



## Statement of Purpose

**Legal entity:** UK Limited Company

**Responsible Individual:** Debra Hooper

**Manager of Service:** Sara Phillips

**Name of Service:** April Complete Care Solutions Ltd service (April)

**Address** 14 Hendre Road  
Pencoed  
Bridgend  
CF35 5NW  
Tel: 01656 863963  
Email: [info@aprilcare.co.uk](mailto:info@aprilcare.co.uk)  
[www.aprilcare.co.uk](http://www.aprilcare.co.uk)

### LOCATION OF OUR OFFICE AND GEOPGRAPHICAL AREA OF SERVICE PROVISION

Our office is situated in Pencoed and easily accessible via Junction 35 of the M4. Pencoed has frequent buses and a mainline railway station and park and ride facility giving excellent rail links.

April provides domiciliary support services to the following regional areas :

- Cardiff & the Vale regional Partnership board
- Cwm Taff Morgannwg regional Partnership board

### ABOUT OUR SERVICES

April supports adult individuals in the following:

- Domiciliary care services
- Domestic services and home help
- Short breaks/respite care
- Supporting Individuals with dementia
- Supporting Individuals with Physical Disabilities
- Supporting Individuals with Sensory impairment

- Illness (including end of life care)
- Supporting Adults with Learning Difficulties (excluding those assessed with specific challenging behaviour)
- Specialist Needs

Age range of people using the service 18yrs – 100 yrs.

Number of Care Hours delivered weekly 501-750

Our office is open Monday to Friday, 9am to 5pm throughout the year, except for Bank Holidays.

All calls are answered by an experienced member of the office team. We also keep a telephone log with all correspondence received. Employees, individuals and anyone else with whom we are in regular contact is asked how they would prefer us to make that contact. These preferences are recorded and updated as necessary.

With the exception of emergency situations, we never contact employees whilst they are working or at unsociable hours.

During office hours we use a text and email application which allows us to contact people quickly and in large numbers if needed.

Outside office hours we operate an on-call system via a mobile telephone, experienced staff members are able to assist with emergency enquires. Our Manager/Responsible Individual is also available to answer any queries that on call staff may not be able to help with. The Manager will also assist and attend a situation if necessary. Our Manager has access to the RI should additional support be required. We also keep an on call telephone log, and an persons on call file have full access to our rota software CAREPLANNER to ensure that they are able to access accurate and appropriate information.

We endeavour to use employees who live locally to individuals. There may be some rescheduling of staff/individuals to ensure that staff attend the individuals nearest to their home.

April have a contingency plan in place; this is updated on a weekly basis or sooner if required. It allows us to prioritise services delivered during severe weather conditions/pandemic. It also allows us to identify which staff are able to reach the individuals. We liaise with our individuals, families and social services to limit any disruption to the ongoing packages. This plan also includes COVID 19

During staff absenteeism and sickness, in the event of a member of staff going absent at short notice, the Care Co-ordinator or on call person ensures that cover for absent staff is found at the earliest opportunity. Only staff known to a particular Individual shall be sent in place of the absent worker. Contact will also be made with the Individual/Family to inform of any changes to schedules. We also take into account skills/ability. If we are unable to find a replacement, the care co-ordinator or person on-call will attend the individual; in times of extreme circumstances, it may be necessary to deliver essential care only and not attend for the whole call duration.

Our Organisation ensures staff receive statutory sick pay and are supported appropriately during this time. All our staff complete a return to work form prior to coming back to employment. We have a robust Absence Policy which helps us not only to support our staff but also to ensure that our individuals are attended to in a reliable, consistent manner.

The Company can also plan cover provision for staff absences, on the basis of historic patterns and trends identified in absence. April will analyse absence patterns and cover demand on an annual basis and make adjustments to the provision as required.

We adopt a person centred/outcome based approach and work with families, carers, advocates and other agencies to support people to achieve their goals, and to maintain their wellbeing. We always start with the person and build the service around their needs. This results in tailored, personal care designed to meet the needs of each individual. Inclusion and participation is essential so we involve people, their families or advocates in every aspect of their care.

