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THIS POLICY IS FOR:	Staff including Agency Workers (temporary workers), Commissioners and Service Users

COMPLAINTS, SUGGESTIONS AND COMPLIMENTS

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COMPLAINTS, SUGGESTIONS AND COMPLIMENTS POLICY

1. PURPOSE

- 1.1 To ensure that Nursing Direct has an effective system in place to manage complaints, suggestions, and compliments.
- 1.2 To ensure that Nursing Direct complies with any legal requirements, regulations, guidelines, and best practice.
- 1.3 To support Nursing Direct in meeting the Key Lines of Enquiry/Quality Statements as set out by the Care Quality Commission (CQC)
- 1.4 To support Nursing Direct in meeting Regulation 20: Duty of Candour. This policy ensures that the duty of candour is upheld, promoting transparency and openness in all aspects of care and support, especially when things go wrong. Service users and their families are informed of any incidents affecting their care and support, and appropriate actions are taken to rectify and learn from such events.
- 1.5 To support Nursing Direct in meeting Regulation 16: Receiving and acting on complaints. This policy provides a clear, accessible, and effective process for receiving and acting on complaints, ensuring that Service Users and their representatives can raise concerns and have them addressed promptly. Feedback is used to drive continuous improvement and enhance the quality of care, and support is provided throughout the complaint process.
- 1.6 To meet the legal requirements of the regulated activities that Nursing Direct is registered to provide:
 - Compensations Act 2006
 - The Care Act 2014
 - The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
 - Human Rights Act 1998
 - The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
 - Mental Capacity Act 2005
 - Mental Capacity Act Code of Practice
 - Data Protection Act 2018
 - UK GDPR

2. SCOPE

- 2.1 The following roles may be affected by this policy:
 - All staff including Agency Workers
- 2.2 The following Service Users may be affected by this policy:
 - Service Users
- 2.3 The following stakeholders may be affected by this policy:
 - Family/Next of kin
 - Advocates
 - Representatives
 - Commissioners
 - External health professionals
 - Local Authority
 - NHS/ICB

3. OBJECTIVES

- 3.1 To improve the quality of the Service User's experience.
- 3.2 To ensure that all complaints and suggestions are promptly addressed, resolved, and shared within the agreed timescales to ensure that lessons are learned and that the learning improves service quality and delivery.
- 3.3 To ensure that there is a clear and effective process for receiving and acting on complaints, ensuring that Service Users and their representatives can raise concerns and have them addressed promptly. Feedback is used to drive continuous improvement and enhance the quality of care and support that is provided.
- 3.4 To ensure that the duty of candour is upheld, promoting transparency and openness in all aspects of care and support, especially when things go wrong. Service Users and their families are informed of any incidents affecting their care and support, and appropriate actions are taken to rectify and learn from such events.

4. POLICY

4.1 Nursing Direct Responsibilities and Representatives

The Registered Manager, and nominated individual of Nursing Direct, have overall management responsibility for this policy and procedure and for ensuring the proper governance of Nursing Direct.

The Registered Manager role is held by: Ms Leanne Marguerite Harris

The Registered Manager, Ms Leanne Marguerite Harris, is professionally and operationally accountable for the day-to-day management and regulatory compliance of the service.

The nominated individual role is held by: Marc Stiff

The Nominated Individual, Mr Marc Stiff, is responsible for supervising the regulated activity, ensuring a high-quality, compliant service.

Both roles are required to undertake regular continuing professional development to enhance knowledge, promote best practice and expand their skill set.

4.2 Complaints

- Nursing Direct understands complaints to be an expression of dissatisfaction requiring a response, communicated verbally, electronically, or in writing. Complaints may be made by any Service User, their family or advocate acting on their behalf, with their consent or in their best interests.
- Nursing Direct takes complaints seriously. We will aim to put things right that have gone wrong and learn lessons to avoid the problem happening again. This policy sets out the framework for how Nursing Direct will achieve this.
- Nursing Direct will comply with legislation, national guidelines, regulations, and best practice when managing complaints and suggestions. A systematic approach will be taken with all aspects of complaints and suggestions.
- Complaints made or concerns raised by staff including Agency Workers, will be addressed via the grievance process if the complaint or concern relates to them individually, or via the Whistleblowing procedure where a protected disclosure is made.
- Nursing Direct understands its statutory obligations in respect of the Duty of Candour and will ensure it follows the agreed policy and procedure.

