Proxycare Personnel Ltd

Complaints (and Compliments) Policy

Regulatory Links

- **Health and Social Care Act 2008 (Regulated Activities) Regulations 2014**
- Regulation 9: Person-centred care – complaints processes must be accessible and responsive to individual needs and preferences
- Regulation 10: Dignity and respect – people must be treated with dignity when raising concerns; complaints must be handled sensitively and without discrimination
- Regulation 16: Receiving and acting on complaints – providers must have an effective and accessible complaints system, investigate complaints, and take necessary action
- Regulation 17: Good governance – systems must be in place to receive, record, investigate, respond to, and learn from complaints
- Regulation 20: Duty of candour – providers must be open and honest when things go wrong, explain what happened, apologise, and take action to prevent recurrence
- **CQC Quality Statements**
- Listening to and involving people: "We make it easy for people to share feedback and ideas, or raise complaints about their care, treatment or support. We involve them in decisions about their care and tell them what's changed as a result."
- Independence, choice and control: "We promote people's independence, so they know their rights and have choice and control over their own care, treatment and wellbeing."
- Safeguarding: "We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately."
- How staff, teams and services work together: "We have a shared vision, strategy and culture. We work collaboratively and in partnership with others, including people who use our services, to deliver care and support that is joined-up, flexible and supports choice and continuity."
- Learning culture: "We have a proactive and positive culture of safety based on openness and honesty, in which concerns about safety are listened to, safety events are investigated and reported thoroughly, and lessons are learned to continually identify and embed good practices."
- Freedom to speak up: "We foster a positive culture where people feel they can speak up and their voice will be heard."
- Governance, management and sustainability: "We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good

quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate."

- Learning, improvement and innovation: "We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research."
- **Other relevant legislation**
- Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
- Records Management Code of Practice 2023 (NHS England)
- UK General Data Protection Regulation (UK GDPR)
- Limitation Act 1980
- Care Act 2014
- Accessible Information Standard 2016

Scope

This policy and procedure are provided for the regulated activity of personal care.
This policy applies to:

- All staff, including agency workers and volunteers
- All people we support, their families, and representatives
- Visitors, professionals, and anyone who has contact with our service
- All complaints, concerns, suggestions, and compliments received

What this policy covers:

- Formal and informal complaints
- Verbal and written concerns
- Anonymous feedback
- Compliments and positive feedback
- Suggestions for improvement

The principles and core timescales in this policy apply across all services. Service-specific procedures are detailed in Appendix A.

What this policy is not:
This policy is not designed to apportion blame, consider negligence or provide compensation. It is not part of the organisation's disciplinary policy. However, where complaints identify potential misconduct, matters may be referred to the appropriate process.

Equality Statement

Our organisation is committed to equal rights and the promotion of choice, person centred care and independence. This policy demonstrates our commitment to creating a positive culture of respect for all individuals. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, sexual orientation, religion or belief, and marriage and civil partnership. It is also intended to reflect the Human Rights Act 1998 to promote positive practice and value the diversity of all individuals.

Policy Statement

We welcome all feedback about our services. Complaints help us learn and improve, whilst compliments tell us what we're doing well. Everyone has the right to raise concerns without fear of any negative consequences to themselves or the care they receive.
We believe complaints are valuable. When someone takes the time to tell us something isn't right, they're giving us a chance to put it right and stop it happening again. We will always listen, take complaints seriously, and respond honestly. If we've made a mistake, we'll say sorry and explain what we'll do differently.
We also want to hear when things go well. Compliments boost staff morale and help us understand what matters most to people. We share positive feedback with the team and use it to recognise good practice.
We believe that most complaints, if dealt with early, openly and honestly, can be resolved at a local level. Failure to listen to and manage complaints effectively can lead to a breach of Regulation 16 and undermine the trust people place in us.

