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|  **Review Sheet** |
| Last Reviewed Last Amended Next Planned Review in 12 months, or15 Dec '21 15 Dec '21 sooner as required. |
| Business impact | Changes are important, but urgent implementation is not required, incorporate into your existing workflow.**MEDIUM IMPACT** |
| Reason for this review | Scheduled review |
| Were changes made? | Yes |
| Summary: | This policy will support staff to follow the correct procedure when receiving a complaint, a suggestions or a compliment, how to record it and who to inform. It has been reviewedand information about complaining about a registered manager has been added at Section5.7. References and links have been checked and remain current. |
| Relevant legislation: | * The Duty of Candour Procedure (Scotland) Regulations 2018
* Compensations Act 2006
* Human Rights Act 1998
* Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016
* The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011
* Data Protection Act 2018
* Public Services Reform (Scotland) Act 2010
* Mental Health (Scotland) Act 2015
 |
| Underpinning knowledge - What have we used to ensure that the policy is current: | * Author: Care Inspectorate, (2014), *Complaints*. [Online] Available from: <https://www.careinspectorate.com/index.php/complaints>[Accessed: 15/12/2021]
* Author: SSSC and Care Inspectorate, (2019), *New raising concerns in the workplace guidance for employers, social service workers and social work students published*. [Online] Available from: [https://www.careinspectorate.com/index.php/news/5048-new- raising-concerns-in-the-workplace-guidance-for-employers-social-service-workers-and- social-work-students-published](https://www.careinspectorate.com/index.php/news/5048-new-raising-concerns-in-the-workplace-guidance-for-employers-social-service-workers-and-social-work-students-published) [Accessed: 15/12/2021]
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| Suggested action: | * Encourage sharing the policy through the use of the QCS App
* Share ‘Key Facts’ with all staff
* Ensure relevant staff are aware of the content of the whole policy
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| Equality Impact Assessment: | QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law. |

**1. Purpose**

* 1. To ensure that The Inclusion Group has an effective system in place to manage complaints, suggestions and compliments.
	2. To ensure that The Inclusion Group complies with any legal requirements, regulations, guidelines and best practice.
	3. To ensure that the complaints and compliments process at The Inclusion Group is fair and transparent and does not discriminate directly or indirectly because of any of the following:
		+ Age
		+ Being or becoming a transsexual/transgender person
		+ Being married or in a civil partnership
		+ Being pregnant or on maternity 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.

* 1. To support The Inclusion Group in meeting the following Quality Indicators:

## Key Question Quality Indicators

|  |  |
| --- | --- |
| SUPPORT-AND- WELLBEING | R.S1.3: People's health benefits from their care and support |
| LEADERSHIP | R.S2.2: Quality assurance and improvement is well led |
| STAFF-TEAM | R.S3.2: Staff have the right knowledge, competence and development to care for and support people |

* 1. To meet the legal requirements of the regulated activities that {The Inclusion Group} is registered to provide:
		+ The Duty of Candour Procedure (Scotland) Regulations 2018
		+ Compensations Act 2006
		+ Human Rights Act 1998
		+ Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016
		+ The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011
		+ Data Protection Act 2018
		+ Public Services Reform (Scotland) Act 2010
		+ Mental Health (Scotland) Act 2015

**2. Scope**

* 1. The following roles may be affected by this policy:
		+ All staff
	2. The following Service Users may be affected by this policy:
		+ Service Users
	3. The following stakeholders may be affected by this policy:
		+ Family
		+ Advocates
		+ Representatives
		+ Commissioners
		+ External health professionals
		+ Local Authority
		+ NHS

**3. Objectives**

* 1. To improve the quality of the Service User's experience.
	2. To ensure that all complaints and suggestions are promptly addressed, resolved and shared within the agreed timescales to ensure that lessons are learnt and that the learning improves service quality and delivery.
	3. To ensure that staff at all levels within The Inclusion Group understand their roles and responsibilities with regard to handling complaints, suggestions and compliments.

