



**Policy and Procedure**

**Adult Social Care**

**Adult Social Care Policy and Procedure for Handling Complaints and Processing Compliments and Comments**

**Policy Summary**  
The policy and procedure documents the Authority's approach to the development of a complaints process that implements the National Health Service, England, Social Care England: The Local Authority Social Services Complaints (England) Regulations 2009

**Statutory Basis for the Guidance**  
National Health Service, England, Social Care England: The Local Authority Social Services Complaints (England) Regulations 2009

**Related Legislation**  
Social Care Act 2008  
National Health Service Act 2006  
The Mental Capacity Act 2005  
Local Government Act 1974  
Health Services Commissioners Act 1993

**Regulations Revoked**  
National Health Services (Complaints) Regulations 2004  
Local Authority Social Services Complaints (England) Regulations 2006

**Local Strategic Partnerships**

**Supporting Documents**

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Ref: Service Manager, Quality Assurance

**Supporting Training**  
Group training with Service Managers and Quality Assurance Team

**Quality Assurance**

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## **Stockport Council Adult Social Care Policy and Procedure for Handling Complaints and Processing Compliments and Comments 2009**

### **1. Introduction**

- 1.1 This policy reflects the response by Stockport's Adult Social Care Service to The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 which came into force on 1 April 2009. These Regulations place a duty of the Authority as a "responsible body" in the handling of complaints, to co-operate with other "Responsible Bodies" in instances where a complaint involves more than one of those bodies and has been made in accordance with the Regulations. A responsible body is defined in these Regulations as an NHS body, local authority, primary care provider and independent provider.
- 1.2 To this end protocols have been developed with a key partnership of "responsible bodies" which includes Stockport Council Adult Social Care, Pennine NHS Foundation Trust, Stockport NHS Foundation Trust and NHS Stockport Clinical Commissioning Group.
- 1.3 These regulations build on previous separate complaints regulations covering local authority and health service complaints, identifying for the first time a joint protocol for managing complaints across agencies.

### **2. Aim of Policy and Procedure**

- 2.1 The aim of the policy and procedure is to detail a flexible and responsive approach to handling complaints and the issues that arise out of those complaints. The aims of the approach are:
- To put things right
  - To be Customer focused
  - To be open and accountable
  - To act fairly and proportionately
  - To use the opportunities found to help continuously improve Adult Social Care Services
  - To ensure compliance with statutory requirements of the Council.
- 2.2 The core function of the service is to manage and process complaints to achieve the best outcomes as quickly as possible. However from time to time comments and compliments may be received that particularly highlight an area of good practice which may be shared amongst establishments that provide similar services.

### **3. Organisations covered by these regulations**

- 3.1 Local authorities, all National Health Services, general practitioners, dentists, ophthalmologists, pharmacists, health service commissioners, hospital trusts, primary care trusts (clinical commissioning groups) and strategic health authorities.
- 3.2 The regulations also apply to any independent provider of health and social care services, including domiciliary care agencies, nursing homes and other residential care that have been commissioned through arrangements with local authorities or health agencies. Independent care providers commissioned by Stockport Council, through Adult Social Care (ASC) are required to maintain their own complaints policies as a condition of their contract.

#### **4. Scope of this Policy**

4.1 The main focus of the policy is about managing complaints in accordance with the 2009 regulations. It will also consider the recording and acknowledgement of compliments and comments and protocols for managing complaints outside the scope of these regulations. These include requests for reviews about decisions made for Blue Badge applications and the administration of the Social Fund and appeals against matters relating to personal budgets and self-directed support, which are covered under separate protocols. Complaints made about how someone was treated during the assessment process or any other service element connected with these subjects are still regarded as complaints and will be treated as such under the 2009 regulations.

#### **5. Roles and Responsibilities**

5.1 As a responsible body Stockport ASC is required to establish two core responsibilities; a Responsible Person and a Complaints Manager. These roles are currently fulfilled by the Director of Adult Social Care and the Team Manager of the Quality Team.

5.2 As the Responsible Person the Director of Adult Social Care is charged with ensuring compliance with the statutory regulations. The Complaints Manager is responsible for managing the procedures for the handling and consideration of complaints.

5.3 Both functions can be carried out by anyone authorised by the responsible person or the complaints manager to act on their behalf. In Stockport's case the complaints manager's functions are devolved to all members of the Quality Team, however the Quality Team Manager maintains overall authority to oversee the entire complaints function.