4.3 Nursing Direct will ensure that its complaints and compliments process is fair and transparent and does not discriminate directly or indirectly because of the following:

- Age
- Being or becoming a transsexual/transgender person
- Being married or in a civil partnership
- Being pregnant or on maternity leave/parental leave
- Disability
- Race including colour, nationality, ethnic or national origin
- Religion, belief, or lack of religion/belief
- Sex
- Sexual orientation

The complainant will feel free to complain without fear of reprisal and will be treated with courtesy, respect, and compassion. Nursing Direct will ensure that the process of making a complaint and the feedback given to the complainant are provided in a way that meets the Accessible Information Standard and are in a format that the Service User can understand.

For service Users who require additional support such as an interpreter, advocate, or any other support necessary, Nursing Direct will acknowledge this and help people receive the support required to be able to complain should they wish.

4.4 Seeking Views and Engaging with Service Users

Nursing Direct will seek out opportunities to obtain feedback from Service Users and stakeholders. Nursing Direct will act with sensitivity, integrity, and professionalism by treating individuals who do complain or make a suggestion with compassion, courtesy, and respect. Nursing Direct will protect the Service User's right to confidentiality.

Nursing Direct will ensure that alternative methods of communication are available so that the complaints and suggestions procedures are accessible for Service Users who experience difficulties with communication or whose first language is not English.

Staff including Agency Workers will undertake training on how to manage complaints in line with their roles and responsibilities.

4.5 Nursing Direct understands that it can be difficult to separate a complaint from a concern and, therefore, Nursing Direct will follow this policy when there is any dissatisfaction with the service.

4.6 A full record will be held of all complaints received regardless of the level of seriousness and means of communication. This approach allows an open and transparent culture around raising concerns in the earliest stage to allow resolution. A record of the complaint will also be held in the Service User's care file and will be reported in line with contractual or regulatory requirements.

4.7 **Safeguarding Concerns**

Where a complaint or concern is raised that relates to a Service User being harmed or likely to be harmed, Nursing Direct will follow its Safeguarding Policy and Procedures in addition to the complaints procedures, seeking advice and guidance from the Local Authorities, CCG's and other service users Safeguarding Adults Team and escalating concerns in line with Local Authorities, CCGs, and other service users' procedure. Nursing Direct will also notify CQC in line with its statutory duty.

4.8 **Roles and Responsibilities – All staff including Agency Workers**

It is acknowledged that all staff including Agency Workers working within Nursing Direct may be presented with an individual wishing to raise a concern or complaint at any time. Therefore, all staff including Agency Workers need to be able to manage this in a sensitive, structured, and timely manner. In order to do this, all staff including Agency Workers:

- Be trained on induction and as a routine measure to ensure knowledge is embedded and refreshed around the complaint's procedure.
- Have access to the complaint's procedure.
- Be provided with the opportunity to reflect on and learn from complaints as a means of developing and driving quality care.
- Appreciate that any feedback from Service Users or their representatives that is of concern needs immediate resolution, where possible, to their satisfaction. The feedback will be recorded on the Radar Healthcare Reporting System as a concern with the learning outcomes recorded. Care Plans will be updated to reflect the planned changes to care. Failing to do this may result in a complaint.
- Be clearly advised that, when presented with a complaint, a swift escalation to management is necessary and that purposefully withholding or concealing concerns expressed by Service Users, or their representatives may lead to disciplinary action.

Nursing Direct has, and continues to develop, an open culture of continuous development which is instilled in everyone who works within the organisation, with a clear ethos of viewing concerns and complaints as opportunities for improvement.