Our Five Principles

We adopt the five principles from the National Complaints Managers' Group (England) Good Practice Guidance, endorsed by the Local Government and Social Care Ombudsman and ADASS:

- **Principle 1:** Ensure the complaints process is accessible
- **Principle 2:** Ensure the process is straightforward for people and their representatives
- **Principle 3:** Keep people informed throughout the complaints process
- **Principle 4:** Be resolution focused
- **Principle 5:** Enable organisational learning and service improvement

Policy Detail

What Counts as a Complaint

A complaint is any expression of dissatisfaction about our service that needs a response. This includes concerns about:

- The quality of care provided
- Staff attitude or behaviour
- Communication problems
- Delays or missed visits
- How we handle personal information
- Charging or financial matters
- The environment or facilities
- Food, activities, or daily routines
- How we've handled a previous concern

Some issues aren't complaints but need immediate action. Safeguarding concerns, for example, must be reported through our safeguarding procedures, not the complaints process.
We recognise that some people do not feel comfortable making a formal complaint. We will consider what actions we must take to resolve any negative feedback including comments, 'grumbles' or concerns, and ensure we learn from these.

Who Can Make a Complaint

Anyone can raise a concern or complaint, including:

- People we support
- Family members, friends, or carers
- Representatives or advocates
- Other professionals
- Visitors
- Members of the public

If someone complains on behalf of a person we support, we'll check that person's consent before sharing information with them. We'll always consider the Mental Capacity Act 2005 if there are questions about someone's ability to consent.

Making Complaints Accessible

We make it easy for people to complain by:

- Accepting complaints in any format (verbal, written, email, through an advocate)
- Providing information in accessible formats on request
- Offering easy-read complaints guides with pictures
- Never requiring complaints to be put in writing if that's difficult for someone
- Providing access to independent advocacy services
- Displaying information about how to complain in our services
- Ensuring staff can help people raise concerns if English is not their first language

We regularly review whether our complaints process is genuinely accessible to everyone we support, including those with dementia, learning disabilities, sensory impairments, or mental health needs.

How to Contact Us

To raise a concern, complaint, or compliment, you can contact us at:
Phone: 02080045210 Email: info@proxycarepersonnel.com Address: 103 Paramount House, 1 Delta Way Egham. TW20 8RX
You can also speak to any member of staff or the Registered Manager at any time.

Complaints About the Registered Manager

If you wish to make a complaint about the Registered Manager, you do not need to raise it with them first. You can contact 02080045210 directly, who will ensure your complaint is handled by someone independent of the service.
All complaints about the Registered Manager will be investigated by a person who is senior to, or independent of, the Registered Manager. The same principles, timescales, and standards set out in this policy apply. You will never be treated differently because you have raised a concern about a manager.
Where the nominated individual and registered manager are the same person, complaints about them will be handled by an independent person from outside the service. The organisation will arrange for a suitably qualified and experienced person who has had no prior involvement in the matter to investigate and respond. This ensures fairness and impartiality regardless of the management structure.

Proactive Feedback

We don't wait for complaints. We actively seek feedback through:

- Regular meetings with people we support (held monthly in each service)
- Family and carer forums
- Satisfaction surveys (at least annually, and following key events)
- Informal conversations during care delivery
- Feedback cards and suggestion boxes
- Digital feedback options where appropriate

We use 'You Said, We Did' boards and newsletters to show how feedback leads to real change.

Confidentiality

We treat all complaints confidentially. We only share information with people who need to know to investigate or respond. We keep complaint records securely and separately from care records, though we may note relevant outcomes in care records if appropriate.
Anonymous complaints are accepted and investigated where possible, though this may limit what action we can take or feedback we can give.

Records Retention

Complaint case files are retained for 10 years from the date the complaint is closed or last actioned, in line with the Records Management Code of Practice 2023 (NHS England).
This retention period:

- Allows for potential legal claims under the Limitation Act 1980
- Enables long-term trend analysis and quality monitoring
- Aligns with UK GDPR storage limitation principles

At the end of the 10-year period, records are reviewed before destruction. Retention may be extended where ongoing litigation exists, a public inquiry is underway, or serious incidents have a 20-year retention requirement.
A summary of all complaints is maintained indefinitely to enable trend analysis and CQC inspection.
Records are stored securely in line with our Confidentiality and Data Protection Policy.

