



## Review Sheet



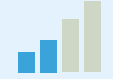
Last Reviewed  
24 Mar 2026



Last Amended  
24 Mar 2026



This policy will be reviewed as needs require or at the following interval:  
Annual

<p>Business Impact:</p>	 <p><b>MEDIUM</b></p> <p>Changes are important, but urgent implementation is not required, incorporate into your existing workflow.</p>
<p>Reason for this Review:</p>	<p>Improve usability</p>
<p>Changes Made:</p>	<p>Yes</p>
<p>Summary:</p>	<p>This policy outlines the complaints procedure at Special People Partnership Ltd.. It has been reviewed with Section 4.3 updated to explain governance roles. For these changes to reflect in the policy, the system details questionnaire will need to be updated. Underpinning Knowledge references and Further Reading links have also been checked and updated.</p>
<p>Relevant Legislation:</p>	<ul style="list-style-type: none"> <li>• The Care Act 2014</li> <li>• The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</li> <li>• Human Rights Act 1998</li> <li>• The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009</li> <li>• Mental Capacity Act 2005</li> <li>• Mental Capacity Act Code of Practice</li> <li>• Data Protection Act 2018</li> <li>• UK GDPR</li> <li>• Compensations Act 2006</li> <li>• Equality Act 2010</li> <li>• The Accessible Information Standard (DCB1605 Accessible Information)</li> </ul>
	<ul style="list-style-type: none"> <li>• Author: NHS England, (2026), Accessible Information Standard [Online] Available from: <a href="https://www.england.nhs.uk/accessible-information-standard/">https://www.england.nhs.uk/accessible-information-standard/</a> [Accessed: 24/03/2026]</li> <li>• Author: ICO Information Commissioner's Office, (2026), Complaints (Internal Reviews) [Online] Available from: <a href="https://ico.org.uk/for-organisations/foi/guide-to-managing-an-foi-request/complaints-internal-reviews/">https://ico.org.uk/for-organisations/foi/guide-to-managing-an-foi-request/complaints-internal-reviews/</a> [Accessed: 24/03/2026]</li> <li>• Author: Local Government and Social Care Ombudsman, (2018), Adult Social Care Guides Launched to Help Providers Deal with Complaints Better [Online] Available from: <a href="https://www.lgo.org.uk/information-centre/news/2018/jul/adult-social-">https://www.lgo.org.uk/information-centre/news/2018/jul/adult-social-</a></li> </ul>

<p>Underpinning Knowledge:</p>	<p><a href="#">care-guides-launched-to-help-providers-deal-with-complaints-better</a> [Accessed: 24/03/2026]</p> <ul style="list-style-type: none"> <li>• Author: CQC, (2025), Regulation 16: Receiving and Acting on Complaints [Online] Available from: <a href="https://www.cqc.org.uk/guidance-providers/regulations/regulation-16-receiving-acting-complaints">https://www.cqc.org.uk/guidance-providers/regulations/regulation-16-receiving-acting-complaints</a> [Accessed: 24/03/2026]</li> <li>• Author: NICE, (2018), Decision-making and Mental Capacity - Guidelines NG108 [Online] Available from: <a href="https://www.nice.org.uk/guidance/ng108">https://www.nice.org.uk/guidance/ng108</a> [Accessed: 24/03/2026]</li> <li>• Author: Parliamentary and Health Service Ombudsman, (2026), What to Do Before you Come to Us [Online] Available from: <a href="https://www.ombudsman.org.uk/making-complaint/before-you-come-to-us">https://www.ombudsman.org.uk/making-complaint/before-you-come-to-us</a> [Accessed: 24/03/2026]</li> <li>• Author: CQC, (2025), Regulation 20: Duty of Candour (regulation in full) [Online] Available from: <a href="https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-20/regulation-20-in-full">https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-20/regulation-20-in-full</a> [Accessed: 24/03/2026]</li> <li>• Author: The Care Quality Commission, (2025), Regulation 20: Duty of Candour [Online] Available from: <a href="https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-20">https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-20</a> [Accessed: 24/03/2026]</li> <li>• Author: Local Government and Social Care Ombudsman, (2026), Acting on Compliments, Feedback and Complaints about Adult Social Care - A good practice guide for adult social care practitioners [Online] Available from: <a href="https://www.lgo.org.uk/assets/attach/4355/Single%20comms2%20-%20v2.pdf">https://www.lgo.org.uk/assets/attach/4355/Single%20comms2%20-%20v2.pdf</a> [Accessed: 24/03/2026]</li> </ul>
<p>Suggested Action:</p>	<ul style="list-style-type: none"> <li>• Encourage sharing the policy through the use of the QCS App</li> </ul>
<p>Equality Impact Assessment:</p>	<p>QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law.</p>



## 1. Purpose

### 1.1 About Special People Partnership Ltd.

We were founded in 1998, by a teacher with her own child with additional needs and a parent with Dementia. We support children, young people and adults with additional needs, to access the community as well as supporting in their homes.

### What are the values of Special People Partnership Ltd.?

At Special People Ltd, our values are centred on delivering safe, compassionate, person-centred and high-quality support to children, young people and adults with learning disabilities, autism, complex needs and associated health conditions. Our core values are:

- Respect and dignity – treating every person as an individual and promoting their rights, choices and independence.
- Person-centred care – tailoring support around each individual's needs, preferences, strengths and aspirations.
- Safety and accountability – maintaining strong safeguarding, governance and risk management processes.
- Compassion and empathy – providing care and support with kindness, patience and understanding.
- Inclusion and equality – promoting participation, diversity and equal opportunities for all.
- Professionalism and quality – ensuring our staff are well trained, competent and committed to high standards.
- Partnership working – working openly and collaboratively with families, commissioners, professionals and communities.
- Continuous improvement – regularly reviewing our services, learning from feedback and striving to improve outcomes.

### What are the Aims and Objectives of Special People Partnership Ltd.?

- Provide safe, effective and person-centred care and support that reflects each individual's assessed needs and desired outcomes.
- Promote independence, wellbeing, choice, dignity and social inclusion for every person we support.
- Deliver services that are reliable, consistent and outcome-focused, both in the home and community.
- Work in close partnership with families, carers, local authorities, health professionals, schools, commissioners and other stakeholders to ensure coordinated support.
- Recruit, train and retain a skilled, compassionate and accountable workforce capable of supporting people with complex behavioural, physical, sensory and health needs.
- Maintain strong safeguarding, clinical governance, quality assurance and compliance systems to ensure high standards of care.
- Respond flexibly to changing needs and provide bespoke support packages that prevent placement breakdown and improve stability.
- Continuously monitor performance, gather feedback and use learning to improve service quality and outcomes.

