



Concerns and Complaints Policy

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Introduction

This policy sets out the values, principles and procedures, which underpin MAK Community Care's approach to handling complaints to comply with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 16: Receiving and Acting on Complaints.

It also shows how MAK Community Care is meeting the Quality Statement, "Listening to and Involving People" which the CQC is using in future for assessment purposes.

"We make it easy for people to share feedback and ideas or raise complaints about their care, treatment and support. We involve them in decisions about their care and tell them what's changed as a result."

Regulation 16 requires care providers to have an effective system to identify, receive, handle and respond appropriately to complaints and comments made by people who use the service, or persons acting on their behalf, and others involved with the service.

Regulation 16 is one of the fundamental standards with which providers must comply to meet their registration requirements. It states the following.

1. Any complaint received must be investigated and necessary, proportionate action must be taken in response to any failure identified by the complaint or investigation.
2. The registered person must establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by people who use the service and other persons in relation to the carrying on of the regulated activity.
3. The registered person must provide to the Commission, when requested to do so and by no later than 28 days beginning on the day after receipt of the request, a summary of:
 - a. complaints made under such complaints system
 - b. responses made by the registered person to such complaints and any further correspondence with the complainants in relation to such complaints
 - c. any other relevant information in relation to such complaints as the Commission may request.

To be compliant with this regulation, MAK Community Care will:



- bring the complaints system to the attention of people who use the service and people acting on their behalf in a suitable manner and format
- facilitate the making of complaints when one is being made
- acknowledge and investigate all verbal and written complaints and (where relevant), work with other services where the complaint is of a joint nature to address the issues raised
- ensure that people who use the service have access to and the help of an independent advocacy service, which they might need to make a complaint where they lack the capacity or means to make the complaint without such assistance; an advocate can assist the person at all stages in the complaints process (see also the separate policy on [Advocacy](#)).

Where appropriate, the care service will also refer users to the leaflet published by the Care Quality Commission (CQC), *How to Complain About a Health or Social Care Service*.

This policy should be read and used in relation to other policies on:

- Responding to the Experiences of People Who Use the Service
- Quality Assurance and Improvement
- Escalation
- Duty of Candour
- Safeguarding policies.

Policy Statement

MAK Community Care works on the principle that if a person who uses the service or anyone who acts in their best interests wishes to make a complaint or register a concern, they should find it easy to do so.

MAK Community Care welcomes complaints and looks on them as opportunities to learn, adapt, improve and provide better services. This policy ensures that complaints are dealt with properly and that all complaints or comments by individuals and their relatives and carers are taken seriously.

The policy is not designed to apportion blame, to consider the possibility of negligence or to provide compensation. It is not the same as the disciplinary policy. However, MAK



Community Care understands that failure to listen to or acknowledge complaints could lead to an aggravation of problems, dissatisfaction of people who use the service and possible litigation.

MAK Community Care supports the principle that most complaints, if dealt with early, openly and honestly, can be sorted at a local level, ie between the complainant and the care service. If this fails due to the complainant being dissatisfied with the result, MAK Community Care respects the right of the complainant to take the complaint to the next stage by seeking a review with the relevant reviewing body of how the complaint was addressed.

The aim is always to make sure that the complaints procedure is properly and effectively implemented and that individuals feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Policy Issues

MAK Community Care recognises that where it is providing a local authority or health authority commissioned service it is the commissioner which becomes accountable for any potential faults in the provision of the service. It is also the commissioning authority which will be responsible for ensuring that MAK Community Care corrects any faults found from the investigation of the complaint and could do this through its quality monitoring processes.

When it receives a written complaint about a local authority commissioned service it is providing, MAK Community Care will notify the commissioning authority of the complaint, how it proposes investigating it and of the outcomes. This ensures transparency, good communication and partnership working in the complaints handling process.

MAK Community Care recognises that a complainant who is not prepared to have the investigation conducted by the care service or its parent organisation or is dissatisfied with the response to the complaint can escalate the complaint to the responsible commissioning authority.

MAK Community Care will also inform people who are paying for their own care independently without local authority involvement of their legal right to escalate an unresolved complaint directly to the Local Government Social Care Ombudsman.



If the complaint involves safeguarding issues requiring an alert to the local safeguarding authority, MAK Community Care will follow the safeguarding procedures, carrying out any internal investigation in line with any plan agreed with the safeguarding staff (with information shared with the CQC).

If the complaint concerns the conduct or performance of the registered manager, who would otherwise be responsible for handling and investigating the complaint, the nominated individual, will become responsible for the complaints handling process.

