

THE MANSE RESIDENTIAL CARE HOME

Complaints, Suggestions and Compliments Policy and Procedure

CQC Ready Policy | Residential Care Home Without Nursing

Provider	Harris Care Limited
Service	The Manse Residential Care Home
Address	15 Cargoll Road, St Newlyn East, Newquay, Cornwall TR8 5LB
Regulated activity	Accommodation for persons who require nursing or personal care
Service type	Care home service without nursing (CHS)
Service user band	Older people (Aged 65+)
Registered Manager	Kirstin Ann Tilley
Nominated Individual	Tariq Khan
Policy owner	Registered Manager
Policy review frequency	Annual or sooner following legislative, regulatory, contractual or operational change
Version	CQC Final
Date	July 2026

Policy Statement

The Manse is committed to listening carefully to Residents, families, representatives, advocates, staff, commissioners, visiting professionals and other stakeholders. Complaints, concerns, suggestions and compliments are treated as important information about the quality, safety and responsiveness of the service. They are used not only to put things right for individuals, but also to improve the service for everyone living at The Manse.

The Manse will make the complaints process open, accessible, fair, timely and person-centred. No Resident, family member, representative, advocate or staff member will be treated unfairly or disadvantaged because they raise a concern, make a complaint, give a suggestion or provide feedback in good faith.

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1. Purpose

The purpose of this policy is to set out the arrangements at The Manse for receiving, recording, investigating, responding to and learning from complaints, concerns, suggestions and compliments. The policy supports a culture where Residents and those important to them are listened to, treated with respect and supported to speak up without fear.

This policy ensures that The Manse has an effective system to meet the requirements of Regulation 16, Receiving and Acting on Complaints, and Regulation 20, Duty of Candour. It also supports the CQC quality statements around listening to and involving people, treating people as individuals, safeguarding, learning culture, governance and management.

- Provide a clear, fair and accessible complaints process.
- Ensure complaints are acknowledged, investigated and responded to within agreed timescales.
- Support Residents and representatives to raise concerns in their preferred communication format.
- Ensure safeguarding concerns, notifiable incidents and Duty of Candour matters are escalated appropriately.
- Use feedback to identify themes, learn lessons and improve care quality.
- Recognise compliments and suggestions as valuable sources of learning and good practice.

2. Scope

This policy applies to all complaints, concerns, suggestions, compliments and feedback relating to the service provided by The Manse. It applies whether feedback is received verbally, in writing, electronically, through an advocate or representative, through a professional, through a commissioner, or anonymously.

Group	How this policy applies
Roles affected	All staff, including management, care staff, ancillary staff, agency staff, volunteers and anyone working on behalf of The Manse.
People affected	All Residents living at The Manse, including Residents who may need support to communicate, understand or raise concerns.
Stakeholders affected	Families, representatives, advocates, commissioners, Cornwall Council, NHS/ICS partners, visiting professionals, contractors, visitors and CQC.

The policy also applies where a complaint overlaps with another process, such as safeguarding, Duty of Candour, staff grievance, disciplinary matters, whistleblowing, health and safety, medicines, infection prevention and control, or data protection. In these cases, the relevant linked procedure must be followed alongside this policy.

3. CQC Regulatory Alignment

The Manse will use this policy to demonstrate that it listens to people, responds to complaints and uses feedback to improve the service. Complaints handling must be open, person-centred and proportionate, with clear evidence of investigation, outcome, action and learning.

CQC area	How The Manse meets this through the policy
Regulation 16 - Receiving and acting on complaints	The Manse has a clear system for receiving, recording, investigating and responding to complaints, including accessible information and escalation routes.
Regulation 20 - Duty of Candour	Where a complaint relates to a notifiable safety incident or something has gone wrong, The Manse will act openly, apologise, explain what happened and take appropriate action.
Regulation 17 - Good governance	Complaints are logged, analysed, audited and used to identify trends, actions and service improvements.
Regulation 9 - Person-centred care	The process respects each Resident's communication needs, preferences, capacity, representative arrangements and desired outcomes.
Regulation 10 - Dignity and respect	People are treated with courtesy, compassion and respect throughout the process.

CQC area	How The Manse meets this through the policy
Regulation 13 - Safeguarding	Complaints involving harm, abuse, neglect or risk of harm are escalated under safeguarding procedures and notified where required.

