

 CUSTOMER SERVICE Addressing a Complaint	SOP ref	SOP LG006P 10.1	
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Standard Operating Procedure – Addressing a Complaint

1. Scope

This procedure outlines how complaints received by residents or prospective residents and their representatives, or any other stakeholder covered by the Complaints, Concerns & Compliments Policy should be addressed. See section 3 of the Policy for more details. Service-level complaints are covered by [Addressing a service-level complaint SOP \(LG006P 10.2\)](#).

2. Definitions

Complaint: *“an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual resident or group of residents.”* (Housing Ombudsman’s Complaint Handling Code (last updated March 2022)).

The word complaint does not have to be used in order for it to be treated as such. While this policy is aimed at residents or their representatives, the above definition is extended to cover an expression of dissatisfaction from any stakeholder affected by the standard of service, actions or lack of action from the Abbeyfield Living Society or those working for us.

The difference between a service request and a complaint is outlined in Appendix A of the Housing Ombudsman’s Code.

3. Procedure

3.1 Ensuring access to the Complaints procedure

The service manager is responsible for ensuring that an individual who is considering admission to an Abbeyfield house or home is provided with a copy of the Complaints leaflet. Copies should also be displayed on the communal areas and a complaints poster on the resident noticeboard, where relevant.

The Complaints Leaflet will be made available in large print, Braille, audio and in translated versions where the need is identified in line with the [Accessible Information Policy \(C031P\)](#).

The service manager should arrange appropriate support and advocacy to enable a resident to make a complaint, where this is required.

3.2 Receiving a Complaint

Where a resident, or their representative, is dissatisfied with any aspect of the service provided by Abbeyfield, the individual is asked to raise the problem directly with the relevant manager or staff member concerned. The staff member who receives the complaint is expected to seek to resolve the issue causing dissatisfaction immediately, or as soon as is practically possible. In many cases, the issue causing dissatisfaction will be resolved and no further action will be required. A local service-level record of the complaint and actions taken should be kept in line with the [Addressing a service-level complaint SOP \(LG006P 10.2\)](#).

Where the issue cannot be resolved immediately, or the complainant is dissatisfied with the local response, the staff member who received the complaint should inform the resident or their representative, provide a copy of the Complaints leaflet and ask if they wish to make a formal complaint. If necessary, the individual should be supported to make a formal complaint (which may include writing the complaint on the resident's behalf).

Complainants are asked to provide details of:

- What went wrong
- When and where it happened
- Who was involved
- How the complainant would like Abbeyfield to resolve the matter and what outcome they are seeking
- Their full name, address and contact details (telephone and/or email). Where a complaint is made from a group of residents, the response should be sent to all members of the group whose names and details are included with the complaint.

Residents, their representatives and other stakeholders are offered the following channels to make a complaint:

- by email: by sending the complaint to complaints@abbeyfield.com
- by telephone: 01727 857536
- by post:
 - Complaints Officer
 - Abbeyfield
 - Hampton House
 - 17-19 Hampton Lane
 - Solihull

West Midlands

- B91 2QT
- through an advocate or representative, who is formally authorised to act on behalf of a complainant, who may use any of the channels outlined above.

Where a complaint is received by telephone, the Complaints Officer will make a written record of the complaint.

In the event that a complaint is made via a direct message on Abbeyfield's social media channels, the Digital Team are responsible for providing a generic response and passing the complaint to the Complaints Officer to be addressed using the standard procedure, where possible.

3.3. Stage 1: Receipt, acknowledgement and investigation by a relevant Manager

3.3.1 Acknowledgment

On receipt of a complaint, the Complaints Officer will:

- Make a written record on the central Complaints log, which will include:
 - The method of receipt (e.g. telephone, letter, email)
 - Details of what went wrong, from the complainant's perspective.
 - The full name, address and contact details of the complainant(s).
 - Send a standard written acknowledgement (Appendix 1) to the complainant(s) within our target of two working days of receipt of the complaint
- The acknowledgement should include details of the person dealing with the complaint (the 'Investigating Officer') (or a reason as to why it is not yet possible to provide confirmation of the Investigating Officer) and the expected timescale of a full written response within 10 working days from the date of acknowledgement.
- The complaint acknowledgement will also set out the understanding of the complaint and the outcomes the complainant is seeking. If any aspect of the complaint is unclear, the resident must be asked for clarification and the full definition agreed between both parties.

