
Compliments, Concerns & Complaints Policy

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Ver 1.0	12/01/21	Major update	Update to entire policy
Ver 2.0	19/07/21	Minor update	Amended timescales for Scottish Services to respond to Complaints within 20 Working days in line with Care Inspectorate regulations.
Ver 3.0	16/08/21	Minor update	Care Inspectorate Address updated within Appendix 1
Ver 4.0	17/11/21	Minor update	Inclusion of Advocacy support and language review in line with committee feedback.
Ver 5.0	02/02/22	Minor update	Healthcare Improvement Scotland email address and web site updated (Pg12).
Ver 6.0	25/05/22	Annual Review	Annual review following ratification by Trustees. Next review due in 3 years



Ver 7.0	04/08/22	Minor Update	Inclusion of response to vexatious/ disproportionate number of complaints included in line with committee feedback. (S2. Pg4).
Ver 8.0	15/11/23	Minor Update	Update in line with Healthcare Improvement Scotland (HIS) requirements & branded to Brainkind.



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1 Introduction

1.1 Our policy

- 1.1.1 We believe that an open and honest approach to self-governance and risk management is an essential element of developing our services and promoting 'best practice' that can ultimately lead to the improvement of the service we provide.
- 1.1.2 Information received as a compliment, concern, or complaint, is important to Brainkind and also important to the person making their own reflection on the individual service. All feedback is valuable and should be seen in a positive light – giving us a useful insight into how the services we provide are perceived and to learn lessons in how to continually improve services.
- 1.1.3 Anyone who has an interest in ensuring that the service we provide meets and exceeds the expectations of those it affects has a right to make a comment about the services we provide. This includes but is by no means exclusive or exhaustive:
- Service users (People we support)
 - Advocates, Representatives, Family and/or Friends of people we support
 - Medical / Care Professionals
 - Members of the public
 - Employee's and anybody working within the services
 - Bank/Agency Staff & Contractors
- 1.1.4 It is important to note that any compliment, concern, or complaint can be reported directly to the Regulator – See Appendix 1 for contact details.
- 1.1.5 Employees raising a complaint regarding employment and work-related issues including bullying and harassment should be directed to the Grievance Procedure which will be more appropriate to their needs or to the Whistleblowing Policy if the issue relates to malpractice.

2 Purpose

2.1 Why we have this policy

- 2.1.1 To ensure that people we support/their representatives, care professionals, members of the public and staff are aware of how to give unprompted feedback or raise concerns and that we provide easy to use options for them to register their opinions and/or concerns through the various mediums available.



- 2.1.2 To ensure it creates a proactive approach and culture in relation to the giving of feedback, welcoming comments etc., as a chance to identify areas for continuous improvement and where best practise has been indicated.
- 2.1.3 To ensure that details of all compliments, concerns and complaints are held centrally via Datix Feedback Module in order to analyse trends across the services, which enables us to proactively deal with any issues that may have the potential to re-occur and where best practise can be shared.
- 2.1.4 To ensure that where complaints have been thoroughly investigated, Managers are given support and tools to enable them to deal with habitual or vexatious complainants.
- 2.1.5 Services are not required to investigate the following complaints:
- A complaint made by an employee relating to their employment as the employee should be directed to the Grievance Policy & Procedure.
 - A complaint that has already been investigated and resolved.
 - A complaint made by a representative of a person we support who has the capacity to decide that they do not wish the complaint to be investigated.
 - Where a complainant raises a complaint or series of complaints, which could be considered vexatious, or where a complainant raises, over an extended period, exceeding 12 weeks, a disproportionate number of complaints and queries in terms of volume or frequency creating an unsustainable demand on resource.
- 2.1.6 In these circumstances after discussing with their Regional Manager the service must, as soon as reasonably practicable, notify the complainant in writing of its decision not to investigate the complaint and the reasons why.

3 Regulatory & Legislative Overview

- 3.1.1 This Policy is written to comply fully with the regulations of:
- Health and Social Care Act (CQC)
 - The Mental Capacity Act 2005 – England & Wales
 - Care Quality Commission (CQC – England)
 - Care Standards Act 2000 (CIW - Wales)
 - Healthcare Improvement Scotland (HIS - Scotland)
 - Care Inspectorate (CIS – Scotland)
 - Mental Health (Care and Treatment) Scotland Act, 2003
 - Adults with Incapacity (Scotland) Act, 2000
 - Adult Support and Protection (Scotland) Act 2007
 - Health & Social Care Standards from April 2018



- 3.1.2 Key regulators in relation to this policy and their contact information is detailed in appendix 1 of this policy (page 19). For anyone who wishes to make contact with a regulator at any time, especially for raising complaints, should do so by using the contact details provided within appendix 1.