Management Team at Nursing Direct

- The management team at Nursing Direct is responsible for ensuring compliance with this policy, regulations, improvement planning and for having arrangements in place to provide relevant reports and information regarding complaints.
- The Registered Manager and Quality Assurance Team are the main point of contact for the receipt, and management of complaints within Nursing Direct. However, depending upon the nature of the complaint this may be delegated to management within Nursing Direct who holds the experience, knowledge, and competence to investigate and manage complaints.
- Nursing Direct will ensure the procedure for raising a complaint is accessible on the Nursing Direct website and in the Service User Guide. Alternative languages and formats will be available on request.

4.9 **Compliments and Suggestions**

Nursing Direct welcomes compliments and suggestions and recognises their importance in celebrating and recognising the success of its service and opportunities for improvement. Nursing Direct will engage with a wide range of stakeholders in addition to Service Users to support service development and improvement. Nursing Direct will also share feedback with the relevant persons.

4.10 **One Complaint, One Response**

Nursing Direct will follow the Local Government and Social Care Ombudsman best practice and, where Service Users are receiving services from more than one organisation, it will ensure they can make a complaint to anyone and be provided with a single response following a joint investigation.

4.11 **Policy Accessibility**

Nursing Direct Healthcare Limited understands that some Service Users may take in and retain information in different ways. To support full understanding and engagement, this policy is available in accessible formats upon request.

5. **PROCEDURE**

5.1 **Raising Complaints**

A complaint can be received by Nursing Direct either verbally or in writing and can be made by:

- Service Users
- Someone acting on behalf of a Service User and with their written consent, e.g., an advocate, relative, Member of Parliament
- Someone acting on behalf of a Service User who is unable to represent his or her own interests, provided this does not conflict with the Service User's right to confidentiality or a previously expressed wish of the Service User

Complaints can be received either verbally or in writing, and could be in person, by telephone, in writing, through staff including Agency Workers, or through an advocate or representative.

Where someone complains verbally, Nursing Direct will make a written record and provide a copy of it within 3 working days by letter or by email.

Written complaints can be posted to: Galago House, 163 Brighton Road, Coulsdon, Surrey, CR5 2YH.

Complaints can be emailed to: info@nursingdirect.co.uk

Verbal complaints can be made in person or via telephone: 0330 056 6000

Accessibility - Including Support for Service Users with a Learning Disability or Autism

Nursing Direct recognises that there are times where some Service Users will need additional support to be able to provide feedback to the service. Nursing Direct commits to offering information in various accessible formats when required.

At the time of the pre-service assessment Nursing Direct will identify how much support the Service User may require in this area. This will be logged in the agreed Care Plan and reviewed as part of the ongoing evaluation process of the Service User's Care needs.

Nursing Direct provides easy read versions of the Complaints, Suggestions and Compliments policy and procedure and ensures that Service Users are given information on how to make a complaint and the process once a complaint has been made, including any agreed timescales.

Nursing Direct will ensure that Service Users are given information on how to make a complaint and the process once a complaint has been made, including any agreed timescales.

Nursing Direct will support individuals who wish to lodge a complaint by ensuring accessibility and providing the necessary assistance in line with the Accessible Information Standard.

Additionally, for Service Users who require further support, Nursing Direct will help to signpost to advocacy services to assist individuals in navigating the complaint process, ensuring their concerns are heard and addressed effectively. This is to support the complaint process and ensure it is as inclusive and supportive as possible for everyone.

5.2 Time Limits for Submitting a Complaint

Complaints should be submitted within 12 months of the incident or concern arising. The time limit, however, can and should be waived, if:

- It is still practical and possible to investigate the complaint (the records still exist, and the individuals concerned are still available to be questioned, etc.) and
- The complainant can demonstrate a reasonable cause for delay in making the complaint. It is at the discretion of the manager of the service if the time limit can be set aside.

It is at the discretion of the manager of the service if the time limit can be set aside.

5.3 Complaints Procedure:

When a complaint is raised to Nursing Direct, Nursing Direct will make an effort to resolve it as quickly as reasonably possible and to the satisfaction of the complainant.

