

# Complaints, Concerns and Compliments Policy

**Reference Number:** QTY-R&A-POL-01

**Version:** 6.4

**Date of next strategic review:** July 2026

**Owned by:** Director of Resident Safety

**Version History** (For previous versions, contact the Policy Administrator)

Version	Date of Issue	Author	Change Summary
3.0	July 2017	Standards & Compliance Team	New Template
3.1	November 2017	Standards & Compliance Team	Document revised
3.2	October 2018	Risk & Assurance Coordinator	Addition of 'Your thoughts count' poster reference
4.0	April 2019	Standards & Compliance Team	Revised Policy
5	April 2020	Policy Administrator	Update to regulator reference
5.1	March 2021	Head of Quality and Regulation	Revised timeframe for response
6.0	April 2022	Quality Information Manager	Policy reviewed, no change.
6.1	May 2024	Policy Administrator	Review date revised due to ongoing review of policy and process. Recoded and ownership changed to Director of Safety
6.2	July 2024	Policy Administrator	Revised review date due to ongoing Policy and Procedure review project.
6.3	September 2024	Policy Administrator	Statement to include Ideal Homes added.
6.4	July 2025	Policy Administrator	Revised review date due to ongoing Policy and Procedure review project.

## Equality Impact Assessment

All Colleagues, contractors and third-party partners are required when following this procedure to ensure that they do not disadvantage any person or group on the grounds of race, religion or belief, age, sex, gender reassignment, disability, sexual orientation and/or caring responsibilities.

## 1. Policy Statement

At HC-One, we encourage people to raise complaints, concerns and compliments, collectively referred to as 'feedback'.

Complaints, concerns and compliments are an extremely valuable source of information to us and we welcome all feedback, as if it is a gift, thus allowing us opportunity to improve. We adopt a fair, sensitive, inclusive and accurate approach to the handling of feedback.

Any complaints or concerns that we receive will be investigated in an honest, open and transparent manner. We will put the person who has complained at the heart of our investigation. Once our investigation is complete, we will provide a response for the person who has complained, which will clearly explain what action we are taking in order to address the areas raised and we will always complete the response in a timely manner.

Internally, we will regularly review, analyse and report on complaint themes, which will allow us to learn and continually improve the quality of services that we provide; and we will share our learning across the organisation.

Customer-facing HC-One Colleagues will receive training which informs them of how to welcome and promote the receipt of feedback from an individual. The training will include how to help the individual have their feedback listened to and how to react in a positive manner when in receipt of feedback.

## 2. Scope of Policy and Definition

This Policy applies to all HC-One Colleagues, Contractors and to all HC-One Homes, Offices and other locations.

Please note that as Ideal Care Homes are part of the HC-One Group, any mention of 'HC-One' within this document should be considered as referring or applicable to Ideal Care Homes.

For the purpose of this Policy:

The word '*complaint*' is defined as an expression of dissatisfaction about our Service(s), which requires further investigation by HC-One in order for us to determine what has happened, how it happened, how we will resolve the issue(s) and how we can prevent a repeat of the issue(s).

The word '*concern*' is defined as a low impact issue that is of importance, irritation or frustration to the individual, which can be resolved quickly by taking action locally and without formal investigation. Where a concern has been raised more than once regarding the same issue and by the same person, it will then be categorised as a complaint.

The word '*compliment*' is defined as an expression of satisfaction received about our Homes, Services or Colleagues.

The word '*investigation*' is defined as a fair, thorough and proactive evaluation and consideration of all available facts and evidence pertaining to the complaint.

The word 'response' is defined as a verbal or written explanation provided to the person who has complained, which outlines how the complaint was investigated and how we have, or will address the issue(s) raised.

The phrase 'timely manner' is defined as:

- A complaint will be acknowledged within 48 hours from receipt.
- A response to a complaint will be provided as soon as possible and no longer than 21 calendar days from receipt.
- A response to a concern will be provided as soon as possible and no longer than 48 hours from receipt.