4. Legal and Good Practice Framework

This policy is informed by the following legislation, regulation and guidance. Staff are not expected to memorise every document, but must understand the practical requirements that apply to their role.

- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- The Care Act 2014.
- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
- Human Rights Act 1998.
- Mental Capacity Act 2005 and Mental Capacity Act Code of Practice.
- Equality Act 2010.
- Data Protection Act 2018 and UK GDPR.
- Accessible Information Standard.
- CQC guidance on Regulation 16 and Regulation 20.
- Local Government and Social Care Ombudsman good practice guidance for adult social care complaints.
- Parliamentary and Health Service Ombudsman principles of good complaint handling.

5. Policy Principles

The Manse will manage complaints, concerns, suggestions and compliments in line with the following principles.

Principle	Meaning in practice
Accessible	People will be told how to complain in a way they can understand. Information will be available in accessible formats where required.
Prompt	Concerns will be acknowledged quickly and investigated without unnecessary delay.
Fair	All parties will be treated fairly, without bias or discrimination.
Open and honest	The Manse will be transparent about findings, apologise where things have gone wrong and explain what will be done.
Person-centred	The process will consider what the person wants to achieve, their communication needs and any support required.
Confidential	Information will be shared only where lawful, necessary and proportionate.
Learning-focused	Complaints and suggestions will be used to improve practice, systems and outcomes.
Safe	Any safeguarding, safety or Duty of Candour issue will be escalated immediately.

6. Definitions

Term	Definition
Complaint	An expression of dissatisfaction, disappointment or concern requiring a response. It may relate to an act, omission, decision, standard of care, communication, attitude, delay or any other aspect of the service.
Concern	A worry or issue that may not be described as a formal complaint but still requires action and recording. The Manse will not dismiss concerns because the person has not used the word complaint.
Suggestion	A comment or proposal about how the service could improve. Suggestions may be made by Residents, families, staff or others.
Compliment	Positive feedback, praise or thanks about the service, a staff member, care provided or an aspect of The Manse.
Representative	A person acting on behalf of a Resident, with consent or where this is in the Resident's

Term	Definition
	best interests and does not conflict with confidentiality or known wishes.
Vexatious complaint	A complaint pursued in a way that is unreasonable, repetitive, abusive, unfounded or intended primarily to harass, disrupt or place disproportionate burden on the service. The label applies to the complaint behaviour, not to the person.
Duty of Candour	The legal duty to be open and honest when a notifiable safety incident has occurred, including providing an apology, explanation and follow-up where required.

7. Roles and Responsibilities

7.1 Registered Manager

The Registered Manager has day-to-day responsibility for ensuring that complaints, concerns, suggestions and compliments are managed in line with this policy. This includes ensuring the complaints procedure is accessible, complaints are acknowledged and investigated, learning is recorded, and CQC or safeguarding notifications are made where required.

- Act as the main point of contact for complaints unless there is a conflict of interest.
- Ensure complaints are investigated by a competent and sufficiently senior person.
- Ensure all complaints are logged, tracked and responded to within timescales.
- Review complaints for safeguarding, Duty of Candour, CQC notification, commissioner notification or disciplinary implications.
- Ensure actions, lessons learned and changes to care plans are completed and evidenced.
- Report themes and learning through governance meetings and quality assurance systems.

7.2 Nominated Individual and Provider

The Nominated Individual and provider have oversight responsibility for ensuring The Manse operates a robust complaints system. They must ensure there is suitable governance, impartiality where required, and provider-level review where the complaint involves senior management or the Registered Manager.

7.3 All Staff

All staff must understand that receiving feedback is part of providing safe and responsive care. Staff must listen, remain calm, respond respectfully, record accurately and escalate promptly. Staff must never ignore, minimise, hide or delay reporting a complaint or concern.

- Listen without becoming defensive.
- Apologise that the person has felt the need to raise a concern, without making unsupported admissions.
- Take immediate action where a Resident is at risk or where the issue can be resolved straight away.
- Record the complaint or concern clearly and factually.
- Inform the senior person on duty or Registered Manager without delay.
- Maintain confidentiality and dignity throughout the process.
- Co-operate honestly with any investigation.

7.4 Complaints About the Registered Manager or Senior Staff

Where a complaint relates to the Registered Manager, the complainant may contact the Nominated Individual, Tariq Khan, or Harris Care Limited. Where impartiality could be affected, The Manse may appoint an external professional, such as an experienced health and social care consultant or another CQC registered provider, to oversee or conduct the investigation. This protects fairness and confidence in the process.

