

BUDDIES COMMUNITY CARE LIMITED
Complaints, Compliments, Feedback Policy.

Responsible Person: James Pay – 07999 16 1718

Letsgetbetter@buddies.care

CQC Fundamental Standards

Legislation:

**Regulation 16: Receiving and Acting on
Complaints**

Details

The intention of this regulation is to make sure that people can make a complaint about their care and treatment. To meet this regulation providers must have an effective and accessible system for identifying, receiving, handling and responding to complaints from people using the service, people acting on their behalf or other stakeholders. All complaints must be investigated thoroughly and any necessary action taken where failures have been identified

**Key Lines of Enquiry (KLOE): How this applies to our Compliments
and Complaints Policy**

This policy should be read in conjunction with our:

- Complaints Form (Appendix 1)
- Compliments Form (Appendix 2)
 - Safeguarding Policy

Policy Statement

Policy Aims

The purpose of this procedure is to maintain and improve the quality of service provided by ensuring that effective and appropriate action is taken upon receipt of compliments and complaints.

A key consideration is to make arrangements flexible within the parameters of these procedures; treating each complaint according to its individual nature, with a focus on satisfactory outcomes, organisational learning and those lessons leading to service improvement.

Scope

This procedure applies to anyone receiving a compliment or complaint about any individual linked to, or any service provided by, the organisation. This procedure also covers the responsibilities of the Buddies Complaints Co-ordination team, and where applicable, any other people called upon to investigate a complaint.

If a complaint or concern is an allegation or suspicion of abuse, for example, sexual abuse, physical neglect or abuse, or financial abuse, it should immediately be investigated following the appropriate safeguarding policies and procedures.

In a situation where a person discloses physical or sexual abuse or criminal or financial misconduct, it must be reported to the necessary authority even if the person does not want to make a complaint.

In any case, involving a vulnerable adult or children, including the threat of self-harm and/or harm to others, all staff should implement effective safeguarding policies and practices, referring to the appropriate safeguarding board.

Compliments

This policy encourages all kinds of feedback. Anyone who has a relationship with can compliment a member of staff, a team or the organisation. Compliments are passed on to staff and their line manager

and are used to identify areas of good practice can learn from. Compliments can be submitted verbally to any member of staff, who will then forward this on to letsgetbetter@buddies.care

Making a Complaint

Key Question: Can I make a complaint about an incident that happened few months ago?

Complaints can be made twelve months from the date when the event or subject of the complaint came to the notice of the complainant. If good reasons exist for the complaint not being made within 12 months, and it's possible to investigate the complaint fairly, may still decide to consider the complaint

When a complaint is received, it should be viewed positively, and as an opportunity to improve aspects of the services provided by.

If a member of staff is approached by an individual wanting to make a complaint, they should listen to the complaint and provide a copy of the complaint form. An explanation must be given about the various ways in which the complaint may be made. The complaint can be made either by the complainant, with the help of a member of staff or an advocate of the complainant's choice in the following ways:

- 1 Using the complaint form, which can be filled in personally;**
- 2 Writing a personal letter of complaint.**
- 3 By email.**
- 4 Making a formal complaint verbally, either in person or over the telephone.** (In this event, the person receiving the complaint must make a written record of the complaint, which the complainant should sign in agreement if present, or which is sent out to the complainant to be signed and returned to in a pre-paid envelope.)
- 5 Asking a representative to act on their behalf using any of the above routes.**

Whichever method the complainant chooses to voice their complaint, a **written record of the complaint must be made within 24 hours.**

Letters of complaint or completed Complaints Forms should then be sent to the Complaints Co-ordination Team

The individual making the complaint must be assured by the person they have contacted that they will be supported throughout the process, and as far as the procedures allow, their confidentiality will be maintained.

Key Question: Will my complaint be kept confidential?

Complaints will be handled in the strictest confidence, in line with our Confidentiality policy, the Data Protection Act, the Human Rights Act 1998 and any other legal obligations.

Confidentiality will be maintained so that only managers and staff who are leading the investigation know the contents of the case. Anyone disclosing information to others who are not directly involved in the case should be dealt with under disciplinary procedures.