Step 1

Nursing Direct will record the details of the complaint as accurately and in as much detail as possible.

Step 2

Nursing Direct will apologise to the complainant for the fact that there was the need to complain in the first instance and explain the complaints process as described in the procedure steps.

Step 3

Nursing Direct will formally request the complainant to submit their complaint in writing, preferably through email. Recognising that certain circumstances may impede the ability to do so, such as a lack of computer literacy or internet access, alternative arrangements will be made to ensure accessible and equitable complaint submission.

Step 4

Once the formal complaint has been received, the complaint will be escalated to management and the Quality Assurance team and logged on the Radar Healthcare Reporting System.

If the complaint relates to a member of the office team or senior management, the complaint will be reported to the member of staff who is next in line in seniority.

Step 5

Formal acknowledgement of all complaints received will be sent within 3 working days to the complainant. This could be via letter or email. Nursing Direct will have a local system in place to manage out-of-hours, and weekend complaints received. Nursing Direct will have a local system in place to manage out-of-hours, and weekend complaints received.

The acknowledgement will include:

- An invitation to meet and discuss the complaint
- Who will be investigating the complaint
- How the investigation will be handled - the response should state what the investigation will be focused on
- A time limit for the investigation to be concluded. This should be 28 days. However, some cases may take longer, and the complainant will be made aware of this.
- The complaints procedure and contact details of bodies that can be accessed in the event of dissatisfaction with the outcome of the investigation.

Step 6

Following a full investigation, a response letter will be sent, and this will be sent within 28 working days of the complaint being raised. The response letter will include the following:

- A summary of the issue from the complainant's point of view.
- Details of the evidence and sources consulted in order to investigate the issue fully and fairly.
- A presentation of the findings for each issue clearly and concisely described.
- A conclusion, stating clearly whether the issue is "upheld," "partially upheld" or "not upheld;" unless it is ineligible, in which case the reason for this will be given, e.g., out of time or out of jurisdiction.
- An explanation of the outcome and whether any remedial action or learning points arise from the investigation of that issue.
- An apology where the issue is upheld, and shortcomings or failings have been found.
- The complainant's rights if not satisfied with the outcome to refer to The Local Government and Social Care Ombudsman.
- The Registered Manager and the Nominated Individual will have an oversight of all complaints and may intervene when necessary.

Step 7

The complaint will be closed if the complainant does not respond to express dissatisfaction. If dissatisfaction is expressed, Nursing Direct will assist the complainant in accessing additional support.

5.4 The Complaints Log

A record will be held of all complaints raised and contain the following information:

- Each complaint received.
- Subject matter and outcome
- Details of any reason for delay where investigations took longer than the agreed response period.
- The date of the report of outcome was sent to the complainant.
- If no action is taken this will also be recorded

Where complaints relate to a Service User, a copy of the complaint will be sent to the Service User so that the Service User can reflect on the recommendations.

Where complaints are raised by telephone, the log will include the date and time of the call, and this will be followed up with written confirmation of the areas discussed.

Where a complaint indicates the potential abuse of Service Users, safeguarding policies will be followed as per local authority expectation, and necessary notifications will be made to the regulatory body. Where care is commissioned by Local Authorities, ICB's and other service users, their reporting procedure for notifying them of complaints will be followed.

Where complaints are to be shared as part of learning, the complaint will be anonymised so there is no identifiable Service User information, in line with UK GDPR and data protection law.

5.5 Investigations

All investigations will be managed by using the following approach:

- Investigating the fact
- Assessing evidence
- Review of records
- Receiving incident reports and statements from those involved

Where necessary, advice and support will be sourced via senior managers within the organisation. The complaint must be investigated by staff including Agency Worker with the knowledge, experience, and seniority to undertake the investigation robustly.

Confidentiality of information will be considered at all times and all staff including Agency Workers will adhere to the confidentiality policies and relevant codes of practice.

Appropriate action will be taken without delay to respond to any failures identified by a complaint or the investigation of a complaint.

