



**MANAGEMENT OF COMPLAINTS**

**Policy and Procedure**

**This document is intended for internal use only. “Our Complaint Policy” (Appendix A) is available for all external parties see Section 4.2 Accessibility.**

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The purpose of this document is to set out the policy and the process for identifying, receiving, recording, handling and responding to complaints made by residents, their relatives/significant others, team members, visiting professionals or members of the public.

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**1.0 POLICY STATEMENT**

Complaints, comments and suggestions received should be welcomed and viewed as a means to assess, monitor and improve the quality and safety of the service. They must be acknowledged, accurately recorded and responded to within established timeframes. All complaints, however minor, must be taken seriously, appropriately investigated and dealt with promptly, empathetically and effectively.

A complaint provides an opportunity to engage with the complainant and respond in a manner that demonstrates the values and culture of the business.

Appendix A – “Our Complaint Policy” sets out our policy for publication.



## **2.0 SCOPE**

All Registered Sunrise Senior Living Communities and Gracewell Homes, Support Office, Permanent and Contracted Team Members.

## **3.0 RESPONSIBILITIES**

The Senior Director of Care and Quality is responsible for ensuring an appropriate policy is in place from which the registered Home manages complaints effectively.

The General Manager (Registered Manager) is responsible for ensuring their individual Home follows the policy and that their team members have access to the policy along with any training required.

In the absence of a General Manager, this responsibility lies with the most senior person responsible for the Home at the time.

## **4.0 PROCEDURE**

### **4.1 Definition**

A complaint is any expression of dissatisfaction with any aspect of the service provided by Sunrise Senior Living where the complainant requires a response. A complaint can be made in person, during a phone call or in writing (letter or email).

### **4.2 Accessibility**

The Complaints Policy (**Appendix A**) must be:

- Displayed in the foyer in each Registered Homes.
- Available in the Service User Guide.
- Sent out with all contracts and/or given to all residents/relatives on the day of move in
- Available on request.
- Available on the Sunrise Senior Living Website
- Available in large print, audio tape, braille or other languages if required.



### **4.3 Time Limits**

A complaint should be made as soon as possible after the event occurred or within 6 months of finding out about the problem as long as this is within 12 months of the incident. These time limits can be extended where it is still possible to investigate the complaint effectively and fairly and with both parties acting reasonably.

### **4.4 Managing Complaints – The Process**

The Sunrise Senior Living Complaint Policy is designed to be transparent and easily understood by both those making a complaint and its team members. This policy aims to ensure there are no obstacles or barriers to hinder the raising of a complaint or escalation if the complainant remains dissatisfied.

A complaint will be addressed at one or more of the following levels:

- Level 1 - Local
- Level 2 - Company
- Level 3 – External

The levels are not necessarily an indication of seriousness and they do not in themselves drive different approaches to a resolution or recompense. The business objective is that the majority of all complaints will be addressed at Level 1 (Local) as this will provide the most immediate resolution and demonstrate the strength of relationship between our Homes, residents and their families. (**Appendix B**).

#### **4.4.i Level 1. Local (Verbal or written)**

Any adverse comment on any aspect of service provided and/or an individual should be considered as a complaint and, as such, should be brought to the attention of the General Manager. This is the case whether the complaint is related to care, nursing, administration, housekeeping, environment, catering, fees or volunteer issues, etc.

Anyone who feels dissatisfied with any aspect of the service is advised to raise the matter in the first instance with the General Manager or the most senior team member within the Home.

The care of residents is of primary importance and the first responsibility of a recipient of a complaint is to ensure that the resident's immediate health care needs are being met. This may require urgent action before any matters relating to the complaint are investigated. Team members handling complaints referring to a clinical issue must ensure that before responding to a complainant it is agreed in advance by the clinician responsible or on duty and, in the case of medical care, by the doctor.

There may be situations where a resident does not agree with a complaint being made by relatives or team members. In these circumstances, confidentiality and the wishes of the resident are



paramount. Legal advice may be required before the complaints' procedure can proceed. In these circumstances, the Regional Director of Operations must be informed.

It may be that the complaint relates to an incident that can be immediately resolved to the satisfaction of the complainant in which case no further action is required unless the situation is repeated within the Home. These incidents still create an impression of the overall service and offer opportunities to learn and improve.

The person receiving a complaint should record the details on a Record of Complaint Form (**Appendix C**), including details of any action taken to address the issue and submit the form to their immediate line manager and/or the General Manager.