No Negative Consequences

We will never treat anyone differently because they've complained. This applies to the person who complained, the person the complaint is about (if different), and anyone else involved.
If any staff member treats someone negatively because of a complaint, this will be treated as a disciplinary matter.

Duty of Candour

When a complaint relates to a notifiable safety incident, our Duty of Candour obligations apply. We will be open and honest, provide a full explanation, and offer an apology.

Handling Compliments

Positive feedback is just as important as complaints. When we receive a compliment, we:

- Thank the person who shared it
- Record it in our compliments log
- Share it with the staff member or team involved
- Use it to recognise good practice
- Include it in our quality monitoring

Compliments are audited to identify positive and best practice, and we develop action plans to share learnings across all teams.

Time Limits

We can normally only investigate complaints about events in the last 12 months. However, we'll consider complaints outside this timeframe if there are good reasons for the delay.

The Local Government and Social Care Ombudsman expects organisations to investigate complaints about events within 12 months of the person becoming aware of them.

Multi-Agency Complaints

Where a complaint is about more than one organisation, we will work with the other bodies to decide who should take the lead. We will keep the complainant updated about who is taking the lead role and provide a named person who is investigating their concerns.

Difficult or Persistent Complaints

In a small number of cases, people may pursue their complaints in a way that can impede investigation or place significant demands on the service.
Please see the Managing Expectations about Complaints Policy, which sets out how we will decide if engagement during a complaint becomes difficult to manage, and what we will do in those circumstances.

Staff Training and Competence

All staff receive guidance on complaints handling during induction and annually thereafter. This training covers:

- The complaints handling procedure and how to access it
- How to handle and record complaints
- Who they can refer a complaint to if they are not able to handle the matter
- The need to resolve complaints early and close to the point of service delivery
- How to handle minor complaints to minimise escalation
- Remaining calm, respectful and professional when receiving complaints

Staff who investigate complaints receive additional training in root cause analysis, interviewing techniques, and report writing.
Registered Managers ensure staff competence is monitored through supervision and annual appraisals.

Learning from Feedback

All complaints and compliments are reviewed monthly to identify:

- Patterns or trends
- Training needs
- Policy or procedure changes needed
- Good practice to share
- Themes that may indicate organisational or safeguarding concerns

We share learning with staff through team meetings, supervision, and training. We report on complaints and compliments to our governance meetings and include them in our quality reports.

The complaints log is monitored for any patterns that may indicate discriminatory practice, in line with our duties under the Equality Act 2010.

Procedures

Step 1: Receive the Complaint

Complaints can be made:

- In person to any staff member
- By phone to the service or head office
- By email
- In writing
- Through an advocate or representative

All staff must take complaints seriously, regardless of how they're raised. All complaints must be brought to the attention of the Registered Manager without delay.
If the complaint is about the Registered Manager, refer to the "Complaints About the Registered Manager" section above and direct the person to 02080045210.

Step 2: Acknowledge the Complaint

For verbal complaints:

- Listen carefully without interrupting
- Thank the person for telling us
- Check you understand the concern correctly
- Ask what outcome they are hoping for
- Explain what happens next
- Offer to put them in touch with a manager if they prefer
- Confirm in writing within 3 working days (if not resolved immediately)

For written complaints:

- Send acknowledgement within 3 working days
- Include the name of the person investigating
- Explain the process and likely timescale
- Provide contact details for questions
- Include a copy of our complaints procedure
- Provide information in a format suitable for the complainant

Staff conduct when receiving complaints:

- Remain polite, courteous and professional

- Stay calm and respectful at all times
- Avoid defensive or aggressive attitudes
- Don't accept blame, make excuses or blame other staff
- Explain that the concern will be dealt with openly and honestly

Step 3: Informal Resolution

Many concerns can be resolved quickly and informally. We aim to resolve informal concerns within 5 working days.
If the person is happy with this approach:

- Try to resolve the issue immediately if possible
- If you cannot solve the problem immediately, ask a manager to get involved
- Apologise if something has gone wrong
- Explain what action you'll take
- Check the person is satisfied with the outcome
- Record the concern and resolution in the complaints log
- Follow up to ensure the resolution worked

If informal resolution isn't possible or the person wants a formal response, provide them with a copy of the complaints procedure.