#### **6. Definition of a complaint**

6.1 A complaint may be generally defined as "an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social care services provision or the provision of any services commissioned by the authority to meet the needs of a service user or any services provided though another responsible body which requires a response."

#### **7. Type of complaints covered by this complaints procedure**

7.1 The type of complaints that are covered by this procedure are complaints concerning the social service functions undertaken by the local authority alone or functions undertaken in agreement with the primary care trust (PCT) under Section 75 of the National Health Service Act 2006. From 1<sup>st</sup> April 2013 the PCT is replaced by the local Clinical Commissioning Group (CCG). The direct commissioning of GP services becomes the responsibility of a National Commissioning Group.

7.2 Similarly the process covers complaints concerning the PCT, (CCG) relating to NHS functions and functions undertaken with the local authority under Section 75 of the National Health Service Act 2006. In Stockport the CCG is Stockport Clinical Commissioning Group. CCG will be used in the remainder of this document.

7.3 The procedure also covers complaints against a service provider commissioned through arrangements with an NHS body or a local authority, whether it is a primary care provider or an independent provider.

## **8. The nature of complaints that may be received**

8.1 All matters indicating dissatisfaction with a service received by the Quality Team should be assessed as a complaint. Although not an exhaustive list the type of issues that are most likely to be complained about include:

- an unwelcome or disputed decision;
- concern about the quality or appropriateness of a service;
- delay in decision making or the provision of services;
- delivery or non-delivery of services including complaints procedures;
- quantity, frequency, change or cost of a service;
- staff conduct;
- application of eligibility and assessment criteria;
- the impact on an individual of the application of a local authority policy; and
- assessment, care management and review.

## **9. Principles of the Policy and Procedure for Handling Complaints**

9.1 The aim of this policy and procedure is to detail a process through which complaints can be handled to ensure that:

- Complaints are listened to and dealt with seriously
- complaints are dealt with efficiently;
- complaints are properly investigated;
- complainants are treated with respect and courtesy;
- complainants receive, so far as is reasonably practical –
  - assistance to enable them to understand the procedure; or
  - advice on where they may obtain such assistance;
- complainants receive a timely and appropriate response;
- complainants are told the outcome of the investigation of the complaint; and
- action is taken if necessary in the light of the outcome of the complaint.

## **10. Persons who may complain under these arrangements**

10.1 A complaint may be made by:

- a) anyone who receives or has received services from the authority or any other related “responsible body”; or
- b) anyone who is affected, or likely to be affected, by the omission or decision of the authority or any other responsible body which is the subject of the complaint.

10.2 A complaint may also be made by a person acting on behalf of a person detailed in a) or b) above who:

- a) has died;
- b) is a child;
- c) is unable to make the complaint themselves because of physical incapacity; or lack of capacity within the meaning of the Mental Capacity Act 2005 or has requested the representative to act on their behalf.

10.3 A person acting on behalf of another person is defined in these regulations as the person’s representative.

10.4 Where a representative makes a complaint on behalf of a child, the authority, as a responsible body, to which the complaint is made must not consider the complaint unless it is satisfied that there are reasonable grounds for the complaint being made by a representative instead of the child. If it is not so satisfied, the representative must be notified in writing stating the reason for its decision.