Our Organisations philosophy is to reflect and promote values that focus upon the individual as being at the Centre of Care Service planning and Service delivery. To help achieve this, the Company has drawn upon the fundamental Core Values of Care to develop the following Service Values which will form the basis for considering the provision of an individual Care Service:

- Autonomy and independence of personal decision-making, including the assumption of risks as well as responsibilities associated with citizenship.
- Choice of occupational activities, lifestyle, and the best way to maintain independence, including the opportunity to select independently from a range of options.
- Respect for the intrinsic worth, dignity and individuality of the person and his / her racial and ethnic identity and cultural heritage.
- Participation and integration in society, and in the development of plans, policies and decisions affecting the individual's life.
- Knowledge about conditions and prospects, options and opportunities, and ways of improving the individual's life.
- Fulfilment of personal aspirations and abilities in all aspects of daily life, including the chance to develop new skills and knowledge.
- Privacy from unnecessary intrusion, and the preservation and safeguarding of confidentiality.
- Equality of opportunity and access to services irrespective of age, race or ethnic origin, creed, colour, religion, political affiliation, disability or impairments, marital status, parenthood, sexual gender or sexual orientation.

April will remain responsible for the overall management of the individuals care and to maintain openness, transparency and candour for that care, taking into account.

- Openness: enabling concerns to be raised and disclosed freely without fear and for questions to be answered.
- Transparency: allowing true information about performance and outcomes to be shared with the individual, staff and the public.
- Candour: ensuring the patients harmed by healthcare services (and those health tasks delegated) are informed of the fact and that appropriate remedy is offered, whether or not a complaint has been made or a question asked about it.

#### **Arrangements for assessing, planning and reviewing individuals's care**

Our Team enables individual's to have a greater awareness of the range of options available to them, so they can make the choice or decision that is uniquely right for them, helping them to feel more empowered.

At assessment of care, support must be based around a conversation between the individual, and other relevant parties, to understand the personal outcomes the individual wants to achieve and how they can be supported to achieve them.

Where a referral has been made, we arrange for a home/hospital visit to assess the individuals requirements. This visit will be carried out by our Manager or by a Care Co-ordinator. We are able to devise a person centred/outcome based Package of Care specific to the individual, consulting with family members/professionals identifying the individuals care needs and provisions.

Once the Initial assessment and risk assessments have been completed, A Service Delivery plan is compiled keeping in line with the service specification, signatories requested and an office and home file is produced. We will incorporate best practise such Asset Based and Co production approach into ways in which we plan and deliver the service.

When completing person centred care plans and risk assessments, individuals are encouraged to take an active role in decisions and outcomes that they would like to achieve, they are then regularly reviewed by the Manager and if applicable Social Worker and family to ensure all needs are being met. These reviews are carried out at least every 3 months or earlier if there are changes to condition/circumstances.

Derived from the Care support Plan, our staff have a clear understanding about individuals they work with. This includes their needs, their culture, their means of communication, their family and other professionals' involvement so we can promote and provide person centred care and support.

We carry out the relevant risk assessments pertaining to the individuals environment, wellbeing and Health Care requirements

We take a balanced approach to risk assessments but nonetheless is undertaken in a way that meets or exceeds the requirements of the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 and all other appropriate regulatory standards such as those required by the Care Inspectorate Wales.

All risk assessment activities undertaken are recorded and stored in accordance with the above.

When required, we incorporate risk assessments undertaken by professionals such as Occupational Therapists and Health professionals into our risk assessment and evaluate and review risk assessments. We ensure that risk assessments relating to Individuals are undertaken at least yearly and sooner should needs change or enablement principles be applied.

Our risk assessments include the following:-

Risk to self

Risk to others (including Staff and the wider community)

Risks from others (including Staff and the wider community)

Include control measures to eliminate, minimise or respond to identified risks

The manager or care co-ordinators ensure that those with dementia or more changing needs are risk assessed as frequently as appropriate, so as to ensure they are appropriately safeguarded. Staff attending to individuals have received dementia training, some have also completed 5 day dementia training event course. Their knowledge engaging in A Positive Approach to Care is then passed onto other members of staff.

