

Adult Services Complaints Policy / Procedure



Dorset
Council

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1. Introduction

- 1.1 People who use the Adult Social Care services are encouraged to give feedback on the quality and appropriateness of the services they receive. This feedback can be in the form of compliments, representations, comments, suggestions, queries or complaints. All of these different kinds of representations from service users and carers should be welcomed and encouraged. The Adult Social Care Service is committed both to listening to its service users and to using the information received to develop and improve the services it provides or commissions.
- 1.2 It is important that all representations from service users and carers are recorded to ensure that the views expressed by service users can be used to inform the process of service planning and service development. A specific element of this is the recording of compliments and complaints. The Adult Social Care Service is legally required to establish and maintain a complaints procedure, in relation to social care services, and it is important that complaints are recorded and dealt with effectively in order to meet the statutory requirements of the complaints procedure.
- 1.3 The statutory complaints procedure is structured around three main principles: listening, responding and improving. These principles help the authority to take a more active approach to asking for people's views, to deal with complaints more effectively and use the information received to learn and improve.
- 1.4 This guidance is written to assist staff who receive representations from service users and to clarify both statutory and Adult Social Care Service requirements and expectations.

2. Policy and Objectives

- 2.1 The legislation recognises that giving people the right to complain, and to make other representations, is particularly important to those who are most frail and vulnerable and for those concerned on their behalf, when services are absent, inappropriate or insensitive. A robust and responsive complaints procedure is a key factor in ensuring that the Adult Social Care Service



responds to and learns from its service users and is open to challenge when there is dissatisfaction with its services.

- 2.2 As part of its commitment to customer care the Adult Social Care Service is committed to receiving any comments or criticisms about its services so that where things have gone wrong, they are quickly corrected ensuring the best quality of service is achieved. The complaints procedure is the method by which service users and carers can express their worries, problems or concerns and be sure they will be listened to, taken seriously, and their problems resolved quickly and efficiently.
- 2.3 All staff should be aware of the Complaints Procedure and the process to follow. All first line managers will have a copy of these guidelines and complaints issues should be a regular agenda item at management meetings. Information on the complaints process is available on the Dorset Council website and staff intranet. Training will be available for all staff. The Whole Authority Procedure is also available. Copies of the Dorset Council leaflet, Complaints/Comments/Compliments, will be on display in Local Offices and an electronic copy also available.
- 2.4 The Health Service Ombudsman, which is responsible for investigating National Health Service (NHS) complaints that can't be resolved locally, has published Principles of Good Complaint Handling. The Local Government and Social Care Ombudsman has also issued guidance.
- 2.5 In summary, the six principles are:
 1. getting it right
 2. being service user focused
 3. being open and accountable
 4. acting fairly and proportionately
 5. putting things right
 6. seeking continuous improvement

3. The Legislation Behind the Complaints Procedure

- 3.1 The National Health Service and Community Care Act 1990 introduced Directions under the Local Authority and Social Services Act 1970, which required local authorities with social services functions to establish from 1 April 1991 a formal complaints procedure. This procedure is based on The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 which came into force on 1 April 2009.
- 3.2 The legislation is supported by guidance "Listening, Responding, Improving – A guide to better customer care" published by the Department of Health in February 2009. The new approach will help organisations deal with complaints better, in order to make services more effective, personal and safe.



3.3 The Adult Social Care Service's complaints procedure is part of Dorset Council's corporate framework for responding to comments, both positive and negative about its services. The expectation is that the majority of complaints received about the Adult Social Care Service will be dealt with under this procedure. Some general matters may however be dealt with more appropriately by the Council's own complaints procedure, a separate guide regarding this process exists for employees and managers which may be found on the intranet

4. What is a Complaint?

4.1 A complaint may be generally defined as an expression made in any format whether written, verbal or through alternative communication methods of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social care provision which requires a response.

4.2 If it is possible to resolve the matter immediately, there may be no need to engage the complaints process, however the information should be recorded and passed to the Complaints Team.