- 10.5 Where a representative makes a complaint on behalf of a child or a person who lacks capacity within the meaning of the Mental Capacity Act 2005 the responsible body must be satisfied that the complaint is in the best interests of the person on whose behalf the complaint is made. A child is defined as an individual who has not attained the age of 18.
- 10.6 Although most complaints from children are dealt with primarily through Services to Children, the Disability Review includes individuals in transition from age 14 who are regarded as children as defined by the Statutory Instrument. The Statutory instrument is very clear that where the responsible body is not satisfied that the complaint made on behalf of a child or a person who lacks capacity is in the best interest of the person on whose behalf the complaint is made, the complaint must not be considered further and the responsible body must notify the representative in writing.
- 11. Complaints that will not be considered under this complaints procedure**
- 11.1 Complaints by other responsible bodies**
- 11.1.1 These procedures do not cover complaints from one responsible body against another responsible body e.g. the local authority complaining about the CCG. Such complaints are covered by other protocols and procedures.
- 11.2 Personnel Issues**
- 11.2.1 This complaints policy does not cover complaints from staff that would normally be covered under employment legislation and Human resources procedures.
- 11.3 Some Oral Complaints**
- 11.3.1 This means a complaint that is made orally and is resolved to the complainant's satisfaction not later than the next working day after the day on which the complaint is made.
- 11.4 Complaints that have been previously investigated**
- 11.4.1 A complaint will not be investigated if the subject matter is the same as a complaint that has been previously made by the same complainant and has been investigated previously under these or previous regulations and a final report has been sent. However where such instances occur these should be recorded as a representation on the information recording database.
- 11.5 Safeguarding**
- 11.5.1 Some complaints may concern incidents that put people at risk and may be more appropriate to be considered under the local authority's safeguarding procedures or procedures relating to The Mental Capacity Act or Deprivation of Liberty Safeguards. Where this applies the complaints procedure is suspended until investigations under these protocols are complete. However in Stockport the QAO maintains contact with the Safeguarding investigation and informs the complainant of progress where appropriate.
- 11.6 Court Proceedings**
- 11.6.1 Where a complainant institutes court proceedings, the complaints process is also suspended. However the authority may be asked to provide evidence to the court as part of the court process.
- 11.7 Complaints already with the Ombudsman**
- 11.7.1 Complaint where Subject matter is already being considered by the Local Government Ombudsman or the Parliamentary and health Service Ombudsman.
- 11.8 Freedom of Information Act and Data Protection Breaches.**
- 11.8.1 A complaint arising out of the alleged failure by a responsible body to comply with a request for information under the Freedom of Information Act 2000. Where this occurs advice can be sought from the authority's Freedom of Information Officer. Data Protection Breaches will be managed in accordance with the Managing Personal Information Policy (DP) and the Serious Information Governance Breach Procedure. [here](#).

## **11.9 Time limit for making complaints**

- 11.9.1 There is a time limit for making complaints. A complaint must be made not later than twelve months after the date on which the matter which is the subject of the complaint occurred or if later, the date on which the matter which is the subject matter of the complaint came to the notice of the complainant.
- 11.9.2 The complaint can still be dealt with outside that time limit if the responsible body co-ordinating the response to the complaint is satisfied that the complainant had good reasons for not making the complaint within that time limit and notwithstanding the delay, it is still possible to investigate the complaint effectively and fairly.

## **12. Handling Complaints**

- 12.0.1 All responsible bodies have the duty to handle and co-ordinate complaints to ensure that the complainant receives one co-ordinated response.

### **12.1 Complaints relating to Social Services Functions only**

- 12.1.1 Where a complaint is received by adult social care and simply relates to a social services function this can be handled simply by the local authority.

### **12.2 Complaints relating to NHS functions only**

- 12.2.2 Where a complaint is received by and NHS body and simply relates to a function associated only with an NHS function, the complaint should be handled by that body.

### **12.3 Complaints relating to a social care provider**

- 12.3.1 Where a complaint relates to services provided by an independent social care provider the complainant should be asked whether they consent to the details of that complaint being sent to the provider and if the complainant consents the details are sent to the provider as soon as possible. The details of the complaint cannot be forwarded to the third party unless this consent is obtained, however it may still be appropriate to take action to investigate the matter.
- 12.3.2 Where such a complaint includes an element that falls under social services functions, the complainant should be advised which elements of the complaint will be dealt with by social services and which by the social care provider.

### **12.4 Complaints relating to the functions of another “responsible” body**

- 12.4.1 The responsible body, local authority or at receives the complaint is responsible for co-ordinating the complaint. Where the local authority receives a complaint that relates to a function carried out by an NHS organisation the complainant should be advised that is the case and asked for the details of the complaint to be copied to that organisation. On receipt of consent the complaint is then copied to that organisation.

