the subject of a complaint should not communicate directly with the complainant unless accompanied by a senior member of staff, unless requested directly to do so by the complainant.

Where the complaint gives rise to concerns regarding the well-being of one or more Service Users, serious consideration must be given to suspension of the person or persons complained about, and an investigation must be initiated immediately in order to identify any risk to the health and welfare of the Service User involved.

All complaint investigations should be completed within 6 months at the latest, unless a different time period has been agreed. This should only be done when there is good reason for it.

Procedure

1. Formal requests/complaints may be made, verbally, in writing or in person either directly to the manager of a particular service, or through any other member of Gordon Moody staff.
2. A complaint must be made no more than 12 months after the date of the event occurred, or if later, the date the event came to the notice of the complainant.
3. The person receiving the formal request/complaint shall inform immediately the relevant Manager/Head of Department. All responses will be made/followed up in writing (preferably email).
4. There are several distinct levels of dealing with a complaint, and it is important for the speedy and effective resolution that each level is followed.
5. An exception to this principle will be made in the case of a complaint who alleges abuse, in which case the complaint will be immediately and directly reported to the Clinical Director, Dragos Dragomir at dragos.dragomir@gordonmoody.org.uk.

6. All formal requests/complaints will be recorded in the Formal Requests and Complaints File and subsequent actions recorded against their entry.
7. All formal request/complaints shall be acknowledged in 24 h. In this acknowledgement we must indicate who will be investigating the complaint.
8. All formal or serious complaints will be investigated by a person not related to the immediate source of complaint.
9. The relevant Manager/Head of Department shall respond to any formal request/complaint in writing within ten working days (Mon-Fri), or by a mutual agreed time, and attempt to solve the matter.
10. If the applicant/complainant feels that they have not received a satisfactory response, they may write to the Clinical Director or to the CEO depending of the issue raised. The Clinical Director/CEO shall than attempt to resolve the matter within 10 days or mutually agreed time.
11. If the outcome is unsatisfactory, for the applicant or complainant, they may request a meeting with the relevant Manager or Director and have the right to be accompanied by and advocate of their choice and/or request and interpreter to be present. They will also be given/sent a copy of the minutes of the meeting and a record of any action taken.
12. If the applicant/complainant remains unsatisfied, they may ask for all relevant correspondence to be forwarded to the Chairman of Trustees who shall attempt to settle the matter within one calendar month, or by a mutually agreed time.
13. Gordon Moody will only accept complaints from a third party under certain conditions:
 - Where you know that the Service User has consented, either verbally or in writing; or:
 - Where the Service User cannot complain unaided and cannot give consent because they lack capacity within the meaning of the Mental Capacity Act 2005; and
 - The representative is acting in the Service User's best interests – for example, where the matter complained about, if true, would be detrimental to the Service User.
14. The complaints process will only be regarded as “completed” when the complainant or their representative has indicated, in writing if possible, that they are satisfied with the outcome of the complaint procedure.

15. In the event of a continued disagreement which cannot be resolved internally, the complainant will be advised to approach an appropriate external authority, such as the Local Government Ombudsman or an independent advocacy service.
16. This procedure can be available, upon request, in other languages and formats, if required.

Formal requests/complaints in writing can be addressed to:

Gordon Moody
47 Maughan Street
Dudley
West Midlands
DY1 2BA

or emailed to:

help@gordonmoody.org.uk, with the word **Complaint** added at the beginning of the Subject Title.

Monitoring This Policy

Gordon Moody will continuously monitor this policy and review its use biennially. If subsequent updates are made by the current Health Care Standards and regulatory bodies, these will be incorporated accordingly.