4 Definitions

4.1 Feedback Definitions & Reporting Route

- 4.1.1 It is important to note that this policy is not to be followed for all types of feedback raised a table has been included to provide definitions, reporting route and the relevant policy to follow (**Appendix 2**)

5 Responsibilities

5.1 Trustee Board

- 5.1.1 The Board maintains oversight and responsibility for ensuring policies and procedures are in place to deal with stakeholder concerns and that they are effective in achieving the appropriate outcomes. The Board receives assurance via quarterly reports on key quality metrics and detailed reports on request.

5.2 Regional Managers

- 5.2.1 Regional Managers are responsible for ensuring that Services adhere to the Compliments, Concerns and Complaints Policy and regularly review compliance monitoring reports. They are responsible for the operational review and sign-off of Level 3 Complaints within their Regions and will give support and guidance to Service Managers in relation to Complaint Management and ensure that any complex or vexatious complaints are assigned to the relevant Regional Quality Assurance Business Partner as required.

5.3 Service / Area Managers

- 5.3.1 Service/Area Managers are responsible for ensuring that Level 1 concerns and Level 2 complaints are dealt with promptly, fairly and sensitively with due regard to the upset and worry that they can cause to all relevant parties.



- 5.3.2 Service/Area Managers are to ensure wherever possible, concerns and complaints are dealt with on a local level between the complainant and the service. For more complex or vexatious complaints or if either of the parties are not satisfied by the local process, an independent Investigating officer can be assigned by contacting the relevant Regional Quality Assurance Business Partner at: CSSQA@brainkind.org
- 5.3.3 Service/Area Managers are responsible for ensuring the complainant is provided with the contact details for the relevant regulatory authority as the complainant has a right at any point, to refer their concerns to them. (**Appendix 1**)

5.4 Employees

- 5.4.1 All employees are responsible for supporting people who wish to provide feedback or raise concerns and ensure they are provided with information leaflet and easy to read documents as required.

5.5 Governance & Quality Assurance Team

- 5.5.1 The Governance & Quality Assurance Team will provide a supportive service within the organisation.
- 5.5.2 The Datix Helpdesk team will ensure that relevant access is provided to Datix feedback records, and that support and training is given on system use and procedures and provide monthly compliance reports to Ops Directors and regional managers. The Datix Helpdesk team will also co-ordinate Level 3 complex complaints.
- 5.5.3 The Quality Assurance Team will support the investigations of Level 3 Complex Complaints and provide advice and support to Service Managers as required. The Quality Assurance Business Partners will review the quality and compliance of complaint management during service reviews and highlight areas of good practice or where any improvements should be required.

6 Feedback Type & Level

6.1 Compliments (Level 0)

- 6.1.1 Any positive feedback received about anyone. The feedback is received in person, by telephone, by email or in writing from a person we support, carer or representative. Compliments will be used to facilitate learning, bring attention to service developments, and reinforce good practice.



6.2 Concerns (Minor - Level 1)

- 6.2.1 A request for the resolution of a problem or difficulty by a person we support, carer or representative. Concerns should be addressed and resolved locally within 5 working days. The concern has minimal impact to the provision of health, safety, or welfare of people we support. (e.g., Menu choice, bed uncomfortable, TV broken etc).

6.3 Complaint (Moderate - Level 2)

- 6.3.1 Any formal expression of dissatisfaction made in person, by telephone, by email or in writing about any aspect of service provided by Brainkind made by a person we support, carer or representative or anyone affected by any action or decision made by or on behalf of the organisation.
- 6.3.2 The Complaint has moderate impact to the provision of health, safety, or welfare of people we support (e.g., quality of care provision, delay in receiving support, inappropriate restrictive practices etc).
- 6.3.3 Complaints can be upheld, partially upheld, or not upheld.

6.4 Complex Complaint (Major - Level 3)

- 6.4.1 Any formal expression of dissatisfaction made in person, by telephone, by email or in writing about an aspect of service provided by Brainkind made by a person we support, carer or representative or anyone affected by any action or decision made by or on behalf of the organisation.
- 6.4.2 The Complaint may be complex or have multiple subject themes that although not serious themselves may identify a more significant underlying issue that has a major impact to provision of health, safety, or welfare of people we support (e.g., Serious safeguarding allegations, serious Incidents resulting in major harm, professional misconduct, reputational damage, grossly substandard care, or acts/omissions resulting in death).
- 6.4.3 Where it is felt appropriate, complex complaints of this nature should be investigated by the relevant Quality Assurance Business Partner for the Region that the complaint relates to. Complaints can be upheld, partially upheld, or not upheld.



