



Complaints, Concerns and Compliments Policy

For customers of Beacon Centre

1. Introduction

1.1. Beacon Centre recognises that to ensure the most effective performance of services, consideration of all feedback is important. The experience of each person who comes into contact with the Organisation will be unique. Listening to people's experiences is a vital tool in gauging how well the Organisation is providing services and how we can improve for the future.

1.2 It is therefore important that the Organisation has a clear process for feedback to ensure that any concerns and complaints are dealt with efficiently and effectively. The way in which customer feedback is dealt with must take their preferences into account and ensure that they are placed at the centre of all work carried out to investigate their issues and respond effectively.

1.3 The Organisation is committed to listening carefully and responding and resolving, immediately, whenever possible, any issues. This policy allows a more formal response if this is not possible.

1.4 During any complaint process, all staff must follow the principles outlined with the organisations Grievance Procedure & Whistleblowing Policy, found in the Staff Handbook.

2. Purpose

2.1 This policy aims to ensure;

- The organisation is open to feedback from anyone who comes into contact with its services and will respond in a proportionate, appropriate and fair manner in accordance with all relevant regulations and best practice guidance.
- That processes to deal with complaints and concerns ensure that the person raising feedback is fully involved in collaboratively agreeing how their issues will be dealt with, and their response shared with them.
- The organisation learns from the experiences of those who use our services and embeds any changes in practice identified as a result of feedback.
- That staff involved in any feedback are treated fairly.
- That any staff member who is asked to investigate a concern or complaint has a clear process to follow to support their investigation.



2.2 The Organisations main objectives, with regard to complaints and concerns are;

- To promote feedback from anyone who comes into contact with services, to enable the Organisation to learn from people's experiences and improve for the future.
- To have an efficient and timely complaints and concerns process.
- To ensure that all complainants are dealt with courteously and empathically and that they are involved in all relevant decisions about how their complaints are dealt with.
- That no one will be treated in any discriminatory manner as a result of raising a complaint or concern, or of having a complaint or concern raised on their behalf.
- That systems are in place to ensure that customers, staff and relatives are assured that the Organisation acts appropriately on all feedback and makes any identified changes and improvements.
- That the complaints and concerns process is fully accessible and that alternative formats are provided to meet each individual's needs.

3 Definitions

3.1 The following are the Organisation's accepted definitions of a complaint, compliment or concern;

- A complaint is an expression of dissatisfaction with a service which has personally affected an individual and which requires a proportionate investigation and a formal response in order to promote resolution between the parties concerned. It is usually historic (i.e. happened in the past) and cannot be immediately remedied.
- A concern is an expression of worry or disquiet about an event or incident which is usually current and can be addressed within a short period of time.
- A compliment is a positive comment received from someone who has come into contact with the Organisation. It will contain sufficient detail to enable the Organisation to understand what has been liked or valued by the person.

4 Duties and Responsibilities

4.1 Chief Executive

The Chief Executive;

- has overall responsibility, and accountability, for the effective implementation of the Complaints, Concerns and Compliments Policy.
- has responsibility to provide a signed letter of response to formal complaints.
- must nominate a suitable deputy if they are ever in a position to not provide a signed letter of response to formal complaints.



- must designate a member of staff to ensure compliance with the regulations and ensure that actions are taken as a result of concerns and complaints, wherever appropriate.
- designates authority to manage the concerns and complaints procedures, to the Safeguarding Lead, where necessary.

4.2 Overarching responsibility for complaints handling and ensuring the organisation learns from complaints

4.2.1 The Executive Leadership Team has overarching responsibility for the management, and monitoring of complaints.

4.2.2 The Executive Team PA will analyse all feedback including complaints, concerns and compliments, to identify trends and themes that have been validated by the divisions on a quarterly basis. This will be reported to Charity Operations Committee, and then to Board of Trustees.

4.3 Business Support & Administration Manager

The Business Support & Administration Manager;

- is the organisation's designated point of contact for complaints and compliments.
- will ensure that details of the complaint are logged within the Complaints, concerns and compliments tracking document.
- Will notify initial Investigating Officer – Chief Executive Officer of the complaints, concerns and or compliments immediately.