If an investigation of a complaint results in disciplinary action against staff including Agency Worker within Nursing Direct the complaint will continue to its conclusion. The complainant will be informed that the investigation has led to the disciplinary process, but the details of the outcome or ongoing investigation will remain confidential.

Nursing Direct conducts investigations impartially and without discrimination, the approach to a Service User's support will remain unchanged in this way and indiscriminate treatment will be provided.

5.6 One Complaint, One Response

Where more than one organisation is involved in the Service User's Care, they, or their representative, will be able to complain to any of them and Nursing Direct will contact the other organisations, carry out a joint investigation, and provide a single joint response. Service Users must not have to contact each organisation separately.

If someone complains and Nursing Direct is not responsible for the care or service complained about, rather than turning the complainant away, Nursing Direct will signpost them to the correct organisation. It will be necessary to obtain the individual's permission to do this. If the person prefers that their complaint is not shared with another organisation, Nursing Direct will provide the person with their contact details.

Nursing Direct will follow Local Government Ombudsman (LGO) guidance for managing this.

5.7 **Who is Responsible for Complaint Resolution at Nursing Direct?**

All efforts will be made by to resolve all complaints within Nursing Direct. If a Service User does not wish to raise a complaint directly with management within Nursing Direct, in the first instance, Nursing Direct will try and sensitively establish their reasons why and aim to resolve and address any concerns that present.

Nursing Direct recognises the importance of Service Users being able to speak freely and raises a concern or complaint regarding anyone in the organisation, including the Registered Manager. Service Users are provided with information relating to who to contact in the event that this is necessary.

5.8 **Handling Complaints About the Registered Manager**

If the complaint relates to the conduct of the Registered Manager, then the following process applies:

- **Alternative Contact** – The person making the complaint may feel more comfortable directing their complaint to the Nominated Individual or HR Manager.
- **External Investigation** – There may be times, to ensure impartiality, when investigations will be carried out by an external professional, such as a health and social care consultant or an alternative social care provider registered with the regulator.

This process ensures that all complaints are managed fairly and impartially.

5.9 **Anonymous Complaints**

Anonymous complaints will be investigated in the same way as named complaints. They will be logged and any corrective action necessary will be taken and also logged.

5.10 **The Right to Appeal a Decision and Internal Review**

Following the outcome of the investigation, if the complainant is dissatisfied with the response or handling of information, they have the right to appeal the decision by Nursing Direct. Upon being notified of this Nursing Direct will conduct an internal review of how the complaint was handled. The investigation will be conducted by staff including Agency Workers with suitable standing that is not the original responder to the complaint, such as the Responsible Individual.

When to Appeal:

- You believe that the outcome of a complaint was incorrect and disagree with the initial decision
- You disagree with the initial decision as you suspect there was a failure in the complaint process
 - Such as insufficient investigation
 - A misunderstanding of your complaint
 - A misinterpretation of evidence
- You can provide new evidence or information that was not available during the initial complaint that affects the outcome
- You feel the decision is unfair or unreasonable

Nursing Direct recognises that as a key part of transparency and continuous improvement, conducting an internal investigation of this process is necessary before signposting the complainant to an external body.

5.11 **Unresolved Complaints**

Following the initial handling of the complaint and the appeal process, in the event that the Service User feels their complaint is unresolved, there are many bodies that can support or will need to be informed to assist with this (to ensure there is no bias). These services may conduct an independent review on how the complaint has been handled and will consider if the complaint has been:

- Handled fairly
- Investigated thoroughly and efficiently, exploring all the facts
- Handled objectively

They will issue a final report that outlines their findings and recommendations.

Nursing Direct will fully cooperate with this process and provide the independent reviewer all the information required to ensure transparency. We have a commitment to continuously improve, as part of that commitment we fully understand the importance of learning from the outcomes of this process.