- Deliver value for money while maintaining excellent standards and supporting long-term positive outcomes for the people and communities we serve.

**1.2** To ensure that Special People Partnership Ltd. has an effective system in place to manage complaints, suggestions and compliments.

**1.3** To ensure that Special People Partnership Ltd. complies with any legal requirements, regulations, guidelines and best practice.

**1.4 Meeting Regulation 20: Duty of candour**

This policy ensures that the duty of candour is upheld, promoting transparency and openness in all aspects of care and support, especially when things go wrong. Client/Service Users and their families are informed of any incidents affecting their care and support, and appropriate actions are taken to rectify and learn from such events.

**1.5 Meeting Regulation 16: Receiving and acting on complaints**

This policy provides a clear, accessible, and effective process for receiving and acting on complaints, ensuring that Client/Service Users and their representatives can raise concerns and have them addressed promptly.

Feedback is used to drive continuous improvement and enhance the quality of care, and support is provided throughout the complaint process.

**1.6**

Key Question	Quality Statements
CARING	QSC2: Treating people as individuals
RESPONSIVE	QSR4: Listening to and involving people
SAFE	QSS3: Safeguarding

**1.7 Relevant Legislation**

- The Care Act 2014
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Human Rights Act 1998
- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
- Mental Capacity Act 2005
- Mental Capacity Act Code of Practice
- Data Protection Act 2018
- UK GDPR
- Compensations Act 2006
- Equality Act 2010
- The Accessible Information Standard (DCB1605 Accessible Information)



**2. Scope**

**2.1 Roles Affected:**

- All Staff

**2.2 People Affected:**

- Client/Service Users

**2.3 Stakeholders Affected:**

- Family
- Advocates
- Representatives
- Commissioners
- External health professionals
- Local Authority
- NHS

**3. Objectives**

**3.1** This policy provides a clear and effective process for receiving and acting on complaints, ensuring that Client/Service Users and their representatives can raise concerns and have them addressed promptly. Feedback is used to drive continuous improvement and enhance the quality of care and support that is provided.

This policy ensures that the duty of candour is upheld, promoting transparency and openness in all aspects of care and support, especially when things go wrong. Client/Service Users and their families are informed of any incidents affecting their care and support, and appropriate actions are taken to rectify and learn from such events.

**3.2** To improve the quality of the Client/Service User's experience.

**3.3** To ensure that all complaints and suggestions are promptly addressed, resolved and shared within the agreed timescales to ensure that lessons are learned and that the learning improves service quality and delivery.

**4. Policy****4.1 CQC Regulated Activities, Service Types and Service User Bands**

Where required, Special People Partnership Ltd. will be registered with the CQC for regulated activities, service types and service user bands as defined in the CQC Statement of Purpose.

This will ensure that Special People Partnership Ltd. provides services that are safe, effective, caring, responsive and well-led in line with the CQC's published quality statements, regulatory framework and associated best practice guidance.

**Special People Partnership Ltd. is registered to provide the following regulated activities:**

Personal Care

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**Special People Partnership Ltd. is registered to provide the following service types:**

Community-based services for people with mental health needs (MHC), Community-based services for people with a learning disability (LDC), Domiciliary care service (DCC), Long-term conditions services (LTC), Supported living service (SLS), Urgent care services (UCS)

**Special People Partnership Ltd. is registered to support the following service user bands:**

Adults aged 18 - 65, Children aged 0 - 3, Children aged 4 -12, Children aged 13 - 18, Dementia, Learning difficulties or autistic disorder, Mental health, Older people (Aged 65+), People who misuse drugs or alcohol, Physical disability, Sensory impairment

**4.2 Care and Support at Special People Partnership Ltd.**

Special People Partnership Ltd. provides care and support to Client/Service Users with a range of needs in a person-centred, safe, and lawful way.

All staff must follow the guidance within this policy and the Client/Service User's Care Plan, ensuring that assessed needs, reasonable adjustments and individual preferences are met.

- Every Client/Service User is treated equally and with dignity and respect
- Care and support are tailored to individual needs, preferences and desired outcomes
- Staff follow legal, regulatory, and professional guidance at all times
- Person-centred approaches are used to promote independence, choice, and wellbeing

To support this approach, staff will also follow the policies and procedures below where applicable:

- Person-Centred Care and Supporting Planning
- Safeguarding Adults
- Raising Concerns, Freedom to Speak Up and Whistleblowing
- Mental Capacity Act (MCA) 2005
- Deprivation Of Liberty in Community Settings
- Consent to Care, Support and Treatment
- Equality, Diversity and Human Rights
- Overarching Medicines Management
- Positive Behaviour Support Including Challenging Behaviour
- Restrictive Practices Including Restraint and Physical Interventions
- Sex, Sexuality and Relationships

This list is not exhaustive and there will be additional policies and procedures in place to support specific Client/Service User needs. Staff must seek clarification from their line manager or the CEO, Mr Constantine Bentai, if there is any uncertainty.

Staff supporting any specialist area of need will receive appropriate induction and training. They will complete competency assessments, where required, to meet the needs of Client/Service Users as outlined in the Training Policy and Procedure at Special People Partnership Ltd..