**4. Policy**

## Complaints

* + - The Inclusion Group understands complaints to be an expression of dissatisfaction requiring a response, communicated verbally, electronically, or in writing. Complaints may be made by a variety of people. Examples are Service Users, their families or advocates, professional visitors or members of the public
		- The Inclusion Group takes complaints seriously. It 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 The Inclusion Group will achieve this. The detail of how The Inclusion Group will do this will be found in the associated procedures
		- The Inclusion Group will comply with legislation, national guidelines, regulation and best practice when managing complaints and suggestions. A systematic approach will be taken with all aspects of complaints and suggestions
		- Complaints or concerns by staff and others such as volunteers will be addressed via the Grievance process if the complaint or concerns relate to them individually or via the Whistleblowing procedure where a protected disclosure is made

## Seeking Views and Engaging with Service Users

The Inclusion Group will seek out opportunities to obtain feedback from Service Users and stakeholders. The Inclusion Group will act with sensitivity, integrity and professionalism by treating individuals who do complain or raise a suggestion with compassion, courtesy and respect. The Inclusion Group will protect the Service User's right to confidentiality. The Inclusion Group 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 will undertake training on how to manage complaints in line with their roles and responsibilities.

* 1. The Inclusion Group understands that it can be difficult to separate a complaint from a concern. Therefore, The Inclusion Group will follow this policy when any dissatisfaction arises with the Service.
	2. 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 reported in line with contractual or regulatory requirements.

## Adult Support and Protection (ASP) Concerns

Where a complaint or concern is raised that relates to a Service User being harmed or in a situation where they are likely to be harmed, The Inclusion Group will follow their Adult Support and Protection Policy and Procedure in addition to the complaints procedures, seeking advice and guidance from the Local Authority ASP team, and Police Scotland. The Inclusion Group will also notify the Care Inspectorate in line with its statutory duty.

## Roles and Responsibilities All Staff

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

* + - Be trained at their induction and then as a routine measure to ensure that knowledge is embedded and refreshed around the complaints procedure
		- Have access to the Complaints, Suggestions and Compliments Policy and Procedure
		- Be provided with the opportunity to reflect 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, will need immediate resolution where possible and be to their satisfaction. Care Plans will be updated to reflect the planned changes to care and the Registered Manager informed of the feedback. Failing to do this may result in a complaint
		- Be clearly advised that, on presentation of a complaint, swift escalation to management is necessary and that purposefully withholding or concealing concerns expressed by Service Users or their

representatives could lead to disciplinary action

## The Inclusion Group Management Team

* + - The Management Team at The Inclusion Group is responsible for ensuring compliance with this policy, regulations, improvement planning as well as having arrangements in place to provide relevant reports and information regarding complaints
		- Mrs Fiona Flynn is the main point of contact for the receipt, investigation and management of complaints within The Inclusion Group. However, this may be delegated to a senior member of staff within The Inclusion Group who has the experience, knowledge and competence to investigate and manage complaints
		- The Inclusion Group will ensure that the procedure for raising a complaint is accessible and displayed prominently in The Inclusion Group, on the website of The Inclusion Group and within the Service User information and guides. Alternative languages and formats will be available on request

## Compliments and Suggestions

The Inclusion Group welcomes compliments and suggestions and recognises their importance in celebrating and recognising the success of its service and opportunities for improvement. It will engage with a wide range of stakeholders in addition to Service Users to support service development and improvement. It will share feedback with its staff.

**5. Procedure**

## Raising Complaints

A complaint can be received by The Inclusion Group either verbally or in writing and can be made by anyone, examples include:

* + - 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
		- Any member of the public or professional who has concern, acting on behalf of a Service User with their permission or if they have witnessed something of concern, however the confidentiality of

the Service User but be protected at all times.

The Inclusion Group will ensure that Service Users are given information about how to make a complaint as well as providing them with information regarding the process once a complaint has been made, including any agreed timescales.