Information will not be disclosed to third parties unless the complainant or representative who has provided the information has given consent to the disclosure of that information.

However, information will be disclosed if it is in the best interests of a Service User, or the protection, safety or wellbeing of a child or vulnerable adult. In these circumstances, escalation should take place in line with safeguarding procedures.

Receiving a Complaint

Buddies will investigate a complaint in a manner appropriate to resolve it as efficiently as possible, proportionate to the seriousness of the complaint.

The Complaints Co-ordination Team Lead will acknowledge of complaints within 24 hours. The complaint will then be considered by the CCT to decide who will be appointed to deal with the complaint. The CCT consists of a member of the Corporate Services team, a member of the Marketing Team and a member of the Finance team.

The CCT will then write to the complainant within 10 days with details of how their complaint will be handled. This letter will detail the name of the person appointed to manage the complaint.

In the majority of cases, the Complaints Co-ordination Team will pass the complaint to the Manager of the project to resolve the problem. In cases where the Manager is the focus of the complaint, the Complaints Co-

ordination Team will decide on the most appropriate person to deal with the complaint.

The person appointed to handle the complaint will write to the complainant within **3 working days** of being appointed to manage the complaint, to inform them how their complaint will be managed. This letter must include:

- 1 an action plan for handling the complaint.**
- 2 realistic timescales within which the complaint will be managed and timescales for responding.**
- 3 any further relevant information regarding the process.**
- 4 an offer to discuss the complainant's expectations and desired outcome.**
- 5 information about providers of independent advocacy services e.g. the Independent Complaints Advocacy Service or VoiceAbility.**

The complainant can expect that:

- 1 They will be kept up to date.**
- 2 Their complaint will be investigated and, where appropriate, they will receive an explanation based on facts.**
- 3 Assurance that the matter has been investigated and action has been taken to prevent a recurrence.**
- 4 To be informed of any learning for the organisation**
- 5 A remedy will be made where appropriate**

The Complaints Co-ordination Team will monitor the progress of the complaint, and ensure that timescales are met. The CCT will have no direct input into resolving the complaint. This will enable the team to work objectively in the case of an appeal. One member of the Complaints Co-ordination Team *may* act as a process advisor for the investigation team, but will not take an active part in the investigation.

Managing the Complaint

The person appointed to manage the complaint will be given all relevant documentation from the Complaints Co-ordination Team. They will then

investigate the complaint. This may include interviews with all parties involved in the complaint. Records of these interviews must be kept with all other paperwork relating to the complaint.

The person appointed to manage the complaint must maintain contact with the complainant, informing them of progress being made and of any material changes to the way in which the complaint is being managed:

For example, changes to the way the investigation is being carried out, or to the timescales previously given.

If, during the investigation, additional areas of concern become apparent, advice must be sought from the Complaints Co-ordination Team.

The complainant can expect the investigation to be complete no later than 28 working days after receiving correspondence regarding time frames and an action plan.

If the complaint involves the Registered Manager then you may reach out to the CQC, and/or the local authority whom can support you further-

1. **Care Quality Commission – 03000 61 61 61**

<https://www.cqc.org.uk/contact-us>

2. **Local Government and Social Care Ombudsman – 03000 61 06 14**

Key Question: Will I be informed of the outcome of my complaint?

Yes. Within 28 working days of being appointed, the person responsible for managing the complaint will inform the complainant of the outcome of their investigations into the complaint. This may be done in person; however, in all cases, a formal written response must be provided to the complainant and / or their advocate.

The response of the complaint will include:

- **An explanation of how the complaint has been considered;**
- **An apology, as appropriate;**
- **An explanation based on facts, detailing how the conclusion(s) were reached;**
- **Whether the complaint is upheld – in full or in part;**

- **The conclusions reached in relation to the complaint including any remedial action that the organisation considers to be appropriate or lessons learnt;**
- **Confirmation that the organisation is satisfied any action has been or will be actioned.**

The written response must include details of the appeals process.