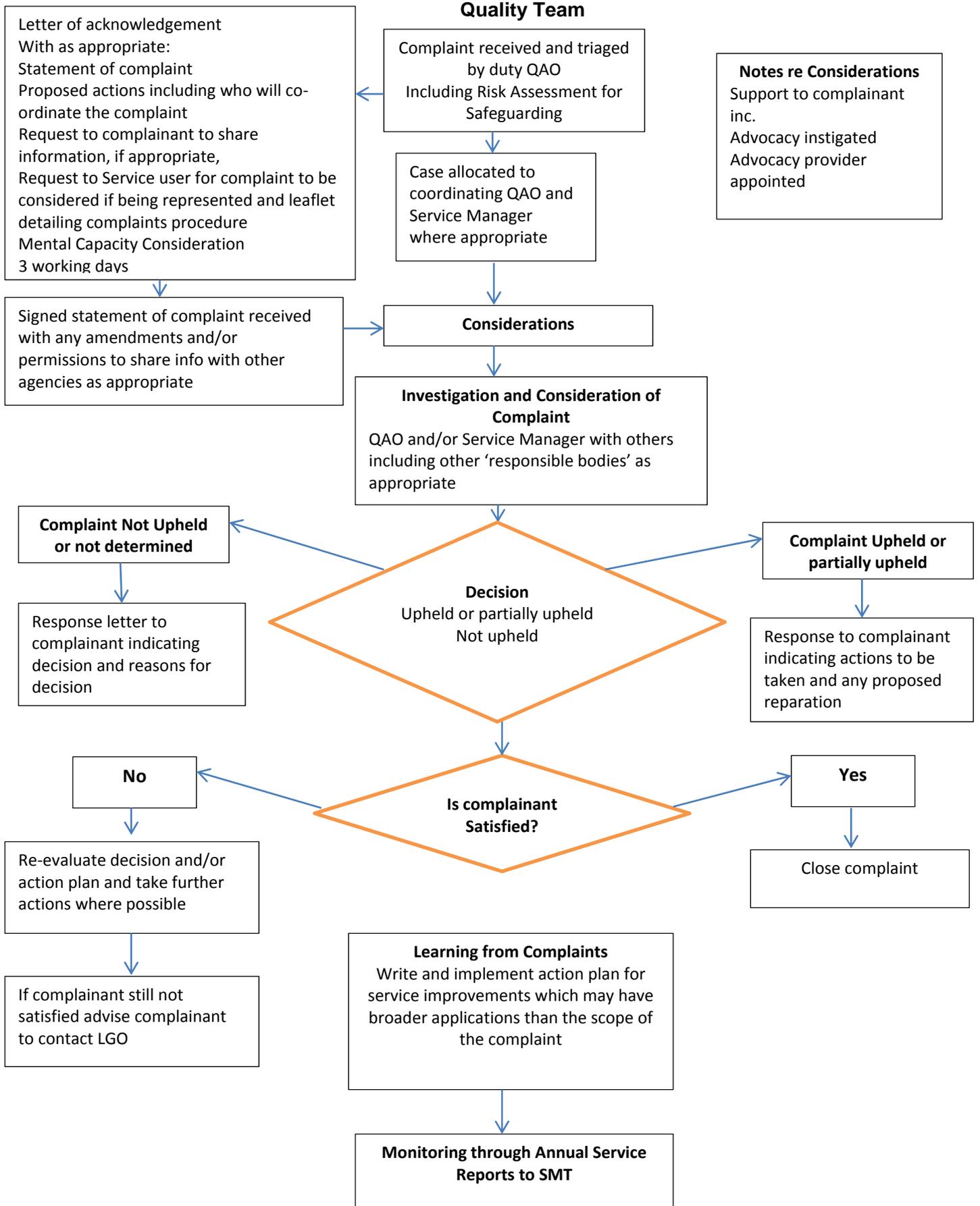
### **12.5 Complaints relating to joint functions of an NHS body and the local authority**

- 12.5.1 The organisation which receives the complaint is responsible for co-ordinating the response. Where the complaint covers functions that are shared between agencies the complainant should be told that this is the case and be asked for the consent to share the details of the complaint with the other parties. On receipt of consent the complaint should be shared as soon as possible.
- 12.5.2 There is then a duty to co-operate and both organisations must share in the investigation of the complaint and co-operate in the co-ordination of the response to the complainant.

## **12.6 Care Standards Complaints**

- 12.6.1 Where a complaint is wholly or in part a complaint relating to the essential standards of quality and safety the local authority must ask the complainant whether the complainant consents to the details of the complaint being sent to the registered person. If the complainant so consents, details of the complaint should be sent to the registered person as soon as possible. The registered person is the person registered under Chapter 2 of The Health and Social Care Act 2008 in respect of the establishment complained about.
- 12.6.2 Where such a complaint includes an element that falls under social services functions, the complainant should be advised which elements of the complaint will be dealt with by Adult Social Care and which by the registered establishment.