We use the review findings to improve ways of applying the principles of co-production, so that continuous learning is taking place, and during reviews and evaluations, work with people who use services and carers, to think about ways of showing the impact that coproduction has, as well as the processes that are involved.

Our Organisation always ensures that constructive reviews are carried out. We would invite personnel relevant to the Individuals care package. We have designed a carbonated review document with 2 copies; one copy is for us to place on file, one for the Individual/family and one for the contracting authority. When completed everyone present is asked to sign.

From the information gathered at the review, we can establish if outcomes are being met, whether plans need to be amended, Our Manager will amend all care plans and risk assessments accordingly. The team will also be informed of changes and informed of any monitoring requirements that needs to take place.

In between planned reviews, we gather information through reading daily report records, feedback from staff, family and advocates and spot checks. This will show a day-by-day picture of an individual's care package. An experienced office member audits our daily report records on a daily basis and is able to pass concerns to our Manager to action. The Manager will then communicate with the Individual or with family members.

We carry out non-scheduled reviews if we feel there is a change in an individuals circumstances. We will liaise with family, advocates or professional bodies appropriately. Our Manager will reflect any changes in producing new care plans, or risk assessments.

### **Standard of care and support**

Our aim at April is to assist Individuals in acquiring the emotional, psychological, social and practical skills needed to enable them to enjoy the quality of life they aspire to.

We aim to promote the wellbeing and fulfilment of Individuals, in a trusting, honest manner.

Our Prevention Agenda helps Individuals to remain physically, mentally and emotionally healthy as they can possibly be.

We encourage our staff to work closely with family members, professional bodies such as GPs, District Nurses, and Occupational Therapist. We also encourage staff to access community facilities where required, to focus on early intervention and preventative services, so that individuals are able to continue living independently for a long as they are safe and able to do so.

We have implemented core principles in relation to the prevention Agenda using the following:-

- Monitoring and early detection
- Early warning
- Early reaction

- Information gathering
- Contingency planning
- Close Monitoring and effective communication
- Up to date reviewing methods
- Close cooperation between all individuals relating to the Individual where support is required.

Individuals are protected from abuse, neglect and self-harm, and are safeguarded from any form of abuse or exploitation including physical, financial, psychological, sexual abuse, neglect, discriminatory abuse or self-harm or inhuman or degrading treatment through deliberate intent, negligence or ignorance in accordance with our written policies and procedures. Our carers receive training on protection of vulnerable adults and prevention of abuse.

Co-production that we work to is: an asset-based approach to public services which enables Individuals/Family members and professionals to share power and work together in equal and reciprocal relationships.

Our Co-production is underpinned by a set of principles:

- Valuing all participants, and building on strengths
- Developing networks of support
- Doing what matters for the people involved
- Building relationships of trust, sharing power
- People can be change makers, and our organisation can enable this

Wellbeing is used to describe feeling comfortable in one's life.

Well-being refers to the well-being of a person who needs care and support, and carers who need support, and includes the following:

- physical and mental health, and emotional well-being
- protection from abuse and neglect
- education, training and recreation
- domestic, family and personal relationships
- being able to participate and contribute to society
- respecting and securing rights and entitlements
- achieving social and economic well-being
- having suitable living accommodation.

## **Language and Communication Needs for people using our services**

We have a comprehensive Communication Policy and our strategy is to always communicate in a clear, concise manner appropriate to the individual and ensures that there is full understanding through feedback and evaluation.

Our communications are offered in a variety of mediums suited to or requested by Individuals/family and we use all means open to us for this purpose. Whilst we offer internet based and written exchanges of information and communication we recognise that many of our clients find face-to-face, personal meetings much easier to understand; this can then be backed up with written documents to formalise and evidence exchanges.

We are committed to treating Welsh and English on the basis of equality, so far as we are reasonably able to do so. We offer free Welsh Language training to all employees.

We will ensure that we make constant progress towards achieving this aim, and our Welsh Language Policy sets out our current commitments in relation to using Welsh.

We currently have 3 members of staff able to speak Welsh fluently, so that we may offer a Welsh language service when requested.

We accept correspondence in Welsh or English and we will give positive consideration to bilingualism when sending and receiving correspondence, based on the nature and purpose of the correspondence. We always reply in Welsh on request and when we are replying to correspondence received in Welsh

We support and facilitate the use of Welsh and English language skills and support staff who want to improve their Welsh language skills.