The Care Inspectorate can be contacted at anytime and complaints can be made directly to them, they have a complaints department that will investigate the complaint made and feedback to the complainant.

## Time Limits for Submitting a Complaint

Complaints must be submitted within twelve months of the incident or concern arising. Please note however Care Inspectorate will only investigate complaints within a 6 month timeframe.

The time limit, however, can and will 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.)
		- The complainant can demonstrate reasonable cause for the delay in making the complaint It is at the discretion of the manager of the service if the time limit can be set aside.

## Complaints Procedure:

**Step 1**

When a complaint is raised to staff, staff will make an effort to resolve it immediately to the satisfaction of the complainant.

## Step 2

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

## Step 3

Staff will report the complaint to the most senior member of staff on duty and the complaint will be logged.

## Step 4

Formal acknowledgement of the complaint will be sent within seventy-two hours of receipt to the complainant. This can be via letter or email. The Inclusion Group 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 will state what the investigation will be focussed on
		- A time limit for the investigation to be concluded. This must be twenty days from receipt of the complaint. 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 5

Following a full investigation, a response letter will be sent, and this 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
		- A signature from the responsible individual or sent by email in their name

## Step 6

The complaint will be closed once confirmation has been received that there is satisfaction with the outcome. In the event of dissatisfaction, The Inclusion Group will support the complainant to access further support (refer to section 5.6).

## 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 the report of the outcome was sent to the complainant

Where complaints relate to a Service User, a copy of the complaint will be held in their care records 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, adult support and protection policies will be followed as per local authority expectation and necessary notifications made to the Care Inspectorate. Where support is commissioned by Dundee City, their reporting procedure for notifying them of complaints must be followed.

Where complaints are to be shared as part of learning, the complaint will be anonymised so that there is no identifiable Service User information.

## Investigations

All investigations will be managed by using the following approach:

* + - Investigating the fact
		- Assessing evidence
		- Reviewing of records
		- Interviewing those involved

Where necessary, advice and support will be sourced via senior managers within The Inclusion Group. The complaint will be investigated by a member of staff with the knowledge, experience and seniority to undertake the investigation robustly.

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

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

## Alternative ways to complain or raise concern

You can also bypass our procedure and complain directly to:

1. Care Inspectorate

Individuals can take their unresolved complaints to the Care Inspectorate via:

* + Website - <http://www.careinspectorate.com/index.php/complaints>(and complete an online complaints form)
	+ Address - Care Inspectorate, Compass House,

11 Riverside Drive, Dundee, DD1 4NY

* + Telephone - 03456009527
	+ Email - concerns@careinspectorate.gov.scot

## Complaints Against the Registered Manager

If there is a complaint against the Registered Manager, the complaint could be sent to The Inclusion Group. Alternatively, it could be sent to the Care Inspectorate at:

* + - Website - <http://www.careinspectorate.com/index.php/complaints>(and complete an online complaints form)

## Compliments

Receiving compliments is an opportunity to celebrate and recognise success. The Inclusion Group will ensure that:

* + - All compliments are shared with staff and displayed in public areas to highlight good practice
		- Compliments are anonymised or permission has been sought before displaying them
		- The number of compliments received are logged as part of a quality assurance programme
		- Verbal positive feedback from Service Users and relatives is also deemed as a compliment and will be recorded and shared with colleagues
		- Compliments form a core agenda item at staff, Service User and relative meetings

## 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 may lead to a complaint
		- When suggestions are raised in a meeting or as part of a conversation, these must be documented and then the outcomes of such suggestions recorded to show consideration
		- Staff will be encouraged to share their suggestions, or the suggestions received by relatives and Service Users with the manager at The Inclusion Group
		- The Inclusion Group manager will consider implementing a suggestions system to encourage comments from Service Users, staff and visitors

## Audit and Evaluation

The Inclusion Group will monitor, review and analyse all information received about the Service as a means of continuously reviewing performance, quality and safety.