The Manager receiving the Record of Complaint Form should then consult with the complainant to establish whether the immediate action taken has addressed the concern to the satisfaction of the complainant and whether any further action is required. If no further action is required and the complainant is satisfied with the outcome, the manager should record the conversation and outcome on the Record of Complaint Form and submit this to the General Manager. The complaint details should be input to the complaint system by completion of an online complaint form and through the edit function on the tracker: <https://sunriseseniorliving.sharepoint.com/sites/UKSites>

If the complainant is not satisfied with the immediate action taken and/or further action is required, the procedure for responding to written complaints should be followed as detailed below.

In some circumstances, particularly where several areas of concern are being raised verbally, it may be necessary to assist the complainant to record their concerns in writing and this should be done supportively and sensitively by a member of the management team.

Written complaints should initially be submitted to the General Manager (or the delegated deputy in their absence) although it is understood that on occasions the complainant may wish to bring the matter to the attention of the Regional Director of Operations.

An acknowledgment letter should be sent to the complainant immediately if possible and certainly within 3 days of receipt of any written complaint (**Appendix D** - Initial Response to Complaint template). The letter should detail who will be investigating the complaint and advise that the complainant will receive a response within 14 days. A copy of the complaint and of the Initial Response Letter should be forwarded to the Regional Director of Operations.

The Regional Director of Operations should be the first point of escalation for providing guidance and support to the management team. They should also be responsible for ensuring that appropriate training and coaching is provided to deal with and respond to complaints. The Regional Director of Operations is responsible for the quality of complaint responses and should ensure the Complaint Policy is being adhered to.



#### 4.4.ii Level 2 – Company

A Company complaint is where a complaint is received at Sunrise Senior Living Support Office directly addressed to the Chief Executive Officer or other Directors or other Senior Management or by referral from a Regional Director of Operations.

These complaints are likely to be by letter or email and would generally relate to situations where a previous complaint has not been satisfactorily resolved, the complainant has lost trust in the local management team or where the complainant believes the issues raised are of such a serious nature that senior management or directors should be made aware.

The complaint will be acknowledged, and a complaint form will be raised, if not already done. The complaint form will generate an entry on the tracker. The nature of the complaint will be reviewed and forwarded to the individual best placed to investigate, resolve and prepare a response. In most cases this will be the General Manager or Regional Director of Operations. The Regional Director of Operations will always be made aware of complaints within their region to enable them to support and manage the investigation as required.

Where possible and if appropriate, the complainant should be invited to attend a meeting (physical or via Microsoft Teams) to discuss the details of the complaint. This will usually be led by the General Manager but if the complaint involves multi-disciplinary matters, the Regional Director of Operations may wish to chair the meeting to ensure all aspects of the complaint are clarified, discussed and responsibilities are clearly allocated. In these situations, minutes of the meeting and a resume of the meeting including the proposed investigation/action and timeframe for expected outcome should be forwarded to the complainant.

The General Manager will usually take responsibility for coordinating an investigation into the issues raised by the complainant and the subsequent resolution. **(Appendix E -The Complaint Ownership Model)**. When the complaint is about one specific aspect of the service, they may appoint a senior professional responsible for that service to be the investigation manager. Complaints should be kept confidential and only those who need to know will be informed about the complaint or investigation. This approach to responsibility will be followed for complaints commonly relating to care, service, team member attitude, finance, invoice disputes and administrative issues. Where the complaint relates specifically to the General Manager responsibility for coordinating the investigation will rest with their line manager.

The appointed responsible person will keep a contemporaneous written record of all meetings, statements, correspondence and actions taken to investigate the complaint and any email correspondence must also be printed and retained with the written record.

An investigation report must be completed which will contain a summary of investigatory actions taken, details of findings and recommendations or details of actions taken to prevent the situation from re-occurring. Consider using the Lessons Learned Pro-Forma **(Appendix F)** and sharing the outcome with the Regional Director of Operations and the Head of Quality Improvement.

The details of the investigation and outcome should be communicated to the complainant in a letter, with a clear apology if the complaint was found to be justified. The response letter will usually be signed by the person investigating the complaint and where the Regional Director of Operations or other Directors have been involved with the complaint, the letter will either be prepared for their signature or be approved by him / her in advance of it being sent out.

The complainant should be offered the opportunity to discuss the contents of the letter with the General Manager/Regional Director of Operations if appropriate.

If the complainant is not satisfied with the investigation, the outcome or the action taken, they are advised to refer the matter in writing, for further consideration through the Regional Director of Operations and/or the Senior Director of Operations and Sales.

As a final course of internal investigation where a complainant remains unsatisfied following the response from a director, complaints may be escalated to the Chief Executive Officer.