1. The following external bodies can assist with a complaint that a person feels remains unresolved: The Care Quality Commission

The Care Quality Commission will not investigate complaints on behalf of individuals but does like to be informed of any concerns regarding a care provider, such as poor care that has been seen or experienced. Information given to CQC will help to prevent others from going through the same experience and can be fed back via:

- Website: www.cqc.org.uk
- Email: enquiries@cqc.org.uk
- Address: Care Quality Commission (CQC)

National Correspondence Citygate, Gallowgate Newcastle upon Tyne, NE1 4PA

Tel: 03000 616161

Fax: 03000 616171

2. **The Local Government and Social Care Ombudsman (for those Service Users that are funded by local authority-funded social services care or self-funded)**

Individuals have the right to raise their complaint with the Local Government and Social Care Ombudsman. This is a free service, and individuals can contact their Local Government and Social Care Ombudsman via:

The Local Government and Social Care Ombudsman
PO Box 4771
Coventry, CV4 0EH
Tel: 0300 061 0614
Email: advice@lgo.org.uk
Website: <https://www.lgo.org.uk/>
Complaint form: <https://www.lgo.org.uk/complaint-form>

Self-Funded Care

The Local Government Ombudsman (LGO) may investigate complaints from people who arrange their own care. Self-funders will have the right to complain to an independent and impartial Ombudsman.

Individuals must be advised that the Local Government and Social Care Ombudsman will not investigate the complaint until the provider has had the opportunity to respond and resolve the matter in the first instance.

3. **Parliamentary and Health Service Ombudsman (for Service Users that are NHS funded)**

Individuals have the right to raise a concern about a service that is NHS funded. This is a free service, and individuals can make contact via:

- Telephone: 0345 0154033
- Email: psho.enquiries@ombudsman.org.uk
- Website: www.ombudsman.org.uk
- Address: Parliamentary and Health Service Ombudsman, Millbank Tower, 30 Millbank, Westminster, London, SW1P 4QP

Nursing Direct can also signpost individuals to Healthwatch and the local Independent Complaints Advocacy Service (ICAS).

4. **Integrated Care Systems**

Individuals can make a complaint about a health service they are receiving or have received and can discuss this with the commissioner of the service.

5. **Local Authority Complaints Teams**

Individuals have the right to raise concerns and complaints about adult social care regardless of whether or not they pay for their own Care or if the Council funds it. Individuals can make a complaint about organisations who provide services on the Council's behalf.

The contact details for the Local Authority Complaints Team are: Local Authority Complaints Team – csab@croydon.gov.uk

6. **Professional Bodies**

If a complaint involves serious misconduct of a healthcare professional, their relevant professional body can be informed, and this is determined on an individual case basis in discussion with the Registered Manager of Nursing Direct.

For any external bodies managing complaints, Nursing Direct will work with the external body providing information as requested, within any agreed timescales expected.

Decisions to raise complaints outside of Nursing Direct will be fully respected and the Service User will be supported to raise their complaint with the commissioner of the service or to seek the support of an independent advocate or representative.

Service Users can also be signposted to Citizens Advice guidance.

5.12 **Vexatious Complaints**

Occasionally, Nursing Direct may receive complaints that are vexatious in that they cause considerable disruption to the work at Nursing Direct, time to handle, and impact to the wellbeing of all staff including Agency Workers (because of the way the complaint is made or because of its repetitive nature).

Nursing Direct will ensure that it meets the requirements of the Equality Act 2010 to make 'reasonable adjustments' for disabled Service Users. In some circumstances, Service Users may have a disability that makes it difficult for them to either express themselves or communicate clearly and/or appropriately. Where there is an indication that this may be the case, Nursing Direct will consider the needs and circumstances of the Service User or complainant in the first instance and use this information to inform any decisions that are made.

Where appropriate, Nursing Direct will consider complaints to be vexatious but would not label an individual complainant as vexatious. Even if Nursing Direct decides that an individual's complaint about the service is vexatious, that does not preclude that person from making a formal complaint. Nursing Direct would still consider any such complaints in line with the usual procedures, as outlined in this policy.