5. What May Be Complained About

5.1 Section 1A and Schedule 1 of the Local Authority Social Services act, 1970 provides that all functions of the local authority under the Act may form the subject of a complaint. For example, a complaint may arise as a result of many things relating to statutory social care functions such as:

- *An unwelcome or disputed decision*
- *Concern about the quality or appropriateness of a service*
- *Delay in decision making or provision of services*
- *Delivery or non-delivery of services including the complaints procedure*
- *Quantity, frequency, change or cost of a service*
- *Attitude or behaviour of staff*
- *Application of eligibility and assessment criteria*
- *The impact on an individual of the application of a local authority*
- *Assessment, care management and review.*

5.2 This is not an exhaustive list and guidance should always be sought from the Complaints Team in the case of any doubt about whether an issue should be addressed under the Complaints process.

6. Who May Complain

6.1 Section 5 of the Regulations 2009 requires the authority to consider complaints made to it by someone who:



- Is receiving or has received services from the authority
- Is affected, or likely to be affected, by the action, omission or the why it is being returned, and remind them that it will not be returned again
- Where complaints are received from someone who may be affected but it is not in the interests of the service user to pursue a complaint, it is the role of the Complaints Manager to consider the appropriate route

6.2 A complaint may be made by a person acting on behalf of a person in 5.1 who:

- has died
- is a child
- is unable to make the complaint themselves due to physical incapacity or lack of capacity within the Mental Capacity Act 2005. Has requested the representative to act on their behalf.

6.3 A complaint by a representative will not be considered if the authority is satisfied that the representative is not acting in the best interests of the person on whose behalf the complaint is being made. The authority will inform the representative of the reason for this decision in writing. The Authority has the discretion to decide whether the person or not is suitable to act. In some cases, we may check with the service user that they are happy for the person to make the complaint on their behalf.

6.4 Where social work intervention or a social work report has gone to court, the complainant can make a complaint about the report (for example its quality or accuracy) distinct and separate from the subsequent actions of the court. This may, for example, apply in relation to a Safeguarding issue (see 10 below).

7. How Complaints Are Received

7.1 Complaints may be received by various means:

- Verbally
- In writing
- Telephone
- Email

7.2 Where a member of staff receives a complaint the member of staff must inform the Complaints Team. Where a verbal complaint can be resolved to the complainant's satisfaction with 24 hours there is no need to record this as a complaint. However, it is still important that a copy of the issue raised, and the response, is forwarded to the Complaints Team to record as a comment /concern. This will ensure that the Directorate will learn from the feedback received.

7.3 The Council recognises that members of the public may choose to use Artificial Intelligence (AI) tools to assist in drafting correspondence or complaints. While we do not restrict the use of such tools, all submissions must remain:



- Accurate,
- Relevant to the matter being raised, and
- Proportionate in length.

7.4 Where a lengthy AI generated complaint has been submitted, the Council reserves the right to:

- Greatly summarise unnecessarily lengthy or repetitive complaints and respond only to the substantive issues raised;
- Issue brief position statements rather than detailed responses if the complaint includes excessive or irrelevant commentary.

7.5 Where correspondence appears to have been generated using AI in a way that produces excessive volume, repetitive material, or content that does not relate meaningfully to the issue, the Council may apply its unreasonable behaviour provisions (see section 25)

7.6 Service users and their carers also have the right to complain to their Councillor or Members of Parliament (MP); There is a separate protocol for dealing with letters from MPs. Where an MP has written to the Adult Social Care Service advocating on behalf of their constituent to form a complaint the letter should be copied to the Complaints Team to check whether a complaint investigation is already in progress for the particular complainant. The MP will then receive a response from the Head of Service informing the MP of the current investigation. Where no formal complaint has been received the letter may, depending on the seriousness of the concern, be treated as a comment/concern and be added to the complaint file.

7.7 The complainant may complain to the Local Government and Social Care Ombudsman (LGSCO), although it is unusual for the LGSCO to consider a complaint before it has been addressed by the local authority. The LGSCO normally would refer such complaints back to the local authority.

8. What is not covered by the complaints procedure

8.1 The following matters are not required to be dealt with in accordance with these procedures:

- A complaint by a 'responsible body' (local authority, NHS body Primary care provider or independent provider).
- A complaint by an employee of the local authority relating to their employment.
- A complaint which is made orally and resolved to the complainant's satisfaction within one working day. These complaints should still be recorded on via the online complaints form and passed to the Complaints Manager by email, if possible.
- A complaint which has already been investigated under the 2006 regulations before 1st April 2009.