**Fig 1. Adult Social Care Complaints Procedure**



### **13. Procedure**

- 13.1 Many complaints start as enquiries at the Contact Centre, discussions with social workers or other staff members. Often the person taking this enquiry can check with the service what the enquiry is about and bring about an amicable conclusion, often on the same day. This is normal good practice. If the enquirer is not satisfied, they are asked if they want the matter to be dealt with as a complaint, if so the details are then referred to the Quality Team to be dealt with as a complaint under the 2009 regulations.
- 13.2 Complaints can be received orally by phone, in writing by fax or letter, electronically by e-mail or through the internet portal on the My Care My Choice Website or from another service department.
- 13.3 Where complaints are taken by the Contact Centre, these are logged on a system called Lagan.
- 13.4 Whilst the Contact Centre often acts as a first point of contact the primary complaints handling function is the Adult Social Care Quality Team.

The contact details for the public are:

The Adult Social Care Quality Team  
Adult Social Care  
Stopford House  
Piccadilly  
Stockport  
SK1 3XE  
Telephone: 0161 217 6019  
Fax: 0161 217 6022  
Minicom: 0161 217 6024  
E-mail: [ASC.Qualityteam@stockport.gov.uk](mailto:ASC.Qualityteam@stockport.gov.uk)

### **14. Stages of the Complaints Process**

- 14.1 The 2009 regulations detail a two stage complaints process:
- Local Resolution
  - Review by the Local Government Ombudsman
- 14.2 The Local Resolution stage has four components:
- Receipt of Complaint,
  - Acknowledgment of complaint
  - Investigation and management of complaint
  - Response to complainant

### **15. Receipt of the Complaint:**

- 15.1 The quality team operates a duty officer scheme. The daily duty officer checks a number of systems to pick up complaints. These include:
- The Lagan System operated by the Contact Centre
  - My Care My Choice Website Complaints Portal
  - Post, Fax and Minicom
  - E-mail generic e-mail address

## **16. Recording the Complaint**

16.1 Each complaint is logged on the complaints management system. This is a bespoke system which enables all stages of the investigation to be logged and monitored. At this time any additional information including case record information is also logged.

## **17.0 Triaging the Complaint**

17.0.1 The complaint is then triaged for a number of things:

### **17.1 Complaints made orally**

17.1.1 Where a complaint is made orally, the duty officer discusses the complaint with the complainant and subsequently writes up a statement of the complaint, clearly stating all the components of the complaint and how each will be dealt with.

### **17.2 Complaints made in writing or electronically**

17.2.1 Where a complaint is received in writing, it is acknowledged as detailed below.

### **17.3 Complaints made by a third party on behalf of a Service User**

17.3.1 Where the complaint is made by a third party on behalf of a service user the complainant is advised that the authority will have to get permission from the service user to proceed with the complaint and their consent to being “represented” by the complainant. Under the 2009 regulations a friend or member of the family acting on behalf of a service user is regarded as a “representative”

### **17.4 Complaints made about an independent provider or other responsible body**

17.4.1 Where the complaint is about a service provided by an independent provider, the complainant is advised initially to take the complaint directly to the provider. If they do not wish to do so the complainant is then asked for permission to share the details of the complaint with the provider to enable the complaint to be investigated. Often complainants are still reluctant to do this but the matter cannot be investigated without this consent. The complainant is advised of this and told that the complaint will be managed and co-ordinated by the authority.

### **17.5 Complaints concerning other responsible bodies**

17.5.1 Where the complaint is concerned wholly or partly with services provided by another responsible body such as NHS Stockport, Stockport NHS Foundation Trust or Pennine NHS Foundation Trust, the complainant should be asked for permission to share the details of the complaint with the other organisations involved, and advised that unless they consent to this it might not be possible to process the complaint effectively.

### **17.6 Complaints forwarded by another responsible body**

17.6.1 Where the complaint is one that has been received by another responsible body, and forwarded to the authority an acknowledgement is sent advising which authority will take responsibility for co-ordinating the ultimate response to the complainant.

### **17.7 Complaints that include Safeguarding issues**

17.7.1 Where the complaint includes safeguarding issues a safeguarding alert is raised to the Council’s Contact Centre and recorded on Care First for the attention of the responsible manager. The complainant is advised that this has happened and that the safeguarding investigation will take precedence although the complaint will be logged on the complaints database. The complainant will be kept fully informed of the outcome of the safeguarding inquiry by the responsible manager or the QAO as determined at the initial strategy meeting. Further support and guidance is available from the Safeguarding Adults and Mental Capacity Act Service.