To ensure Client/Service Users receive person-centred care and support from Special People Partnership Ltd., staff must adhere to the following **Supporting Children and Young People**

**Delete the age ranges that you do not support**

- Children aged 0-3 years
- Children aged 4-12 years
- Children aged 13-18 years

**Supporting Children and Young People**

Staff will ensure the safety, wellbeing, and development of children and young people in line with their care and support plan. Staff must:

- Always act in the individual's best interests
- Follow safeguarding procedures and report any concerns immediately
- Promote learning, play, education and inclusion

In addition, staff will also follow this policy:

- Safeguarding Children and Child Protection

**Supporting People with a Learning Disability**

Staff must support people with a learning disability in line with this policy and the individual care and support plan. Staff must follow any assessed needs, reasonable adjustments, and personal preferences, which include:

- Communicating in ways the person understands
- Supporting choice, dignity and independence
- Ensuring care and support are compassionate and outcome focused

In addition, staff will also follow these policies:

- Access to NHS Services
- Advocacy
- Co-Production
- Specialist Needs
- Supporting those with a Learning Disability
- Supporting Communication and Sensory Needs
- Positive Risk Taking
- Trauma Informed Care and Support

**Supporting People with Mental Health Needs**

Staff must support individuals with mental health needs safely, respectfully, and in line with their care and support plan which should include information that enables staff to know, understand and follow:

- The promotion of recovery and wellbeing
- Any crisis or relapse prevention plans
- The process for recording and reporting any changes in mood or behaviour
- Any individualised risk assessments completed

In addition, staff will also follow these policies:

- Access to NHS Services
- Community Treatment Orders
- Mental Health Act 1983 and Regulations 2008
- Prevention and Management of Self-harm and Suicide
- Safe and Supportive Observations
- Supporting Mental Health Conditions
- Trauma Informed Care and Support

### **Supporting People Living with Dementia**

Staff will provide compassionate and person-centred care and support for individuals living with dementia, following both this policy and their care and support plan which should include:

- Using calm, reassuring communication
- Supporting orientation and familiar routines
- Information about providing stimulating and engaging environments
- Meaningful activities and engagement
- Respecting life history and personal preferences.

In addition, staff will also follow these policies:

- Dementia
- Dignity, Respect and Choice
- Specialist Needs
- Supporting Communication and Sensory Needs

### **Supporting People with Autism**

Staff will ensure that individuals with autism are supported according to their care and support plan, respecting their sensory, communication, and social needs. This includes:

- Following individual communication and sensory care and support profiles
- Maintaining structure and predictability
- Involving and including people important to the individual
- Making any reasonable adjustments in line with the Equality Act 2010

In addition, staff will also follow these policies:

- Access to NHS Services
- Adults with Autism
- Advocacy
- Co-Production
- Specialist Needs
- Supporting Communication and Sensory Needs
- Positive Risk Taking

- Trauma Informed Care and Support

### **Supporting People with Sensory Impairments**

Staff will support people with visual, hearing, or dual sensory impairments as detailed in their care and support plan which should also include:

- Using agreed communication methods (e.g. sign language, large print)
- Ensuring the environment supports safe access and orientation
- Providing specialist equipment or aids as assessed

In addition, staff will also follow these policies:

- Specialist Needs
- Supporting Communication and Sensory Needs

### **Supporting People with Physical Disabilities**

Staff will provide support that promotes independence, dignity, and safety in line with the individual care and support plan which should also include:

- The use of correct moving and handling techniques
- Supporting access to equipment or adaptations
- Encouraging choice and autonomy

In addition, staff will also follow these policies:

- Access to NHS Services
- Specialist Needs
- Mobility

### **Supporting People who Misuse Drugs or Alcohol**

Staff will offer non-judgmental, person-centred support to individuals affected by drug or alcohol misuse, following their care and support plan which should include information regarding:

- The promotion of harm reduction and recovery
- Following any risk or relapse management plan
- Working closely with healthcare or addiction services

In addition, staff will also follow these policies:

- Access to NHS Services
- Community Treatment Orders
- Consumption of Alcohol
- Illegal Possession of Drugs on Premises
- Mental Health Act 1983 and Regulations 2008
- Safe and Supportive Observations
- Substance Abuse
- Supporting Mental Health Conditions

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- Trauma Informed Care and Support

**Supporting People with an Eating Disorder**

Staff will support individuals with eating disorders safely and sensitively, following guidance in their care and support plan. Staff must:

- Follow care and meal support plans closely
- Monitor and report any physical or behavioural changes
- Work with health professionals and families where appropriate

In addition, staff will also follow these policies:

- Access to NHS Services
- Nutrition and Hydration
- Prevention and Management of Self-harm and Suicide
- Safe and Supportive Observations
- Supporting Mental Health Conditions
- Trauma Informed Care and Support

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**4.3 Special People Partnership Ltd. Responsibilities and Representatives**

The CEO, and nominated individual of Special People Partnership Ltd., have overall management responsibility for this policy and procedure and for ensuring the proper governance of Special People Partnership Ltd..

The CEO role is held by: Mr Constantine Bentai

The nominated individual role is held by: Constantine Bentai

We recognise that dual roles of registered manager and nominated individual are not considered best practice. At times, the responsibilities of these roles may conflict or create risk. To address potential conflicts and ensure impartiality and accountability, we have implemented measures to mitigate risks and maintain a high-quality, compliant service, including:

- A peer-to-peer agreement with a local registered provider to support governance evaluation.
- We will commission experienced social care professionals for audits and quality assurance when needed.
- Supervision via peer support from a local registered provider, social care professional. Both roles require ongoing professional development to enhance knowledge, promote best practice, and expand skills.

The registered manager is professionally and operationally accountable for the day-to-day management and regulatory compliance of the service.

The nominated individual is responsible for supervising the regulated activity, ensuring a high-quality, compliant service.

Both roles are required to undertake regular continuing professional development to enhance knowledge, promote best practice and expand their skill set.

**Special People Partnership Ltd. will ensure that at all times:**

- The organisation is managed and governed appropriately
- Suitable systems are in place to effectively assess, monitor and improve the service

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- Records are completed accurately and stored safely and securely
- That the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 are met
- Care and support delivered is consistent, safe and of high-quality

**4.4 Complaints**

- Special People Partnership Ltd. understands complaints to be an expression of dissatisfaction requiring a response, communicated verbally, electronically, or in writing. Complaints may be made by any Client/Service User, their family or advocate acting on their behalf, with their consent or in their best interests
- Special People Partnership Ltd. takes complaints seriously. We will aim to put things right that have gone wrong and learn lessons to avoid the problem happening again. This policy sets out the framework for how Special People Partnership Ltd. will achieve this. The detail of how Special People Partnership Ltd. will do this will be found in the associated procedures
- Special People Partnership Ltd. will comply with legislation, national guidelines, regulation and best practice when managing complaints and suggestions. A systematic approach will be taken with all aspects of complaints and suggestions
- Complaints made or concerns raised by staff will be addressed via the grievance process if the complaint or concern relates to them individually, or via the Whistleblowing procedure where a protected disclosure is made
- Special People Partnership Ltd. understands its statutory obligations in respect of the Duty of Candour and will ensure it follows the agreed policy and procedure

**4.5** Special People Partnership Ltd. will ensure that its complaints and compliments process is fair and transparent and does not discriminate directly or indirectly because of the following:

- Age
- Being or becoming a transgender person
- Being married or in a civil partnership
- Being pregnant or on maternity leave
- Disability
- Race including colour, nationality, ethnic or national origin
- Religion, belief or lack of religion/belief
- Sex
- Sexual orientation

The complainant will feel free to complain without fear of reprisal and will be treated with courtesy, respect and compassion. Special People Partnership Ltd. will ensure that the process for how to make a complaint and the feedback given to the complainant are provided in a way that meets the Accessible Information Standard and are in a format that the Client/Service User can understand.