8. Receiving Feedback, Concerns and Complaints

The Manse welcomes feedback at any time. Feedback may be made by Residents, families, advocates, representatives, friends, staff, professionals, commissioners, visitors or others affected by the service. Complaints can be made in person, by telephone, by letter, by email, through a member of staff, through an advocate, during a meeting, or anonymously.

Route	Details
In person	Speak to the Registered Manager, Deputy Manager, senior staff or any staff member.
Telephone	The Manse telephone number: 01872 510844.
Email	kirstin@themansecarehome.co.uk.
Post	Registered Manager, The Manse, 15 Cargoll Road, St Newlyn East, Newquay, Cornwall TR8 5LB.
Alternative contact	Where the complaint concerns the Registered Manager, contact Tariq Khan at tariq@themansecarehome.co.uk.
Advocate or representative	The Manse will support Residents to access advocacy or representation where required.

Where a verbal complaint is made, The Manse will make a written record and provide a copy of the record to the complainant within 3 working days wherever practicable. Staff must check that the written record accurately reflects the concern raised.

9. Accessible Information, Advocacy and Support

The Manse recognises that some Residents and representatives may need support to understand the complaints process, communicate their concern or take part in an investigation. The complaints process must be accessible and must not place unnecessary barriers in front of people.

- Information about complaints will be available in plain language and can be adapted into large print, easy read, audio, translated information or other accessible formats where required.
- Residents with sensory impairment, dementia, learning disability, autism, mental health needs or communication difficulties will be offered reasonable adjustments and support.
- The Manse will consider the Accessible Information Standard and record communication needs in the Resident's care plan.
- Advocacy support will be offered where a Resident needs help to raise or progress a complaint.
- Where a Resident lacks capacity to make a specific decision about a complaint, the Mental Capacity Act 2005 and best-interest principles will be followed.
- Confidentiality and the Resident's known wishes must be respected when representatives are involved.

10. Complaints Procedure

Stage	Required action
Step 1 - Listen and respond immediately	The staff member receiving the concern must listen, remain respectful and try to resolve the issue immediately where this is safe, appropriate and within their role.
Step 2 - Apologise and explain the process	Staff should apologise that the person has had cause to raise the issue and explain that the concern will be recorded and escalated.
Step 3 - Record and escalate	The complaint must be recorded and reported to the senior person on duty or Registered Manager. If the complaint relates to that person, it must be escalated to the next appropriate senior person.
Step 4 - Acknowledge within 3 working days	All complaints, whether verbal or written, will be formally acknowledged within 3 working days where contact details are available.
Step 5 - Investigate	A suitable person will investigate the complaint, gather evidence, speak to relevant people, review records and identify findings.
Step 6 - Respond within 28 working days where possible	The Manse aims to provide a written response within 28 working days. If more time is needed, the complainant will be told the reason and given an updated timescale.
Step 7 - Outcome and learning	The response will explain whether the complaint is upheld, partially upheld, not

Stage	Required action
	upheld or outside scope, and will set out any action, apology, remedy or learning.
Step 8 - Closure or appeal	The complaint will be closed when the complainant is satisfied or when the internal process has concluded. If dissatisfied, the person will be offered an internal review and external escalation information.

10.1 Acknowledgement Letter

The acknowledgement will normally include who is investigating, what issues will be investigated, how the investigation will be handled, an invitation to meet or discuss the complaint where appropriate, the expected response timescale, and details of escalation options if the complainant remains dissatisfied.

10.2 Response Letter

The final response will be clear, respectful and written in a way the complainant can understand. It will include a summary of the complaint, the evidence considered, findings for each point, the conclusion, an apology where appropriate, actions taken or planned, learning identified, timescales for outstanding action, and the complainant's right to request an internal review or contact the relevant external body.

11. Investigation Standards

Complaint investigations must be proportionate to the seriousness and complexity of the issue. The purpose is to establish what happened, whether The Manse met expected standards, what impact there was, what should be done to put things right and what can be learned.

- The investigator must have suitable seniority, independence, knowledge and experience.
- The investigation must review relevant records, care plans, risk assessments, communication logs, rotas, incident records, medication records, daily notes, staff statements and any other relevant evidence.
- Residents and representatives should be involved in the investigation where appropriate and in line with consent and capacity.
- Staff involved must be treated fairly and given the opportunity to provide information.
- The investigator must consider whether the complaint links to safeguarding, Duty of Candour, CQC notifications, commissioner reporting, disciplinary action or training needs.
- The outcome must be evidence-based and recorded clearly.