The Inclusion Group will also:

* + - Share themes and trends with Support Workers working for The Inclusion Group, and Service User's and their representatives.
		- Ensure that staff are trained to deal with complaints and understand the procedure for managing complaints

## Anonymous Complaints

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

## Vexatious Complaints

Occasionally, The Inclusion Group may receive complaints that are vexatious in that they cause considerable disruption to the work at The Inclusion Group, disproportionate cost and time to handle, and impact the wellbeing of staff (because of the way the complaint is made or because of its repetitive nature). The Inclusion Group will ensure that it meets the requirements of the Equality Act 2010 to make ‘reasonable adjustments’ for disabled customers. In some circumstances, customers 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, The Inclusion Group 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, The Inclusion Group will consider complaints to be vexatious but would not label an individual complainant as vexatious. Even if The Inclusion Group decides that an individual’s complaint about the service is vexatious, that does not preclude that person from making a formal complaint. The Inclusion Group would still consider any such complaints in line with the usual procedures.

To help decide whether a complaint is vexatious, The Inclusion Group 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 The Inclusion Group, its staff or an individual member of staff
		- The primary purpose and/or effect of the manner in which the complaint is made is to disturb, disrupt and or/pressurise The Inclusion Group, its staff or an individual member of staff
		- The complaint is otherwise clearly unreasonable

If at any point in the handling of a complaint a member of staff believes it meets the criteria to be deemed vexatious, it must be referred to Mrs Fiona Flynn with a summary of why it is thought to be vexatious.

Mrs Fiona Flynn 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, Mrs Fiona Flynn will respond directly to the complainant explaining why it is thought to be so and explain that the complaint will be closed with no further action. Mrs Fiona Flynn 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 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 Social Care and Social Work Improvement Scotland - Care Inspectorate complaints team will be shared with the complainant.

**6. Definitions**

## Compliment

* + - A compliment is an expression of satisfaction about a service that the Service User has received
		- Compliments are positive feedback that can be received verbally or in writing and can include expressions of praise, admiration, congratulation and encouragement

## Complaint

* + - A complaint is an expression of dissatisfaction, disappointment or discontent. This may be in response to an act of omission, a decision or act
		- Complaints can be made in various ways and include:
			* Verbally
			* Electronically
			* Local feedback channels
			* Writing

## Self-Funded Care

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

## Vexatious Compliant

* + - 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

**Key Facts - Professionals**

Professionals providing this service should be aware of the following:

* + - You will be involved in quality improvement planning in response to themes from both compliments and complaints received by The Inclusion Group. Compliments will be recognised and celebrated, and staff will be supported during any complaints investigations
		- Any feedback received from Service Users or their representatives can influence positive change and quality delivery of care and must be discussed with your manager
		- The receipt of complaints, suggestions and compliments is everyone's responsibility and therefore you must know what to say and how to respond. You need to be able to promote an open, honest and transparent service to encourage people to feel able to feedback and raise concerns

**Key Facts - People affected by the service**

People affected by this service should be aware of the following:

* + - You have the right to feel confident to raise a concern, make a suggestion or pay a compliment
		- The process for you to raise a concern, make a suggestion or pay a compliment will be simple and you will feel listened to and understood
		- Your concerns, suggestions and compliments will make a positive difference to future care at The Inclusion Group

**Further Reading**

There is no further reading for this policy, but we recommend the 'underpinning knowledge' section of the review sheet to increase your knowledge and understanding.