When informal resolution is not appropriate:

- Safeguarding concerns
- Serious incidents or harm caused
- Repeated issues that haven't been resolved informally
- Complainant specifically requests formal investigation
- Complaint involves potential misconduct
- Complaint is about senior management

Step 4: Formal Investigation (Stage 1)

The Registered Manager (or nominated person) leads the investigation. The complaint should not be investigated by someone with previous involvement in the issue.
Timescales:

- Straightforward complaints: 14 working days
- Complex complaints: 28 working days
- If we need longer, we'll explain why and agree a new timescale

Investigation process:
The investigator will:

- Review relevant records
- Speak to staff involved
- Speak to the complainant (if they wish)
- Gather any other evidence needed
- Consider whether similar complaints have been made previously
- Assess whether the complaint indicates systemic issues

Investigation considers:

- What happened?
- What should have happened?
- Is there a difference between the two?
- Is the organisation responsible?
- Does this meet duty of candour requirements?
- Is onward referral to Safeguarding, CQC or Police required?

The written response will:

- Be clear and easy to understand
- Avoid technical terms
- Address all issues raised
- Include an apology where things have gone wrong
- Explain what was found and whether the complaint was upheld, partially upheld, or not upheld
- Explain what action we're taking
- Indicate a named staff member available to clarify any aspect
- Explain how to escalate if not satisfied

If the complainant would prefer a meeting, they may bring a friend, relative or advocate.

Step 5: Senior Review (Stage 2)

If the complainant isn't satisfied with the Stage 1 response, they can request a review within 20 working days of receiving the response.
A senior manager (Regional Manager or Director) not involved in Stage 1 reviews the complaint and:

- Assesses whether the investigation was thorough and fair
- May carry out further investigation
- May uphold, partially uphold, or revise the findings
- Sends final response within 20 working days
- Explains options if still dissatisfied

Where the complaint cannot be resolved, an arbitration service may be used.

Step 6: Escalating to External Bodies

If someone remains dissatisfied after our internal process, they can contact:

Local Government and Social Care Ombudsman (for adult social care)
PO Box 4771, Coventry, CV4 0EH
Phone: 0300 061 0614
Website: www.lgo.org.uk

Parliamentary and Health Service Ombudsman (for NHS-funded care)
Millbank Tower, Millbank, London, SW1P 4QP
Phone: 0345 015 4033
Website: www.ombudsman.org.uk

The Care Quality Commission
Phone: 03000 616161
Website: www.cqc.org.uk/give-feedback-on-care
Email: enquiries@cqc.org.uk
The CQC does not investigate individual complaints but may share information with the LGSCO.

Local Authority
You can also contact the local authority about your concerns:
Local Authority Complaints Manager (Adults): wokinglocalityteam@surreycc.gov.uk ; spelthornelocalityteam@surreycc.gov.uk ; epsom.ewelllocalityteam@surreycc.gov.uk ; guildfordlocalityteam@surreycc.gov.uk ; surreyheathlocalityteam@surreycc.gov.uk ; runnymedelocalityteam@surreycc.gov.uk
Local Social Services Office: wokinglocalityteam@surreycc.gov.uk ; spelthornelocalityteam@surreycc.gov.uk ; epsom.ewelllocalityteam@surreycc.gov.uk ; guildfordlocalityteam@surreycc.gov.uk ; surreyheathlocalityteam@surreycc.gov.uk ; runnymedelocalityteam@surreycc.gov.u
Out of Hours Social Services: wokinglocalityteam@surreycc.gov.uk ; spelthornelocalityteam@surreycc.gov.uk ; epsom.ewelllocalityteam@surreycc.gov.uk ; guildfordlocalityteam@surreycc.gov.uk ; surreyheathlocalityteam@surreycc.gov.uk ; runnymedelocalityteam@surreycc.gov.u

Other relevant bodies:

- The local authority commissioning or funding the care
- The Integrated Care Board (for NHS-funded care)