## **17.8 Complaints that involve Capacity Issues under the Mental Capacity Act 2005 or the Deprivation of Liberty Safeguards**

17.8.1 Where the complaint involves someone who lacks capacity under the Mental Capacity Act 2005, the complainant is advised the any actions taken following an investigation need to be in the person's best interests. Further advice is available from the Safeguarding Adults and Mental Capacity Act Service. Consideration should be given to the appointment of an Independent Mental Capacity Advocate to act on the service user's behalf.

## **17.9 Anonymous Complaints**

17.9.1 There is no obligation under the 2009 regulations to investigate anonymous complaints. However in the case of Stockport, the matter of anonymous complaints may be investigated, although the complainant is advised that without any contact details the authority will not be able to notify them of the outcome.

## **17.10 Unreasonable or Vexatious Complaints**

17.10.1 As previously stated complaints that are made and responded to repeatedly by the same person who doesn't accept the response need not be dealt with under these regulations. Some complainants may become aggressive and their behaviour unacceptable. However persistent or enraged complainants should still be dealt with in a professional and consistent manner.

17.10.2 Where any member of the Quality Team encounters someone who is aggressive they are advised to:

- Make sure a manager or service manager is overseeing the contact.
- Provide a single point and mode of contact (e.g. by phone) to the complainant and advise that no other member of staff will be able to help them.
- Place a time limit on the length of each contact.
- Advise the contact that their current mode of behaviour will not be tolerated and try to agree an appropriate means of behaviour that will enable you to process their concern.
- Ensure that all contacts are observed and recorded by another member of the team.
- Where it is deemed necessary a communication strategy meeting can be arranged.

## **17.11 Complaints from individuals who pay for their own care**

17.11.1 The 2009 regulations relate to funded services only. People who pay for their own care should be advised to contact the Local Government Ombudsman. The LGO complaints review service came into effect from October 2010 to process complaints made concerning self-funded care services. However good customer care suggests that the matter is recorded as a concern and acted upon if it has implications for other users of the particular service.

## **17.12 Complaints from Council Members or Members of Parliament**

17.12.1 From time to time complainants choose to make their complaint to a Member of the Council or an MP. Each complaint is recorded as a separate complaint even if there is already some information relating to a matter that has been raised by the subject complainant. In processing the complaint the appropriate Duty Quality Assurance Officer should:

- Acknowledge the complaint to the Council Member advising that they will receive a response "in due course" rather than a specified date.
- Advise the service user or their relatives that they have a right to make a complaint in their own right should they choose to do so. They should also be offered the usual support to enable them to do so including making a statement of their complaint.
- Allocate the enquiry to the appropriate Quality assurance Officer and Service Manager advising them of time scales for a response.
- On receipt of response this should be drafted in a letter in the name of the Director of Adult Social Care. This can be left with the Directorate support team for signature.
- If no further response is received from the correspondent the case can be closed.
- If the correspondent raises further issues, the new matter is logged as the process started again

### **17.13 Complaints relating to Personal Budgets and Self Directed Support**

17.13.1 If the complaint is about the employment of a carer help can be obtained by contacting the Choosing and Purchasing Team.

17.13.2 If the complaint relates to information provided by ASC about Direct Payments, the way in which the payments are managed by the finance team or about assessment of need, this can be investigated under this complaints procedure.

### **17.14 Complaints and Reviews for Blue Badge and Social Fund Applications**

These are services that are new to Adults Social Care. The process for handling complaints for these processes has not yet been fully developed and is likely to be considered as one of two further policy projects. In the interim requests for a review against outcome decisions should be recorded as “representations” on the complaints database and referred to the appropriate team for further consideration. Complaints about how the assessment was conducted are regarded as complaints in accordance with the 2009 regulations and should be dealt with in accordance with this procedure. Current practice suggests that what often starts out as an objection to a decision includes a final paragraph that suggests a complaint.

## **18. Acknowledging the complaint**

18.1 In all cases, a letter of acknowledgement is sent within 3 working days incorporating, as appropriate:

- a statement of the complaint (asking for signed copy to be returned)
- proposed actions including details of who will co-ordinate and respond to the complaint
- Request to the complainant to share information
- Request to service user for complaint to be considered if being “represented by a third party
- Mental Capacity information
- Fact sheet detailing complaint process.