The nominated individual will investigate the complaint in line with the complaints procedure, which could include arranging for the complaint to be investigated by a competent independent person or body. This could be the local authority if the commissioner of the service subject to the complaint about the manager.

If a privately funded service, the nominated individual as the representative of the care provider will, if unable to achieve local resolution, recommend that the complainant escalates the matter to the Local Government Social Care Ombudsman.

Principles of Complaints Handling

1. At MAK Community Care, people who use it, their representatives and carers are always made aware of how to complain from the onset of their using the service, (for example, by having a complaints notice displayed prominently in public areas, and having the procedure available in alternative formats in line with users' communication needs).
2. People who use the service, their representatives and carers are always made aware that MAK Community Care provides easy-to-use opportunities for them to register their complaints.
3. A named person is always responsible for the administration of the procedure.
4. Every written complaint is acknowledged with the acknowledgment sent within two working days.
5. Investigations into written complaints are held within 28 days.
6. The complainant will be informed of any reasons for failing to complete the investigation within the 28 days.
7. The findings of the investigation will be given to the complainant in writing by MAK Community Care immediately after completion.



8. Complaints are dealt with promptly, fairly and sensitively with due regard to the upset and worry that they can cause to people who use the service and those against whom the complaint has been made.
9. MAK Community Care recognises national guidance on complaints' handling, which uses a three-stage (two stages for some self-funding people) model of:
 - a. local resolution
 - b. complaints review
 - c. independent external adjudication by Local Government and Social Care Ombudsman (LGSCO), Health Service Ombudsman or through the Independent Healthcare Advisory Services (IHAS).
10. The person to whom complaints should be made is Morgan Caines (Lincolnshire),, or Courtney Vaughan (Berkshire/ Kent).

The Complaints Procedure

Stage one: local resolution

MAK Community Care works on the basis that wherever possible, complaints are best dealt with directly with the people who use the service by its staff and management, who will arrange for the appropriate enquiries to be made in line with the nature of the complaint. This can involve using an independent investigator as appropriate or if the complaint raises a safeguarding matter a referral to the local safeguarding adults authority.

Stage two: complaints review

In line with national guidance, MAK Community Care then recognises that if the complaint is still not resolved, the complainant has a right to take their complaint to the body responsible for the commissioning of the service, eg local authority and/or health service (again depending on the nature of the complaint and type of service involved). A self-funding person whose care and support has no local authority involvement is entitled to go directly to the LGSCO for resolution.

Stage three: independent external adjudication

If complainants are still dissatisfied with the management and outcome of their complaint, MAK Community Care is aware that they can refer the matter to the



LGSCO/Health Service Ombudsman in respect of some private healthcare providers through the IHAS for external independent adjudication.

Role of the Care Quality Commission

MAK Community Care makes its users aware that the Care Quality Commission (CQC) does not investigate any complaint directly, but it welcomes hearing about any concerns. It accordingly provides users with information about how to contact the CQC by referring them to the CQC's leaflet *How to Complain About a Health or Social Care Service* (July 2013) (available on the CQC website).

MAK Community Care also sends to the CQC any information about complaints requested or required as part of the CQC's compliance reviewing policy.

Safeguarding issues

In the event of the complaint involving alleged abuse or a suspicion that abuse has occurred, MAK Community Care refers the matter immediately to the local safeguarding adults' authority which will usually, following an initial assessment, call a meeting to decide on the actions to be taken next. This could entail further enquiries into any allegation by a member of the Safeguarding Authority team.

MAK Community Care will also notify the CQC under the (revised) Care Quality Commission (Registration) Regulations 2009, Regulation 18(e) Notification of Other Incidents of "any abuse or allegation of abuse in relation to a service user".

Verbal Complaints

MAK Community Care adopts the following procedures for responding to complaints and concerns made verbally to staff in the course of their providing support or to managers to whom the matter has been referred or escalated.

1. MAK Community Care expects its staff to treat all verbal concerns and complaints, no matter how seemingly unimportant, seriously and to acknowledge, report and record them.
2. If a person expresses a concern or complaint to their support worker while receiving support, the support worker should agree to address the matter immediately, resolve it if possible and apologise as appropriate.