7 Complaint Pathways & Guidance

7.1 Complaints made on behalf of people we support

- 7.1.1 Complaints will only be accepted from a representative of a person we support under certain circumstances, either:
- a) Where you know the person has consented, either verbally or in writing, and has the assessed capacity to do so.
 - b) Where the person cannot complain unaided and cannot give consent because they lack capacity within the meaning of the Mental Capacity Act 2005, and
 - c) Where the representative is acting in the person's best interest, for example, where the matter complained about – if true – would be detrimental to the person.
 - d) The complaint is not directly relating to a person we support but is connected to the running of the service.
 - e) The complaints procedure summary for carers/ relatives to send with acknowledgement of complaint (**Appendix 4**)

7.2 Complaints by an Employee relating to their Employment

- 7.2.1 A complaint by an employee relating to their employment should be handled through the grievance procedure and staff should be signposted to Connect for the relevant documents and should not be recorded within Datix Feedback Module (see **Appendix 2** for more details).

7.3 Complaints under external investigation by Local Authority / Police

- 7.3.1 Where the local authority safeguarding team or police advise they are conducting an investigation, the Service Manager will liaise and work with them.
- 7.3.2 On occasions the service may be unable to proceed with their own investigation if a police investigation is ongoing. The police should be consulted re the services ability to begin its own investigation if there is police involvement. The Service Manager will also need to inform the complainant and the person affected (if different parties) that a referral has been made and any reason for delay.



7.4 Complaints resulting from Incidents

- 7.4.1 It is important when receiving complaints Service Managers should check to see if an incident has already been reported on Datix that relates to the complaint.
- 7.4.2 If an incident record already exists, both records need to be linked together. This will provide more information whilst investigating the Complaint and avoid duplication of any regulatory or local authority upward reporting requirements.

7.5 Complaint Leaflets

- 7.5.1 Each Residential Service and Hospital Site must display 'how to make a complaint' in an appropriate location within the service, e.g., foyer, hallway, reception. This must contain the relevant contact details, including a named person the complainant can complain to; postal address, telephone number, email address and local advocacy and regulatory authority's services who could offer support.
- 7.5.2 Easy read leaflets should also be made available within Residential and Services and Hospital sites (**Appendix 3**)
- 7.5.3 Within Community Houses information on how to access complaint leaflets should be included in Key Worker sessions and links provided to the website and complaint forms included within Tenant's handbooks.

7.6 Advocacy Support

- 7.6.1 An advocate is an independent expert who can help support complainants to make a complaint. They make sure the complainants rights and interests are protected and provide practical advice and support to the complainant.



8 Guidance for the person giving feedback

- 8.1.1 Feedback should be made by or on behalf of a person we support, in person, by telephone, by email or in writing. All feedback will be categorized as a compliment, concern, or complaint.
- 8.1.2 The complainant should be provided with:
- The Complaints Procedure Summary for Carers/ Relatives (**Appendix 4**) and an Easy Read leaflet of how to give feedback. Complainants can also be provided with this policy if requested.
 - Staff or an Advocate should be able to provide assistance to ensure a full understanding of the complaint's procedure.
 - Details of the regulatory authorities to whom the complainant has the right to send their complaint to, at any time if they so wish, without reference to the Brainkind policy and procedure. (**Appendix 1**)
 - If necessary, an advocate should be sought in order to fully empower the person or their representative to express their views.
- 8.1.3 A complaint must be made no more than 12 months after:
- the date of the event occurring.
 - or if later, the date the event came to the notice of the complainant
- 8.1.4 Anyone making a complaint who may have additional communication support needs should communicate these needs when making the complaint as we will endeavour to meet any identified communication requirements.
- 8.1.5 The timescales set out within this policy should be complied with – unless exceptional circumstances arise, and further investigation is required. The complainant will be made aware of this in writing and a revised timeframe will be proposed and agreed with them.