4.4 Charity employees, volunteer and temporary staff

All;

- will aspire to best practice in seeking, listening and responding to feedback about their service, in order to learn and improve.
- will promote a culture which is open and honest and that ensures that questions about care are welcomed as an opportunity to improve and learn.
- will actively seek feedback from people in contact with services, and aim to resolve issues early. Where this is not possible, they will refer issues to the Safeguarding Lead as soon as possible.
- must comply with any request to supply information to an investigating officer undertaking a complaint investigation.
- must ensure that a customers are not affected in a discriminatory manner by them making a complaint, or having a complaint raised on their behalf.
- must ensure that no information pertaining to a complaint is stored on a clinical files.
- are entitled to receive support in managing complaints, or if they are the subject of a complaint. Managerial support should be sought, whenever



required. Support is also available through Human Resources (HR), the Safeguarding Lead, as appropriate

- those wishing to make a concern or complaint must follow the principles outlined with the organisations Grievance Procedure & Whistleblowing Policy, found in the Staff Handbook.

4.5 Investigating Officer

The Investigating Officer;

- will be appointed by the Chief Executive Officer.
- Be from another department to the one providing the service to the customer in question, unless there is a particular reason why someone from that department should investigate (such as the need for specialised knowledge).
- must declare, as soon as possible, if they do not feel they are an appropriate person to investigate a complaint, e.g. due to any partiality to any persons involved in the complaint (staff or complainant).
- will take forward any concerns, to address locally, or delegate responsibility for dealing with concerns to staff within teams
- has a responsibility to complete the investigation they have been assigned, in line with policy and within the specified timeframe.
- will ensure that they carry out investigations in line with the wishes of the complainant, including meeting the complainant as requested.
- must highlight any issues which may affect their investigation, or the identified timeframe, to the Safeguarding Lead as soon as possible, where necessary.
- will be responsible for notifying any staff members of a complaint made against them and for giving them/ arranging for them to receive appropriate support to enable them to share their information.
- will ensure that their completed investigating officer's report is approved by the Chief Executive Officer, and any involved staff, before submission to the Safeguarding Lead.
- will undertake any reflective practice and supervision to support challenging case management.
- will upload any documents relevant to their investigation to the Complaints, concerns and compliments tracking document. As above; including Letters, statements, interview notes, meeting notes and recordings.

5. Process

5.1. This policy provides a robust framework for Customer and all Staff, Trustees, Volunteers and Students involved in the investigation of concerns and complaints.

5.2 Complaints, compliments or concerns can be raised:

- By anyone who has been, or is likely to be, affected by any action or inaction by the Organisation.
- Any customer or Volunteer of any service



- On behalf of customers, by someone who has the consent of the customer. If the customer is unable to provide consent, the best interests of the customer will be considered on an individual basis

5.2.1 A complaint, compliment or concern can be raised in person, or by a third party acting on behalf of a customer if the customer;

- has passed away
- is a child (someone under the age of 18)
- is unable to give their own feedback, due to a confirmed lack of capacity
- has requested a representative, such as an advocate, to act on their behalf
- has given consent for a relative or friend to act on their behalf.

5.2.2 Occasionally, a complaint or concern may be received where the complainant has no obvious connection with the customer. In such cases, the following must be clarified, before a decision is made over whether an investigation will be carried out, and/ or a response shared;

- does the customer know that a concern or complaint has been raised about their care?
- is the customer happy with the third party raising feedback on their behalf, and to receive information in response?

5.3 For complaints received in relation to regulated care services, alongside complaining directly to Beacon Centre, complainants have the right to approach the relevant Clinical Commissioning Group (CCG), in their role as commissioner, to raise their complaint or concern for them. Complaints and concerns received via CCGs will be treated in the same manner as all other complaints. Responses will be sent to the relevant CCG to pass on to the complainant.

5.3.1 Complainants can also approach the Care Quality Commission (CQC) to raise their complaint. Complaints received via the CQC will be treated in the same way as all other complaints. The CQC will be asked to confirm whether complaint responses should be sent directly to complainants or sent to the CQC to pass on. All complaints received via the CQC should be reported to the Organisation's Safeguarding Lead for information and monitoring.