- A complaint which is being investigated or has been investigated by a Local Commissioner under the Local Government Act 1974. For example, a current investigation by the Local Government and Social Care Ombudsman.
- A complaint arising from alleged failure of the authority to comply with a request under the Freedom of Information Act 2000.
- Complaints that fall wholly within the Care Standards Act.
- Complaints that fall wholly within safeguarding procedures.

8.2 The complainant must be notified in writing of the reason their complaint is not being dealt with in accordance with these regulations.

9. Complaints about the provision of health services

9.1 Sometimes a complaint will cross the boundaries between a local authority and an NHS body. The local authority and the NHS body will co-operate to co-ordinate the handling of the complaint and to ensure the complainant receives a co-ordinated response to the complaint.

9.2 The Joint Local Protocol (Appendix 1) outlines the duties of both bodies to:

- Agree which of the two bodies will take the lead in co-ordinating the complaint and communicating with the complainant.
- Provide the other body with information relevant to the complaint which is reasonably requested.
- To attend or be represented at any meeting reasonably required during the consideration of the complaint.

10. Complaints about a Care Quality Commission regulated service or Care Standards Act Regulated Service

10.1 Dorset Council's Adult Services are increasingly working with the independent sector in commissioning services for our service users. When people have concerns about the services we have commissioned, we believe that they should have the same rights and standards in getting those concerns addressed as users of in-house services. Therefore, we will ensure that commissioned services have robust complaints procedures in place, and the service user can choose to have their concerns addressed through our procedures by coming to us rather than the provider.

10.2 The service user is also free to have their concerns addressed by the commissioned service and Dorset Council concurrently, should they wish to do so.

11. Complaints which involve Safeguarding Adults (Adult



Protection) issues

- 11.1 There are sometimes occasions when a complaint may highlight a possible safeguarding (adult protection) issue.
- 11.2 Such instances should be recorded as a complaint by the Complaints Manager and then, dependent upon the decision of a case conference, either investigated as an adult protection matter or as an ordinary complaint. Whichever route is considered more appropriate the Complaints Manager must be informed of the outcome in the usual way and the complainant should have a written response.

12. The role of the Complaints Manager

- 12.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 states that a Complaints Manager must be in post with responsibilities for managing the procedures for the handling and consideration of complaints in accordance with the regulations. The Complaints Manager should ensure that:
- Complaints are dealt with efficiently;
 - Complaints are properly investigated;
 - Complainants are treated with respect and courtesy;
 - Complainants receive, so far as is reasonably practical; assistance to enable them to understand the complaints process or advice on where they may obtain such assistance;
 - Complainants receive a timely response;
 - Complainants are told the outcome of the complaint;
 - Action is taken if necessary in the light of the outcome of the complaint;
 - Information is available to the public as to the authority's arrangements for dealing with complaints and how further information may be obtained;
 - A record is maintained of each complaint received, the subject matter of each complaint, adherence to response period and any amendments to that period.
- 12.2 The functions of the Complaints Manager may be carried out by a person authorised to act on their behalf.

13. Diversity and the provision of advocacy

- 13.1 Dorset Council strives to ensure that everyone will have equal access to our services, to be socially inclusive in all our functions and activities, to be transparent in all we do and to value our customers and staff.



13.2 Socially excluded people and those with diverse needs may experience difficulty in raising complaints. Provision of advocacy is a way to ensure everyone is able to use the complaints procedure.

13.3 Advocacy Services are commissioned by Dorset Council for people with physical or learning disabilities, older people and those with mental health issues. Other support such as translation services can be commissioned on an individual basis.

13.4 Complaints information can be provided in other formats such as:

- Easy read
- Cassette tape or DVD
- Braille
- Large print
- Computer CD for screen writers
- Other languages

13.5 The more person-centred and individualistic approach to complaints handling should seek to address existing patterns of inequality by supporting specific needs and assisting all to have a voice.

13.6 The benefits of a more inclusive complaints process include better feedback contributing to organisational learning, commissioning and service provision.

13.7 Staff should consider whether the service user might benefit from the involvement of an independent advocate. Further advice of services such as Dorset Advocacy, Help and Care or the local Citizens Advice Bureau is available from the Complaints Team.

14. Time limits for making a complaint

14.1 A complaint should be made no later than 12 months from the date on which the matter which is the subject of the complaint occurs or the date upon which the subject of the complaint came to the notice of the complainant unless:

- a) The complainant had good reason for not making the complaint within the time limit and
- b) Notwithstanding the delay, it is still possible to investigate the complaint effectively.