3.3.2 The Investigating Officer

Where the complaint relates to an ALS service, the Regional Operations Manager responsible for the service that the complaint relates to will be allocated as the 'Investigating Officer'. Where the complaint also involves other teams (such as Property or Finance), the Regional Operations Manager will be expected to liaise with them during the course of their investigation.

Where it is unclear who should investigate, the relevant Director will be notified to appoint an appropriate candidate. In all cases, the allocated person will have enough seniority and experience to deal with the issues which are raised by the complaint, and will not be directly implicated in the issues concerned. In the event the complaint is about

a member of the Executive Committee then the complaint will be referred to the Chief Executive to nominate an Investigating Officer.

The Complaints Officer will pass the complaint to the relevant Investigating Officer with a date of when the complaint response is due, alongside a copy of the Investigation Plan (Appendix 2) and Stage 1 template letter (Appendix 3).

Prior to commencing the investigation, the Investigating Officer should:

- If the complaint has come from a representative, ensure the complainant has the authority to formally act on the resident's behalf – which is normally expected to be written confirmation of consent from the resident. In the event that a resident does not have capacity to provide consent, those with a registered Lasting Power of Attorney (LPA) may make a complaint on a resident's behalf. If the complainant does not have the authority to act on the resident's behalf (and it is not deemed in the resident's best interests to engage with the representative), the template letter (Appendix 4) should be used.
- If the complaint suggests possible abuse or neglect, follow the [Responding to suspected or actual abuse SOP \(LG031P 10.1\)](#). Where the complaint concerns the potential or actual abuse of a resident, the Investigating Officer should notify the local authority safeguarding team and ensure the details of any such notification are recorded on the Safeguarding Log. The complainant should be notified of the impact on the complaints investigation accordingly.
- If the complaint relates to a staff member, the Investigating Officer should refer to the HR Advice Team to confirm whether the substance of the complaint could be deemed a disciplinary matter. If the complaint is of a disciplinary nature, the investigation must be carried out in line with the [Disciplinary Policy \(S008P\)](#). The timescale for a response may need to be extended due to the need to instigate disciplinary proceedings and the complainant should be advised accordingly, while protecting the confidentiality of the staff member.
- In the event of a complaint which may result in a claim against Abbeyfield, advice should be sought from the Legal Team who will liaise with Abbeyfield's insurers.
- For complaints related to a care service, the Investigating Officer must ensure the Care Quality Commission (CQC) is notified where Regulation 18 (Notification of other incidents) of the Health and Social Care Act 2008 applies.
- In the event of a complaint involving the Police or other external regulator, advice should be sought from the Complaints Team who will liaise with the Customer Operations Director for a decision as to whether to proceed. The Involvement of the Police recording form (Appendix 5) should be used to log when there is Police involvement in any incident.

3.3.3 Investigating a Complaint

The Investigating Officer is expected to:

- Provide a full written response to the complainant within 10 working days. If this is not possible, the Investigating Officer should contact the complainant to

provide a clear explanation for the delay and a revised date (of up to 10 additional working days) for when the Stage 1 response will be given (see Appendix 6). In the event that more than 10 working days is required, the Investigating Officer should contact the complainant and seek their agreement on the new timescale, prior to confirming the agreed revised timescale in writing (Appendix 7). The new timescale and the reason for the delay should be communicated to the Complaints Officer. Where agreement over an extension period of more than 10 working cannot be reached, the relevant Ombudsman's details will be provided so the complainant can challenge our plan for responding and/or the proposed timeliness of our response.