**Excellent Practice**

To demonstrate Excellence in this policy area ensure that:

* + - Service Users are involved in the complaint handling process and future design of procedures. Their views influence future management decisions
		- 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
		- The wide understanding of the policy is enabled by proactive use of the QCS App
		- There is evidence of annual reporting as a means of commitment to transparency and quality. An annual report is prepared and published detailing the numbers of complaints, compliments and suggestions and actions are taken as a result

**Forms**

The following forms are included as part of this policy:

|  |  |  |
| --- | --- | --- |
| **Title of form** | **When would the form be used?** | **Created by** |
| Complaint Investigation Template - SQQ03 | To record a complaint and investigation. | QCS |
| Complaint Procedure for Service Users - SQQ03 | To be displayed in a prominent position in the Service and given to Service Users prior to admission. | QCS |
| Complaints and Compliments Register - SQQ03 | To record compliments or complaints. | QCS |
| Complaint Acknowledgement Letter Template - SQQ03 | To acknowledge a complaint received. | QCS |
| Complaint Final Response Letter Template - SQQ03 | To respond to a complaint when the investigation is completed. | QCS |

|  |  |
| --- | --- |
| **Complaint Reference:** |  |
| **Name (who does the complaint relate to):** |  | **Date of Birth:** |  |
| **Address:** |  |
| **Date of Complaint:** |  | **Date Complaint Acknowledged:** |  |
| **Name of Complainant:** |  | **Date Response Required by:** |  |
| **If the complainant is not the Service User, what evidence was provided of the Service User’s consent to complain on their behalf?** |
|  |
| **Overview of Complaint** (append complaint letter or notes of verbal complaint to this form): |
|  |

|  |
| --- |
| **Investigation Plan** (outline the planned activities to investigate the complaint): |
|  |
| **Findings of Investigation** (append interview notes to this form): |
|  |

|  |
| --- |
| **Proposed Response:** |
|  |
| **Approved by:** |  |
| **Response Provided by:** |  |
| **Method** (attach any written communication to this form)**:** |  |
| **Date:** |  |

## Introduction

We always aim to provide a high standard of care in all our services.

Our Service Users’ views are important to us and help to ensure that our services are consistently meeting people’s needs. If you are unhappy with any of our services, it is important that you let us know.

If a complaint alerts us to possible abuse or neglect, we will tell the Local Authority’s Adult Support and Protection (ASP) Team. The ASP Team will decide how to investigate and monitor outcomes.

## Making a Suggestion

Often people feel more comfortable suggesting improvements than complaining formally. Suggestions can be made by anyone receiving services, or their friends/family. To make a suggestion you can:

* + Speak to the Manager or their Deputy
	+ Utilise available comments or suggestion boxes if you would rather make your suggestion that way
	+ If the suggestion is something that The Inclusion Group, as a company, needs to consider you can send it to: Registered Manager

The Inclusion Group 23-27 Albert square Meadowside Dundee

DD1 1PW

Scotland 01382322677

## Making a Complaint

We aim to handle complaints quickly, effectively and in a fair and honest way. We take all complaints seriously and use valuable information from investigating to help us improve the service we provide. We treat all complaints in confidence.

The Inclusion Group assures Service Users and their families that it will not withdraw or reduce services because someone makes a complaint in good faith.

## Who Can Complain?

Anyone can make a complaint.

A representative can make a complaint for the affected person if they:

* + Have died
	+ Cannot make a complaint themselves, or
	+ Have given consent for the representative to act on their behalf

If you are not happy about making a complaint yourself and you do not know someone who can talk or write to us on your behalf, we will be happy to find someone from an independent organisation to act as an advocate for you.

## How You Can Make a Complaint

You can complain:

* + In person
	+ By telephone
	+ Through a member of our staff
	+ Through an advocate or representative

Where someone complains verbally, we will make a written record and provide a copy of it within 3 working days

* + By letter
	+ By email

Complaints can be made to The Inclusion Group, alternatively the complaint can be made directly the Social Care and Social Work Improvement Scotland - Care Inspectorate without involving The Inclusion Group.

## Anonymous Complaints

We deal with anonymous complaints under the same procedure. However, it will be noted, that if you provide contact details, we can update you on the outcome of our investigation.