#### **4.4.iii Level 3 External -Taking a Complaint Further**

Where a complaint has not been fully resolved and the complainant remains dissatisfied with the outcome the complainant has the right to take their complaint to the following external parties:

- Residents whose care is funded fully or in part by the local council may complain to their local Social Services department.
- Residents in receipt of nursing care may complain to the Clinical Commissioning Group funding their care.
- The Care Quality Commission (CQC) inspect and regulate the service and can be contacted directly and at any time in relation to a complaint.
- Complainants who are not fully satisfied with the outcome of an internal investigation can refer their complaint to the Local Government and Social Care Ombudsman (LGSCO) and ask for it to be reviewed. The LGSCO provides a free and independent service. Telephone: 0300 061 0614, Email: [advice@lgo.org.uk](mailto:advice@lgo.org.uk)

#### **4.5 Monitoring the Incidence of Complaints**

It is the responsibility of the General Manager to record and maintain a register of all complaints. By completing the online complaints form, an entry will be created in the complaints tracker. This entry can then be updated/edited by the General Manager, Regional Director of Operations and other specified individuals (access is controlled).

Any letter/email of complaint can be uploaded to the complaint form or tracker (**as a PDF document**) for future ease of access and the investigation report and response can be uploaded to the tracker using the edit function. **Please do not upload any investigation or subsequent investigation that relates to colleagues E.g. a disciplinary process.**

It is also the responsibility of the General Manager to track and proactively address any trends in complaints within their Home.

Additionally, complaints received at the Sunrise Senior Living Support Office (Level 2) are tracked and reviewed monthly by senior management in order to review response times, common and emerging trends.

## **4.6 Other Considerations**

### **4.6.i Escalation**

At any time should the individual investigating the complaint, be concerned about the nature of the complaint, their findings or any hindrance to their investigation, they should seek support and guidance from their line manager, the Senior Director of Operations and Sales or the Chief Executive Officer as appropriate.

### **4.6.ii Safeguarding**

Where a complainant raises safeguarding concerns or where safeguarding concerns are suspected, this must be notified immediately to the Local Authority Safeguarding Team, in accordance with current safeguarding policy and procedures, and their advice sought and followed in relation to the continuation of the investigation process. Complaints of this nature should be reported to the Director of Safeguarding, Karen Davies-Read and the Regional Director of Operations. Investigations should only proceed following approval to do so by the local safeguarding team and CQC should be notified as per regulations. It is important to keep the complainant aware of any process or actions that may delay the investigation into their complaint and subsequently our response.

### **4.6.iii Legal Matters / Financial Implications**

- The complaint details must be copied and sent to the Senior Director of Operations and Sales, and the Complaints Manager following every complaint of this nature.
- The complaints procedure should be stopped if the complainant explicitly indicates an intention to take legal action in respect of the complaint.
- Complaints which have a significant possibility of litigation should be handled by the appropriate director.
- The possibility of legal proceedings should not prevent the continuing of any investigations to uncover faults in procedures or making recommendations to prevent recurrence.
- Where allegations are serious and may constitute a criminal offence, the Senior Director of Operations and Sales and the Complaints Manager should be informed, and the police should be notified immediately in accordance with other operating procedures.

### **4.6.iv Disciplinary Action**

A case for considering disciplinary action against a team member can be suggested at any point during the complaints procedure, but consideration as to whether or not disciplinary action is warranted is a separate matter for management, outside the complaints procedure and must be subject to a separate process of investigation.



#### 4.6.v. Confidentiality and Resident Information

Occasionally, requests will be made for resident information or documentation in connection with an investigation not involving the Sunrise Senior Living. In such cases, you must refer the matter to the Data Protection Officer and follow the Data Subject Access Procedure.

#### 4.6.vi. Threat of Disclosure to Media

If there is any indication of a threat of disclosure to the media, **no information is to be given**. The Senior Director of Operations and Sales should be informed immediately (including out of hours) and they will communicate this to relevant members of the UK Leadership Team and the Public Relations Company who deal with such issues.

### 5.0 DATA PRIVACY

A data privacy complaint is a complaint that in full or in part, relates to:

- How personal data has been processed i.e. used, viewed, transferred, shared or stored.
- How a data subject request has been handled.

All data privacy related complaints are to be reported to the Data Protection Officer (DPO) immediately and no communication regarding a data privacy complaint may be made with the complainant or data subject without the prior approval of the Data Protection Officer

Responsibility for managing all complaints relating in full or part to data privacy will rest with the Data Protection Officer **(See Section 5 and Appendix G)**.

### 6.0 OBSOLETE POLICY

Any Complaints Policy and or Procedure predating December 2020.