- Seek clarity from the complainant, if there is uncertainty about what the complaint is about or the expected outcome. Where necessary, the Investigating Officer should manage residents' expectations from the outset, being clear where a desired outcome is unreasonable or unrealistic.
- Allocate sufficient time to investigate the complaint fully.
- Remain fair and objective throughout the investigation.
- Gather as much information on the case as is reasonable.
- Keep the case confidential.

The Investigating Officer is expected to make and manage an investigation plan to ensure there is a structured approach for what needs to be investigated, what evidence is required and delivering the investigation within the agreed timeframe. A template investigation plan is available (Appendix 2).

3.3.3.1 Collecting evidence

The Investigating Officer should gather necessary evidence to investigate the complaint (e.g. emails, documents). During the investigation, the Investigating Officer may also require interviews (by telephone or in person) with the complainant(s), residents, volunteers and / or other staff members involved. A record of all discussions should be kept, and statements received should be corroborated, wherever possible.

3.3.3.2 Reviewing the evidence

Once collated, the evidence should be reviewed against:

- ALS policies and procedures
- Relevant legislation and regulations, where applicable
- Resident information and literature

3.3.3.3 Additional complaints

Where residents raise additional complaints during the investigation either to the Complaints team or directly to the Investigating Officer (or other staff member), these will be incorporated into the Stage 1 response if they are relevant and the Stage 1 response has not been issued. Where the Stage 1 response has been issued, or it would unreasonably delay the response, the new issues will be logged as a new complaint and the complainant informed.

3.3.3.4 Final response

On conclusion of the investigation, the standard template letter for a Stage 1 response should be used (Appendix 3) – although the template should be amended if needed by the Investigating Officer to fit the specific situation.

The final response letter should include:

- details of the findings;
- whether the complaint has been fully, partially or not upheld.
- any action that has been taken;
- our proposals to resolve the complaint (see ‘Putting things right’); and
- details of how to escalate the complaint if the complainant remains dissatisfied
- the contact details for the Ombudsman, if relevant for the complainant.

The Investigating Officer may also offer to meet or have a phone call with the complainant to discuss the outcome further, if they have not done so during the investigation period.

The Investigating Officer may send the final response directly or ask the Complaints Officer to send the response on their behalf. The Investigating Officer should provide a copy of correspondence with the complainant and any reports prepared to the Complaints Officer to file.

Where the complaint was upheld or other issues were identified as a result of the investigation, the Investigating Officer should send a copy of a completed lessons learned form (Appendix 8) to the Complaints Officer in line with the [Identifying and Sharing Lessons Learnt Procedure \(SOP LG045P 10.1\)](#). Where the lessons learnt review requires an action to take place, it is the responsibility of the Investigating Officer to implement the recommendation and report to the Complaints Officer when the action is completed.

3.4 Stage 2: Review of the complaint and subsequent investigation by a Director

If the complainant thinks that the initial response has not fully addressed their complaint or they remain dissatisfied, they may escalate the complaint to Stage 2 by contacting the Complaints Officer (by any means) and detailing the reasons for their outstanding dissatisfaction.

The Complaints Officer will send the standard written acknowledgement of escalation letter (Appendix 9) to the complainant(s) within five working days of receipt of the request.

The Complaints Officer will notify a Director to serve as the ‘Reviewing Director’. For operational complaints, the Reviewing Director would normally be the Director of Housing Operations or the Director of Care Operations, – although any member of the Executive Team may be asked, if required. The Complaints Officer will share the copies

of all correspondence with the complainant and other parties, and any reports prepared from the initial investigation held on the central file, with the Reviewing Director.

If it is unclear, the Reviewing Director will ask the complainant to clarify which aspects of the complaint have not yet been resolved and what outcome they are seeking from the review.