12. Safeguarding, Duty of Candour and Notifications

12.1 Safeguarding

Where a complaint or concern indicates that a Resident has been harmed, may have been harmed, is at risk of harm, or may be experiencing abuse or neglect, The Manse will follow its Safeguarding Adults Policy and Procedure immediately. Advice will be sought from Cornwall Council Safeguarding Adults Team where required, and the CQC will be notified in line with statutory requirements.

12.2 Duty of Candour

Where a complaint relates to something that may meet Duty of Candour requirements, The Manse will follow its Duty of Candour procedure. This includes acting in an open and honest way, telling the relevant person what is known, providing a sincere apology, explaining further enquiries, sharing outcomes and keeping written records.

12.3 CQC and Commissioner Notifications

The Registered Manager must consider whether the matter requires notification to CQC, Cornwall Council, NHS commissioners, safeguarding, the police, the coroner or another external agency. Decisions must be recorded, including where a decision is made that notification is not required.

13. One Complaint, One Response

Where a complaint involves more than one organisation, The Manse will not pass the person from one service to another unnecessarily. With consent, The Manse will liaise with the other organisation or commissioner to support a joined-up investigation and, where appropriate, a single coordinated response. If consent is not given to share information, The Manse will signpost the person to the correct organisation and provide contact details where possible.

14. Appeals, Internal Review and External Escalation

14.1 Internal Review

If a complainant is dissatisfied with the outcome or the way the complaint was handled, they may request an internal review. The review should be conducted by someone who was not the original investigator and who has suitable seniority, such as the Nominated Individual or another appropriate person. The Manse will aim to provide the internal review response within 20 working days unless a different timescale is agreed.

14.2 External Escalation

If the person remains dissatisfied after The Manse has had the opportunity to respond, they may contact an external body. The Manse will support and respect their right to do so.

External body	When relevant / contact information
CQC	CQC does not usually investigate individual complaints for the complainant, but uses information to monitor care providers. Website: www.cqc.org.uk . Email: enquiries@cqc.org.uk . Telephone: 03000 616161.
Local Government and Social Care Ombudsman	For adult social care complaints including self-funded and local authority-funded care, once the provider has had opportunity to respond. Website: www.lgo.org.uk . Telephone: 0300 061 0614. Email: advice@lgo.org.uk .
Parliamentary and Health Service Ombudsman	For NHS-funded services or complaints about NHS bodies. Website: www.ombudsman.org.uk . Telephone: 0345 015 4033.
Cornwall Council Adult Social Care Feedback / Complaints	For local authority adult social care feedback and complaints. Email: ascfeedback@cornwall.gov.uk or use the council online feedback forms.
Healthwatch / Advocacy / ICAS	The Manse can signpost to independent support where a person needs help to make or progress a complaint.

15. Anonymous, Vexatious and Unreasonable Complaints

15.1 Anonymous Complaints

Anonymous complaints will be taken seriously, logged and investigated as far as reasonably possible. The limitations of investigating without contact details will be recorded. Any corrective action, safeguarding concern or learning must still be addressed.

15.2 Vexatious or Unreasonable Complaint Behaviour

The Manse will not label a person as vexatious. However, it may decide that a particular complaint, pattern of complaint or communication behaviour is unreasonable or vexatious where it is repetitive, abusive, unfounded, disproportionate, disruptive

or primarily intended to harass or pressure staff. The Manse will first consider whether reasonable adjustments are required under the Equality Act 2010, including where disability, mental health, neurodiversity, dementia, trauma or communication needs may affect how a person communicates.

Any proposal to treat a complaint as vexatious must be reviewed by the Registered Manager and, where appropriate, the Nominated Individual or external advisor. The decision and rationale must be recorded. The complainant must be told why the decision has been made and what communication arrangements will apply. New complaints from the same person must still be considered on their own merits.

16. Compliments and Suggestions

Compliments and suggestions are important evidence of what is working well and what could be improved. The Manse will record, review and share compliments and suggestions in a way that supports learning, morale and service development.