14.2 Whether or not to consider the complaint will be made on a case-by-case basis and the decision will be made by the appropriate Head of Service following recommendation from the Complaints Manager.



15. Receiving a complaint, Action Plans and timescales

- 15.1 A complaint may be made in many ways; orally, in writing or electronically. Any member of staff receiving a complaint should notify the Complaints Team of this as soon as possible.
- 15.2 If the complaint is received at the local office the local manager should refer to the Complaints Team to acknowledge.
- 15.3 On receipt of a complaint the Complaints Team will record it on the complaints database and acknowledge the complaint. The Complaints Team will assess the complaint to identify who is best-placed to investigate and respond. If further information is required in order to progress the complaint, the Complaints Team will contact the customer directly to request this, along with clarifying the outcomes they are seeking, if this remains unclear.
- 15.4 At the time of referral, or as soon as possible, the Complaints Team will discuss with the investigating manager the complaint action plan. If a clear plan with a realistic outcome can be agreed from the start the issue is more likely to be resolved satisfactorily. The plan should include:
- The specific issues that the complainant would like addressed
 - The outcomes that the complainant would like achieved
 - The manner in which the complaint is to be handled. For example, a face-to-face interview formal investigation or mediation.
 - The timescale in which the investigation is likely to be completed and a response to be sent.
- 15.5 When referring a complaint to the investigating manager, the Complaints Team may suggest a telephone call from the Service to the complainant as part of the investigation.
- 15.6 If the complainant declines the offer of this discussion the Complaints Team will:
- Determine a response timescale
 - Write to the complainant advising them of the timescale
- 15.7 Following discussion with the complainant, the Complaints Team or investigating manager will write to the complainant outlining the issues discussed and the proposed action to be taken. This should include details of how it is proposed to investigate the complaint, for example, through meeting with staff involved, mediation, or independent investigation. It is acknowledged that the complainant may not always agree with the Action Plan and in these instances the Complaints Team will aim to negotiate a resolution that the complainant is satisfied with, if this does not prove possible the Complaints Team should exercise discretion and the complainant should be informed in writing of the rationale for the suggested complaints plan. The complaints plan should also record the complainant's desired outcomes. However, these must be realistic and achievable. It should be explained to the complainant that they may not be able to



achieve their desired outcome through the complaints process.

16. Investigation of the complaint

16.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 came into force on 1 April 2009. The new regulations have removed the three-stage process as this was viewed as too lengthy. The new single approach aims to give greater flexibility with the emphasis on getting it right first time.

16.2 When a complaint is made, the Local Authority must investigate it appropriately to make certain that it is resolved in a timely and efficient manner ensuring that the complainant is informed, as is reasonably practical, as to the process of the investigation.

16.3 The Complaints Team will assess the seriousness of the complaint and the likelihood of the issue recurring. It is envisaged that in most cases the local manager will be expected to respond but in more serious cases it may be more appropriate to instigate an Independent Investigation. The status of the complaint may be reviewed based on the results of any investigation.

16.4 As soon as possible after the complaint has been investigated a response should be sent to the complainant including:

- Explicit details which respond to the issues raised in the Complaint Plan – (ie highlighting the need to cross reference with the complaint plan in the response to ensure that all issues have been addressed and there are no gaps
- An explanation of how the complaint has been considered
- The conclusions reached in relation to the complaint, including any matters for which the complainant specifies, or the authority feels any remedial action is needed.
- Confirmation of any action which has been taken or will be taken as a response to the complaint.
- Details of the complainant's right to take their complaint further or to the Local Government and Social Care Ombudsman.

17. Guidance for staff investigating a complaint

17.1 Following acknowledgement of a complaint and determination of an Action Plan and timescale, the Complaints Team will determine the most appropriate route for the investigation. The Complaints Team will notify the appropriate staff. It is anticipated that, in the first instance, the responsibility for responding/investigating will be at Team Manager level. Should it become apparent that the complaint is more serious or involves the actions of the local manager then the responsibility for responding will be with the Service Manager. The Complaints Team will be available to offer advice on how to proceed.