To help decide whether a complaint is vexatious Nursing Direct will consider the full history and context of interactions with the individual making the complaint and will look at both the nature of the complaint and the manner in which it is made. The particular issues that will inform a decision will include whether:

- The primary purpose and/or effect of the complaint is to disturb, disrupt and/or pressurise Nursing Direct, its staff including Agency Workers or a specific individual
- The primary purpose and/or effect of the manner in which the complaint is made is to disturb, disrupt and or/ pressurise the Nursing Direct, its staff including Agency Workers or a specific individual
- The complaint is otherwise clearly unreasonable

If at any point in the handling of a complaint a member of staff including Agency Workers believes it meets the criteria to be deemed vexatious, it must be referred to the Registered Manager and/or Nominated Individual with a summary of why it is thought to be vexatious.

The Registered Manager and/or Nominated Individual will consider the complaint, seek external advice if appropriate, and will either declare the complaint as being vexatious or not. Where a complaint is not deemed to be vexatious it will be returned to the appropriate point in the complaints handling process.

If a complaint is deemed to be vexatious, the Registered Manager and/or Nominated Individual will respond directly to the complainant explaining why it is thought to be so and will explain that the complaint will be closed with no further action. The Registered Manager and/ or Nominated Individual will also consider if the making of a vexatious complaint also requires the application of a restriction on communication following unreasonable behaviour.

The decision to declare a complaint as vexatious will be recorded in the complaints register on the Radar Healthcare System for future reference.

Any declaration that refers to the specific complaint being vexatious and any further complaints from the same individual will still be considered.

If any individual wishes to challenge a decision made in relation to this policy, and all attempts to resolve the complaint locally have been unsuccessful, details of the Complaints Team of Local Authorities, CCGs, and other service users and Parliamentary and Health Service Ombudsman (PHSO) will be shared with the complainant.

5.13 **Compliments**

Receiving compliments is an opportunity to celebrate and recognise success. Nursing Direct will ensure that:

- All compliments are recorded and shared with staff including Agency Workers to highlight good practice.
- Compliments are anonymised or permission is sought before sharing them on a public forum.
- The number of compliments received is logged as part of a quality assurance programme.
- Verbal, positive feedback from Service Users and relatives is also deemed a compliment and will be recorded and shared with staff including Agency Workers.
- Compliments form a core agenda item at staff including Agency Workers, Service User, and relative meetings.

5.14 **Suggestions**

Suggestions can be made verbally or in writing and generally are in response to seeking a means of changing practice for the better.

- Suggestions are not complaints, but in some circumstances, if they are not considered or actioned, they could lead to a complaint.
- When suggestions are raised in meetings or as part of a conversation, these will be documented and then outcomes of such suggestions recorded to show consideration.
- All staff including Agency Workers will be encouraged to share their suggestions, or suggestions received by relatives and Service Users, with the Homecare Manager.
- Nursing Direct will consider implementing a suggestions system to encourage comments from service Users, staff including Agency Workers and other relevant persons.

5.15 **Audit and Evaluation**

Nursing Direct operates with an ethos of continuous improvement and will:

- Ensure all complaints are logged
- Identify themes and trends
- Create actions to improve any identified themes and trends
- Share themes, trends and actions with staff including Agency Workers
- Ensure that staff including Agency Workers are trained to deal with complaints and understand the procedure for managing complaints
- Conduct audits on the complaints process to evaluate timescales, outcomes, and feedback

Using Feedback from Complaints to Improve the Service at Nursing Direct

Nursing Direct values feedback from complaints as a critical tool for continuous improvement. It commits to thoroughly analysing all complaints received to identify patterns and areas for enhancement. Specific actions or changes that may be implemented based on complaints include revising policies, providing additional staff including Agency Workers training, updating procedures, and enhancing communication channels. Each complaint will be documented and actionable insights and lessons learnt will be shared with relevant stakeholders to ensure that corrective measures are taken promptly to prevent recurrence and improve overall service quality.