### 7.0 RESOURCES

Public Interest Disclosure Act 1998 [www.legislation.gov.uk/ukpga/1998/23/contents](http://www.legislation.gov.uk/ukpga/1998/23/contents)  
Data Protection Act 1998 [www.legislation.gov.uk/ukpga/1998/29/contents](http://www.legislation.gov.uk/ukpga/1998/29/contents)  
Principles of Good Complaint Handling – PHSO (Primarily for public bodies but a good guide for principles) <https://ombudsman.org.uk/about-us/our-principles/principles-good-complaint-handling>  
LGO Resources [www.lgo.org.uk/learning-resources](http://www.lgo.org.uk/learning-resources)  
The following link provides access to the online complaints form and the complaints tracker:  
<https://sunriseseniorliving.sharepoint.com/sites/UKSites>

Guidance on how to log a complaint and use the tracker is given on the web page.



## 8.0 APPENDICES

- Appendix A** *Complaints Policy (Summary) – To be edited by each Homes and displayed*
- Appendix B** *Aide Memoire – Complaints Management Flow*
- Appendix C** *Record of Complaint Form*
- Appendix D** *Initial Response to Complaint template (Acknowledgement)*
- Appendix E** *Complaint Ownership Model*
- Appendix F** *Lessons Learned Pro-Forma*
- Appendix G** *Data Privacy Complaint Procedure*
- Appendix H** *Principles of Complaint Management*



## **Appendix A**

### **Our Complaints Policy**

Here at .....of .....we invite and welcome feedback from you as a means of improving the service that we offer, this includes any concerns or complaints that you may have.

Concerns and complaints should be brought to the attention of a team member as soon as possible. There is always a senior member of the care team or nurse on duty in all of our communities, as well as a manager on call who will be happy to ensure that concerns or complaints are addressed.

