

Quality Care Manual, Part 2 <b>CARE</b>	Page 1 of 5	Issue 1 – 02 / 2026	© Magnolia PLH Ltd 2026 All rights reserved
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<b>Care-PR-05</b>	<b>CONCERNS AND COMPLAINTS</b>
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## 1.0 POLICY

- 1.1 It is The Company's policy to ensure that where any concern or complaint is raised it is addressed promptly and in an impartial and professional manner.
- 1.2 Concerns and complaints are welcomed as another method of communication.
- 1.3 The Company's approach is always that something should be learned from each concern or complaint. Where there are lessons to be learned as a result of a complaint, or if an issue comes to light that has not been the result of a complaint, The company is duty bound to investigate and learn lessons to avoid further occurrences. It is also bound by the principles set out in the Duty of Candor requirements, set out by the Care Quality Commission. These principles are, in summary form:
- That affected parties are informed about an incident as soon as possible;
  - To provide reasonable support to any affected parties or their families;
  - To provide a truthful account of the facts known regarding the incident in question;
  - To provide a summary of further enquiries, should they be necessary;
  - To issue an apology to the affected parties, should one be warranted.
- 1.4 This policy is designed to comply with:
- Regulation 16: Receiving and acting on complaints
  - Regulation 20: Duty of Candour
  - The Accessible Information Standard
  - The Equality Act 2010
  - UK GDPR and the Data Protection Act 2018
- 1.5 All complaints will be handled in a confidential manner, and personal data will be processed in accordance with data protection legislation.

## 2.0 RESPONSIBILITIES

- 2.1 **Board of Directors** has ultimate responsibility for the satisfactory conclusion of a formal complaint made against The Company.
- 2.3 **Operations Director** has the responsibility to provide any necessary assistance to the Care Home Manager to enable a formal complaint to be resolved as quickly and effectively as possible.
- 2.4 **Care Home Manager** has responsibility for the implementation of the formal complaints procedure as applicable to the Care Home.
- 2.5 **Person in Charge** is responsible, in the absence of the Care Home Manager, for the operation of this procedure.

## 3.0 PROCEDURE

### 3.1 Resident Comments and Suggestions

- 3.1.1 The Care Home Manager should keep a record of any comments, suggestions or observations made by Residents, Relatives or others involved in the care of residents. Brief details of the issue should be noted in a hard-backed notebook along with names of those concerned and the date on which the comment was made.

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3.1.2 The Care Home Manager should address each of the issues raised and take action as appropriate. Details of the action taken should be noted and those concerned should be informed regarding the outcome.

3.1.3 The Care Home Manager will review the record comments periodically to determine if there is cause for concern or opportunities for improvement in the types of comments or suggestions being made. This might be, for example, where the same type of comment appears repeatedly, or where a series of comments associated with a particular individual has been noted. In this way minor matters can be addressed before they become significant issues.

### 3.2 Resident Complaints

3.2.1 Staff Members will ensure that residents are aware of their right to register a complaint at any time and will provide impartial assistance for the Resident to do so where this is necessary.

3.2.2 Every Resident will be advised regarding how to make a formal complaint. A copy of the procedure, which is included in the Statement of Purpose for the Care Home, must be issued to each Resident.

3.2.3 Residents will also be informed of their right to access the complaints procedures of the NHS or Local Authority if they are funding their care package.

3.2.4 Residents will be encouraged to indicate where it is considered that the level of care is satisfactory or alternatively, to indicate where there is a perceived drop in the standard of Care.

3.2.5 Complaints and comments from residents or their representatives will be taken seriously and treated with respect and in confidence whether they are made verbally or in writing. Complaints will be dealt with immediately and wherever possible, informally, to resolve the matter to the satisfaction of both the Resident and the Care Home.

3.2.6 Where a Resident or their representative makes a formal complaint, either verbally or in writing, the recipient of the complaint collects sufficient information to enable the matter to be investigated further. The recipient immediately notifies the appropriate Supervisor, Person in Charge, or Care Home Manager.

3.2.7 Complaints can be made verbally, in writing, by email or by telephone.

3.2.8 In the first instance, complaints should be directed to the Care Home Manager.

3.2.9 If the complaint relates to the Care Home Manager, complaints should be directed to:

- **Quality Director:** Sandra Hustwick
- **Telephone:** 01482 875504
- **Email:** sandrahustwick@parklanehealthcare.co.uk

3.2.10 Complaints may also be made to external bodies:

- **Care Quality Commission (CQC):** [www.cqc.org.uk](http://www.cqc.org.uk) / 03000 616161
- **Local Authority Safeguarding Team**
- **Local Government and Social Care Ombudsman:** [www.lgo.org.uk](http://www.lgo.org.uk) / 0300 061 0614

### 3.3 Supporting People to Make a Complaint

3.3.1 The service will provide appropriate support to enable people to raise complaints, in line with the

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Accessible Information Standard and Equality Act 2010. This includes:

- Providing information in alternative formats (e.g. large print, easy read)
- Access to interpreters or translation services where required
- Support from staff, relatives, advocates or representatives
- Allowing complaints to be made by a representative on behalf of the resident

3.3.2 All complaints will be handled in a way that ensures people are not disadvantaged due to disability, communication needs, or protected characteristics.

