

## Complaints Policy

<b>Ratification Information</b>					
<b>Ratifying Body</b>	BAC O'Connor	<b>Ratified By (Responsible person)</b>	Kendra Gray	<b>Date Ratified</b>	10/11/20
<b>Documentation Responsibilities</b>			<b>Document History</b>		
<b>Originator/Author (person responsible for Review)</b>	Operations Manager	<b>First Operational</b>	2013		
	Strategic Director Service Manager		<b>Previously Reviewed</b>	June	2017
<b>Owning Department</b>	BAC O'Connor			Sept	2020
<b>Version Number</b>	V.5				
<b>Date Operational</b>	17/11/2020	<b>Next Review Date</b>	Sept 2023		
<b>Contains References to the following Documents</b>					
<b>Document Title &amp; Reference</b>					
<b>Document Title &amp; Reference</b>					
<b>Document Title &amp; Reference</b>					
<b>Document Title &amp; Reference</b>					
<b>Document Title &amp; Reference</b>					

**Approved by:**

Name: Kendra Gray

Role: Strategic Director

Signature: 

Date: 10/11/2020

## Contents

**Scope of the Policy**  
**Policy Purpose**  
**Organisational Responsibility**  
**Procedure**  
**Legislative References**  
**References**  
**Appendices**

BAC O'Connor Centre

## **Scope of the Policy**

This policy applies to all staff employed by BAC O'Connor and has been developed to ensure that our clients, family/concerned others and any professionals are aware of how to make a complaint and what they can expect to happen during the Complaints process.

## **Purpose of the Policy**

BAC O'Connor is fully committed to respect the rights of clients, including the right of clients, family/concerned others and any professionals to voice complaints. All clients, family/concerned others and any professionals of BAC O'Connor are informed during orientation that we have a formal Complaints Policy and Procedure and are encouraged and supported to use this Policy and process should they feel they need to raise a complaint about any aspect of our service and their treatment.

While we strive to do all we can to provide the highest standard of care with the resources available to us, we recognise that from time to time complaints may arise. We also know that it can be very stressful for an individual to make a formal complaint and we want to ensure that clients, family/concerned others and any professionals feel supported to raise any concerns they may have as this helps BAC O'Connor to continually improve our services and address any concerns for all clients and future clients.

If a client, family/concerned other or any professional wishes to complain about the care or service that is received from BAC O'Connor, then the following procedure is in place for their benefit. We will investigate all complaints through the following procedure is to ensure that all clients receive the best service possible. We would also like to reassure clients, family/concerned other or any professional that raising a complaint will not affect any treatment, or future treatment, provided by BAC O'Connor.

Complaints must be made within 12 months of the event or within 12 months of becoming aware of the event. However, this can be extended at the discretion of the Managing Director to allow us the opportunity to thoroughly investigate it as complaints of a historical nature may not be able to be fully investigated.

## **Organisational Responsibility**

Implementation and review of this policy will be the responsibility of the Strategic Director and Service Manager and approval will be agreed with the Clinical Governance Board. The policy will be reviewed every three years unless any changes are required due to changes in regulations or operational procedures are updated. It is the responsibility of all staff to familiarise themselves with the content of this policy and implement all aspects of the procedures as required. It is also a requirement that staff remind clients, family/concerned other or any professional about this policy if they

raise any concerns. Complaints will be reviewed and investigated by someone who was not directly involved in the events leading to the complaint.

Overall responsibility for ensuring that Complaints are managed effectively sits with Noreen Oliver MBE Managing Director.

BAC O'Connor Centre

## **Procedure for making a formal complaint**

### **Family/Significant Other Complaint**

If a family/significant other or professional other wishes to make a complaint about the service or care being provided to a client, they should put the complaint in writing for the attention of Noreen Oliver MBE Managing Director who will assign the investigation of the complaint to a Senior Manager who will be the Investigating Manager.