Reviewing the Effectiveness of the System at Nursing Direct

As part of the commitment of Nursing Direct to good governance, the complaints process will remain effective and responsive, using a process of regular reviews and assessments. This includes audits of complaint records to evaluate response times, resolution rates, and customer satisfaction post-complaint resolution. Nursing Direct will also gather feedback from complainants on their experience with the complaints process. Findings from these reviews will be used to refine the complaints handling procedures, ensuring they are user-friendly, efficient, and aligned with best practices. Regular staff including Agency Workers training will be conducted to keep everyone updated on any changes and to reinforce the importance of effective complaint management.

Independent Review

Nursing Direct is committed to the growth and development of the service. As such we recognise that concerning trends identified over time or processes that do not seem to be working may benefit from an independent review. Nursing Direct will seek external support from an independent consultant should it be deemed necessary.

For more details, staff including Agency Worker should also refer to the following policies and procedures:

- Good Governance Policy and Procedure
- Quality and Quality Assurance Policy and Procedure
- Auditing Policy and Procedure

5.16 Continuous Improvement and Development

Without feedback it is impossible to improve our service. We have a strong ethos on embracing the feedback we receive be it a compliment or concern to enhance our service.

As part of our commitment to create and maintain a positive culture, we embed this ethos in our staff training from induction onwards to make sure that any feedback is viewed as a catalyst for improvement. If we do not know about it, we cannot do anything to improve or change it.

We share our overarching identified lessons learned and outcomes with both staff and Service Users to make sure that they feel part of this process, are kept informed and are invested in our commitment for the betterment of the service.

6. DEFINITIONS

6.1 All staff including Agency Workers

6.1.1 Staff

Denotes the employees of Nursing Direct Healthcare Limited.

6.1.2 Agency Workers

Refers to individuals who are contracted with Nursdoc Limited or another employment business as an Agency Worker (temporary worker) provided to Nursing Direct Healthcare Limited to perform care services under the direction of Nursing Direct.

6.2 Nursing Direct

Nursing Direct, also known as Nursing Direct Healthcare Limited, is the entity regulated by the CQC (Care Quality Commission) and responsible for the care service provision, contracted to provide homecare services to service users in their homes, in placements, essential healthcare facilities and in the community.

6.3 Nursdoc Limited

As the sister company to Nursing Direct Healthcare Limited, Nursdoc Limited acts as an employment business, specialising in providing staffing solutions to the healthcare sector.

6.4 CQC (Care Quality Commission)

CQC throughout this policy, the term "CQC" refers to the Care Quality Commission (CQC) which is the independent regulator of health and social care in England.

6.5 Complaint

A complaint expresses dissatisfaction, disappointment, or discontent, often in response to an omission, decision, or action. Complaints can be made in writing, electronically or through local feedback channels and, under specific circumstances, can also be made verbally.

6.6 Self-Funded Care

Self-funded care is defined as care that is paid for entirely by the person receiving it.

6.7 Vexatious Complaint

A vexatious complaint is one that is pursued, regardless of its merits, solely to harass, annoy or subdue somebody; something that is unreasonable, without foundation, frivolous, repetitive, burdensome, or unwarranted.

6.8 Compliment

A compliment is a positive expression of satisfaction regarding a service received by the Service User. It can be conveyed verbally or in writing and may include praise, admiration, congratulation, or encouragement.

OUTSTANDING PRACTICE

To be 'outstanding' in this policy area you could provide evidence that:

- All complaints are logged, investigated and the outcomes are fed back to the complainant within the agreed timescales.
- Trends in complaints are identified and tracked to improve service delivery.
- There is evidence of annual reporting as a means of commitment to transparency and quality. Prepare and publish an annual report detailing the numbers of complaints, compliments and suggestions and the actions taken as a result.
- Service Users are involved in the complaints handling process and future design of procedures. Their views influence future management decisions
- The service is dedicated to continuous improvement, and any complaints are viewed as a means to make things better

COMPLETED DATE:	14.04.2025
SIGN OFF DATE:	15.04.2026
REVIEW DATE:	15.04.2027
SIGNED:	 Marc Stiff – Group Managing Director