9 Guidance for the person receiving feedback

9.1.1 If a person wishes to provide feedback to you, confirm the nature of the feedback, identify if it is a compliment, concern, or complaint. If it is a compliment refer to receiving a compliment section. If the feedback is a “concern” refer to the Concern section of the Policy. If it is a complaint, refer to the points below:

- The complainant should be given the opportunity to clearly state their views; confirm who they would like to make their complaint to, e.g., you, your line manager or the Service Manager of the service.
- If the person wishes to make the complaint to someone else, arrange for this to happen at the earliest possible opportunity.
- If the feedback is being given by a person we support, consider their mental capacity and any support that should be required to ensure that their feedback is valued and understood.
- If the feedback is from a representative of a person we support, consider the person’s consent and mental capacity.
- Assess the complaint and ascertain the complainant’s desirable outcomes. Time should be taken to clarify any parts of the complaint which are not clear.

9.1.2 Ensure that you:

- a) Reassure the complainant that their views are taken seriously and that complaints are a valuable tool for service improvement, so it is important to thank the complainant for bringing their feedback to our attention.
- b) Provide the complainant with the opportunity to discuss their feedback in a private location which is conducive to ensuring that they feel able to discuss with an appropriate person.
- c) Enquire as to what assistance, if any, the complainant should require in formulating or presenting his/her complaint and organise this as necessary. It may be necessary to involve an advocate or an Independent Mental Capacity Advocate (IMCA), family member or friend, depending on the situation.
- d) Provide the complainant with a copy of the Compliments, Concerns & Complaints Policy and easy read leaflet and the Complaints Procedure Summary for Carers/Relatives (**Appendix 4**)
- e) Offer assurance that this complaint will be passed on to a manager and that an appropriate person will contact them within 5 working days to acknowledge receipt of the complaint.
- f) Ensure that remedial action is taken immediately if there are any risks posed and reported to the regulator / Safeguarding if required.



- g) Communicate the complaint to the relevant person in your line management structure within the timescales set out within this policy.

10 Procedures & feedback timescales

10.1 Classification

- 10.1.1 All feedback must be classified as a compliment, concern, or complaint record.
- 10.1.2 In the first instance the Service Manager or nominated record owner should review the feedback received to establish the record type and define the level of investigation and any immediate action required including referral to appropriate authorities for investigation. This should include regulators and/or the local authority safeguarding teams (England & Wales) / Adult Support and Protection (Scotland).

10.2 Recording & Managing Compliments (5 working days)

- 10.2.1 The person receiving the compliment should ensure the Service Manager or nominated deputy is informed of the compliment. The Service Manager or nominated deputy records the compliment on the Datix Feedback Module.
- 10.2.2 The Service Manager or nominated deputy informs the individual(s) named in the compliment and sends an email communication from the Datix record of such feedback within 5 working days of receipt.
- 10.2.3 If the compliment is regarding a staff member(s), a record of the compliment can be held on their personnel file and included within Being our Best Reviews.

10.3 Recording & Managing Concerns (5 working days)

- 10.3.1 A concern should be classed as a request for the resolution of a minor problem or difficulty by a person we support, carer or representative.
- 10.3.2 If a concern of this nature is received the person receiving the feedback should ensure the Service Manager is informed of the concern and the Service Manager or nominated deputy should record the concern on Datix and take action to resolve the issue to the satisfaction of the individual within 5 working days ensuring that any action taken is evidenced to confirm resolution on the Datix feedback record.



- 10.3.3 If the concern cannot be resolved within 5 working days a rationale for the delay should be given to the complainant.

10.4 Recording & Managing Complaints (*25 or 35 working days)

All Scottish Services Must complete all levels of Complaint within 20 Working Days in line with Care Inspectorate Regulator requirements

- 10.4.1 A complaint should be classed as a formal expression of dissatisfaction, either in writing or verbally to any member of staff within the organisation about services provided which requires a formal response and cannot be resolved in 5 working days. This should be due to the seriousness of its nature and warrants an investigation.
- 10.4.2 The person receiving the feedback should ensure the Service Manager is informed of the complaint received and the Service Manager or nominated deputy should record the complaint on Datix Feedback Module and check if any previous incidents have been reported in relation to the complaint and link them to the complaint record.
- 10.4.3 If the complaint issue requires a referral to the local authority Safeguarding team and relevant Regulatory Authority, this should be evidenced within the attached Datix incident record.
- 10.4.4 The Service Manager or nominated deputy is responsible for approving the complaint on Datix, allocating themselves or someone else as the investigating officer and generating the automated acknowledgement letter to send to the complainant within 5 working days of receipt.
- 10.4.5 The Service Manager or nominated deputy should then investigate the complaint, update findings within the Investigation & Findings section and attach all relevant documents. Additional information and updates can be provided using Email communication and adding Progress notes to the record. Action plans can be used to address any recommendations found during the investigation.
- 10.4.6 Automated document templates can be used to produce the final response letter to the complainant based on information added within the investigation section. The merged documents can be tailored as required to personalise the feedback to the individual as required.
- 10.4.7 Moderate Complaints (Level 2) should take a maximum of 25 working days from receiving the complaint to fully investigating, providing a final written response, and identifying any actions for improvement. Any extensions to complaint timescales



need to be agreed in advance with the complainant and evidenced within the extension section of the complaint record.