The Reviewing Director is expected to:

- Seek clarity from the complainant, if there is uncertainty about what aspects of the complaint have not been resolved or what outcome they are seeking from the review
- Allocate sufficient time to review the complaint and investigation fully.
- Complete a fair, objective and comprehensive review of the complaint and subsequent investigation
- Provide a full written response to the complainant within 15 working days of the request to escalate. If this is not possible, the Reviewing Director must contact the complainant to provide a clear explanation for the delay and a revised date (of up to 10 additional working days) for when the Stage 2 response will be given (Appendix 6). In the event that more than 10 working days is required, the Reviewing Director should contact the complainant and seek their agreement for the delayed timescale, prior to confirming the agreed revised timescale in writing (Appendix 7). The new timescale and the reason for the delay should be communicated to the Complaints Officer. Where agreement over an extension period of more than 10 working days cannot be reached, the relevant Ombudsman's details will be provided so the complainant can challenge our plan for responding and/or the proposed timeliness of our response.

Following review, the Reviewing Director may conclude that the findings of the initial investigation were appropriate and remain valid, or that the initial investigation and response did not sufficiently address the issues raised in the complaint and that further remedy is required.

Regardless of the findings, the standard template letter for a Stage 2 response should be used (Appendix 10) – although this should be amended by the Reviewing Director as required for the specific situation. The response letter must include:

- the outcome of the review;
- whether the complaint has been fully, partially or not upheld;
- any further action that has or will be taken, if appropriate (see 'Putting things right');
- confirmation that the internal complaints procedure has now concluded;
- details of how to escalate the complaint if the complainant remains dissatisfied – by contacting the relevant Ombudsman and requesting a review, if appropriate.

The Reviewing Director may also arrange to meet with or have a phone call with the complainant to discuss further.

The Reviewing Director may send the final response directly or ask the Complaints Officer to send the response on their behalf. The Reviewing Director should provide a copy of correspondence with the complainant, and further investigation notes or reports prepared to the Complaints Officer to file.

Where relevant, the Reviewing Director should send a copy of a completed lessons learned form (Appendix 8) to the Complaints Officer in line with the [Identifying and Sharing Lessons Learnt Procedure \(SOP LG045P 10.1\)](#).

3.4.1 Conclusion of the complaints process

Where a complainant continues to pursue a case after having exhausted our internal complaints procedure and without presenting any new information, Abbeyfield will inform the individual that the complaint will not be investigated further and advise that they take the issue to the Ombudsman, as appropriate (see Appendix 11).

The Complaints Officer will send a satisfaction survey to the complainant (Appendix 12) six weeks after the final response has been sent. The Complaints Officer will complete a check of the resident's status on the resident information system prior to sending out the survey to ensure surveys are not sent where a resident has deceased. The results of the surveys will be recorded on a central log, analysed with any learnings implemented, and reported to the Customer Committee.

3.5 The role of the Ombudsman

Where the resident is dissatisfied with the outcome following our investigation and / or further review, they may refer the complaint to the relevant Ombudsman for a free independent review. The Ombudsman will not normally investigate a complaint until the internal complaints procedure has been followed.

For complaints related to housing, residents have the right to take the complaint to the Housing Ombudsman.

For complaints related to care services, residents have the right to take the complaint to the Local Government & Social Care Ombudsman (LGSCO), which is independent of local authorities and care providers. While the Care Quality Commission (CQC) cannot get involved in individual complaints about providers, residents, or their representatives may also notify the CQC about a complaint related to a care service. Where care is funded by the NHS or local authority, the complainant may also make a complaint to the funder for them to investigate.

3.5.1 Working with the Ombudsman

The Customer Operations Director will be responsible for dealing with any information requests from the Ombudsman related to a complaint referred to them. All requests for

evidence must be provided within the timescale set by the Ombudsman as a failure to provide evidence in a timely manner may result in the Ombudsman issuing a complaint handling failure order.

3.6 Putting things right

The investigation of a complaint may identify that the complaint should be upheld for a number of reasons, including:

- there was an unreasonable delay
- inaccurate or inadequate advice, explanation or information was provided to the complainant
- Abbeyfield's policy or procedure was not followed
- there was a factual or legal error that impacted on the outcome for the complainant
- there was unprofessional behaviour by staff.