### **LEADERSHIP & MANAGEMENT**

Our Organisation has in place a Responsible Individual, Debra Hooper who established the company in 1996. She has a diploma in Health Care Management, an Intermediate exam in Laws and was a Registered Nurse (adult) from 1989 until 2017.

We are currently without a Registered Manager. Our Manger, Sara Phillips, is working towards her QCF level 5 in Health and Social Care Management and holds a Diploma of higher education in management and leadership (QCF level 5). She has over 23 years' experience in senior healthcare management.

1 Care Co-ordinator's qualified at QCF level 5 in Health and Social Care Management

1 care Co-ordinator working towards her QCF level 3 in health and social care

We have a qualified finance manager PQACCA, BSC Hons

We have a total of 28 Health Care Assistants

Our Organisation has 8 full time staff and 20 part time staff with staffing hours of 540 hrs per week

20 members of staff have completed their QCF level 2

2 members of staff have completed QCF level 3

1 member of staff has completed QCF level 5

4 members of staff are enrolled and working towards QCF level 2

1 member of staff is enrolled and working towards QCF level 5

Where specialist care is required e.g. dementia, palliative care etc. staff have received specialist training and have the skills to provide this specialist care. When staff have completed specialist training they acquire a certificate and this is kept in their personal file along with all other certificates.

### **Staff levels**

As an innovative Organisation recognising the importance of continuity of care, we are able to deploy regular staff on a shift basis to set areas, 24 hours a day, 7 days a week with additional staff being deployed where care requirements are "peak" e.g., morning and late call times. Not exceeding the commissioned hours. We are able to also deploy staff from other geographical areas to help if needed in keeping in with key principles of the Social Services and Wellbeing (Wales) Act.

### **Arrangements for delegated tasks**

Aprils focus is to support integrated care for Individuals, particularly frail elderly people or those individuals with complex needs.

We ensure individuals have a voice and control over their care and support. This places a strong focus on maintaining well-being through individualised bespoke responses to a person's needs.

The decision to delegate specialist care tasks/decisions will be undertaken in coproduction with an individual/family members to best meet their needs and will be recorded as part of the integrated assessment, planning and review of the individual's needs.

Integrated assessment, planning and review promotes choice, control, independent living, autonomy and staying safe.

Our Manager will record the decision to delegate a specific task: i.e.

- An assessment of the individuals capacity to consent to specific tasks being delegated to support their health/wellbeing
- Who will best meet the needs of the individual?
- Consent
- Risk assessment

Our manager will take into account which tasks to delegate, depending on a number of factors:

- The requirements of the individual and their own choice
- The support workers skills, competence, aptitude and experience
- The nature of the task in the specific circumstances; or
- If there is a need for a change or introduction of assistive technology to help in meeting the need.



When delegating a support worker specified by the individual then a Choice, Control and Assessment will be in place and a Risk Enablement Tool used to highlight risks and to set up an agreed contingency plan.

### **Supervision arrangements**

April is committed to providing formal and regular staff supervision at least every 3 months. We believe that effective supervision provides the framework for high quality service provision, staff development, education and support.

In adhering to good practice, the following principles of supervision are key:

- ☐ All staff will have formal supervision
- ☐ The best interests of the individual remain paramount within supervision.
- ☐ Regular supervision is considered good practice of all staff.
- ☐ Supervision is a shared responsibility between the supervisor and the supervisee.
- ☐ Supervision is regular and uninterrupted.
- ☐ Supervision involves practice development, monitoring and support to underpin the three main objectives of supervision (support, education and improving care).
- ☐ Supervision promotes competent, evidence-based practice.
- ☐ Supervision promotes anti-discriminatory practices in line with the equal opportunities policy.
- ☐ Supervision is seen as complementary to personal development and appraisal and can contribute to identifying training and development needs of individuals.
- ☐ All staff attend 3 monthly supervised practice sessions on a 1:1 basis. 2 are office based and 2 are a supervised practice visit at an individual's home.

Supervision has three main objectives:

- ☐ Support
- ☐ Education
- ☐ Monitoring standards to improve care.