- 10.4.8 Major / Complex Complaints (Level 3) should take a maximum of 35 working days from receiving the complaint to fully investigating, providing a final written response, and identifying any actions for improvement. Level 3 Complaints require review and sign off by the relevant Regional Manager before the final response letter is sent to the complainant.

Region	Level 2 Complaint	Level 3 Complaint
England & Wales	25 working days	35 working days
Scotland	20 working days	20 working days

11 Appeals

11.1 Guidance if the complainant wishes to appeal the outcome

- 11.1.1 The complainant has a right to appeal if they are dissatisfied with the outcome of the investigation into their complaint. The response letter must advise the complainant of how to appeal with details of who they should appeal to and relevant contact details of the Regional Manager.
- 11.1.2 The complainant has an additional right to seek redress through external authorities and should be provided with contact details of the office of the relevant registration body or the local Government Ombudsman which should be included in their final response letter.

11.2 The Appeal Process

- 11.2.1 The complainant must submit their appeal in writing within 7 working days of receiving the Investigating Officers response to the complaint. The response letter will provide details of who will deal with the appeal, this will usually be the Regional Manager.
- 11.2.2 The letter of appeal should clearly state the reasons for the appeal and only be in relation to those concern(s) investigated.



- 11.2.3 The Regional Manager will assign a senior manager or a relevant staff member with particular skills or knowledge of the complaint subject to review the complaint appeal and provide access to the Complaint record on Datix
- 11.2.4 A full review of the complaint and reasons for the appeal will take place within 28 working days from the date of the appeal letter being received.
- 11.2.5 The complainant will receive a response in writing to their appeal from the person hearing the appeal within 28 working days from the date of the appeal letter being received.

12 Data Quality

- 12.1.1 Quality checks of Level 3 complaints will be completed by Regional Managers during review and sign off of the final response letters. In addition, monthly audit reviews will be carried out by Quality Assurance Business Partners and included within monthly Operational reports produced by the Risk Team.

13 Monitoring at Quality & Governance Committee

- 13.1.1 On behalf of the board of directors, the Quality & Governance committee will review the arrangements provided by this policy to ensure appropriate oversight of feedback provided and to ensure that we are recording, investigating, and responding to Complaints in a timely manner and in line with the policy timescales.
- 13.1.2 The Committee will also receive quarterly reports of feedback themes providing assurance that any concerns or complaints raised are being addressed and that there is proportionate and independent investigation and follow-up action of such matters. The committee will also have sight of numbers and themes of Compliments reported to give a balanced view of positive feedback and good services being delivered throughout Brainkind.



14 Policy Review

- 14.1.1 This Policy should be reviewed every three years or more frequently dependent on changes in the legislative framework and submitted to the Policy Review Group for approval.

15 Appendices

Appendix 1 – Feedback directly to Care Commissioner or Regulator
Appendix 2 – Feedback Definitions, Reporting Route & Policy
Appendix 3 – How to make a complaint (Easy Read Format)
Appendix 4 – Complaints Procedure Summary for Carers / Relatives

1 Appendix 1 – Give feedback directly to the Care Commissioner or Regulator

Contact Information to be included within Response letters and available within Services.

Refer your complaint to the Care Commissioner or Regulator:

England	Care Quality Commission (CQC) National Customer Service Centre, Citygate, Newcastle upon Tyne, NE1 4PA Tel: 03000 616161 Website: https://www.cqc.org.uk/contact-us
Scotland	Care Inspectorate Scotland Compass House 11 Riverside Drive DD1 4NY Tel: 0345 600 9527 Email: concerns@careinspectorate.gov.scot Website: https://www.careinspectorate.com/index.php/online-complaint-form
Scotland	Healthcare Improvement Scotland (hospitals) Programme Manager, Independent Healthcare Services Team, Gyle Square, 1 South Gyle Crescent, Edinburgh, EH12 9EB Tel: 0131 623 4342 Email: his.ihcregulation@nhs.scot Website: https://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/ihc_complaints_procedure.aspx
Wales	Care Inspectorate Wales Welsh Government Office, Sarn Mynach, Llandudno Junction, LL31 9RZ Tel: 0300 7900 126 Email: CIW@gov.wales Website: https://careinspectorate.wales/contact-us/raise-concern