For Client/Service Users who require additional support such as an interpreter, advocate or any other support necessary, Special People Partnership Ltd. will acknowledge this and help people receive the support required to be able to complain should they wish.

**4.6 Seeking Views and Engaging with Client/Service Users**

Special People Partnership Ltd. will seek out opportunities to obtain feedback from Client/Service Users and stakeholders. Special People Partnership Ltd. will act with sensitivity, integrity and professionalism by treating individuals who do complain or make a

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suggestion with compassion, courtesy and respect. Special People Partnership Ltd. will protect the Client/Service User's right to confidentiality.

Special People Partnership Ltd. will ensure that alternative methods of communication and support are available so that the complaints and suggestions procedures are accessible for Client/Service Users who experience difficulties with communication or whose first language is not English.

Staff will undertake training on how to manage complaints in line with their roles and responsibilities.

**4.7** Special People Partnership Ltd. understands that it can be difficult to separate a complaint from a concern and, ultimately both require action. Therefore, Special People Partnership Ltd. will follow this policy when there is any dissatisfaction with the service.

**4.8** A full record will be held of all complaints and concerns received regardless of the level of seriousness and means of communication. This approach allows an open and transparent culture around raising concerns in the earliest stage to allow resolution. A record of the complaint will also be held in the Client/Service User's Care file and will be reported in line with contractual or regulatory requirements.

**4.9 Safeguarding Concerns**

Where a complaint or concern is raised that relates to the Client/Service User being harmed or likely to be harmed, Special People Partnership Ltd. will follow its Safeguarding Policy and Procedures in addition to the complaints procedures, seeking advice and guidance from the Islington London Borough Council Safeguarding Adults Team and escalating concerns in line with Islington London Borough Council procedure. Special People Partnership Ltd. will also notify the CQC in line with its statutory duty.

**4.10 Roles and Responsibilities****All Staff**

It is acknowledged that all staff working at Special People Partnership Ltd. may find themselves presented with a person wishing to raise a concern or complaint at any time. Therefore, staff need to be able to manage this in a sensitive, structured and timely manner. In order to do this, staff will:

- Be trained on induction and as a routine measure to ensure knowledge is embedded, refreshed and understood around the complaints procedure
- Have access to the complaints, suggestions and compliments procedure
- Be provided with the opportunity to reflect and learn from complaints as a means of developing and driving quality care
- Appreciate that any feedback from Client/Service Users or their representatives that is of concern needs immediate resolution, where possible, to their satisfaction. Care Plans will be updated to reflect the planned changes to care and Mr Constantine Bentai informed of the feedback. Failing to do this may result in a complaint
- Be clearly advised that, when presented with a complaint, swift escalation to management is necessary and that purposefully withholding or concealing concerns expressed by Client/Service Users or their representatives may lead to disciplinary action

Special People Partnership Ltd. has, and continues to develop, an open culture of continuous development which is instilled in everyone who works within the organisation, with a clear ethos of viewing concerns and complaints as opportunities for improvement.

**Management Team at Special People Partnership Ltd.**

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- The management team at Special People Partnership Ltd. is responsible for ensuring compliance with this policy, regulations, improvement planning and for having arrangements in place to provide relevant reports and information regarding complaints
- Mr Constantine Bentai is the main point of contact for the receipt, investigation and management of complaints within Special People Partnership Ltd.. However, this may be delegated to a senior member of staff within Special People Partnership Ltd. who holds the experience, knowledge and competence to investigate and manage complaints
- Special People Partnership Ltd. will ensure the procedure for raising a complaint is accessible and displayed prominently in Special People Partnership Ltd., on the website of Special People Partnership Ltd. and in Client/Service User information and guides. Alternative languages and formats are available on request

**4.11 Compliments and Suggestions**

Special People Partnership Ltd. welcomes compliments and suggestions and recognises their importance in celebrating and recognising the success of its service and opportunities for improvement. We will engage with a wide range of stakeholders in addition to Client/Service Users to support service development and improvement. We will share feedback with our staff.

**4.12 One Complaint, One Response**

Special People Partnership Ltd. will follow the Local Government and Social Care Ombudsman best practice (a link to which can be found in the Underpinning Knowledge section of this policy) and, where Client/Service Users are receiving services from more than one organisation, it will ensure they can make a complaint to anyone and be provided with a single response following a joint investigation.

**4.13 Policy Accessibility**

Special People Partnership Ltd. understands that some Client/Service Users may take in and retain information in different ways. To support full understanding and engagement, this policy is available in accessible formats. The ReciteMe tool has various ways of making this policy accessible by providing this policy in:

- Audio
- Large print
- Multiple languages

This policy can also be made available in:

- Easy-read versions
- Simple-policy view to reduce navigation and complexity

These options are in place to help Client/Service Users to understand and engage with this policy more easily.

**5. Procedure****5.1 Raising Complaints**

A complaint can be made to Special People Partnership Ltd. by:

- Client/Service Users

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- Someone acting on behalf of the Client/Service User and with their written consent, e.g. an advocate, relative, Member of Parliament
- Someone acting on behalf of the Client/Service User who is unable to represent his or her own interests, provided this does not conflict with the Client/Service User's right to confidentiality or a previously expressed wish of the Client/Service User

Complaints can be received either verbally or in writing, and could be:

- In person
- By telephone
- In writing
- Through a member of our staff
- Through an advocate or representative

Where someone complains verbally, Special People Partnership Ltd. will make a written record and provide a copy of it within 3 working days:

- By letter
- By email

Complaints can be sent to:

The CEO

Special People Partnership Ltd.

