# REHAB WITHOUT WALLS POLICY DOCUMENT

Policy Name: Complaints

Policy Number: RWW011

Date of Implementation: 31/07/2004

Date Last Reviewed: 01/12/2017

Registered Manager Signature:



Case Management | Neuropsychology Reports | Expert Reports

This policy and procedure has been created in accordance with Regulation 16 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014:

Regulation 16

- 1. Any complaint received must be investigated and necessary and proportionate action must be taken in response to any failure identified by the complaint or investigation.
- 2. The registered person must establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by service users and other persons in relation to the carrying on of the regulated activity.
- 3. The registered person must provide to the Commission, when requested to do so and by no later than 28 days beginning on the day after receipt of the request, a summary of:
  - a) complaints made under such complaints system,
  - b) responses made by the registered person to such complaints and any further correspondence with the complainants in relation to such complaints, and
  - c) any other relevant information in relation to such complaints as the Commission may request

A written copy of the complaints procedure shall be supplied to every service user, and upon request, to any person acting on behalf of a service user.

## **POLICY STATEMENT**

Rehab Without Walls invites and values feedback about the services provided. We use the information received to ensure the service we provide continues to meet needs and exceed expectations

Any complaint or feedback will be gratefully received and addressed in accordance with the procedure below. Complaints are treated without prejudice or partiality.

Complaints can be made verbally or in writing.

### **AIM**

We aim to provide anyone making a complaint with an impartial, structured and efficient procedure to address and rectify any shortfalls identified in the delivery of the services we provide.

It is in the interest of all parties that complaints are managed in such a way as to promote positive outcomes and resolutions.

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We will use our complaints procedure and complaint outcomes as a tool for monitoring, reviewing and improving any service should it fall below the expected standard.

This policy is for anyone who has an interest in ensuring the service we deliver meets and exceeds the expectations of those it affects. This includes service users, their advocates or representatives, their family or friends and members of the public.

### PROCEDURE FOR RECEIVING COMPLAINTS

- Formal complaints are to be made to the Complaints Officer, Melanie Bristow, Director of Practice Development.
- The Complaints Officer will ensure that the complainant has a copy of this procedure
- The Complaints Officer will record the complaint on the Complaints Record, and
- Establish if they require any assistance to formulate / organise / present their complaint and provide / arrange this as required.
- Complaints Officer will reassure the complainant.

### MANAGING A COMPLAINT

- A written acknowledgement of the complaint will be sent to the complainant within 3 working days.
- The complainant should be thanked for bringing the complaint to our attention and be given an opportunity to discuss the complaint. The Complaints Officer will explain that discussions will be recorded in written notes.
- If the issue can be resolved straight away to the satisfaction of the complainant this should be facilitated.
- If further investigation is needed the complainant must be advised that Complaints Officer will
  respond within 5 working days, and will outline the investigation action plan and review the
  complaint to date.
- The complainant will be reassured that their cooperation in the process is valued.
- The complainant will be given written notification of outcomes and actions resulting from the investigation of the complaint within 28 working days from the date of the original complaint being recorded.
- The complainant will be made aware that if they remain dissatisfied they may take their complaint directly to the Responsible Individual, Cathy Johnson, Director of Rehab Without Walls, and ensure they have the contact details of this person.
- The complainant will be made aware of the address of the Care Quality Commission:

Care Quality Commission: CQC National Correspondence

Gallowgate

Newcastle upon Tyne

NE1 4PA

Tel: 03000 61 61 61

Email: enquiries@cqc.org.uk

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