Refer your complaint to the Ombudsman:

England	Local Government Ombudsman
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PO Box 4771, Coventry, CV4 0EH

Tel: 0300 061 0614

Email: advice@lgo.org.uk

Website: <http://www.lgo.org.uk>

Scotland

Office of the Scottish Charity Regulator (OSCR)

2nd Floor, Quadrant House, 9 Riverside Drive, Dundee, DD1 4NY

Tel: 01382 220446

Email: info@oscr.org.uk

Website: <http://www.oscr.org.uk/Makingacomplaint.stm>

Wales

Public Services Ombudsman for Wales

1 Ffordd yr Hen Gae, Pencoed, CF35 5LJ

Tel: 0300 790 0203 Email: ask@ombudsman.wales

Website: <https://www.ombudsman.wales/how-to-complain/>

2 Appendix 2 – Feedback Definitions & Reporting Route

It is important to note that this policy is not to be followed for all types of concerns raised, the table below provides definitions, reporting route and the relevant policy to follow:

Type of Feedback	Definition	How to record	Policy to Follow
Whistleblow raised by Staff, Bank or Agency Member	When a staff Member raises a concern about malpractice, Service User safety, wrongdoing, or possible illegality, which harms, or creates risk of harm, to people we support, Carers, staff or members of the public. Some Concerns raised externally by Regulators, Commissioners or Local Authority should also be recorded as Whistleblows as determined by Directors.	See Section 12 of this Policy	Freedom to Speak Up Whistleblowing Policy
Allegations of Abuse by Staff raised by a person we support about specific staff members	An Allegation of abuse by staff is “a direct allegation made against a named member of staff where they have been accused of discrimination, neglect or the verbal, physical, sexual, emotional or financial abuse of a person we support”. Concern should be raised if the staff member is behaving in a way which demonstrates unsuitability for working with children, young people, and adults at risk or work colleagues. The allegation or issue may arise either in the employees’ workplace or private life.	Staff member to Record on Datix DIF1 Incident Form	Allegation of abuse by Staff Protocol
Safeguarding Investigation (Section 42) raised by Local Authority	An external request from a Local Authority for a formal investigation into safeguarding concerns raised.	Manager to link to existing Datix Incident and Manage in Safeguarding Section	Incident Mgt Policy



Type of Feedback	Definition	How to record	Policy to Follow
Grievance raised by Staff. Bank workers should also follow this Policy although it may be dealt with as a complaint	A grievance is a specific complaint from a member or members of staff concerning matters related to work. Grievances dealt with under this policy should include issues relating to work allocation, the working environment, career development opportunities, the way in which the staff member is being managed or treated by their manager and the way in which the staff member is being treated by colleagues. A grievance may also involve bullying and/or harassment claims by the staff member. Please refer to the Harassment and Bullying Statement for further information regarding such complaints	Discuss Concerns informally with Line Manager or Senior Manager in first instance. Contact HR if required.	Grievance Policy
Disciplinary Applied by Managers for Contracted Staff	The Disciplinary Policy provides a framework for managers to assist employees reasonably and fairly with maintaining satisfactory standards of conduct, working in accordance with our stated Values and where necessary to encourage improvements.	Manager to discuss concerns with Staff member	Disciplinary Policy
Minor Concern raised by the person, carer, or their representative	A request for the resolution of a problem or difficulty by a person we support, carer or representative. Concerns should be addressed and resolved locally. The concern has minimal impact to the provision of health, safety, or welfare of people we support. (e.g., Menu choice, bed uncomfortable, TV broken etc)	Record on Datix Feedback Module	Compliments Concerns & Complaints Policy



Type of Feedback	Definition	How to record	Policy to Follow
Moderate Complaint raised by the person, carer, or their representative	Any formal expression of dissatisfaction made in person, by telephone, by email or in writing about any aspect of service provided by Brainkind made by a person we support, carer or representative or anyone affected by any action or decision made by or on behalf of the organisation. The Complaint has moderate impact to the provision of health, safety, or welfare of people we support. (e.g., quality of care provision, delay in receiving support, inappropriate restrictive practices etc). Complaints can be upheld, partially upheld, or not upheld.	Record on Datix Feedback Module	Compliments Concerns & Complaints Policy
Major Complex Complaint raised by the person, carer, or their representative	Any formal expression of dissatisfaction made in person, by telephone, by email or in writing about an aspect of service provided by Brainkind made by a person we support, carer or representative or anyone affected by any action or decision made by or on behalf of the organisation. The Complaint may be complex and has a major impact to provision of health, safety, or welfare of people we support. (e.g., Serious safeguarding allegations, serious Incidents resulting in major harm, professional misconduct, reputational damage, grossly substandard care, or acts/omissions resulting in death). Complaints can be upheld, partially upheld, or not upheld.	Record on Datix Feedback Module	Compliments Concerns & Complaints Policy