Special people  
Brickworks Community Centre  
42 Crouch Hill  
London  
N4 4BY

Verbal complaints can be made in person or via:

Special People Partnership Ltd. Telephone Number: 020 7686 0253

Special People Partnership Ltd. Email: [hr@specialpeople.org.uk](mailto:hr@specialpeople.org.uk)

On Call Telephone Number: 07702510264

**Accessibility - Including Support for Client/Service Users with a Learning Disability or Autism**

Special People Partnership Ltd. recognises that there are times where some Client/Service Users will need additional support to be able to provide feedback to the service. Special People Partnership Ltd. commits to offering information in various accessible formats such as easy read documents, audio versions, and translated materials through interpreters.

At the time of the preservice assessment Special People Partnership Ltd. will identify how much support the Client/Service User may require in this area. This will be logged in the agreed Care Plan, and reviewed as part of the ongoing evaluation process of the Client/Service User's Care needs.

Special People Partnership Ltd. provides easy read versions of the Complaints, Suggestions and Compliments policy and procedure and ensures that Client/Service Users are given information on how to make a complaint and the process once a complaint has been made, including any agreed timescales.

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Special People Partnership Ltd. will ensure that Client/Service Users are given information on how to make a complaint and the process once a complaint has been made, including any agreed timescales.

Special People Partnership Ltd. will support individuals who wish to lodge a complaint by ensuring accessibility and providing the necessary assistance in line with the Accessible Information Standard.

Additionally, for Client/Service Users who require further support, Special People Partnership Ltd. will help to arrange advocacy services to assist individuals in navigating the complaint process, ensuring their concerns are heard and addressed effectively. This is to support the complaint process and ensure it is as inclusive and supportive as possible for everyone.

Further information on supporting Client/Service Users with communication needs can be found in the:

- Supporting Communication and Sensory Needs Policy and Procedure
- Person-Centred Care and Support Planning Policy and Procedure

Advocacy support information can be found in the Advocacy Policy and Procedure of Special People Partnership Ltd..

## 5.2 Time Limits for Submitting a Complaint

Complaints should be submitted within 12 months of the incident or concern arising.

The time limit, however, can and should be waived, if:

- It is still practical and possible to investigate the complaint (the records still exist and the individuals concerned are still available to be questioned, etc.) and
- The complainant can demonstrate reasonable cause for delay in making the complaint

It is at the discretion of the manager of the service if the time limit can be set aside.

## 5.3 Complaints Procedure:

### Step 1

When a complaint is raised to staff, staff will make an effort to resolve it immediately to the satisfaction of the complainant.

### Step 2

Staff will apologise for the fact that there was the need to complain in the first instance and explain the complaints process as described in the procedure steps.

### Step 3

Staff will report the complaint to the most senior member of staff on duty and the complaint will be logged. If the complaint relates to that individual, the staff member will report the complaint to the member of staff who is next in line in seniority.

### Step 4

Formal acknowledgement of all complaints received (whether verbal or written) will be sent within 3 working days to the complainant. This could be via letter or email. Special People Partnership Ltd. will have a local system in place to manage out-of-hours and weekend complaints received.

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The acknowledgement will include:

- An invitation to meet and discuss the complaint
- Who will be investigating the complaint
- How the investigation will be handled - the response should state what the investigation will be focused on
- A time limit for the investigation to be concluded. This should be 28 working days. However, some cases may take longer and the complainant will be made aware of this
- The complaints procedure and contact details of bodies that can be accessed in the event of dissatisfaction with the outcome of the investigation

**Step 5**

Following a full investigation, a response letter will be sent and this will include the following:

- A summary of the issue from the complainant's point of view
- Details of the evidence and sources consulted in order to investigate the issue fully and fairly
- A presentation of the findings for each issue clearly and concisely described
- A conclusion, stating clearly whether the issue is 'upheld', 'partially upheld' or 'not upheld'; unless it is ineligible, in which case the reason for this will be given, e.g. out of time or out of jurisdiction
- An explanation of the outcome and whether any remedial action or learning points arise from the investigation of that issue
- An apology where the issue is upheld and shortcomings or failings have been found
- The complainant's rights if not satisfied with the outcome to refer to The Local Government and Social Care Ombudsman
- A signature from the responsible individual or sent by email in their name

**Step 6**

The complaint will be closed once confirmation has been received that there is satisfaction with the outcome. In the event of dissatisfaction, Special People Partnership Ltd. will support the complainant to access further support. (Refer to section 5.9 and 5.10)

**5.4 The Complaints Log**

A record will be held of all complaints raised and contain the following information:

- Each complaint received
- Subject matter and outcome
- Details of any reason for delay where investigations took longer than the agreed response period
- The date the report of outcome was sent to the complainant
- If no action is taken this will also be recorded

Where complaints relate to a particular Client/Service User, a copy of the complaint will be held in their care records so that the Client/Service User can reflect on the recommendations.

Where complaints are raised by telephone, the log will include the date and time of the call and this will be followed up with written confirmation of the areas discussed.

Where a complaint indicates the potential abuse of Client/Service Users, safeguarding policies will be followed as per local authority expectation and necessary notifications

made to the regulatory body. Where Care is commissioned by Islington London Borough Council, their reporting procedure for notifying them of complaints will be followed.

Where complaints are to be shared as part of learning, the complaint will be anonymised so there is no identifiable Client/Service User information, in line with UK GDPR and data protection law.

### 5.5 Investigations

All investigations will be managed by using the following approach:

- Investigating the fact
- Assessing evidence
- Review of records
- Interviewing those involved

Where necessary, advice and support will be sourced via senior managers within the organisation. The complaint must be investigated by a member of staff with the knowledge, experience and seniority to undertake the investigation robustly.

Confidentiality of information will be considered at all times and staff will adhere to the confidentiality policies and relevant codes of practice.

Appropriate action will be taken without delay to respond to any failures identified by a complaint or the investigation of a complaint.

If an investigation of a complaint results in disciplinary action against staff within Special People Partnership Ltd., the complaint will continue to its conclusion. The complainant will be informed that the investigation has led to the disciplinary process, but the details of the outcome or ongoing investigation will remain confidential.

Special People Partnership Ltd. conducts investigations impartially and without discrimination, the approach to a Client/Service User's support will remain unchanged in this way and indiscriminate treatment will be provided.