3. If the support worker cannot address the person's complaint immediately, they should say they will refer the matter to their manager without delay.
4. Staff should always be professional, remaining calm and respectful, polite, courteous and sympathetic to a complainant. There is nothing to be gained by their being defensive or aggressive. They should avoid making excuses or blaming other staff.
5. After talking the problem through, the member of staff or manager responding to the complaint will suggest a course of action to resolve it. If this course of action is acceptable, then the member of staff will clarify the agreement with the complainant and agree a way in which the results of the complaint will be communicated to the complainant (ie through another meeting or by letter).
6. If the suggested plan of action is not acceptable to the complainant then the member of staff or manager will ask the complainant to put their complaint in writing and give them a copy of MAK Community Care 's complaints procedure to enable them to do this.
7. The staff member receiving the initial complaint in addition to any reporting should always record the matter on the person's records.
8. The record should include the nature of the complaint and how it arose, how the staff member receiving the complaint responded and how they followed it up.
9. If a third party makes the complaint directly to a staff member, for example a relative or friend on behalf of the person who uses the service, the staff member should respond in the same professional manner as described above.
10. If the complainant has acting power of attorney for the health and welfare for the person receiving care they might respond directly as if it was the person receiving support making the complaint.
11. Otherwise, it is less likely that they can deal with the complaint directly and will need to refer the matter to their manager. The staff receiving the complaint or the manager to whom it has been referred, must then always check with the third party the nature of the complaint in relation to the support and treatment that they are providing to the person receiving their support and how it is affecting them.
12. If the complaint appears to be valid in that respect, the staff member or manager, whoever is responding, might suggest that as a first step they discuss



the matter directly with the person receiving support and go on from there to resolve the matter with the person's consent.

13. Alternatively they might suggest that the third party complainant speaks to the person receiving support to see if they have the same concerns which can then be addressed by the person receiving care or jointly.
14. They might also suggest, depending on the nature of the concern or complaint. That the third party raises the matter directly with MAK Community Care or put in a written complaint.
15. MAK Community Care staff must not disclose to a third party complainant information that is confidential to the care and treatment of the person receiving care without the person's valid consent.

Written Complaints

MAK Community Care adopts the following procedures for responding to written complaints, which might be made by letter or via email.

Preliminary steps

1. When MAK Community Care receives a written complaint, it passes it to a designated person or complaints handler, eg the registered manager who records it and sends an acknowledgement letter which describes the procedures they will follow. MAK Community Care will send the acknowledgement letter within two working days of receipt.
2. The designated person, eg the registered manager is responsible for dealing with the complaint throughout the complaints handling process, including for any investigations to be carried out by an independent person, who will report to the named person/complaints manager.
3. If necessary, the designated person or a person carrying out the investigation into the complaint will obtain further information from the complainant. If the complaint is not made by the person who uses the service but by a third party, the designated person will seek the consent of the person receiving support to proceed with the complaint as a valid complaint related to their support and treatment.



4. MAK Community Care reserves the legal right to seek legal advice if the nature of the complaint raises questions of law. MAK Community Care recognises that this is likely to delay the completion of the investigation and will inform the complainant of this possibility. MAK Community Care will continue to keep the complainant informed of the progress of the legal intervention.

Investigation of a complaint (other than safeguarding)

1. Immediately on receipt of a written complaint, MAK Community Care will launch an investigation and aims within 28 days to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned.
2. If the issues are too complex to complete the investigation within 28 days, MAK Community Care will issue an interim report of the progress being made with the complaint investigation, stating reasons for any delay and an estimated timescale for completion.

Meetings

1. At any meetings to discuss the complaint, the complainant might wish to bring a friend or relative or have an advocate to represent their views, which will be conducted openly, transparently and fully recorded with records agreed by all parties.
2. Once an outcome is reached, MAK Community Care will arrange a special meeting which could be face to face or remote to discuss the findings and the measures it proposes to resolve the complaint.
3. MAK Community Care, through its designated person will provide a detailed explanation of the results of the investigation, an apology for any possible distress caused and any remedial measures it proposes to take or might have already taken.
4. MAK Community Care views such a meeting as an opportunity to show the complainant that it has taken the complaint seriously and has thoroughly investigated it.



Follow-up action

1. MAK Community Care will also provide a written report to the complainant confirming the results of the investigation and a summary of the discussions held.
2. The report will include how the complainant might escalate the complaint if the complainant is not satisfied with conduct of the complaint investigation or the outcome.
3. The designated person or complaints handler will provide a full record of the complaint investigation and outcomes.
4. MAK Community Care will ensure that remedial measures agreed from the complaint process are fully actioned in agreed timescales, which will be subject to further auditing and review.
5. The management reviews all complaints to determine what can be learned from them. It regularly reviews the complaints procedure to make sure it is working properly and is legally compliant.

Signed: Amber Richards

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