3 Appendix 3 – Making a Compliment, Concern or Complaint (Easy Read)

Date & Time:



Service Name:



Do you want to tell us about –
A Compliment? (Tick)





**Do you want to tell us about –
A Concern? (Tick)**



**Do you want to tell us about –
A Complaint? (Tick)**



What do you want to tell us?
– Include: Who, What, Where,
Why, When & How





Your name:





Your address:



Your contact details:
Phone & email



We will get back to you within (Tick):

5 days for concerns:

20 - 35 days for complaints:

To tell you what we have found out.



Thank you for your views.

All your compliments, concerns and complaints are welcomed, as this ensures we can continue to improve our offer to you.

Internal use only

Staff reported to:

Date & time:

Staff role:

Date & time passed to manager:

Date put on Datix:

4 Appendix 4 – Complaints Procedure Summary for Carers / Relatives

See Compliments, Concerns & Complaints Policy for full details

Anyone who has an interest in ensuring that the service we provide meets and exceeds the expectations of those it affects has a right to give feedback about the services Brainkind provides.

If you feel angry, frustrated, or anxious about a service we provide, please talk to us about it.

You can talk to the Manager, or a member of staff.

We will always listen to your complaint and try to improve the way we do things.

Feedback is categorised into 3 types:

Compliments - Any positive feedback received about anyone. The feedback is received in person, by telephone, by email or in writing from a person we support, carer or representative. Compliments will be used to facilitate learning, bring attention to service developments, and reinforce good practice.

Concerns - A request for the resolution of a problem or difficulty by a person we support, carer or representative. Concerns should be addressed and resolved locally within 5 working days. The concern has minimal impact to the provision of health, safety, or welfare of people we support. (e.g., Menu choice, bed uncomfortable, TV broken etc)

Complaints - Any formal expression of dissatisfaction made in person, by telephone, by email or in writing about any aspect of service provided by Brainkind made by a person we support, carer or representative or anyone affected by any action or decision made by or on behalf of the organisation. The Complaint has moderate or major impact to the provision of health, safety, or welfare of people we support. (e.g., quality of care provision, delay in receiving support, inappropriate restrictive practices etc). All Complaints are investigated, and the outcome can be upheld, partially upheld, or not upheld.

Complaints on behalf of a person we support will be accepted under certain circumstances, either:

- a) Where you know the person has consented, either verbally or in writing, and has the assessed capacity to do so.
- b) Where the person cannot complain unaided and cannot give consent because they lack capacity within the meaning of the Mental Capacity Act 2005, and



- c) Where the representative is acting in the person's best interest, for example, where the matter complained about – if true – would be detrimental to the person.
- d) The complaint is not directly relating to a person we support but is connected to the running of the service.

Complaints can also be directed to the regulators at any time. Details of all related regulators have been made available on Appendix 1 of this policy document.

Complaint Leaflets - Each Residential Service and Hospital Site must display the 'how to make a complaint' in an appropriate location within the service, e.g., foyer, hallway, reception. This must contain the relevant contact details, including a named person the complainant can complain to; postal address, telephone number, email address and local advocacy and regulatory authority's services who could offer support. Easy read leaflets should also be made available within Residential Services and Hospital sites.

Complaint Process

If you make a complaint we will:

- Write to you within 5 working days to acknowledge your complaint and allocate an investigating officer.
- The investigating officer should then contact you to understand your complaint in more detail
- We will then investigate your complaint by looking at the policies and paperwork that is in place already.
- We will also talk to staff and other people who may be involved.
- We will then look at ways of improving what we do to make it better.

Once the investigation has concluded we will write a response letter to tell you what we have found and how we are going to address any issues found.

We will make sure that a written response is received within 25-35 working days dependent upon the complexity of the complaint (20 days for Scottish Services).

If you are not satisfied with the Outcome of the Complaint, you have a right to appeal if you are dissatisfied with the outcome of the investigation or if you do not think that we have done this properly then you can tell the Inspector about your complaint. (See appendix 1)

If you choose to Appeal, you must submit your appeal in writing within 7 working days of receiving the Investigating Officers response. The letter should clearly state the reasons for the appeal and only be in relation to those concern(s) investigated. A full review of the complaint and reasons for the



appeal will take place and you will receive a response letter within 28 working days from the date of the appeal letter being received.