18.2 The complainant is advised that whilst the authority has to collect these permissions the complaints process will not be held up and investigations will commence.

## **19. Considerations**

19.1 Once the signed statement of complaint has been received with any amendments and/or permissions to share information the complainant is contacted to find out if they need any support. Where the individual has indicated that they require advocacy this is instigated and the name of the advocacy service recorded.

## **20.0 Investigating the Complaint**

20.0.1 Once the complaint has been logged onto the complaints database it is allocated to a Quality Assurance Officer to act as Compliant/Case Worker. Agreement has been made that in normal circumstances the same QAO will work with the service manager designated to follow the procedure through to the end. Special arrangements will be made to cover periods of absence of either officer. The QAO advises the service manager of the complaint. The service manager then investigates the complaint reporting back to the QAO and delegating some investigative tasks to the QAO as appropriate.

### **20.1 Multi –agency Complaints**

20.1.1 Where the complaint involves other responsible bodies, the QAO agrees with the other bodies which service is going to co-ordinate the response and logs this agreement. The Service Manager will investigate the elements relating to the elements for which the local authority is responsible in partnership with other officers in the partnership bodies, reporting back to the co-ordinating officer as appropriate.

## **21. Response Time**

- 21.1 The 2009 regulations require that the matter is investigated in a manner appropriate to resolve it speedily and efficiently and during the investigation keep the complainant informed, as far as reasonably practicable as to the progress of the investigation.
- 21.2 The authority aims to be able to make a final response to the complainant in most cases with 20 working days. A working day is defined as “any day except a Saturday, a Sunday, Christmas Day, Good Friday or a day which is a bank holiday in England”. This is in line with other corporate complaints processes within the Council.
- 21.3 Where complaints are of a more serious or complex nature the regulations state that investigations should normally be completed within 6 months from the date the complaint was received, or such longer period as may be agreed between the authority and the complainant. If it becomes apparent that the investigation isn’t going to be completed within this “relevant period” the complainant must be notified in writing giving the reasons why.

## **22. Managing the Complaint**

- 22.1 The Quality Assurance Officer has responsibility for managing the complaint and keeping the complainant informed of developments. The service manager has the responsibility for investigating the complaint and drafting the final response and action plan.

## **23. Responding to the Complainant**

- 23.1 The regulations state that a response should be sent to the complainant as soon as is reasonably practicable after completing the investigation. The response is compiled and written by the service manager responsible for investigating the complaint and signed by the Director of Adult Social Care as the “responsible person”. Current practice is that this duty is devolved to the service manager handling the case. The response will set a time frame in which any further correspondence from the complainant should be received. After this time the complaint will be regarded as closed.
- 23.2 The response must include:
- an explanation of how the complaint has been considered; and
  - the conclusions reached in relation to the complaint, and whether the complaint has been found to be upheld, partially upheld, not upheld or not determined.
  - there should be an explanation of the conclusions reached including any matters for which the complaint specifies or the authority considers, that remedial action is needed; and
  - confirmation as to whether the authority is satisfied that any action needed in consequence of the complaint has been taken or is proposed to be taken;
  - where the complaint relates wholly or in part to the functions of the local authority, details of the complainant’s right to take their complaint to the Local Government Ombudsman or where the complaint relates wholly or partly to services provided by a health authority the Parliamentary and Health Services Ombudsman.

## **24. Use of Electronic Communication**

- 24.1 Any communication which is required by the regulations to be made to a complainant may be sent electronically where the complainant has consented in writing or electronically that this should be so.
- 24.2 All responses should be password protected and distributed in accordance with Information Governance Procedures. All Adult Social Care Staff are required to undergo level 1 of the online Information Governance training which must be updated as indicated by the Information Governance Officer.

- 24.3 It is acceptable in the case of a document which is to be sent electronically by the individual who is authorised to sign the document to type their name using a computer or other electronic means.

## **25. Further Responses from the Complainant**

- 25.1 If no further response is received from the complainant it can be assumed that the complainant is satisfied and the complaint closed.
- 25.2 If the complainant indicates that they are not satisfied, the response should be revisited to see if anything further can be done to satisfy the complainant. If the complainant states that they are still not satisfied they should be advised of their right to contact the Local Government Ombudsman and given the address and information to support them in doing this.

## **26. Stage 2 Working with the Local Government Ombudsman (LGO) Referral**

- 26.1 If all has been done to manage the complaint and the complainant is dissatisfied with the outcome they are advised that they can take to matter further by contacting the LGO.