All complaints and concerns are logged, acknowledged, investigated and our intention is to respond to you within 14 days of receiving the complaint. In some cases, due to the complexity or availability of people required in an investigation, it may take us longer to respond in full. In these situations we will contact you and keep you informed of progress and expected timescales. However, if the complaint is not resolved or you wish to discuss further, please do not hesitate to contact ....., General Manager.

If you feel it necessary to escalate your complaint at any stage please write to ..... Regional Director of Operations, Sunrise Senior Living Limited, Sunrise House, Post Office Lane, Beaconsfield, Buckinghamshire, HP9 1FN and your complaint will be reviewed and/or investigated by a senior officer. If after this your complaint is still unresolved please write to the Chief Executive Officer at the same address.

You also have the right to take the complaint externally:

Residents whose care is funded fully or partially by the local council may complain to their local Social Services department.

Residents in receipt of nursing care may complain to the Clinical Commissioning Group funding their care.

If after exhausting the company policy on complaints you are not fully satisfied with the outcome of an internal investigation, you have the right to refer the complaint to the Local Government Ombudsman and request that it be reviewed:

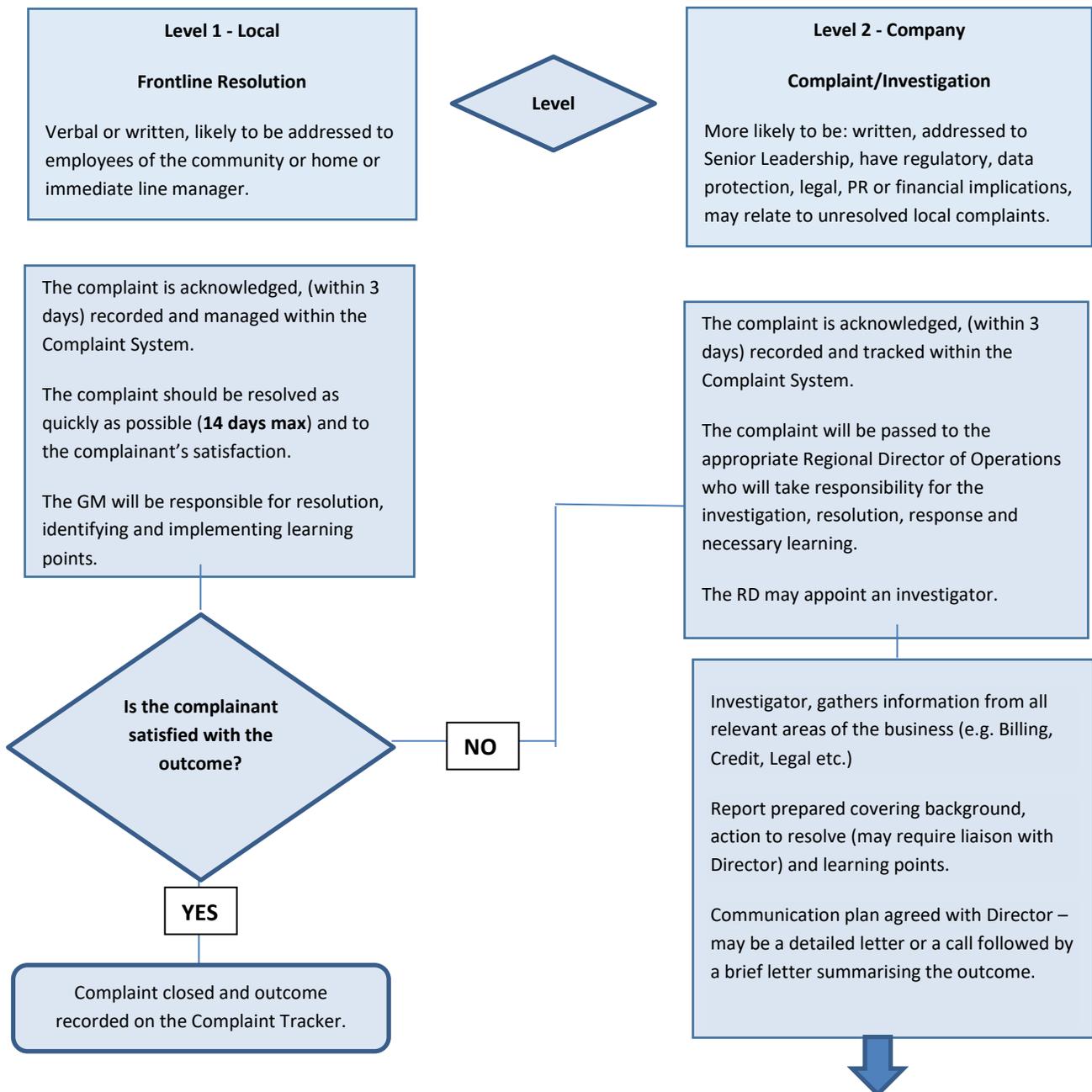
Local Government Ombudsman  
PO Box 4771  
Coventry  
CV4 0EH  
[www.lgo.org.uk](http://www.lgo.org.uk)  
Telephone: 0300 061 0614