Feedback type	How it will be managed
Compliments	Logged, shared with staff, celebrated in meetings where appropriate and used to identify good practice. Consent or anonymisation will be used before public display.
Suggestions	Recorded, considered by management, responded to where possible and used to support improvement. Outcomes will be documented so people can see that their feedback was considered.
Informal comments	Where comments indicate dissatisfaction, staff must treat them as concerns and escalate them rather than waiting for a formal complaint.

17. Records, Confidentiality and Data Protection

The Manse will keep a clear record of all complaints, concerns, suggestions and compliments. Records must be accurate, factual, contemporaneous where possible, and stored securely.

- Each complaint received, including date, source, subject, Resident affected, summary and desired outcome.
- Acknowledgement date and response due date.
- Investigator and investigation actions.
- Evidence reviewed and people spoken to.
- Outcome: upheld, partially upheld, not upheld, outside scope or withdrawn.
- Actions, learning, apology, remedy and care plan updates.
- Safeguarding, Duty of Candour, CQC or commissioner notifications considered and made where required.
- Reasons for any delay beyond the expected response period.
- Date the outcome response was sent and whether the complaint was closed or appealed.

Where complaints are shared for learning, information must be anonymised unless there is a lawful reason to identify a person. Complaint records will be processed in line with UK GDPR, Data Protection Act 2018 and The Manse confidentiality and data protection policies.

18. Learning, Audit and Quality Assurance

Complaints handling is a core part of good governance. The Manse will not treat complaints as isolated events only; it will look for patterns, repeated issues, delays, communication problems, staffing themes, care planning issues, training gaps or cultural concerns.

- The complaints log will be reviewed regularly by the Registered Manager.
- Themes and trends will be reported through management meetings and quality assurance systems.

- Actions will be added to a quality improvement action plan where required.
- Learning will be shared with staff through meetings, supervision, training, handovers or memos as appropriate.
- The Manse will review whether complainants felt listened to and whether the process was accessible and fair.
- An annual complaints, suggestions and compliments report will be prepared where appropriate, summarising numbers, themes, outcomes, learning and improvement.

19. Training and Competency

Staff will receive training and guidance on this policy during induction and through ongoing supervision, meetings and refresher training. Staff must understand how to recognise complaints, how to respond, when to escalate, how to record, and how complaints connect to safeguarding and Duty of Candour.

Staff group	Expected knowledge
All staff	How to listen, record, report and escalate concerns or complaints.
Senior staff	How to support immediate resolution, recognise risks and ensure accurate records.
Managers	How to investigate, respond, identify learning, complete notifications and manage appeals.
New/agency staff	Where the complaints procedure is kept and who to contact if feedback is received.

20. Equality, Human Rights and Non-Retaliation

The Manse will manage complaints in a way that respects equality, diversity, dignity, privacy, family life and human rights. The complaints process must not discriminate directly or indirectly on the basis of age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation.

No person will be threatened, punished, ignored, treated less favourably or have their care reduced because they raise a complaint, concern or suggestion in good faith. Retaliation or victimisation by staff will be treated as a serious conduct matter.

21. Related Policies

- Safeguarding Adults Policy and Procedure.
- Duty of Candour Policy and Procedure.
- Raising Concerns, Freedom to Speak Up and Whistleblowing Policy and Procedure.
- Mental Capacity Act 2005 Policy and Procedure.
- Deprivation of Liberty Safeguards Policy and Procedure.
- Person-Centred Care and Support Planning Policy and Procedure.
- Equality, Diversity and Inclusion Policy and Procedure.
- Data Protection and Confidentiality Policy and Procedure.
- Good Governance Policy and Procedure.
- Quality Assurance and Auditing Policy and Procedure.
- Disciplinary and Grievance Policy and Procedure.
- Accessible Information / Communication and Sensory Needs Policy and Procedure.

22. References and Further Reading

- Care Quality Commission: Regulation 16, Receiving and Acting on Complaints.
- Care Quality Commission: Regulation 20, Duty of Candour.
- Local Government and Social Care Ombudsman: adult social care complaints good practice guidance.

- Parliamentary and Health Service Ombudsman: Principles of Good Complaint Handling.
- NHS England: Accessible Information Standard.
- NICE NG108: Decision-making and Mental Capacity.
- Cornwall Council adult safeguarding and adult social care feedback routes.