On completion of the complaints process, the person appointed to manage the complaint will inform the Complaints Co-ordination Team and will ensure that all documentation relating to the complaint is passed to the Co-ordination Team for filing.

Keeping clear and accurate records of complaints is important, and these should be retained for a period of ten years.

Staff Support

All documentation relating to the investigation will be stored securely in the case file. Members of staff named in the complaint (personally or by role) should be informed of the complaint, and fully supported by their relevant line manager. Any investigation should be comprehensive, fair and timely, and should not apportion blame but seek only to improve. A number of supports are available for staff, including: Line manager, Managing Director, Peer support, Occupational Health, Professional bodies.

Buddies will monitor that all staff and service users are aware of the complaints policy and procedures through training, meetings and reviews, service user welcome packs, email and the website. A global notice will be sent to managers and staff to notify release of this document and any subsequent updates to this policy will be provided. Notification of this document will be included in the all staff email bulletin and staff briefings. All managers will be given training for implementation of this policy as appropriate. A training needs analysis will be undertaken with other staff affected by this document and any appropriate training will be provided to staff as required.

Monitoring and Evaluation

The Complaints Co-ordination Team will log the process of each complaint, enabling results to be reviewed on a regular basis by the Registered Manager.

The Registered Manager will regularly review complaints in detail and monitor compliance with the complaints procedure on a monthly basis.

We will use of feedback to learn and improve. An annual report will be produced, which will detail:

- **number of complaints received.**
- **number of complaints received considered to be based on solid evidence or good reasons (complaints upheld).**
- **issues and key themes that the complaints have raised.**
- **lessons learnt.**
- **actions taken, or being taken, to improve services as a result of the complaints made.**
- **number of cases being considered or referred to the Ombudsman.**
- **Equality impact data.**
- **Production of a report for the Managing Director that include identification of trends and highlight issues for audit.**

Equality impact assessment.

A preliminary EIA has been conducted with the intention to eliminate unlawful discrimination, advance equality of opportunity and foster good relations, as stated in the Equality Act. The assessment includes the protected characteristics of race, disability, gender, sexual orientation, age, religious or other beliefs, marriage and civil partnership, gender reassignment and pregnancy and maternity, and to promote the positive practice and value the diversity of individuals and communities. So far, no adverse impacts have been identified that arise specifically from the policy or procedures. However, further information will be sought during wider consultation and monitoring.

Quality assurance: will monitor both the effectiveness of the complaints process and how complaints information is being used to improve services and delivery of care. A system will be established to:

- **Disseminate learning from complaints across the organisation.**
- **Include the use of complaints procedures as a measure of performance and quality.**

- **Use complaints information to contribute to development and service planning.**

Monitoring and Review

This procedure is part of quality standards. Compliance with the policy and procedures laid down in this document will be monitored by the Registered Manager together with independent reviews by both Internal and External Audit on a periodic basis.

The Registered Manager is responsible for the monitoring, revision and updating of this document.

This policy will be kept under review in light of operational experience and national guidance. The first review will take place one year from adoption, and positive action will be taken to resolve any issues.

Employees are invited to suggest any ways the policy can be improved.

This policy does not form part of any employee's contract of employment, and it may be amended at any time.

Key Points to Take Away

All compliments should be forwarded to letsgetbetter@buddies.care

Our Complaints Procedure enables any individual or organisation coming into contact with our services to express their views and have those views valued and issues resolved fairly and transparently.

Complaint investigations will be completed within 28 working days

It means really listening to and valuing feedback when it is received and seeing it as an opportunity for enhancement and service improvement in line with our approach to continual improvement and Quality Assurance Policy.

At Buddies, the client is at the heart of our service quality and improvement processes.

We operate a system to champion client feedback and complaints and we all play an important role in making that system work well.

After reading this Policy, you should be able to:

- Understand what complaints, compliments and feedback are and how this policy operates;

- Understand how our complaints procedure operates at and have an awareness of the actions we take in preventing, identifying and reporting concerns;
- Understand the role you play in managing complaints, compliments and feedback.