## Responsibility

The Registered Manager has overall responsibility for dealing with all complaints made about their service. We will provide, as far as is reasonably practical:

* + Any help you need to understand the complaints procedure
	+ Advice on where you may get that help
	+ Information about making a complaint in a way you can understand

## How We Handle Complaints

The Registered Manager or The Inclusion Group may ask one of the Management Team to investigate the complaint. That person will have enough seniority and experience to deal with the issues raised by the complaint.

We will acknowledge a complaint within **3** working days and give you the name and contact details of the person investigating it. We will keep you informed about the progress of the investigation. We aim to have all complaints finished within **20 working days** unless we agree a different time scale with you.

When we have finished investigating, we will arrange to meet with you to discuss the outcome, and write to you with:

* + Details of the findings
	+ Any action we have taken
	+ Our proposals to resolve your complaint

## Time Limits

You must complain as soon as you can after the date on which the event occurred or came to your notice. If you complain more than twelve months later, we may not be able to investigate properly. However, we will consider whether you had a good reason for not making the complaint sooner and whether, despite the delay, it is still possible to investigate the complaint effectively and fairly.

## Further Steps

At any stage during the process, if you are not happy with the way The Inclusion Group is dealing with your complaint you can contac Registered Manager at:

The Inclusion Group 23-27 Albert square Meadowside Dundee

DD1 1PW

Scotland 01382322677

Once we have dealt with your complaint, if you are not happy with the outcome you can refer your complaint to the Care Inspectorate. The Care Inspectorate can investigate individual complaints about a providers service at any time.

You can contact the Care Inspectorate at:

Social Care and Social Work Improvement Scotland - Care Inspectorate Complaints Team Care Inspectorate,

Compass House, 11 Riverside Drive, Dundee, DD1 4NY

Website: <http://www.careinspectorate.com/index.php/complaints>

## \*We can provide this policy in other languages or in other formats on request

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Name of person making****complaint/compliment** | **Summary of****complaint/compliment** | **Action taken** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

[Insert date] [Insert name] [Insert address]

**Our ref:** [Insert reference]

**Your ref:** [Insert reference]

**Our contact details:** [Insert name, email address and phone of person managing this complaint]

# Dear [Insert title and name],

[Insert heading. For example, Complaint about. ]

Thank you for bringing to our attention your concerns in [your letter/your email/our conversation] of [date]. I am sorry that you are not happy with the service provided by The Inclusion Group.

As I understand it, you are concerned that [Insert your understanding of the issues of concern, using a bulleted or numbered list if there is more than one point]. Please contact me straight away if I have misunderstood your concerns.

I would be happy to meet you to discuss the issues you have raised and our investigation procedures, if that would be helpful. [Suggest a date and/or ask them to contact you to arrange].

I am looking into the points you have made as a matter of urgency and shall be in touch with you with a full response by [insert anticipated response time – not longer than 20 working days].

Please do contact me again in the meantime if I can be of further assistance. My email and phone number are provided above.

Yours Sincerely,

[Insert name and job title]

[Insert date] [Insert name] [Insert address]

**Our ref:** [Insert reference]

**Your ref:** [Insert reference]

**Our contact details:** [Insert name, email address and phone of person managing this complaint]

# Dear [Insert title and name],

[Insert heading. For example, Complaint about. ]

My investigation into the concerns you raised on [Insert date] is now complete.

I will address each of the points as outlined in my earlier acknowledgement letter to you.

[Repeat each individual point of complaint and follow each one with what you found in the investigation. Put this as a numbered list if there is more than one issue.]

Point one, I have found that...

Point two, I have found that...

**Outcome**

# As a result of your complaint we have taken the following action (if not already mentioned above). [action one]

[action two] [action three]

I would like to thank you for bringing these matters to our attention. We welcome comments from people who use our services and aim to use these to improve our services.

If you are not fully satisfied with the way we have handled your complaint you have the right to take your complaint to the Social Care and Social Work Improvement Scotland - Care Inspectorate, whom you can contact at: <http://www.careinspectorate.com/index.php/online-complaint-form>

Yours Sincerely,

[Insert name and job title]