### **Staff Training/New Recruits**

Every effort possible is made to maintain staff retention and to prevent high rates of turnover.

Our terms and conditions for employees reflect and meet as a basic requirement all relevant legislation, Working Time Regulations and Real Living Wage

We have been extremely successful in receiving enquires. We offer competitive rates of pay, flexible work/life balance and a comprehensive Recognition and Reward Policy. We have an excellent reputation in staff retention and have employed a number of people by "word of mouth". We also employ via social media and have an active website, updated fortnightly.

All Care Workers are interviewed by our Manager. If the applicant is successful, our company requests at least two references, one of which will be the previous employer, prior to commencement of duties; References are then checked for their validity. All new staff members receive an enhanced DBS check (or an "update" service check) prior to commencement of their duties. We have a Safer Recruitment Policy insitu which staff are required to declare any criminal convictions, including spent convictions. The Manger will perform a risk assessment if convictions, spent or otherwise are declared.

Once these have been received the Manager then makes the decision to inform the applicant in writing that they have been successfully chosen. All selection interviews are undertaken at our premises in Pencoed in a room that is secure and private. The manager Identifies any training requirements required and the new employee is then booked on training.

Our Company has a Training and Development Policy

We deliver various programmes from Training Needs Analysis and Induction to detailed Skills Development Training for all its employees, including new employees We provide the following training which all staff will undergo:

- Induction Training AWIF
- Fire Prevention
- Food Hygiene
- Health & Safety
- Moving and Handling
- SOVA
- Emergency First Aid in the Workplace
- Infection Control
- Medication
- Equality & Diversity

We have a wide range of training and development opportunities available to staff and this is discussed with each individual staff member at their three monthly supervised practice sessions. Any member of staff who expresses an interest in attending a particular training course is given encouragement and assisted with securing a place on the course.

All staff will have completed the section regarding existing skills and current training on their application form.

We ensure staff have attended/received current training on relevant courses and that these skills are updated appropriately.

Staff are asked to complete a feedback questionnaire as to their preferred style of training.

We encourage staff may make an appointment to meet with the Manager to discuss personal career development.

**Specialist staff**

Within April's organisational structure we focus on training that is most suitable to meet the needs of our core client groups; specialist training is undertaken as required.

### **Facilities**

Our office has portable disabled access leading directly into reception area. We have a small kitchen area for making hot drinks/snacks. There is a disabled toilet with raised seat, handrails and emergency call cord. There are 3 private offices used for working, training, meetings and interviews one on the ground floor and 2 on the first floor. Staff are able to come to the office by appointment to do on-line training and other computer based activities. A member of the office team is always on hand to help those with little or even no IT skills.

### **General Data Protection Regulation**

April is fully committed to compliance with the requirements of the GDPR which came in to place on the 25.05.18. April will therefore follow procedures that aim to ensure that all employees, of the company who have access to any personal data held by or on behalf of the company are fully aware of and abide by their duties and responsibilities under the Act.

April regards the lawful and correct treatment of personal information as very important to its successful operations and to maintaining confidence between the company and those with whom it carries out business. April will ensure that it treats personal information lawfully and correctly.

To this end April fully endorses and adheres to the Principles of Data Protection as set out in the GDPR Act 2018

April will ensure that:

- There is someone with specific responsibility for data protection in the organisation;
- Everyone managing and handling personal information understands that they are contractually responsible for following good data protection practice;
- Everyone managing and handling personal information is appropriately trained to do so;
- Everyone managing and handling personal information is appropriately supervised;
- Anyone wanting to make enquiries about handling personal information, whether a member of staff or a member of the public, knows what to do;
- Queries about handling personal information are promptly and courteously dealt with;
- Methods of handling personal information are regularly assessed and evaluated;
- Performance with handling personal information is regularly assessed and evaluated;
- Data sharing is carried out under a written agreement, setting out the scope and limits of the sharing. Any disclosure of personal data will be in compliance with approved procedures.