17.2 In investigating a complaint it is vital to systematically establish pertinent facts.



Whenever possible / in all but exceptional circumstances (which should be fully recorded) the investigator should telephone or meet with the complainant as soon as possible. This will help define the investigation by understanding the complainant's perspective and establish clarity around the complaint. This may also provide an opportunity for early resolution.

- 17.3 It is important to be clear from the start about exactly what is being investigated. The following questions can assist in establishing this:
- a) What should have been provided? What was expected?
 - b) What was provided? What actually happened?
 - c) Is there a difference between a) and b)?
 - d) If the answer to c) is yes, why?
 - e) If the answer to c) is no, why does the complainant think otherwise?
 - f) What was the impact of d)?
 - g) What should be done to put things right?
 - h) What should be done to avoid a reoccurrence?
- 17.4 The investigator must also speak to staff involved and view pertinent paper and computer files.
- 17.5 All final communications regarding the outcome of the Complaint must be sent to the Complaints Team in draft format prior to being sent to the complainant. The Complaints Manager may make recommendations with regards to the content of the final communication

18. Independent Investigation

- 18.1 If a complaint is established as very serious, or of high complexity or has not been resolved by a local investigation an independent investigation may be pertinent. Independent Investigators may be appointed by the Complaints Team and, when necessary, in the case of a vulnerable adult, an Independent Person may also be appointed.
- 18.2 In preparation for the investigation the Independent Investigator and Independent Person will meet with the complainant to produce a Statement of Complaint (where this has not already been agreed) establishing the full details of the complaint and the requested outcomes of the complainant. Where an action plan is already in place this may be reviewed at this time. The Statement of Complaint will be signed by the complainant.
- 18.3 In circumstances where the complainant does not engage with the process, the investigation may still proceed with the information provided in the original complaint, response and subsequent contact relevant to the local authority's investigation of the complaint.
- 18.4 The Independent Investigator and Independent Person will interview staff involved in the complaint and will view pertinent paper and computer files.



18.5 When the investigation is completed the Independent Investigator in liaison with the Independent Person will produce a draft report which will be circulated to all involved to be checked for factual accuracy. Once these are returned the Independent Investigator will produce a final report which will include a chronology, the body of the investigation and the Independent Investigators conclusions and recommendations.

18.6 The Independent Person (when used) will provide the authority with a report which may include comments on:

- Whether the investigation was robust, impartial and effective;
- Whether all concerned have been able to express their views fully and fairly;
- Whether the Independent Investigator's report provides a complete and accurate account of the investigation;
- The nature of the recommendations or additional recommendations.

18.7 The Complaints Team will forward a copy of the final report to the appropriate Executive Director who will act as an adjudicator. The purpose of the adjudication is to allow the authority to consider the report and identify:

- Its response;
- Its decision on each point of the complaint;
- Any action with timescales for implementation.

18.8 As part of the adjudication the Executive Director may wish to meet with the complainant, the Complaints Manager, the independent investigator or the Independent Person.

18.9 Once the adjudication is complete the Executive Director will write the 'sign off' letter to the complainant enclosing:

- The Independent Investigator's final report;
- The Independent Person's final report;
- The adjudication;
- Details of the complainant's right to take the matter to the Local Government and Social Care Ombudsman if they remain dissatisfied.

19. Guidance for staff meeting the Independent Investigator

19.1 All the external Independent Investigators and Independent People have been appointed to a 'pool'. They generally have considerable experience in Social Care or related fields. They understand the pressures of both frontline work and service management.

19.2 All involved with the complaint must make every effort to meet with the investigators at the earliest opportunity.

19.3 Staff are able to have someone with them at the meeting perhaps a colleague



or union representative as long as they are not involved in the complaint.

- 19.4 Prior to the meeting staff should read through the file to remind themselves of the case and their part in it. Often complaints refer to matters which have happened some months previously.
- 19.5 All the investigator's questions should be answered clearly and honestly. The Independent Investigator will make notes as you speak to ensure an accurate account of what is said.
- 19.6 Once the Independent Investigator has completed the draft report staff involved will be sent a copy to check for factual errors.
- 19.7 If at any time, following the interview, there is something that staff wish to add they should contact the Independent Investigator through the Complaints Manager.