The complaint should be addressed to:

Noreen Oliver MBE  
C/o BAC O'Connor  
126 Station Street  
Burton on Trent  
DE141BX

Email: [complaints@bacandoconnor.co.uk](mailto:complaints@bacandoconnor.co.uk)

If any support is required to put the complaint into writing please contact Noreen Oliver on 01283 537280 who will be able to arrange support as appropriate.

Complaints must be made within 12 months of the event or within 12 months of becoming aware of the event. However, this can be extended at the discretion of the Managing Director.

Where the complaint may involve a Senior Manager the Managing Director will ensure that person is not involved in leading any investigation process. Where family/significant others or professional do not feel able to go directly to the Managing Director in the first instance they can contact CQC directly if they have significant concerns.

Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA  
[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)  
Tel: 03000-616161

## **Complaints Process: What happens to a complaint once it has been received?**

The complainant will receive written confirmation that their complaint has been received which will be sent no later than five working days after the day on which the complaint was received.

A timescale for our response will be agreed, this may vary depending on the complexity of the complaint and the Investigating Manager will ensure that the complainant is kept informed of expected timescales and any delays created by the need for further investigation or information. We will aim to conclude investigations within a 28 day period but will keep complainants informed of any delays and expected timescales to conclude the process.

The Investigating Manager may wish to talk to the complainant and arrange a meeting or telephone call to gather further information to ensure the complaint can be thoroughly investigated

Once the investigation has been completed the complainant will receive a formal response in a letter from the Investigating Manager within three working days of completion of the investigation, detailing the outcome of the investigation. The letter will also include details of what options are available to the complainant if they are not satisfied with the outcome of the investigation. This includes the option to appeal in the first instance and if they are still not satisfied the matter will be referred to a review panel led by a Director who has not been involved in the complaint or investigation process.

Complainants can contact the Complaints Manager for further information or advice on the complaints procedure.

Alternatively, all family members/significant others have the right to complain direct to:

Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA  
[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)  
Tel: 03000-616161

## Client Complaints Process

Complaints must be made within 12 months of the event or within 12 months of becoming aware of the event. However, this can be extended at the discretion of the Managing Director.

We want to ensure that clients have the best possible service during their treatment and therefore it is important that any complaints are raised as soon as possible to allow us to investigate and rectify any issues in a timely manner. Clients are encouraged to report any concerns at the earliest opportunity and should be assured that their treatment will not be affected negatively should they feel they need to raise a complaint. Through raising any concerns or formal complaints at the earliest opportunity we will be able to address any issues which will only affect treatment in a positive way for both the complainant and all current and future clients.

There are two types of complaints that clients may have; a service complaint such as food, the house, cleaning etc. or a complaint about their programme of care. This section describes the process for making a complaint about either the service or care provided by BAC O'Connor and the easy to follow flowchart below also details the process. Where the complaint concerns the care that the client is receiving, in the first instance this should be taken up and discussed with the key-worker involved in their care if the client feels comfortable and able to do so. The complaint can then be dealt with rapidly and in an informal and sensitive manner.

If the key-worker is unable to deal with the complaint, the complaint involves the key-worker or the client is not satisfied with the outcome, the complaint should then follow the Complaints Process as described below.

This process should also be followed for any complaints about service provision:

1. The complaint should be reported to the Department Manager. The complaint will be dealt with by the Manager. The Manager will respond to the complaint within 3 days on an informal basis.
2. If the Department Manager is unable to deal with the complaint, the complaint involves the Department Manager or the client is not satisfied with the outcome, then the complaint should be put in writing and referred to the Complaints Manager:

Noreen Oliver MBE  
C/o BAC O'Connor  
126 Station Street  
Burton on Trent  
DE141BX

Email: [complaints@bacandoconnor.co.uk](mailto:complaints@bacandoconnor.co.uk)

If any support is required to put the complaint into writing please contact Noreen Oliver on 01283 537280 who will be able to arrange support as appropriate.