All managers and staff within the company will take steps to ensure that personal data is kept secure at all times against unauthorised or unlawful loss or disclosure and in particular will ensure that:

- Paper files and other records or documents containing personal/sensitive data are kept in a secure environment;

- Personal data held on computers and computer systems is protected by the use of secure passwords, which where possible have forced changes periodically;
- Individual passwords should be such that they are not easily compromised.
- Ensure that all of staff who have access to personal data held or processed for or on behalf of the council, are aware of this policy and are fully trained in and are aware of their duties and responsibilities under the Act.
- Meet with people using the service;
- Provide staff training; and
- Meet with staff.

## **GOVERNANCE & QUALITY MONITORING ARRANGMENTS**

Regulation and Inspection of Social Care (Wales) Act 2016 requires the Responsible Individual to carry out statutory visits to the services at least once every three months.

The statutory guidance specifies that the RI monitors the performance of the service in relation to its statement of purpose and completes a quality of care review.

To enable completion of the quality of care review report the RI gathers information by:-

1. talking to, (with consent and in private) individuals and their representatives (if applicable)
2. meet with members of staff
3. Inspect the premises, and audit a selection of records, i.e. any complaints records.
4. The RI ensures systems are in place to provide evidence that visits have taken place and have been logged and documented.

We actively act on any areas of non-compliance, making sure that we remain compliant with all requirements and legislations, delivering a service above and beyond the minimum standards set within our area of expertise.

A morning handover is completed between our Manager and Care Co-ordinators in order to ensure effective and consistent delivery of care. This gives an opportunity to identify any areas of concern in the quality of services provided, then analyse the best way to resolve them. We hold monthly office team meetings in addition to quarterly care staff meetings.

Within our governance structure the key areas of our core business are covered by matrix overviews; these keep us up to date on the areas of staff training along with both client reviews, staff supervisions, observations and appraisals. The RI conducts an audit to ensure that the matrix are up to date. As we move towards a paperless service, we use CarePlanner to record and highlight items to update.

It is the responsibility of the Manager to carry out weekly audits to ensure compliance with Regulations and Legislations

We encourage a culture of “open door” policy so that both staff, Individuals and family members can access us to openly air views and make suggestions in order to make sure that our services remain at

the fore front of delivery. Since COVID, to protect our staff and individuals by minimising the potential for cross infection, we encourage appointments to be made in advance Our key aim is to remain person centred in our approach and supportive of all those who come into contact with our organisation that being both staff and Individuals.

As part of our commitment to Quality Assurance, on an annual basis, we ask our staff and Individuals to complete our quality of services survey. This helps identify areas that those accessing or working for our organisation feel they would like to see improved. We also at each review and staff supervision give an opportunity for persons to share their views on how the service is delivered and this gives us further information to identify if improvements are needed. In all cases we give feedback were appropriate.

We achieved IIP accreditation in 2015 and we have been assessed and approved to Quality Management System Standard BS EN ISO 9001 : 2015.

### **The circumstances in which we may cease to provide services to an individual.**

There are certain exceptional circumstances in which a service would be withdrawn. These are usually as the result of identified risk to the health and safety of individuals and /or care workers.

They include environmental factors where the home is unsafe for staff to work in, where certain infections are present or, where individual behaviour is such that it would be unsafe for staff to work. The manager/Care Co-ordinators carry out detailed risk assessments of each home to establish whether any concerns for staff safety are identified. In these circumstances a meeting would be arranged with all interested parties, issues discussed, actions agreed.

## **Complaints and Compliments**

We take complaints seriously and will respond in line with our Complaints and Compliments Policy which is shown in full below. During this time the Manager and or Care Co-ordinator will liaise with the individual making the complaint, this will include protection of the individual making the complaint (whistle blower). We record all compliments received and notify the persons concerned in line with GDPR regulations.

### **APRIL COMPLETE CARE SOLUTIONS LTD (The "Company")**

#### **Complaints & Compliments Policy**

April Complete Care Solutions Ltd

14 Hendre Road,

Pencoed, Bridgend

CF35 5NW

Telephone 01656 863963

Issued – 05/12/2023

## **1. INTRODUCTION**

Passionate about providing high quality services that make a real difference to the lives of our individuals, April actively welcomes customer feedback. After all, their views and comments enable us to learn from our performance and to take positive action to continually improve all of our services and maximise customer satisfaction.