**Appendix B**

**Complaints Management Flow**

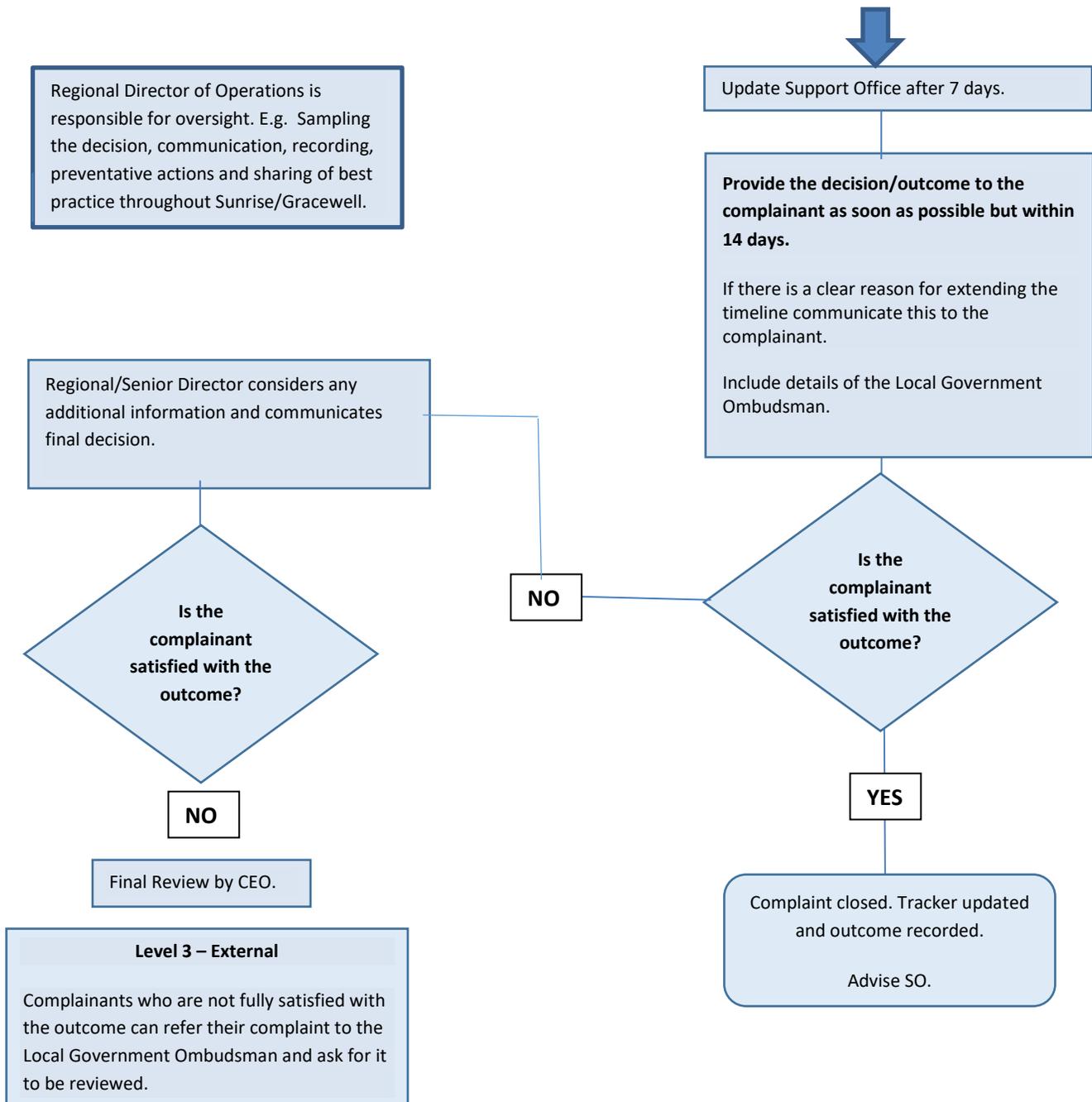
**Complaint Definition**

A complaint is any expression of dissatisfaction with any aspect of the service we provide. A complaint can be made in person, during a phone call or in writing (letter or email). The complaint can be made by a resident, relative or representative of the resident. When receiving a complaint, the first responsibility is to ensure the resident’s immediate health care needs are being met. This may require urgent action before any investigation takes place.



**Appendix B** - Continued

**Complaints Management Flow**



**Rebuilding and Strengthening the Relationship**

Wherever possible and particularly in complex, emotional or stressful situations the RD should seek to meet with the resident and/or family as part of the resolution



**Appendix C**

**Record of Complaint/s**

<b>1. Preliminary Details</b>					
1.1 Name of person receiving complaint					
Appointment:		Date:		Time:	
1.2 Complaint received:		<input type="checkbox"/> in person		<input type="checkbox"/> by telephone	
		<input type="checkbox"/> by letter/ email (attached)		<input type="checkbox"/> Other (please specify)	
1.3 Complainant's name:					
Address:					
Telephone no:					
Relationship to resident/connection with home:					
<b>2. The Complaint</b>					
<b>Outline the nature of the complaint/attach letter of complaint. Continue on a separate sheet if necessary.</b>					

Indicate what follow-up action and time scales given to complainant	
<b>3. Next Stage</b>	
3.1 If the General Manager is absent for more than 48 hours confirm that the Regional Director of Operations is informed the next working days.	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.2 Does the CQC require notification?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.3 Has the complainant received a written response within 48 hours?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.4 Complaint/s attached?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.5 Has someone been assigned to investigate the complaint? If so who?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.6 Are any external agencies involved?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Which:	
3.7 Has the investigation resulted in any suspension of employment?	<input type="checkbox"/> YES <input type="checkbox"/> NO (Details)
<b>4. Brief details of Investigation</b>	



Attach Investigation if appropriate
<b>5. Action taken to resolve</b>
<b>6. Reviewed by: .....</b> <b>(Director of Operations)</b>
Share learning points as appropriate



**Appendix D**

**Complaint Acknowledgement - Example**

Date .....

Dear .....

Re: **Resident Name/Issue**

Your complaint/letter dated ..... has been received and recorded.

In accordance with our complaints policy, it is our intention to respond to you within the next 14 days. Failing any unforeseen complications, I will be in touch with you shortly to inform you of my findings, the outcomes and any necessary action to be taken.

In the meantime, thank you for bringing this to my attention. I am sorry that you have needed to raise a complaint, but please be assured of our intentions to resolve the matter.