### 5.6 One Complaint, One Response

Where more than one organisation is involved in the Client/Service User's Care, they, or their representative, will be able to complain to any of them and Special People Partnership Ltd. will contact the other organisations, carry out a joint investigation and provide a single joint response. Client/Service Users must not have to contact each organisation separately.

If someone complains and Special People Partnership Ltd. is not responsible for the care or service complained about, rather than turning the complainant away, Special People Partnership Ltd. will share the concerns with the correct organisation(s). It will be necessary to obtain the individual's permission to do this. If the person prefers that their complaint is not shared with another organisation (or organisations), Special People Partnership Ltd. will signpost them to the right organisation instead and provide the person with their contact details.

Special People Partnership Ltd. will follow Local Government Ombudsman (LGO) guidance for managing this.

### 5.7 Who is Responsible for Complaints Resolution at Special People Partnership Ltd.?

All efforts will be made by Mr Constantine Bentai to resolve all complaints within Special People Partnership Ltd.. If a particular Client/Service User does not wish to raise a

complaint directly with management within Special People Partnership Ltd., in the first instance, staff will try and sensitively establish their reasons why and aim to resolve and address any concerns that present.

Special People Partnership Ltd. recognises the importance of Client/Service Users being able to speak freely and raise a concern or complaint regarding anyone in the organisation, including the CEO. Client/Service Users are provided with information relating to who to contact in the event that this is necessary.

### **5.8 Handling Complaints About the Registered Manager**

If the complaint relates to the conduct of the CEO then the following process applies:

**Dual Roles** - We recognise that having the dual role of registered manager and nominated individual has the potential to increase conflict of interest and risk within the service. To ensure impartiality, if there is a complaint about the registered manager who also holds the role of nominated individual, complaints or concerns will be referred to our external consultant for oversight and management.

**External Investigation** - To ensure impartiality, investigations will be carried out by an external professional, such as a health and social care consultant or an alternative social care provider registered with the regulator, to conduct the investigation process.

**Alternative Contact** - The person making the complaint may feel more comfortable directing their complaint to the nominated individual or registered provider.

**External Investigation** – There may be times, to ensure impartiality, when investigations will be carried out by an external professional, such as a health and social care consultant or an alternative social care provider registered with the regulator.

This process ensures that all complaints are managed fairly and impartially.

**Please see the Complaints Procedure for Client/Service Users in the Forms section.**

### **5.9 Anonymous Complaints**

Anonymous complaints will be investigated in the same way as named complaints. They will be logged and any corrective action necessary will be taken and also logged.

### **5.10 The Right to Appeal a Decision and Internal Review**

Following the outcome of the investigation, if the complainant is dissatisfied with the response or handling of information, they have the right to appeal the decision by Special People Partnership Ltd.. Upon being notified of this Special People Partnership Ltd. will conduct an internal review of how the complaint was handled. The investigation will be conducted by a member of staff with suitable standing that is not the original responder to the complaint, such as the Constantine Bentai.

#### **When to Appeal:**

- You believe that the outcome of a complaint was incorrect and disagree with the initial decision
- You disagree with the initial decision as you suspect there was a failure in the complaint process
  - Such as insufficient investigation
  - A misunderstanding of your complaint
  - A misinterpretation of evidence
- You can provide new evidence or information that wasn't available during the initial complaint that affects the outcome
- You feel the decision is unfair or unreasonable

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Special People Partnership Ltd. recognises that as a key part of transparency and continuous improvement, conducting an internal investigation of this process is necessary before signposting the complainant to an external body.

**5.11 Unresolved Complaints & Independent Review**

Following the initial handling of the complaint and the appeal process, in the event that the Client/Service User feels their complaint is unresolved, there are many bodies that can support or will need to be informed to assist with this (to ensure there is no bias). These services may conduct an independent review on how the complaint has been handled and will consider if the complaint has been:

- Handled fairly
- Investigated thoroughly and efficiently, exploring all the facts
- Handled objectively

They will issue a final report that outlines their findings and recommendations.

Special People Partnership Ltd. will fully cooperate with this process and provide the independent reviewer all the information required to ensure transparency. We have a commitment to continuously improve, as part of that commitment we fully understand the importance of learning from the outcomes of this process.

The following external bodies can assist with a complaint that a person feels remains unresolved:

**1. The Care Quality Commission**

The Care Quality Commission will not investigate complaints on behalf of individuals but does like to be informed of any concerns regarding a care provider, such as poor care that has been seen or experienced. Information given to the CQC will help to prevent others from going through the same experience and can be fed back via:

- Website [www.cqc.org.uk](http://www.cqc.org.uk)
- Email [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)
- Address: Care Quality Commission (CQC)  
National Correspondence  
Citygate, Gallowgate  
Newcastle upon Tyne NE1 4PA  
Tel: 03000 616161  
Fax: 03000 616171

**2. The Local Government and Social Care Ombudsman (for those Client/Service Users that are funded by local authority-funded social services care or self-funded)**

Individuals have the right to raise their complaint with the Local Government and Social Care Ombudsman. This is a free service and individuals can contact their Local Government and Social Care Ombudsman via:

The Local Government and Social Care Ombudsman  
PO Box 4771  
Coventry CV4 0EH  
Tel: 0300 061 0614  
Email: [advice@lgo.org.uk](mailto:advice@lgo.org.uk)  
Website: <https://www.lgo.org.uk/>  
Complaint form: <https://www.lgo.org.uk/complaint-form>

**Self-Funded Care**

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The Local Government Ombudsman (LGO) may investigate complaints from people who arrange their own care. Self-funders will have the right to complain to an independent and impartial Ombudsman.

Individuals must be advised that the Local Government and Social Care Ombudsman will not investigate the complaint until the provider has had the opportunity to respond and resolve the matter in the first instance.

**3. Parliamentary and Health Service Ombudsman (for Client/Service Users that are NHS funded)**

Individuals have the right to raise a concern about a service that is NHS funded. This is a free service and individuals can make contact via:

- Telephone 0345 0154033
- Email [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk)
- Website [www.ombudsman.org.uk](http://www.ombudsman.org.uk)
- Address: Parliamentary and Health Service Ombudsman, Millbank Tower, 30 Millbank, Westminster, London, SW1P 4QP

Mr Constantine Bentai can also signpost individuals to Healthwatch and the local Independent Complaints Advocacy Service (ICAS).