We also recognise that there may be occasions when our services fall short of the client's aspirations and our high standards and that a client may need to complain about an aspect of the service.

To enable us to more effectively listen to views and feedback, we have introduced this clear, concise and easily accessible policy for dealing with enquiries, comments, complaints or compliments.

A truly people-focused organisation, we will provide training for all of our staff, so that they are able to effectively handle and communicate any enquiries, comments, complaints and compliments.

## **2. POLICY AIMS**

- All comments on service standards will be acknowledged, considered and where appropriate, acted upon with feedback always being provided to the person making the comment.

- All complaints will be dealt with within the timescales set out in this policy and to the satisfaction of both the customer and the company.
- Any matters regarding customer dissatisfaction will be put right as quickly and as simply as possible. We will also improve services to ensure that these issues do not arise again.
- To quickly implement any improvements to our policies and procedures arising from a comment or a complaint.

## **2.1 ENQUIRIES, COMMENTS, COMPLAINTS & COMPLIMENTS**

If you wish to comment on any of our services or have an enquiry, any of the following steps may be taken:

Contact our Manager, Sara Phillips

Call: 01656 863963

Email: sara@aprilcare.co.uk

Write to: Sara Phillips, April Complete Care Solutions Ltd

14 Hendre Road, Pencoed, Bridgend CF35 5NW

We welcome all comments and enquiries and will deal with them all seriously. In line with this policy, they will be acknowledged, directed to the appropriate area of service and where appropriate, a full response given.

**2.1** All compliments will be treated in the same way with the appropriate people being made aware of the appreciation expressed. Staff are also rewarded when a compliment is received about them.

**2.3** All enquiries, comments and compliments will be recorded and monitored with the information being fed back into policy and service reviews to ensure continuous service improvement.

**3** April accepts the rights of individuals to make complaints and to register concerns about the services received. It further accepts that they should find it easy to do so. It welcomes complaints and looks upon them as opportunities to learn, adapt, improve and provide better services.

This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by individuals and their relatives, carers and advocates are taken seriously.

The policy is not designed to apportion blame, to consider the possibility of negligence or to provide compensation. It is not part of the agency's disciplinary policy.

April believes that failure to listen to or acknowledge complaints leads to an aggravation of problems, individual dissatisfaction and possible litigation. April supports the idea that most complaints, if dealt with early, openly, and honestly, can be sorted at a local level between just the complainant and April.

April acts on the basis that, wherever possible, complaints are best dealt with on a local level between the complainant and their Registered Manager.

### **3.1 Aim of the Complaints Procedure.**

April aims to ensure that its complaints procedure is properly and effectively implemented and that individuals feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Specifically, it aims to ensure that:

- Individuals, carers and their representatives are aware of how to complain and that April provides easy to use opportunities for them to register their complaints
- A named person will be responsible for the administration of the Complaints procedure
- April will aim to acknowledge all written complaints within two working days.
- All complaints are investigated within 28 days of being made.
- All complaints are responded to in writing within 28 days of being made.
- Complaints are dealt with promptly, fairly, and sensitively, with due regard to the upset and worry that they can cause to both staff and individuals.

### **3.2 Responsibilities**

The named complaints manager with responsibility for following through complaints for April is:

Sara Phillips– Manager, April Complete Care Solutions, 14 Hendre Road, Pencoed, Bridgend, CF35 5NW. sara@aprilcare.co.uk

Following your complaint, if you feel your complaint has not been dealt with to a conclusion or you are unhappy with the way the complaint has been dealt with you may contact:

CIW (Care Inspectorate Wales), Rhydycar Business Park, Merthyr Tydfil CF48 1UZ.

Phone: 0300 790 0126. <https://careinspectorate.wales/>

In the event of the complaint involving alleged abuse or a suspicion that abuse has occurred, the organisation will refer the matter immediately to the Local Safeguarding Board manager. Usually the board will call a strategy meeting to decide on the actions to be taken next. This could entail an assessment of the allegation by a member of the Safeguarding Authority team.

## **4. Complaints Procedure**

### **4.1 Verbal complaints**

April accepts that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.