If you have not understood any of these points, please ask your Line Manager for further help.

End of Policy Statement

This policy will be reviewed regularly to ensure it remains compliant with current legislation, regulatory standards, and best practice guidance.

The policy is subject to **annual review**, or sooner if there are:

- Changes to relevant legislation or regulation
- Guidance updates from the CQC or other regulatory bodies
- Changes in organisational structure or service provision
- Findings from internal audits or quality assurance processes
- Feedback from staff, service users, or stakeholders

All staff are responsible for ensuring they are familiar with this policy and apply it consistently in their roles. Updates will be communicated to all relevant personnel, and training will be provided as necessary.

Policy Review and Version Control

Version	Date Issued	Reviewed By	Next Review Due	Changes Made (Summary)
1.0	07/10/2025	James Pay	07/10/2026	Initial version issued

Approval:

Policy approved by: **James Daniel Pay - Registered Manager**

Signed:  (MANAGER)

Date: **7/10/2025**

Document Control:

- This document is a controlled policy. Once printed or downloaded, it becomes an uncontrolled copy and may not reflect the latest version. Please refer to the master version stored on the [policy management system / office file / care management software] for current policy.

APPENDIX 1

Confidential

Buddies Community Care Limited

Complaints Form

1. Complainant Details

Full Name: _____

Address: _____

Telephone Number: _____

Email Address: _____

Preferred Contact Method: Phone Email Post

Date of Complaint: _____

Are you the service user? Yes No

If No, please state your relationship to the service user:

Service User's Name (if different):

2. Details of the Complaint

Please provide as much detail as possible, including dates, times, staff involved, and what happened.

(Attach additional pages or evidence if necessary.)

Description of Complaint:

3. Desired Outcome

What would you like to happen as a result of this complaint?

4. Acknowledgement and Follow-up (For office use only)

Date Received: _____

Received By (Name & Position): _____

Method Received: Phone Email Letter In Person

Acknowledgement Sent: Yes No

Date Acknowledged: _____

Response Due Date (28 days): _____

5. Investigation Details (For office use only)

Investigator Name & Title: _____

Investigation Start Date: _____

Summary of Findings:

Action Taken / Outcome:

Date Outcome Sent to Complainant:

Follow-Up Required: Yes No

Follow-Up Date: _____

6. Sign-Off

Registered Manager Signature: _____

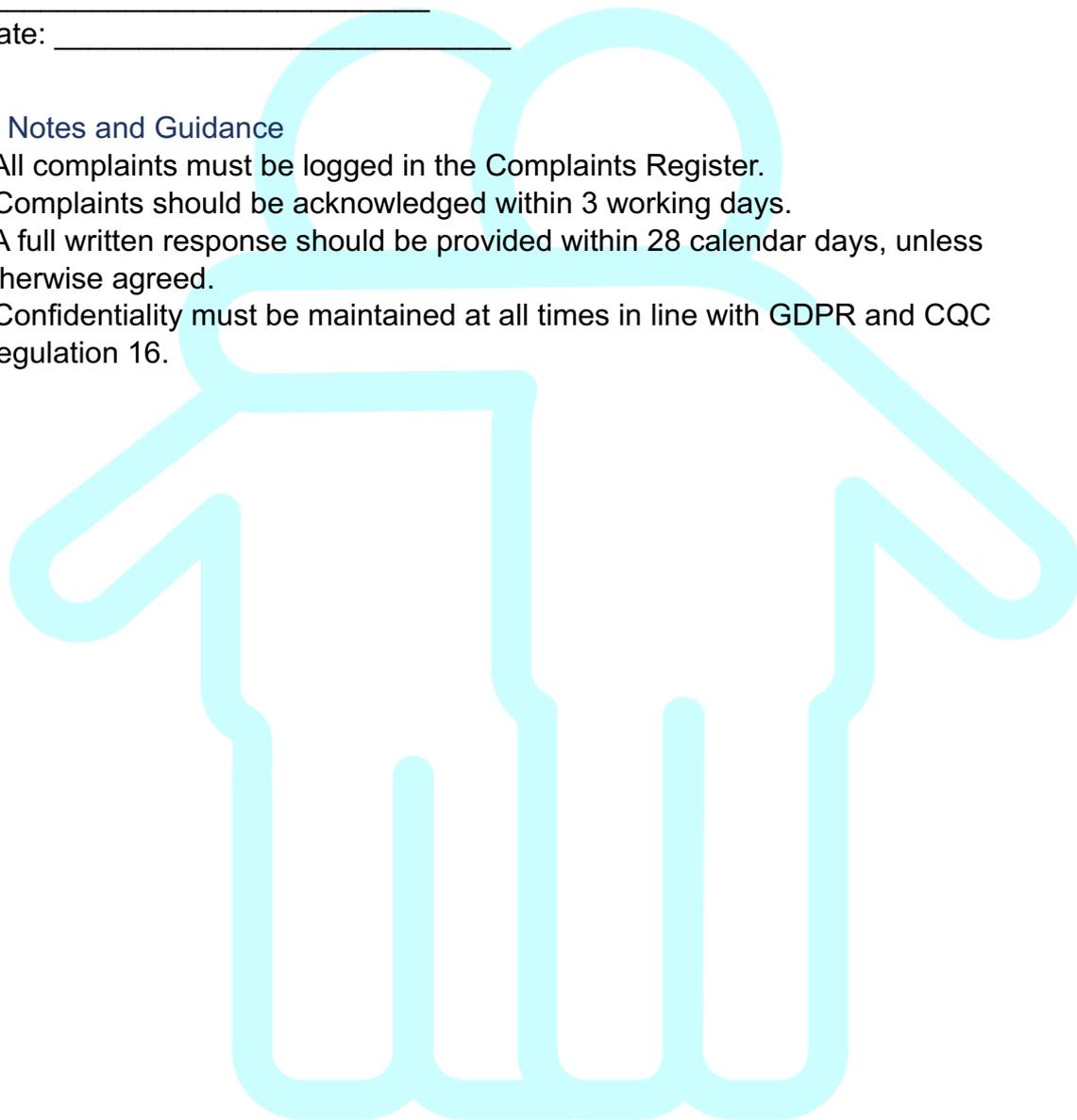
Date: _____

Managing Director / Responsible Individual Signature:

Date: _____

7. Notes and Guidance

- All complaints must be logged in the Complaints Register.
- Complaints should be acknowledged within 3 working days.
- A full written response should be provided within 28 calendar days, unless otherwise agreed.
- Confidentiality must be maintained at all times in line with GDPR and CQC Regulation 16.



APPENDIX 2

CONFIDENTIAL Buddies Community Care Limited

Compliments Form

1. Person Giving the Compliment

Full Name: _____

Address: _____

Telephone Number: _____

Email Address: _____

Preferred Contact Method: Phone Email Post

Date Submitted: _____

Are you the service user? Yes No

If No, please state your relationship to the service user:

Service User's Name (if different):

2. Details of the Compliment

Please describe what happened and why you wish to give positive feedback. Include names (if known), dates, and how our staff or service made a difference.

Details:

3. Staff or Service Area Involved

Name(s) of Staff Member(s):

Service Area / Department:

4. Permission to Share Your Compliment

We may wish to share your compliment (e.g., in staff meetings, newsletters, or training) to celebrate good practice.

Please indicate your consent:

- Yes – You may share my compliment (you may use my name)
- Yes – You may share my compliment anonymously
- No – Please do not share my compliment publicly

Signature: _____

Date: _____

5. Office Use Only

Date Received: _____

Received By (Name & Position): _____

Method Received: Phone Email Letter In Person

Acknowledgement Sent: Yes No

Date Acknowledged: _____

Action Taken (e.g., recognition, thank-you message, staff reward):

Manager Name / Signature: _____

Date: _____

6. Notes and Guidance

- All compliments will be logged in the Compliments Register.
- The Registered Manager will review compliments to identify good practice and celebrate achievements.
- Compliments will be discussed in team meetings and shared as part of continuous improvement and staff recognition.