**4. Integrated Care Systems**

Individuals can make a complaint about a health service they are receiving or have received and can discuss this with the commissioner of the service.

**5. Local Authority Complaints Teams**

Individuals have the right to raise concerns and complaints about adult social care regardless of whether or not they pay for their own Care or if the Council funds it. Individuals can make a complaint about organisations that provide services on the Council's behalf. The contact details for the Local Authority Complaints Team are:

Local Authority Complaints Team

**6. Professional Bodies**

If a complaint involves the serious misconduct of a healthcare professional, their relevant professional body can be informed and this is determined on an individual case basis in discussion with the CEO.

For any external bodies managing complaints, Special People Partnership Ltd. will work with the external body providing information as requested, within any agreed timescales expected.

Decisions to raise complaints outside of Special People Partnership Ltd. will be fully respected and the Client/Service User will be supported to raise their complaint with the commissioner of the service or to seek the support of an independent advocate or representative. Staff can also refer to section 5.6 for a further list of organisations that can be accessed.

Client/Service Users can also be signposted to Citizens Advice guidance.

## 5.12 Vexatious Complaints

Occasionally, Special People Partnership Ltd. may receive complaints that are vexatious in that they cause considerable disruption to the work at Special People Partnership Ltd., disproportionate cost and time to handle, and impact the wellbeing of staff (because of the way the complaint is made or because of its repetitive nature).

Special People Partnership Ltd. will ensure that it meets the requirements of the Equality Act 2010 to make 'reasonable adjustments' for disabled Client/Service Users. In some circumstances, Client/Service Users may have a disability that makes it difficult for them to either express themselves or communicate clearly and/or appropriately. Where there is an indication that this may be the case, Special People Partnership Ltd. will consider the needs and circumstances of the Client/Service User or complainant in the first instance and use this information to inform any decisions that are made.

Where appropriate, Special People Partnership Ltd. will consider complaints to be vexatious, but would not label an individual complainant as vexatious. Even if Special People Partnership Ltd. decides that an individual's complaint about the service is vexatious, that does not preclude that person from making a formal complaint. Special People Partnership Ltd. would still consider any such complaints in line with the usual procedures, as outlined in this policy.

To help decide whether a complaint is vexatious Special People Partnership Ltd. will consider the full history and context of interactions with the individual making the complaint, and will look at both the nature of the complaint and the manner in which it is made. The particular issues that will inform a decision will include whether:

- The primary purpose and/or effect of the complaint is to disturb, disrupt and or/pressurise Special People Partnership Ltd., its staff or an individual member of staff
- The primary purpose and/or effect of the manner in which the complaint is made is to disturb, disrupt and or/pressurise the Special People Partnership Ltd., its staff or an individual member of staff
- The complaint is otherwise clearly unreasonable

If at any point in the handling of a complaint a member of staff believes it meets the criteria to be deemed vexatious, it must be referred to the CEO with a summary of why it is thought to be vexatious.

Mr Constantine Bentai will consider the complaint, seek external advice if appropriate, and will either declare the complaint as being vexatious or not. Where a complaint is not deemed to be vexatious it will be returned to the appropriate point in the complaints handling process.

If a complaint is deemed to be vexatious, the CEO will respond directly to the complainant explaining why it is thought to be so and will explain that the complaint will be closed with no further action. The CEO will also consider if the making of a vexatious complaint also requires the application of a restriction on communication following unreasonable behaviour.

The decision to declare a complaint as vexatious will be recorded in the complaints register for future reference.

Any declaration that refers to the specific complaint being vexatious and any further complaints from the same individual will still be considered.

If any individual wishes to challenge a decision made in relation to this policy, and all attempts to resolve the complaint locally have been unsuccessful, details of the Complaints Team of Islington London Borough Council and Parliamentary and Health Service Ombudsman (PHSO) will be shared with the complainant.

### 5.13 Compliments

Receiving compliments is an opportunity to celebrate and recognise success. Special People Partnership Ltd. will ensure that:

- All compliments are shared with staff and displayed in a public area to highlight good practice
- Compliments are anonymised or permission is sought before displaying them
- The number of compliments received is logged as part of a quality assurance programme
- Verbal, positive feedback from Client/Service Users and relatives is also deemed a compliment and will be recorded and shared with colleagues
- Compliments form a core agenda item at staff, Client/Service User and relative meetings

### 5.14 Suggestions

Suggestions can be made verbally or in writing and generally are in response to seeking a means of changing practice for the better.

- Suggestions are not complaints, but in some circumstances, if they are not considered or actioned, they could lead to a complaint
- When suggestions are raised in meetings or as part of a conversation, these will be documented and then outcomes of such suggestions recorded to show consideration
- Staff will be encouraged to share their suggestions, or suggestions received by relatives and Client/Service Users, with Mr Constantine Bentai
- Mr Constantine Bentai will consider implementing a suggestions system to encourage comments from Client/Service Users, staff and visitors

### 5.15 Audit and Evaluation

Special People Partnership Ltd. will monitor, review and analyse all information received about the service as a means of continuously reviewing performance, quality and safety.

Special People Partnership Ltd. operates with an ethos of continuous improvement and will:

- Ensure all complaints are logged as described in section 5.4
- Identify themes and trends
- Create actions to improve any identified themes and trends
- Share themes, trends and actions with Care Workers working for Special People Partnership Ltd.
- Ensure that staff are trained to deal with complaints and understand the procedure for managing complaints
- Conduct audits on the complaints process to evaluate timescales, outcomes and feedback

### Using Feedback from Complaints to Improve the Service at Special People Partnership Ltd.

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Special People Partnership Ltd. values feedback from complaints as a critical tool for continuous improvement. It commits to thoroughly analysing all complaints received to identify patterns and areas for enhancement. Specific actions or changes that may be implemented based on complaints include revising policies, providing additional staff training, updating procedures, and enhancing communication channels. Each complaint will be documented and actionable insights and lessons learnt will be shared with relevant stakeholders to ensure that corrective measures are taken promptly to prevent recurrence and improve overall service quality.

**Reviewing the Effectiveness of the System at Special People Partnership Ltd.**

As part of the commitment of Special People Partnership Ltd. to good governance, the complaints process will remain effective and responsive, using a process of regular reviews and assessments. This includes audits of complaint records to evaluate response times, resolution rates, and customer satisfaction post-complaint resolution. Special People Partnership Ltd. will also gather feedback from complainants on their experience with the complaints process. Findings from these reviews will be used to refine the complaints handling procedures, ensuring they are user-friendly, efficient, and aligned with best practices. Regular staff training will be conducted to keep all team members updated on any changes and to reinforce the importance of effective complaint management.