Address: Local Government Ombudsman  
PO Box 4771  
Coventry  
CV4 0EH  
Telephone: 0300 061 0614  
Text 'call back' on 0762 480 3014  
Fax: 024 7682 0001

The LGO will not progress a complaint unless it has previously been referred to the appropriate "responsible body"

## **27. Handling a complaint from the LGO**

- 27.1 All LGO complaints for Stockport Council Services are received by the Corporate Complaints team.
- 27.2 The complaint, including all supporting documentation is forwarded to the Quality Team and received by the Duty Officer. An acknowledgement is sent to the Manager of the Corporate Complaints Team.
- 27.3 If the LGO has asked for a summary of the complaint, this is prepared using the complaints management system and input from the appropriate service manager.
- 27.4 After any investigation or fact gathering the response is prepared by the Service Manager and returned to the manager of the Corporate Complaints team for onward transmission to the Local Government Ombudsman.
- 27.5 It is also good practice to send a letter to the complainant advising them of the actions that have been undertaken and their actions.

## **28. Monitoring**

- 28.1 For monitoring purposes the authority will maintain a record of each complaint received; the subject matter and the outcome of each complaint and where the complainant was previously informed of, the response period and any amendments to that period and whether a report of the outcome of the investigation was sent to the complainant within that period or any amended period.

## **29. Annual Report**

29.1 The authority will prepare an annual report which:

- indicates the number of complaints received;
- indicates the number of complaints that were found to be upheld or partially upheld and the number of complaints that were not upheld or not determined
- indicates the number of complaints that the authority has been informed have been referred to:
- The Parliamentary & Health Services Ombudsman or the Local Government Ombudsman

29.2 In addition the report will summarise:

- the subject matter of complaints that the authority received
- any matters of general importance arising out of those complaints, or the way in which the complaints were handled;
- Any matters where action has been or is to be taken to improve services as a consequence of these complaints.

## **30. Dealing with Compliments**

30.1 Where a compliment is received this should be acknowledged in the same way as a complaint and entered onto Respond.

30.2 The complement should then be copied to the QAO and the Service manager to consider whether any action in terms of sharing good practice or complimenting the service is required.

30.3 The case can then be closed.

## **31. Comments and Concerns**

31.1 Some correspondents just wish to raise an issue or concern without making a formal complaint. The process is the same as for handling complaints.

31.2 The correspondent should be advised of their right to make a complaint and their comment or concern should be acknowledged and an agreement to provide feedback made if this is required.

31.3 The matter should then be allocated to the appropriate QAO and Service Manager.

31.4 Details of the outcome of the investigation are sent to the correspondent where they have asked for it previously.

## Glossary

**Adult** an individual who has attained the age of 18

**Adult Social Care** social care within the meaning of the Health and Social Care Act 2008

**Adult Social Care Provider** a person or body who carries on an activity which involves, or is connected with, the provision of adult social care; and is a regulated activity within the meaning of Part 1 of the Social Care Act 2008

**Child** an individual who has not attained the age of 18

**Complaints Manager** the person designated in accordance with regulation 4 1(b) of the 2009 regulations

### Local Authority:

- A county Council in England
- A metropolitan district council
- A non-metropolitan district council for an area for which there is no county council
- A London Borough Council
- The Common Council of the City of London; or
- The Council of the Isles of Scilly

**Independent provider** a person or body who provides health care in England under arrangements made with an NHS body and is not an NHS body or primary care provider

### NHS body

- a Strategic Health Authority
- a Special Health Authority which does not exercise functions only or mainly in Wales and to which section 2 of the Health Services Commissioners Act applies
- a Primary Care Trust or from 1 April 2013 Clinical Commissioning Group
- an NHS trust managing a hospital or other establishment or faculty, in England
- NHS Direct National Health Services Trust or an NHS Foundation trust;
- “primary care provider” means or body who is:
- a General Practitioner (GP)
- a Dentist
- an Ophthalmic Optician
- a pharmacist

**Registered person** the person registered under Section 11 of the Care Standards Act 2000 in respect of the establishment or agency complained about.

**Responsible Body** a local authority, NHS Body, primary care provider or independent provider

**Responsible person** the person responsible for compliance with the arrangements made under the 2009 regulations

**Working Day** any day except a Saturday, a Sunday, Christmas Day, Good Friday or a day which is a bank holiday in England