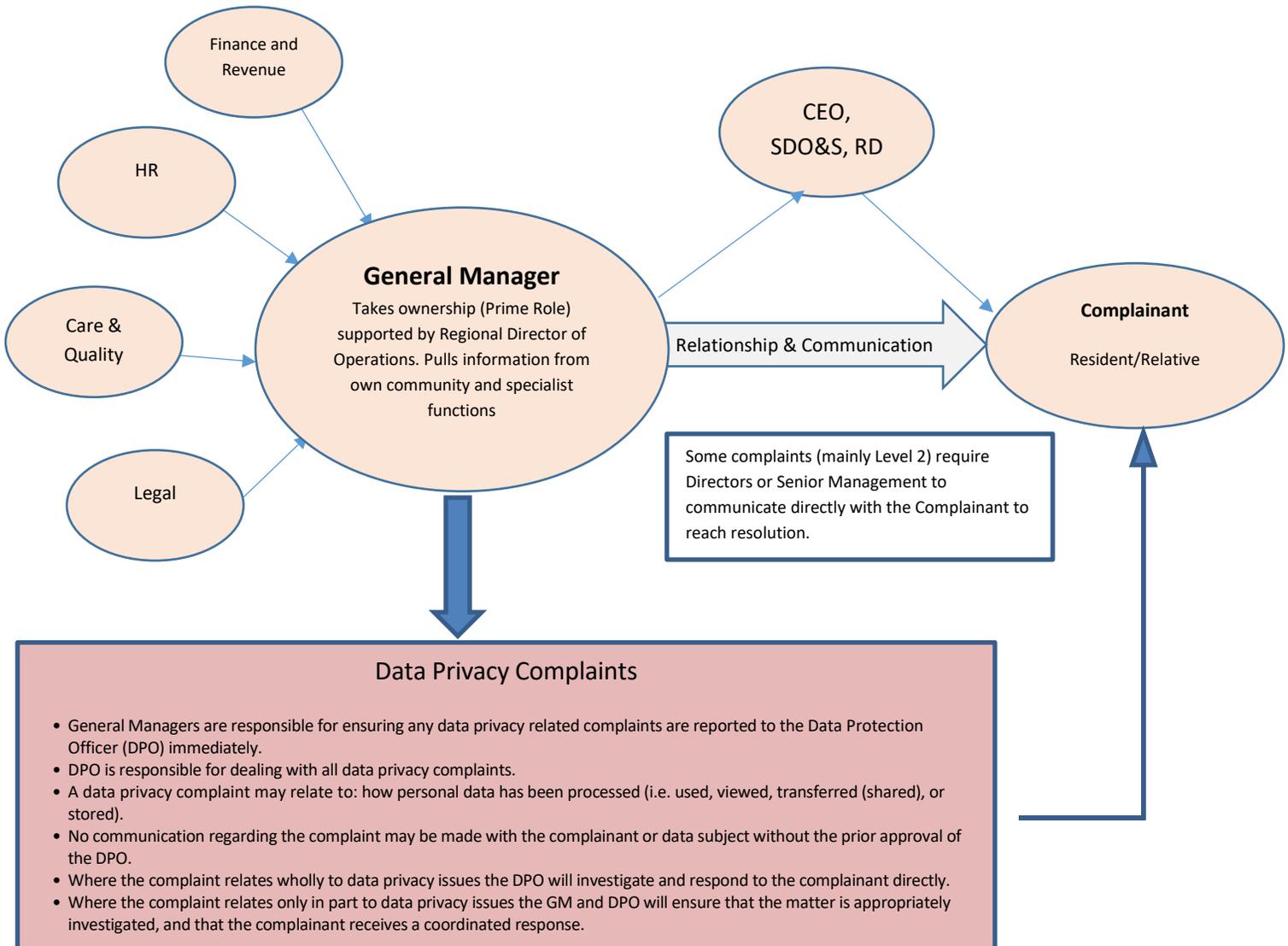
Yours sincerely

Name

General Manager **or other** Designation

**Appendix E**

**Complaint Ownership Model**



**Appendix E continued**

**Examples of Ownership**

Complaint	Responsible	Accountable	Consulted	Informed
All complaints addressed to CEO	GM/RD/SDO&S	CEO	Finance/HR/Care & Quality*/Legal as required	As appropriate
Invoice/Billing/Fees complaint	GM/RD	RD/SDO&S	Finance	
Care complaint addressed to	GM	RD/SDO&S	Care & Quality*	SDOS/CEO
Employee attitude complaint	GM	RD	HR	SDO
Complaint addressed to local community either GM or another community employee	GM or Team Member	GM/RD	Finance/HR/Care & Quality*/Legal as required	DO
Complaint relating to food	GM or Team Member	GM/RD	Chef/Nutritionist	DO
Issue raised at residents meeting	Team Member	GM	As appropriate	Local Team
Unpaid Fees	GM	RD	Finance (Collections)	As appropriate

\* Care & Quality – consider involving QBP and or Director of Safeguarding

**The General Manager holds a prime role as either Accountable or Responsible Manage**

**RACI**

In a RACI matrix, there are four levels of accountability, each of which corresponds to one of the letters in the name. The levels are:

- Responsible**  
Those who are assigned the “Responsible” level of responsibility do the work to achieve the task. For every task or deliverable, there should be at least one role with this level of responsibility. However, other roles can be delegated to assist in the work required.
- Accountable** (sometimes known as Approver)  
Those who are assigned the “Accountable” level of responsibility are those that are ultimately answerable for the correct and thorough completion of the deliverable or task. They are also the ones who may delegate the work to those who are “Responsible”. In other words, an “Accountable” must sign off or approve the work that a “Responsible” does. For every task or deliverable, there must be only one role with this level of responsibility.
- Consulted** (sometimes known as Counsel)  
Those who are assigned the “Consulted” level of responsibility are those whose opinions are sought during the work to complete the task or deliverable, or who help to review the result of the work to ensure it meets the necessary goals. They are typically subject matter experts or those who may be directly impacted by the work; and two-way communications with them are usually maintained throughout the work process.
- Informed**  
Those who are assigned the “Informed” level of responsibility have no required work to support a task or deliverable, but are usually kept up-to-date on work progress. Or they may only be notified once the work or deliverable is completed.





**5) What other actions may need to be considered?**

**6) Follow-up Action Plan and Communication Strategy**

Consider: As an organization, what and how we are going to share this learning experience and communicate to the whole organisation.

**To Whom?**.....

**By When?** .....

**This concludes the report:**

**Name:**

.....  
.....

**Designation:**

.....  
.....

**Date:**

.....  
.....



## Appendix G – Data Privacy Complaint Procedure

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### DATA PRIVACY COMPLAINTS PROCEDURE

**Document Control**  
Reference: GDPR DOC 2.9  
Issue No:  
Issue Date:  
Page: 21 of 22

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#### 1. Scope

This procedure addresses complaints from data subject(s) related to the processing of their personal data, Sunrise Senior Living handling of requests from data subjects, and appeals from data subjects on how complaints have been handled.

#### 2. Responsibilities

- 2.1 General Managers (GM's) are responsible for ensuring any data privacy related complaints made in relation to the scope of this procedure are reported to the Data Protection Officer (DPO) immediately.
- 2.2 DPO is responsible for dealing with all data privacy complaints in line with this procedure.

#### 3. Procedure

- 3.1 Where a complaint is received and relates wholly or in part to a data privacy issue then the GM must contact has the DPO immediately.
- 3.2 A data privacy complaint may relate to:
  - 3.2.1 how personal data has been processed (i.e. used, viewed, transferred (shared), or stored).
  - 3.2.2 how a data subject request has been handled.
- 3.3 No communication regarding the complaint may be made with the complainant or data subject without the prior approval of the DPO.
- 3.4 Where the complaint relates wholly to data privacy issues the DPO will investigate and respond to the complainant directly.
- 3.5 Where the complaint relates only in part to data privacy issues the GM and DPO will ensure that the matter is appropriately investigated, and that the complainant receives a coordinated response.

## **Appendix H**

### **Principles of Complaint Management**

1. Complaints Matter to:
  - a. Individuals – they deserve an explanation when things go wrong and require re-assurance that it is unlikely to happen again
  - b. CQC – they provide an indication of the quality of care and the responsiveness of the provider
  - c. Our business – they provide an opportunity to improve our business and if handled well, will lead to a stronger relationship with the complainant. They are costly if not managed well.
2. Thank the individual for the complaint – say that you are sorry that the problem has happened. This is not an admission of guilt and it does demonstrate respect for the individual.
3. Put yourself in the place of the complainant – this will give you an advantage as you will not only have more empathy with the individual, but as you know your business better than them you should be able to see the solution more quickly
4. It is important to demonstrate empathy and show a willingness to apologise where appropriate and under no circumstances must a complainant be discriminated against or victimized.
5. The care and treatment of a resident must not be affected when a complaint has been made by them or on their behalf.
6. Always start with the view that the individual has a valid point, it may seem minor to you, but it is a big deal to them
7. Gather all the facts – let the individual give you all the information (they will feel more engaged if actively listened to) and gather additional information from your team and specialist functions
8. Correct the problem – as quickly as possible ensuring your definition of the appropriate fix matches with the complainant's. Always do what you say you will.
9. Always respond promptly (Our policy states that a complaint must be addressed within 14 days) and in writing, even if the letter is a brief summary of a more detailed discussion. Apologise and provide re-assurance.
10. Learn from every complaint – fix the process, train/engage the team – see it as an opportunity to improve the business. Where possible advise the individual that they have helped eliminate a problem
11. Complaints and incidents even resolved can create an impression of the overall service and offer opportunities to learn and improve
12. Minimise reasons for complaint – provide regular opportunities to engage with residents/relatives to understand their ideas, issues and concerns. Log the feedback and act on it where possible, communicate positive changes made and also the reasons if something cannot be changed.
13. Listen to your employees – they care about the business and the service provided. They are generally closer to the residents/relatives and will most likely be able to identify potential issues. Ask their views regularly and often, making necessary changes.