20. Adjudication guidance for the independent report and signing off the complaint

- 20.1 The Department of Health Guidance on the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 advises that the Chief Executive as the Responsible Person may delegate the sign off to the Head of Service.
- 20.2 When the independent investigation is completed the Independent Investigator will, in liaison with the Independent Person where appropriate, produce a draft report which will be circulated for factual corrections, the final report, including a chronology, conclusions and recommendations will then be sent to the Complaints Team.
- 20.3 The Complaints Team will forward a copy of the final report to the Executive Director who will act as Adjudicating Officer.
- 20.4 The Independent Person will also provide the authority with a report which will be sent to the Adjudicating Officer.
- 20.5 The purpose of the Adjudicating Officer is to consider the complaints; the findings, conclusions and recommendations of Independent Investigator and, where appointed, the Independent Person; and the complainant's desired outcomes.
- 20.6 As part of the adjudication the Executive Director may wish to meet with the Complaints Team, the Independent Investigator and Independent Person or the complainant.
- 20.7 The written adjudication should commence with an introduction, i.e. who the writer is and their position within the authority and include;
- Confirmation of the local authority's response to the independent report;
 - The Adjudicator's view on whether the investigation has been thorough and complete;



- The Adjudicator's position on the Independent Investigator's and Independent Person's findings against each point of the complaint;
- Details of any actions the authority may be taking and the timescales for these
- A note of thanks for bringing the matter to the authority's attention;
- Confirmation of the complainant's right to approach the Local Government and Social Care Ombudsman at any time.

20.8 Once the adjudication is complete the Executive Director will, having checked it with the Complaints Team, send the adjudication in the form of a letter to the complainant enclosing:

- The Independent Investigator's final report
- The Independent Person's report
- Complaints Leaflet
- Details of how to contact the Local Government and Social Care Ombudsman

20.9 A copy of all the above correspondence must also be sent to the Complaints Team.

21. Putting things right

21.1 The complaints system should identify if an injustice has been caused by maladministration and should seek a remedy that will, as far as possible, put the complainant back into the position they would have been in but for the fault.

21.2 Specific action may be appropriate (assessment, re-assessment, provision of aids or adaptations, care support). Consideration should be given to any practical action the complainant may suggest.

21.3 Section 92 of the Local Government Act 2000 gives councils a general power to pay compensation or take other remedial action. Whether financial compensation should be paid, and how much, will depend on circumstances of the individual complaint. Where specific financial losses have been incurred consideration is to be given to re-imbursement. Where the complainant has had to spend a significant and unreasonable amount of time pursuing a matter, a payment in recognition of time and trouble may be appropriate.

21.4 Corporate Resources Audit and Insurance Risk Management should be made aware if a claim for compensation is made regarding a financial payment in excess of re-imbursement, for injury, property damage, motor policy, defamation or slander, financial loss arising from advice or due to maladministration. This list is not exhaustive and due consideration should be given to consulting Insurance Services with any potential claim.



- 21.5 A recommendation or decision to award a compensation payment may be taken at any stage within the complaints process. Payments or settlements of any kind must be discussed with the Complaints Manager and agreed by the relevant Executive Director after consultation with Legal Services and Insurance Risk Management Services.

22. The Local Government and Social Care Ombudsman

- 22.1 The complainant has the right to take their complaint to the Local Government and Social Care Ombudsman (LGSCO) at any time. However, should the LGSCO feel that the local authority has not had adequate chance to investigate the complaint or has not carried out a robust investigation they may return the complaint to the authority.
- 22.2 The Local Government and Social Care Ombudsman investigates complaints of injustice arising from maladministration by local authorities and certain other bodies. There are three Ombudsmen in England and they each deal with complaints from different parts of the country.
- 22.3 The Ombudsman can investigate complaints about how the council has done something. They cannot question what a council has done simply because someone does not agree with it.
- 22.4 If the Local Government and Social Care Ombudsman has decided to investigate a complaint, they will write to the LGSCO Link Officer in Dorset Council to provide a considerable amount of information about the complaint and any subsequent action taken to address the matter. The request will come with very tight timescales attached in which a response must be received. If, you are requested by the Complaints Team to provide information for the Ombudsman please ensure that you deal with the request as quickly and in as much detail as possible.
- 22.5 The Ombudsman may make his decision based on the written information only or alternatively, he may decide to visit to investigate further. Following the investigation, the Ombudsman will write to the Chief Executive with his findings and conclusion. He will also publish his findings.