### **3.4 Resident Complaints Register**

3.4.1 A record of all formal complaints made by residents or their representatives will be maintained in the Resident Complaint Register section of the home's electronic compliance log document. Bearing in mind the need to maintain confidentiality, the Register is used to provide only an overview of information regarding complaints.

3.4.2 When the complaint has been resolved; the Care Home Manager records brief details of the resolution in the Complaints Register, along with the date of resolution.

3.4.3 The current Resident Complaints Register will be kept readily available for inspection as required on our cloud-based system. All completed Registers and the associated records will be maintained for a period of at least three years.

3.1.1 The Care Home Manager will review the Register on a weekly basis.

3.1.2 Minor complaints, or 'niggles' communicated verbally are also recorded in the Complaint Register.

### **3.5 Resident Complaints File**

3.5.1 A Resident Complaints File is maintained which contains any relevant communications and investigation documentation relating to each complaint.

### **3.6 Complaints Process (Overview)**

3.6.1 The service follows a structured process for managing complaints:

- Receipt of Complaint – Complaint received verbally or in writing and recorded.
- Acknowledgement – Complaint acknowledged within 3 working days.
- Investigation – Complaint investigated by the Care Home Manager or appropriate senior person.
- Updates – The complainant is kept informed of progress throughout the investigation.
- Outcome – Written response provided outlining findings and actions taken.
- Appeal – If dissatisfied, the complainant may escalate the complaint.
- External Escalation – If still unresolved, the complainant may contact external bodies.

### **3.7 Complaint Response Timeframes**

3.7.1 In the event that it is not possible to resolve the complaint within a period of 24 hours, the recipient ensures that a written acknowledgement is provided within three days.

3.7.2 The acknowledgement is sent to the Complainant confirming that the complaint has been received and indicating the likely time scale for the complaint to be resolved.

3.7.3 All formal complaints must be resolved within a period of 28 days of receipt complaint.

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### **3.8 Keeping the Complainant Informed**

- 3.8.1 The complainant will be kept informed of the progress of their complaint throughout the investigation. Updates will be provided at appropriate intervals, particularly where investigations are ongoing or delayed.

### **3.9 Resident Complaints Investigation**

- 3.9.1 The Directors must be notified of all formal complaints. The Care Home Manager will notify the Registration & Inspection Authority of any allegations or complaints involving police investigations or any allegations of Resident abuse. Local Safeguarding of Vulnerable Adults (SOVA / PVG) policy will be followed.
- 3.9.2 The Care Home Manager initiates a full investigation into the complaint in order to resolve the perceived problem. For more serious complaints, the investigation is undertaken by a Director. The investigation is carried out and, where considered appropriate and necessary the Resident, staff and any other party concerned are involved in the inquiry.
- 3.9.3 The findings of the investigation and any action to be taken are recorded. The Complainant is notified in writing of the conclusions arrived at by the Care Home Manager / Director.
- 3.9.4 In the event that the Resident or their representative makes a complaint directly to Head Office, the recipient will acknowledge the complaint and pass the details to the appropriate Operations Directors for investigation.
- 3.9.5 Should a complaint against The Company be made directly to the Registration & Inspection Authority, on notification of the complaint, the matter will be thoroughly investigated and the outcome reported as required. The Board of Directors must always be notified immediately if the Care Home is advised of such a complaint.

### **3.10 Resident Complaints Appeals**

- 3.10.1 A Complainant who is not satisfied with the outcome of the investigation into the complaint may raise the matter directly with the Operations Director, in writing or verbally.
- 3.10.2 Where the Operations Director cannot reach a conclusion that satisfies the Complainant, details of the complaint may be provided to the Board of Directors.
- 3.10.3 The Board of Directors will conduct further investigations and/or examinations of the evidence, with the involvement of Department Heads where necessary, and with the appropriate Operations Director and Care Home Manager.
- 3.10.4 In the event that the Complainant continues to hold the view that The Company has not satisfactorily resolved the problem, the option is for the Complainant to contact the Registration & Inspection Authority. Complainants funded through the NHS or Local Authority will be reminded of their right to access the relevant complaints procedures of the funding authority.
- 3.10.5 Where a complaint relates to the Care Home Manager, the complaint will be handled by the Operations Director or a Director of the Company to ensure independence and fairness. Where the Registered Manager and Nominated Individual are the same person, complaints will be escalated directly to the Board of Directors, who will appoint an independent person to investigate where appropriate.

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### **3.11 Learning and Service Improvement**

3.11.1 All complaints will be reviewed to identify trends, themes and opportunities for improvement. Learning from complaints will be:

- Shared with staff through meetings and supervision
- Incorporated into audits and governance processes
- Used to inform training and service development

3.11.2 The effectiveness of the complaints system will be reviewed regularly to ensure it is working effectively and that improvements are sustained.

### **3.12 Resident Complaints Notices**

3.12.1 To advise residents how to register a complaint, posters are displayed around the care home.