23. Key Facts

23.1 Key Facts for Professionals and Staff

- Every complaint is an opportunity to improve care and strengthen trust.
- Complaints must be acknowledged within 3 working days where possible.
- The Manse aims to complete complaint investigations within 28 working days, unless a different timescale is agreed.
- Concerns that indicate harm, abuse, neglect or risk of harm must be escalated under safeguarding procedures immediately.
- Complaints must not result in retaliation, poor treatment or reduced care.
- Learning from complaints must be recorded, shared and acted on.

23.2 Key Facts for Residents and Families

- You have the right to complain, raise a concern, make a suggestion or give a compliment.
- You can complain verbally, in writing, by email, through a staff member, or through an advocate or representative.
- The Manse will treat you with courtesy, respect and compassion.
- The Manse will not reduce or withdraw care because you complain in good faith.
- You can ask for information in a format you understand.
- You can contact external organisations if you remain unhappy after The Manse has responded.

24. Outstanding Practice

To evidence outstanding practice in this area, The Manse should aim to demonstrate the following:

- Residents and families know how to complain and feel safe to do so.
- Complaints, compliments and suggestions are analysed together to understand the Resident experience.
- The Manse publishes or shares an annual summary of complaints, compliments, themes and actions.
- Residents are involved in reviewing how the complaints process works.
- There is clear evidence that complaints have led to changes in practice, training, care planning or systems.
- Staff can confidently explain the complaints process and describe learning from recent feedback.
- The service uses independent review or external advice where impartiality or governance would benefit.

25. Forms and Appendices

The following forms support this policy. The Manse may hold these records electronically or in paper format. Where e-care or other electronic systems are used, duplication of paperwork should be avoided provided the same evidence is recorded clearly and can be produced for audit, commissioner or CQC review.

- Appendix 1 - Complaints Procedure for Residents, Families and Representatives.
- Appendix 2 - Complaint / Concern Record and Investigation Log.
- Appendix 3 - Complaint Investigation Plan and Evidence Checklist.
- Appendix 4 - Complaint Response Letter Template.
- Appendix 5 - Internal Review / Appeal Record.

- Appendix 6 - Compliments and Suggestions Record.
- Appendix 7 - Complaints Themes, Learning and Action Plan.
- Appendix 8 - Annual Complaints, Suggestions and Compliments Report Template.
- Appendix 9 - Policy Review and Staff Declaration.

Appendix 1 - Complaints Procedure for Residents, Families and Representatives

We always aim to provide a high standard of care. Your views are important to us. If you are unhappy with any part of the service, or if you have a suggestion or compliment, please tell us. We will listen and respond fairly.

How to Make a Complaint or Suggestion

- Speak to the Registered Manager, Deputy Manager or any member of staff.
- Telephone The Manse on 01872 510844.
- Email kirstin@themansecarehome.co.uk.
- Write to: Registered Manager, The Manse, 15 Cargoll Road, St Newlyn East, Newquay, Cornwall TR8 5LB.
- Ask an advocate, family member, friend or representative to help you.
- If your complaint is about the Registered Manager, you may contact Tariq Khan at tariq@themansecarehome.co.uk.

What Happens Next

26. We will listen and try to resolve the matter quickly where possible.
27. We will record your complaint or concern.
28. We will acknowledge your complaint within 3 working days where possible.
29. We will investigate fairly and may ask to meet with you to understand what happened and what outcome you want.
30. We aim to provide a written response within 28 working days. If we need longer, we will explain why.
31. Our response will explain what we found, whether the complaint is upheld, any apology, and what action we will take.
32. If you are unhappy with the response, you can ask us to review how the complaint was handled.
33. If you remain unhappy, you can contact the Local Government and Social Care Ombudsman or other relevant external body.

Safeguarding

If your complaint suggests abuse, neglect, harm or risk of harm, we will contact the Local Authority Safeguarding Adults Team and follow safeguarding procedures.

Your Rights

- You will not be treated unfairly because you complain.
- You can ask for help to make a complaint.
- You can ask for information in a format you understand.
- You can complain anonymously, although this may limit how much feedback we can give you.