5.3.1 Complaints which are deemed as safeguarding issues should be investigated as per the Safeguarding Policy

5.4 A Complaint should be raised within 12 months of an issue, or within 12 months of a person being aware of the issue. This time period is discretionary. An investigation can still be carried out for an issue which occurred more than 12 months ago, if there is a clear reason why the person was unable to raise the complaint before (e.g. illness of the complainant, grief regarding the event). A time limit is in place to ensure that an effective and fair investigation can be carried out. If the issue occurred more than 12 months ago, the organisation needs to be open and honest with the complainant regarding what is realistic in terms of an investigation,



including explaining that staff members involved may have left the organisation and that people may no longer recall the events. Agreement must be gained, from the Chief Executive Officer, before taking forward an investigation into any complaint over 12 months old.

6 Handling Feedback

6.1 A Complaint, Concern or Compliment can be received via telephone, letter or verbally. Letters should be addressed to the Chief Executive Officer, acting as the initial investigation officer who will direct to appropriate member of staff.

6.2 Investigation Officer must issue acknowledgement to the customer within 7 days of a complaint being received.

6.4 The complaint will be investigated and the customer will receive a reply within 28 days, dealing the actions that have been taken

6.5 In the event that the customer is not happy with the response and actions, they have the right to formally write to the Chairperson within 7 days of receiving the response. The chairperson will then investigate the complaint further.

7 Records and Monitoring Compliance

7.1 Records of complaints, including all correspondence, communication and any investigation paperwork will be retained for as long as necessary to fulfil the purposes we collected it for which will include satisfying any legal, accounting or reporting requirements. If you no longer a customer of Beacon, we will retain and securely destroy your information following 10 years after your leaving date. In compliance with GDPR and Beacons GDPR/Data Protection policy.

7.2 Information relating to a complaint should be recorded on the tracking document (annex 2) and when implemented Salesforce.

7.3 Complaints, concerns and compliments data is shared widely alongside other feedback within the following reports;

- Board of Trustees (Quarterly)
- ELT (Monthly)
- Charity Operations Committee (Quarterly)

8 Compliments

8.1 Compliments are valued by staff and the Organisation, providing important feedback on what is valued by the staff, customers, or their family/ carer, and will inform best practice and service improvement.

8.2 Compliments can be recorded on the Complaints, concerns and compliments tracking document, enabling the information to be retained and shared.

9 Policy Review



9.1 This policy will next be reviewed, via the Executive Leadership Team (ELT), in 2 years from the date of ratification, or when there has been a significant change, or when it is believed to no longer be relevant



ANNEX 1

Customer Guidance

How to raise a complaint, concern and or compliment

Please do not feel uncomfortable about wanting to provide feedback on your experience. Our complaints policy is not there to apportion blame or get anyone into trouble. We want you to feel confident that your complaints and worries are listened to and acted upon promptly and fairly.

You can make a formal complaint, concern and or compliment verbally or in writing. You can give feedback, or make a complaint by completing a Complaints & Compliments form from Reception. If you would like assistance completing the form please speak with a member of staff in confidence.

You can also complain directly in writing to:

Lisa Cowley
Chief Executive Officer
Beacon Centre for the Blind
Wolverhampton Road East
Wolverhampton
WV4 6AZ

The Chief Executive Officer will then assign an investigation officer. You will receive acknowledgment within 7 days of filing the complaint. The complaint will be investigated and you will receive a reply within 28 days, in writing or via preferred line of communication, detailing actions taken or identifying the remaining process.

If you are not happy with the response, you can ask for the complaint to be reviewed by a members of the Executive Leadership Team.


All feedback is recorded and monitored. This enables us to keep track of the date and details of the complaint and any action taken.

To support accessibility for blind and partially sighted individuals, you can record your complaint and send us the CD, MP3 file or tape. The recorded version will then be transcribed into a print version for our service records.



ANNEX 2

Example Complaints, Concerns and Compliments Tracker

 Complaints, Concerns and Compliments Tracker											
No.	Date Received	Name	Contact	Effectuated Department	Complaint / Concern / Compliment (Select appropriate)	Date Sent to CEO	Investigating Officer (If Necessary)	Actions Taken	STATUS Completed By (Insert Date)	Risk (Low, Medium, High)	Correspondents (Embed)
1	00/00/0000	ALEX SMITH	ADDRESS, PHONE	RETAIL / FACILITIES / CARE / H&W		00/00/0000	NAME - JOB TITLE	LIST	00/00/0000		