What to Do if Someone Complains About You

If a complaint is made about you:

- Don't take it personally – complaints help us improve
- Cooperate fully with any investigation
- Give an honest account of what happened
- Don't discuss the complaint with the person who made it (unless asked to)
- Don't discuss it with colleagues not involved in the investigation
- Speak to your manager if you need support
- Remember that natural justice applies – you'll have chance to respond

Recording Complaints and Compliments

All complaints must be recorded in the complaints log, including:

- The person's name and contact details (or 'anonymous')
- Date received and how it was received
- The nature/summary of the complaint
- Staff member responsible for handling the complaint
- Action taken and outcome at each stage
- Date closed
- The underlying cause of the complaint
- Any remedial action taken
- Any learning identified

Compliments should be recorded with:

- Date received
- How it was received
- Summary of the compliment
- Staff/team involved
- How it was shared

Root Cause Analysis and Learning

We have clear systems to act on issues identified in complaints:

- Seeking to identify the root cause of complaints
- Taking action to reduce the risk of recurrence
- Systematically reviewing complaints to improve service delivery

Any actions identified from learning will:

- Detail the action required
- Identify the staff member responsible
- Have a target date for completion
- Be monitored until complete

- Share learning with staff

Lessons learned from complaints are used to develop action plans for continuous improvement and to update services, policies, procedures, and training.

Measuring Impact

We don't just act on complaints – we check that our actions make a difference. We:

- Track whether actions taken are effective
- Monitor for repeat issues
- Follow up with complainants (where appropriate)
- Report on sustained improvements
- Include 'complaints closed with no recurrence' as a quality indicator

Regular Review

The Registered Manager reviews complaint and compliment records monthly to:

- Check all complaints are being handled within timescales
- Identify any patterns or recurring issues
- Spot training or support needs
- Recognise positive practice
- Prepare reports for governance meetings

A full analysis happens quarterly, including:

- Number and type of complaints and compliments
- Response times
- Outcomes of investigations
- Actions taken and their effectiveness
- Comparison with previous periods
- Evidence of sustained improvement

References and Further Reading

Legislation and regulations

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
- Care Act 2014
- Mental Capacity Act 2005
- Equality Act 2010

- Data Protection Act 2018 / UK GDPR
- Limitation Act 1980
- Records Management Code of Practice 2023 (NHS England)
- Accessible Information Standard 2016

CQC guidance

- Regulation 16: Receiving and acting on complaints – CQC guidance
- Regulation 20: Duty of Candour – CQC guidance
- Quality statements guidance
- Complaints Matter (CQC, 2014)

Good practice guidance

- Good Practice Guidance for Handling Complaints Concerning Adults and Children Social Care Services (National Complaints Managers' Group, 2016)
- Caring about complaints: lessons from our independent care provider investigations (LGSCO, 2019)
- Acting on compliments, feedback and complaints about adult social care (Quality Matters)

Training resources

- LGSCO Effective Complaints Handling Training - https://www.lgo.org.uk/training-councils-and-care-providers/training-for-adult-social-care-provider
- Skills for Care: Handling Complaints Resources - https://www.skillsforcare.org.uk/Support-for-leaders-and-managers/Good-and-outstanding-care/Complaints-and-concerns.aspx
- NHS England: Records Management Code of Practice 2023 - https://transform.england.nhs.uk/information-governance/guidance/records-management-code/

Useful organisations

- Local Government and Social Care Ombudsman: www.lgo.org.uk
- Parliamentary and Health Service Ombudsman: www.ombudsman.org.uk
- Care Quality Commission: www.cqc.org.uk
- VoiceAbility (independent advocacy): www.voiceability.org
- POhWER (independent advocacy): www.pohwer.net

Related internal policies

- Managing Expectations about Complaints Policy
- Safeguarding Adults Policy
- Whistleblowing Policy
- Duty of Candour Policy
- Advocacy Policy
- Confidentiality and Data Protection Policy
- Disciplinary Policy
- CQC Notifications Procedure

Appendix A: Service-Specific Procedures

A1: Residential Care Homes

Common complaint themes:

- Quality of care (personal care, mobility support)
- Food and nutrition
- Activities and social engagement
- Environment and facilities
- Laundry (lost or damaged items)
- Communication with families
- Other residents' behaviour
- End of life care

Immediate actions:

- Manager on duty takes complaint seriously
- If about care quality, check person immediately to ensure wellbeing
- If about food, offer alternative immediately
- If about lost item, search commenced immediately
- Environmental issues rectified urgently

Accessibility considerations:

- Many people have dementia or communication difficulties
- Use easy-read materials, pictures, or one-to-one support
- Family members often complain on behalf – always check consent
- Regular residents' meetings provide proactive feedback opportunity
- Complaints box in reception and communal areas

Investigation specifics:

- Review care plans, daily notes, handover records
- Check CCTV if allegation about specific incident (with consent)
- Speak to care staff on duty at relevant times

- Review recent CQC or local authority monitoring visits

Preventative approaches:

- Welcome meetings with families on admission
- Regular reviews with families
- Newsletters to families
- Family forums
- Open door policy for concerns

A2: Domiciliary Care Services

Common complaint themes:

- Missed or late calls
- Short visits or staff leaving early
- Different carers (continuity)
- Rushed care or tasks not completed
- Communication problems
- Staff conduct in people's homes
- Medication administration

Immediate actions:

- If missed call reported, dispatcher checks immediately
- If call was missed, arrange immediate visit if care critical
- If carer late, inform person and provide estimated time
- If tasks not completed, arrange return visit same day if essential
- Safeguarding alert if allegation of theft, abuse, or neglect

Accessibility considerations:

- Care delivered in people's own homes – privacy paramount
- Information packs left in person's home
- Regular phone calls to check satisfaction
- Complaints can be made to any carer or to office

Investigation specifics:

- Review electronic call monitoring system
- Check care schedule and rotas
- Review carer's care notes in person's home
- Check GPS data if available (with data protection compliance)
- Speak to carer(s) involved

Preventative approaches:

- Call monitoring to identify issues early

- Regular spot checks by coordinators
- Phone calls after change of carer
- Annual reviews in person's home
- "How are we doing?" calls

A3: Supported Living Services

Common complaint themes:

- Support levels not meeting needs
- Staff not following support plans
- Privacy and autonomy issues
- Safety and security concerns
- Relationship with support workers
- Support with finances
- Social activities and community access

Immediate actions:

- Check person is safe and wellbeing maintained
- If safeguarding concern, follow safeguarding procedures immediately
- If about finances, secure person's money immediately pending investigation
- Offer independent advocacy support

Accessibility considerations:

- The individual may have learning disabilities
- Use easy-read, pictures, or symbols
- May need support from advocate to articulate complaint
- May communicate non-verbally – observe distress or changes
- Information in accessible formats in person's home

Investigation specifics:

- Review support plan and daily notes
- Check whether outcomes being achieved
- Speak to person using preferred communication method
- Consider whether independent advocate needed
- Visit person's home to understand living situation (with permission)

Separation of housing and support:

- Supported living is person's own tenancy – not a care home
- Housing issues are landlord's responsibility
- Support issues are our responsibility
- Person cannot be evicted because they complained about support

Preventative approaches:

- Regular key working sessions
- Annual reviews (person-centred planning)
- "What's working, what's not working" conversations

A4: Quick Reference Guide for Staff

"Someone's complaining – what do I do?"

✅ **DO:**

- Listen carefully and thank them
- Stay calm and professional
- Apologise if something's clearly wrong
- Check what outcome they want
- Record it immediately
- Tell your manager today
- Confirm in writing within 3 days (if formal)

❌ **DON'T:**

- Ignore it or hope it goes away
- Get defensive or make excuses
- Blame colleagues
- Promise things you can't deliver
- Investigate alone (unless minor issue)
- Discuss with other staff (unless involved)
- Wait to tell your manager

Emergency situations:

- Safeguarding concern → Safeguarding procedures NOW
- Person at immediate risk → Make safe, THEN log complaint
- Serious incident → Follow incident procedures AND log complaint
- Criminal behaviour → Inform manager immediately