April staff, who receive a verbal complaint are expected to seek to solve the problem.

Staff are expected to remain polite, courteous, sympathetic, and professional to the complainant. They are taught that there is nothing to be gained by adopting a defensive or aggressive attitude.

At all times in responding to the complaint, staff are encouraged to remain calm and respectful.

Staff should not accept blame, make excuses or blame other staff.

If the complaint is being made on behalf of the individual by an advocate, it must first be verified that the person has permission to speak for the individual, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the individual



when they may not). If in doubt it should be assumed that the individual's explicit permission is needed prior to discussing the complaint with the advocate.

After talking the problem through, the Team Leader or member of the Senior Management Team dealing with the complaint will suggest a course of action to resolve the complaint. If this course of action is acceptable then the member of staff should clarify the agreement with the complainant and agree a way in which the results of the complaint will be communicated to the complainant (i.e. through another meeting or by letter).

If the suggested plan of action is not acceptable to the complainant, then the member of staff or manager will ask the complainant to put their complaint in writing to the Care Manager. The complainant should be given a copy of April complaints procedure if they do not already have one.

Details of all verbal and written complaints must be recorded in the Complaints file.

#### **4.2 Serious or written complaints**

##### **1. Preliminary steps:**

When April receives a written complaint it passes it to the Registered Manager who records the Complaint on the complaint form and aims to send an acknowledgment letter within two working days to the complainant

The manager also includes a leaflet detailing April's procedure for the complainant. (The complaints manager is the named person who deals with the complaint through the process)

if necessary, further details are obtained from the complainant; if the complaint is not made by the individual but on the individual's behalf, then consent of the individual, preferably in writing, must be obtained from the complainant

If the complaint raises potentially serious matters, advice could be sought from a legal advisor. If legal action is taken at this stage, any investigation by April under the complaints procedure immediately ceases.

If the complainant is not prepared to have the investigation conducted by the organisation, he or she should be advised to contact the local authority (if it provides the individual's funding)

Investigation of the complaint by April:

1. Immediately on receipt of the complaint, the complaints manager services start an investigation and within 28 days should be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned

2. If the issues are too complex to complete the investigation within 28 days, the complainant will be informed of any delays.

Meeting:

1. If a meeting is arranged, the complainant will be advised that they may if they wish bring a friend, relative or a representative such as an advocate

2. at the meeting a detailed explanation of the results of the investigation will be given and also an apology if it is deemed appropriate (apologising for what has happened need not be an admission of liability)

3. Such a meeting gives the agency management the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.

Follow-up action:

After the meeting, or if the complainant does not want a meeting, a written account of the investigation will be sent to the complainant. This includes details of how to approach the CIW if the complainant is not satisfied with the outcome.

The outcomes of the investigation and the meeting are recorded in the Complaint Book and any shortcomings in agency procedures will be identified and acted upon

The outcome of the complaint is documented.

April management formally reviews all complaints at least every six months as part of its quality monitoring and improvement procedures to identify the lessons learned.

## **5. RECORDING, MONITORING & REPORTING**

Information from complaints will be fed securely into policy and service reviews to ensure continuous service improvement. The number of complaints received and our performance in resolving complaints will be reported to all relevant bodies and published annually in our quality assurance report.

A complaints register will also be kept and will be updated at each stage of the procedure with information about the relevant issues, timescales and person dealing with the complaint.

## **6. VEXATIOUS COMPLAINTS**

Vexatious complaints have the potential to consume resources and cause stress for our staff whilst achieving no benefits for individuals. Complaints that are thought to be vexatious will be initially investigated to determine that this is the case. The Registered Manager will make this decision. Vexatious complaints will not be pursued after the aforementioned investigation.

The receipt and rejection of a vexatious complaint, (including the reason(s) for the rejection) will however be recorded and managed by the Registered Manager.

Legal advice will be sought where a vexatious complaint involves a member of staff.

## **7. MISCONDUCT OF EMPLOYEES**

Where a complaint alleges potential employee misconduct our disciplinary policy

may have to be involved. In these cases, the complainant will be interviewed by a Manager of April Complete Care Solutions Ltd and appropriate action will be taken. This will be managed by the Registered Manager.