Noreen Oliver MBE Managing Director will then assign a Senior Manager to investigate the issue

3. The complainant will receive written confirmation that their complaint has been received which will be sent no later than five working days after the day on which the complaint was received.
4. A timescale for our response will be agreed, this may vary depending on the complexity of the complaint and the Investigating Manager will ensure that the complainant is kept informed of expected timescales and any delays created by the need for further investigation or information. We will aim to conclude investigations within a 28 day period but will keep complainants informed of any delays and expected timescales to conclude the process.
5. The Investigating Manager may wish to talk to the complainant and arrange a meeting or telephone call to gather further information to ensure the complaint can be thoroughly investigated
6. The Investigating Manager will reply in writing to the client. If the Investigating Manager is unable to deal with the complaint or the client is not satisfied with the outcome, then they have the option to appeal directly to Noreen Oliver MBE and if they are still not satisfied the matter will be referred to a review panel led by a Director who has not been involved in the complaint or investigation process.

Complainants can contact the Complaints Manager for further information or advice on the complaints procedure.

Alternatively, all clients have the right to complain direct to:

Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA  
[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)  
Tel: 03000-616161

A full copy of the BAC O'Connor complaints procedure is available for clients in their Induction Pack. The flowchart below provides an easy-to-use guide to making a complaint:

## Client Complaints Process

When the complaint is about either the service or care provided by BAC O'Connor and has not been resolved by a key worker then the process below should be followed:

Report your complaint to the Department Manager.

Manager to respond 3 days on an informal basis



If Department Manager can't deal with the complaint, it involves the Department Manager or the client is not satisfied with the outcome a formal complaint should be sent in writing to the Complaints Manager:

Noreen Oliver MBE  
C/o BAC O'Connor  
126 Station Street  
Burton on Trent  
DE141BX

Email: [complaints@bacandoconnor.co.uk](mailto:complaints@bacandoconnor.co.uk)

If any support is required contact Noreen Oliver on 01283 537280



Complaints Manager assigns Senior Manager to investigate.  
Written confirmation sent to the complainant within five working days following receipt



Timescale agreed.  
Investigating Manager will keep complainant informed of expected timescales and any delays



The Investigating Manager may arrange to talk to complainant



Investigating Manager will reply in writing to complainant detailing outcomes with options to appeal

Complainants can contact the Complaints Manager for further information or advice on the complaints procedure.

Alternatively, all clients have the right to complain direct to:

Care Quality Commission  
Citygate, Gallowgate  
Newcastle upon Tyne  
NE1 4PA

[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) / Tel: 03000-616161

## Record Keeping

A copy of all written complaints, initial investigations, notes and written replies to the complainants will be forwarded to the Service Manager, who will then be responsible for compiling appropriate review reports.

All complaints will be left open on file for a minimum 6 months or until satisfactorily concluded. If concluded satisfactorily or no further correspondence has been received for 6 months then complaints can be archived.

## Complaints Follow-Up Arrangements

All outcomes of complaints will be fed back to The Service/Registered Manager who will produce a quarterly Complaints Review report which will be fed back to the Clinical Governance Board and the Service Users Experience Group. A full detailed Complaints Log will be kept by the Service/Registered Manager and any lessons learnt from complaints will be disseminated to staff through the weekly staff meeting, through Managers Meetings, individual supervision and team meetings. A full review of all complaints will be discussed at the Clinical Governance Board to ensure that any changes in practice are implemented appropriately.

Following reviews at all the above meetings recommendations can then be made as to:

1. Whether the complaint was managed appropriately
2. Any recommendations for change or further action requested i.e.
  - a) Change to daily practice
  - b) Change to policies or procedure
  - c) Training assessment for staff
  - d) Future admission of client
3. Timescale of action required
4. Whether the complaint is part of a pattern of similar complaints happening on a recurring basis

All findings from the review of Complaints will be disseminated by the Service/Registered Manager including any action required. The Service Manager will action any immediate action required, collate the quarterly reports and produce a bi-annual report for the Clinical Governance Committee. Any further recommendations or actions required including changes to policy or practice will then be disseminated back to staff, as in agreed communication procedures.