Where the investigation (Stage 1) or the subsequent review (Stage 2) identifies that a complaint should be upheld, the Investigating Officer or Reviewing Director should:

- Ensure the failure is acknowledged.
- Notify the relevant manager of the findings and the recommendations to remedy the issue.
- Clearly outline the actions that Abbeyfield has or intends to take to put things right to the complainant.
- Ensure the required actions are taken through to completion.

The specific actions that may be taken include:

- Providing an apology to the complainant
- Providing information or an explanation to the complainant.
- Reviewing resident literature (leaflets, posters etc.)
- Reviewing an operational process.
- Reviewing a contractual agreement with a third party supplier.
- Requesting a review of a policy.
- Arranging training or guidance for staff members involved.

Three months following the conclusion of the complaint (at Stage 1 or, if escalated, at Stage 2), the complainant will be asked for feedback on their satisfaction with the complaints handling process.

3.7 Monitoring complaints

A central log of all complaints received is kept by the designated Complaints Officer, alongside a copy of documentation relating to individual complaints held on file by reference number.

The Complaints Officer will provide regular reports on the volume, category and outcome of complaints, as well as complainant satisfaction and compliance with set timeframes,

to the Corporate Health, Safety & Quality Committee and the Board, via the Customer Committee.

The Investigating Officer and the Reviewing Director should ensure a copy of the relevant response letter together with a completed lessons learnt form (Appendix 8), where appropriate, is sent to the Complaints Officer in line with the [Identifying and Sharing Lessons Learnt SOP \(LG045P 10.1\)](#). All lessons learned will be recorded on the central Lessons Learnt Log.

On an annual basis, the Complaints Officer will complete a self-assessment of our complaints handling procedures, in line with the Housing Ombudsman's Code. The results of the self-assessment will be reported to the Board and published on the Abbeyfield website.

4. Responsibilities

The Chief Executive has overall responsibility for all complaints received at the organisation, delegated to the Customer Operations Director. The central complaints process is administered through the Complaints Officer, who has delegated responsibility from the Customer Operations Director. The Complaints Officer is the Customer Quality Manager.

The Complaints Officer will direct all complaints received to the appropriate manager for investigation. Each manager is responsible for addressing complaints within their business area, unless there is a conflict of interest in which case another senior manager would be appointed to investigate the issues raised.

Following receipt of a complaint and once identified, the Investigating Officer is responsible for managing Stage 1 complaints, including adhering to the set timescales, keeping the complainant and Complaints Officer informed (as needed), maintaining appropriate records, ensuring appropriate redress is provided, and lessons learned are documented and shared in the event that the complaint is upheld.

Following receipt of a request to escalate to Stage 2, the Reviewing Director is responsible for completing a full review of the complaint and Stage 1 investigation, keeping the complainant and Complaints Officer informed, maintaining appropriate records, ensuring appropriate redress is provided and lessons learned are documented and shared in the event that the complaint is upheld.

5. References

- [Housing Ombudsman's Complaint Handling Code \(March 2022\)](#)
- [Housing Ombudsman – Managing Unacceptable Behaviour Policy – Guidance for Landlords](#)

6. Appendices

- Appendix 1: [Standard acknowledgement template letter on receipt of a complaint](#)
- Appendix 2: [Appendix 2: Template Complaints Investigation Plan](#)
- Appendix 3: [Standard Stage 1 response letter template](#)
- Appendix 4: [Unable to respond to a representative standard template letter](#)
- Appendix 5: [Involvement of the Police recording form](#)
- Appendix 6: [Extension of up to 10 working days \(at any stage\) standard template letter](#)
- Appendix 7: [Confirmation of extension of more than 10 working days \(at any stage\) standard template letter](#)
- Appendix 8: Unable to agree extension of more than 10 working days (at any stage) template letter
- Appendix 9: [Post-incident Review and Lessons Learnt form](#)
- Appendix 10: [Standard acknowledgement template for escalation to Stage 2](#)
- Appendix 11: [Standard Stage 2 response letter template](#)
- Appendix 12: [Standard template letter to confirm conclusion of Abbeyfield's internal complaints procedure](#)
- Appendix 13: [Satisfaction survey](#)