Appendix 2 - Complaint / Concern Record and Investigation Log

Complaint reference _____

Date received _____

Received by _____

Resident affected _____

Complainant name _____

Relationship to Resident _____

Preferred contact details _____

Preferred communication format _____

Consent / authority confirmed _____

Summary of complaint or concern _____

Outcome wanted by complainant _____

Immediate action taken _____

Safeguarding concern considered? Yes / No / Details _____

Duty of Candour considered? Yes / No / Details _____

CQC / commissioner notification considered? Yes / No / Details _____

Acknowledgement sent date _____

Investigator appointed _____

Target response date _____

Actual response date _____

Outcome: Upheld / Partially upheld / Not upheld / Outside scope / Withdrawn _____

Actions / learning required _____

Complaint closed date _____

Manager signature _____

Appendix 3 - Complaint Investigation Plan and Evidence Checklist

Complaint reference _____

Investigator _____

Date investigation commenced _____

Main issues to investigate _____

Evidence / action	Required?	Completed?	Notes
Speak with complainant / Resident			
Check Resident care plan and risk assessments			
Review daily notes / communication records			
Review incident / accident records			
Review MAR / medicines records if relevant			
Review rota / staffing records if relevant			
Speak with staff involved			
Speak with witnesses or professionals			
Review CCTV / call bell / electronic records where relevant and lawful			
Consider safeguarding referral			
Consider Duty of Candour			
Consider CQC / commissioner notification			
Identify learning / actions			
Draft response for review			

Investigation findings _____

Conclusion for each issue _____

Recommended action / remedy _____

Investigator signature _____

Date _____

Appendix 4 - Complaint Response Letter Template

[Date]

[Name and address / email]

Dear [Name],

Re: Complaint received on [date]

Thank you for raising your concerns with The Manse. I am sorry that you felt the need to complain. We take all complaints seriously and use them to put things right and improve the service.

Your complaint was understood to be about:

- [Issue 1]
- [Issue 2]
- [Issue 3]

How we investigated

[Set out records reviewed, people spoken to, meetings held, relevant policies reviewed and any professional advice considered.]

Our findings

[Set out findings clearly for each issue. State whether each issue is upheld, partially upheld, not upheld or outside scope.]

Outcome and actions

[Set out apology where appropriate, actions taken, actions planned, timescales, responsible person and any learning identified.]

What happens if you remain unhappy

If you remain dissatisfied with this response, you may ask us to complete an internal review of how the complaint was handled. If you remain unhappy after our internal process, you may contact the Local Government and Social Care Ombudsman or another relevant external body. We can provide contact details and support you to access advocacy if required.

Yours sincerely,

[Name]

[Role]

The Manse

Appendix 5 - Internal Review / Appeal Record

Complaint reference _____

Date appeal / review requested _____

Requested by _____

Reason for appeal / review _____

Original investigator _____

Review completed by _____

Is reviewer independent from original investigation? Yes / No _____

Review evidence considered _____

Was the original investigation fair and proportionate? _____

Was the original outcome reasonable based on evidence? _____

Was the complainant kept informed? _____

Were timescales met or delays explained? _____

Review outcome _____

Further actions required _____

Date response sent _____

External escalation details provided? Yes / No _____

Reviewer signature _____

Appendix 6 - Compliments and Suggestions Record

Date	Type	Received from	Details	Action / shared with	Logged by
	Compliment / Suggestion				
	Compliment / Suggestion				
	Compliment / Suggestion				
	Compliment / Suggestion				
	Compliment / Suggestion				
	Compliment / Suggestion				

Monthly review summary _____

Good practice to celebrate _____

Suggestions to consider _____

Manager signature _____

Appendix 7 - Complaints Themes, Learning and Action Plan

Theme / issue	Evidence source	Action required	Responsible person	Due date	Completed / outcome

Themes identified this period _____

Learning shared with staff by / date _____

Learning shared with Residents / relatives where appropriate _____

Actions reviewed by _____

Date _____

Appendix 8 - Annual Complaints, Suggestions and Compliments Report Template

Reporting period _____

Completed by _____

Date completed _____

Area	Number / summary
Number of complaints received	
Number upheld	
Number partially upheld	
Number not upheld	
Number withdrawn / outside scope	
Number of anonymous complaints	
Number of internal reviews / appeals	
Number referred to external bodies	
Number of compliments received	
Number of suggestions received	

Main complaint themes _____

Main compliments / areas of good practice _____

Main suggestions and response _____

Actions taken to improve the service _____

Outstanding actions to carry forward _____

Provider / management review comments _____

Signed _____

Appendix 9 - Policy Review and Staff Declaration

Policy reviewed by _____

Role _____

Date _____

Next review date _____

Changes required / made _____

Staff name	Role	Signature	Date