23. Freezing operational decisions

- 23.1 In some circumstances, it may be necessary for an operational decision to be “frozen” whilst a complaint is being investigated, for example when a complaint is being made about the reduction of service. In such cases, it may be argued that if the decision to reduce the service were to be implemented it would invalidate the whole purpose of the complaints procedure. Such cases will need to be looked at on an individual basis as and when they arise. The decision to postpone or stop an operational decision may only be made by the Complaints Team after discussion with the Executive Director.



24. Learning from complaints

- 24.1 Resolution of complaints is important and helpful to both the complainant and the authority. Information from complaints provides useful learning to enable the authority to improve services and to meet the needs of service users. The regulations include a requirement for a Complaints Manager to be nominated within the authority to have responsibility not only for the operation of an effective complaints handling process but also for ensuring that any appropriate action identified as a result of a complaint is taken forward. The Complaints Team will have a responsibility to monitor and record areas of organisational learning and inform the Responsible Person who will be the relevant Executive Director. Where such action is identified, there is an obligation on the authority to inform the complainant (in the response to the complaint) of that action and what is proposed to take it forward.
- 24.2 The authority will be required to produce an annual report which, amongst other things, will indicate in a general manner lessons learned by the organisation as a result of complaints it has received. The authority has a duty to publish this annual report and ensure that it is accessible to the public.
- 24.3 Complaints data will be used to support continuous learning within the authority through quarterly and annual reports.

25. Unreasonably persistent complainants

- 25.1 On rare occasions, despite best efforts to resolve a complaint, the person making it may become aggressive or unreasonable. It is important to know how to respond to circumstances such as these. The Council has, therefore, agreed a Managing Customer Behaviours Protocol which will be followed in such cases.

26. The Annual Report

- 26.1 The regulations require the Complaints Team to produce an annual report which should provide a mechanism by which the local authority can be kept informed about the operations of its complaints procedure. The report should be presented to the Committee and will be made available to the regulator (Care Quality Commission) and the general public.
- 26.2 The report will provide information about the following:
- The number of complaints made to the authority
 - The number of complaints which were considered well-founded
 - The number of complaints that were considered by the Local Government and Social Care Ombudsman



- The subject matter of complaints
- Any matters of general importance rising out of complaints or the way they were handled
- Any matters where action has been or will be taken to improve services as a result of the complaint

27. Compliments

27.1 It is important to set these perceptions alongside complaints to provide a more balanced and informed view of the strengths and weaknesses in services.

27.2 For the purposes of these procedures a compliment is a letter of appreciation, which has been sent directly to the staff concerned, to their manager(s), or to Dorset Council, usually addressed to the Director. Wherever they are received, it is important to record the compliment and the particular aspect of the service which the user appreciated.

27.3 All compliments to be forwarded to compliments@dorsetcouncil.gov.uk for recording and reporting purposes.

27.4 Service managers are expected to take responsibility for ensuring that staff who have been the subject of a compliment are properly acknowledged and congratulated.

27.5 The Complaints Team will maintain a central computerised record of all compliments and will include this information in the quarterly reports provided for senior managers of all complaints and compliments received. It is therefore essential for line managers to ensure that the Complaints Team is aware of the compliments received and the staff involved.

28. OTHER HELPFUL INFORMATION, WEBSITES ETC

REFERENCES

- (i) Listening, responding, Improving – A guide to Better Customer Care, Department of Health.2009
- (ii) National Health Service and Community Care Act 1990.
- (iii) Health and Social Care (Community Health and Standards) Act 2003.
- (iv) Care Standards Act 2000.



- (iv) The Local Authority Social Services and National Health Services Complaints (England) regulations 200.

WEBSITES

Department of Health:	www.dh.gov.uk
Local Government Ombudsman	www.lgo.org.uk
Care Quality Commission	www.cqc.org.uk

Any comments or queries in relation to this document should be forwarded to the Complaints Manager - Complaints, Legal & Democratic Services, Dorset Council, County Hall, Dorchester, Dorset, DT1 1XJ, Tel: (01305) 225076

If you would like further information, please contact:

Complaints Team

Dorset Council County Hall Dorchester DT1 1XJ

Tel: 01305 221061

Webpages www.dorsetcouncil.gov.uk

Policy Owner: Tony Bygrave, Complaints Manager

Date Last Reviewed: 27 April 2026

Approved by: Audit and Governance– April 2026

Review Date: April 2029