5 Appendix 5 – Vexatious Complaints

How to recognise and deal with vexatious and malicious complaints

- Introduction
- Identifying vexatious complaints
- What is a vexatious complaint?
- What is a malicious complaint?
- Handling vexatious and malicious complaints

Introduction

1. The presumption should be that a complaint is made in good faith. If the manager becomes aware that the complaint is made with vexatious or malicious intent, if the manager considers that this might not be the case, they should raise it with their line regional manager along with the supporting evidence. Departmental/Regional manager confirmation is required for a complaint to be considered vexatious or malicious. They then may make a decision and recommendations for further action on this basis.
2. Every complaint must be considered on its merits and, even if someone has made a vexatious or malicious complaint in the past, it must not be assumed that any other complaint they make will also be vexatious or malicious.
3. Managers should consider any known temporary or permanent outside factors, such as personal or health issues that may have affected the person, which the individual was prepared to share. Managers should seek to signpost the person to additional support services, such as their social worker, advocates/IMCA's, legal representatives.

Identifying vexatious and malicious complaints

What is a vexatious complaint?

4. 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.
5. In identifying vexatious complaints, managers must be careful to:
 - distinguish between complainants who are raising genuine concerns; and
 - recognise where people are simply being unreasonable.



6. This can be achieved by recognising that complainants may often be aggrieved, frustrated or have other reasons for their behaviour; the focus must be on careful consideration of the merits of the case rather than the attitude of the complainant.

However, a complaint may be regarded as vexatious where the complainant:

- Persists in pursuing a complaint which has already been investigated by another or the same manager and provides no new or material information.
- Seeks to prolong contact by continually changing the substance of a complaint or by continually raising further concerns or questions whilst the complaint is being addressed.
- Fails to clearly identify the substance of a complaint, or the precise issues which may need to be investigated despite reasonable efforts by the manager to assist them.
- Complaints solely about trivial matters to an extent which is out of proportion to their significance.
- Makes excessive contact with the manager or seeks to impose unreasonable demands or expectations on resources, such as responses being provided more urgently than is reasonable or necessary.

What is a malicious complaint?

7. A malicious complaint is one that is made with the intention of causing harm, for example:
 - deliberately seeking to defame an individual colleague or manager and raising a complaint with this intent;
 - through lying about an issue or incident in the knowledge that this will cause harm;
 - through knowingly basing a complaint on rumour with the intention of causing harm.
8. A malicious complaint is defined as:
 - one that the investigation has shown to be without foundation;
 - one where the investigation evidence demonstrates that the complainant knowingly lied to the Investigation Manager; and
 - where there is sufficient evidence to demonstrate this at a disciplinary hearing on the basis of the balance of probabilities.

Handling vexatious and malicious complaints

9. Vexatious and malicious complaints can be very difficult to identify. Largely, this must be a matter of professional judgement for the manager. However, once identified, such complaints should be tackled as soon as possible.



Complaints Policy

10. The Complaints Policy should be followed but managers may conclude as part of their investigation or decision that the complaint is vexatious and or malicious. Managers may also seek to limit the scope of the complaint to what is reasonable and relevant to the complaint itself.
11. The mere fact that a complainant has brought a number of complaints in the past is not of itself sufficient grounds for refusing to consider a complaint if it raises new matters.
12. Managers should not treat anyone less favourably or subject them to a detriment because they have brought a complaint. This applies even where they are suspected to be vexatious, malicious or otherwise.
13. Each case must be considered on its merits, be evidence based and investigated, as appropriate. Any mitigating factors must be taken into account (for example, stress, and physical and mental illness, or certain behaviours which may be outward symptoms of underlying distress, such as bullying, harassment or discrimination) as these may have a significant bearing on the case.
14. Following investigation, and before reaching a decision that a complaint is vexatious or malicious, managers should seek advice from their Line Manager/Regional Manager and provide supporting evidence. Line/Regional manager confirmation is required for a complaint to be considered vexatious or malicious. They then will make a decision and recommendations for further action on this basis. They may also find it helpful to escalate/ speak to the Director responsible for their Directorate.

Full Policy & Appendices: (available upon request)

- Compliments, Concerns & Complaints Policy
- Feedback directly to Care Commissioner or Regulator (Appendix 1)
- How to make a complaint (Easy Read Format) (Appendix 3)