In the event that a response cannot be delivered within the above timescales, due to circumstances outside of HC-One's control, a holding letter and/or verbal update will be provided to the person who has complained, which will explain the reason for the delay. A response will follow as soon as possible thereafter.

### **3. Background and Rationale**

The existence and implementation of this Policy serves the following purposes:

- To adopt an ethos in which all feedback is viewed in a positive light and as a valuable source of information that we can learn from in order to improve.
- To ensure an open, consistent approach to complaint, concern and compliment management across HC-One.
- To inform people who have complained as to the approach HC-One takes towards complaints management.
- To ensure the sharing of complaints, concerns and compliments are promoted and welcomed.
- To ensure that complaints, concerns and compliments are appropriately recorded, acknowledged, investigated and responded to.
- To ensure that all Colleagues are aware of the requirements and obligations HC-One expects with regard to complaints management.
- To satisfy the requirements of our Care Regulators and Local Authorities.

### **4. Involvement of External Sources and handling of Repeat/Vexatious Complaints**

HC-One will work with external agencies in order to satisfy this Policy, as and when required.

Where a complaint relates to or spans over multiple service providers, such as a GP or hospital care, we will work collaboratively with the other providers in order to fully investigate the issues raised and provide one comprehensive response. We will agree at the start of the investigation who will lead this process.

- Complaining to Commissioners: People who have an issue of concern are entitled to make their complaint directly to the Commissioner of our services. Contact details for your Commissioner can be found within our Resident Guides. We will also provide this information upon request.

- Complaining to our Care Regulator: The English (Care Quality Commission) and Welsh (The Care and Social Services Inspectorate Wales) regulators do not investigate complaints. In these countries, any issues raised are communicated to us, thereafter we must investigate and respond to the regulator and person raising the issue (if known). On some occasions, the regulator chooses not to tell us but uses the information to trigger an inspection. In Scotland, the Care Inspectorate will investigate complaints that they receive. On occasion they ask us to complete the investigation.
- Repeat Complaints: Repeat complaints will be brought to the attention of the Operations Team, including the Managing Director, who will decide on the best way forward.
- Vexatious complaints: Where we believe that a person is making vexatious complaints, in that they persist unreasonably in making complaints without genuine desire to resolve issues, this will be escalated to the Operations Team, including the Managing Director, who will decide on the best way forward.
- Additional Guidance: When we respond to complaints, we include 'additional guidance' with our response and this outlines details of where people can seek further independent advice. The additional guidance also includes contact information for the Local Government and Social Care Ombudsman (LG&SCO) or Parliamentary Health Ombudsman (PHO). The LG&SCO or PHO are the final stage for complaints and a person raising an issue can approach the relevant Ombudsman if they remain dissatisfied with the response(s) provided by HC-One.

## 5. References

### Regulatory References (inc. all associated regulations and amendments)

- The Health and Social Care Act 2012
- The Health and Social Care Act 2008
- Care Quality Commission (Registration) Regulations 2009
- The Social Care and Social Work Improvement Scotland Regulations (Requirements for Care Services) 2011
- Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA)

### Best Practice Guidelines

- [www.cqc.org.uk](http://www.cqc.org.uk) [Adult social care: information for providers](#) (Online, accessed April 2022)
- [www.gov.scot](http://www.gov.scot) [Health and Social Care Standards: my support, my life](#) (Online, accessed August 2021)

Please access advice with regard to working safely in Care Homes during a period of sustained transmission of [COVID19 here](#).

### Internal Documentation

- [Complaint Investigation Report Template](#)
- [Complaint Response Style Guide](#)
- [Complaint Acknowledgement Letter Template](#)

- [Delay Letter Template](#)
- [Safeguarding Letter Template](#)
- [Meeting Letter Template](#)
- [Compliment Letter Template](#)
- [Response Letter Template](#)
- [Complainants Guidance](#)
- [Complaints Log](#)
- [Compliments Log](#)