**Independent Review**

Special People Partnership Ltd. is committed to the growth and development of the service. As such we recognise that concerning trends identified over time or processes that do not seem to be working may benefit from an independent review. Special People Partnership Ltd. will seek external support from an independent consultant should it be deemed necessary.

For more details, staff should also refer to the following policies and procedures:

- Good Governance Policy and Procedure
- Quality and Quality Assurance Policy and Procedure
- Auditing Policy and Procedure

**5.16 Continuous Improvement and Development**

Without feedback it is impossible to improve our service. We have a strong ethos on embracing the feedback we receive be it a compliment or concern to enhance our service.

As part of our commitment to create and maintain a positive culture, we embed this ethos in our staff training from induction onwards to make sure that any feedback is viewed as a catalyst for improvement. If we do not know about it, we cannot do anything to improve or change it.

We share our overarching identified lessons learned and outcomes with both staff and Client/Service Users to make sure that they feel part of this process, are kept informed and are invested in our commitment for the betterment of the service.

**6. Definitions****6.1 Compliment**

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- A compliment is an expression of satisfaction about a service the Client/Service User has received
- Compliments are positive feedback that can be received verbally or in writing and can include expressions of praise, admiration, congratulation and encouragement

**6.2 Complaint**

- A complaint is an expression of dissatisfaction, disappointment or discontent. This could be in response to an act of omission, decision or act
- Complaints can be made in various ways and include:
  - Verbally
  - Electronically
  - Local feedback channels
  - Writing

**6.3 Self-Funded Care**

- Self-funded care is defined as care that is paid for entirely by the person receiving it

**6.4 Vexatious Complaint**

- A vexatious complaint is one that is pursued, regardless of its merits, solely to harass, annoy or subdue somebody; something that is unreasonable, without foundation, frivolous, repetitive, burdensome or unwarranted

**7. Key Facts - Professionals**

Professionals providing this service should be aware of the following:

- Any feedback received from Client/Service Users or their representatives can influence positive change and quality delivery of care and must be discussed with the manager
- The receipt of complaints, suggestions and compliments is everyone's responsibility and therefore staff will know what to say and how to respond. Staff need to be able to promote an open, honest and transparent service to encourage people to feel able to feedback and raise concerns
- Staff will be involved in quality improvement planning in response to themes from both compliments and complaints received by the service. Compliments will be recognised and celebrated and staff will be supported during any complaints investigations
- Services where dual roles are held by the CEO have alternative external arrangements in place that are clearly documented to support people to complain without prejudice and to support impartiality

**8. Key Facts - People Affected by The Service**

People affected by this service should be aware of the following:

- The process for you to raise a concern, make a suggestion or give a compliment will be simple and it is our intention that you feel listened to and understood

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- In line with our commitment to continuous improvement, your concerns, suggestions and compliments will make a positive difference to future care at Special People Partnership Ltd.
- You have the right to feel confident to raise a concern, make a suggestion or give a compliment



## Further Reading

### **Parliamentary and Health Service Ombudsman - Principles of Good Complaint Handling:**

<https://www.ombudsman.org.uk/about-us/our-principles/principles-good-complaint-handling>

### **Care Quality Commission - Complaints Matter Report 2014:**

[https://www.cqc.org.uk/sites/default/files/20141208\\_complaints\\_matter\\_report.pdf](https://www.cqc.org.uk/sites/default/files/20141208_complaints_matter_report.pdf)

### **Local Government and Social Care Ombudsman (2019) - Caring about Complaints - Lessons from our independent care provider investigations:**

<https://www.lgo.org.uk/information-centre/news/2019/mar/ombudsman-issues-good-practice-guide-for-care-providers>

### **NHS England - What are Integrated Care Systems?**

<https://www.england.nhs.uk/integratedcare/what-is-integrated-care/#ccg-e>



## Outstanding Practice

To be "outstanding" in this policy area you could provide evidence that:

- All complaints are logged, investigated and the outcomes are fed back to the complainant within the agreed timescales
- The wide understanding of the policy is enabled by proactive use of the QCS App
- Trends in complaints are identified and tracked to improve service delivery
- There is evidence of annual reporting as a means of commitment to transparency and quality. Prepare and publish an annual report detailing the numbers of complaints, compliments and suggestions and the actions taken as a result
- Client/Service Users are involved in the complaints handling process and future design of procedures. Their views influence future management decisions
- The service is dedicated to continuous improvement and any complaints are viewed as a means to make things better



## Forms

The following forms are included as part of this policy:

Title of form	When would the form be used?	Created by
Complaint Investigation Template - QQ03	To record a complaint and investigation.	QCS
Complaints Procedure for Service Users - QQ03	To be displayed in a prominent position at the Service and given to Service Users prior to admission.	QCS
Complaints and Compliments Register - QQ03	To record compliments or complaints	QCS
Complaint Acknowledgement Letter Template - QQ03	To acknowledge a complaint received.	QCS
Complaint Final Response Letter Template - QQ03	To respond to a complaint when the investigation is completed.	QCS

## Complaint Investigation Template - QQ03

<b>Complaint Reference:</b>			
<b>Name: (Who does the complaint relate to?)</b>		<b>Date of Birth:</b>	
<b>Address:</b>			
<b>Date of Complaint:</b>		<b>Date Complaint Acknowledged:</b>	
<b>Name of Complainant:</b>		<b>Date Response Required by:</b>	
<b>If the complainant is not the Client/Service User, what evidence was provided of the Client/Service User's consent to complain on their behalf?</b>			
<b>Overview of Complaint</b> (attach the complaint letter or notes of verbal complaint to this form):			

**Investigation Plan** (outline the planned activities to investigate the complaint):

**Findings of Investigation** (attach interview notes to this form):

**Proposed Response:**

--	--

**Approved by:**

--

**Response Provided by:**

--

**Method** (attach any written communication to this form):

--

**Date:**

--

## Complaints Procedure for Service Users - QQ03

### 1. Introduction

We always aim to provide a high standard of care in all our services.

Our Client/Service Users' views are important to us and help to ensure our services are consistently meeting people's needs. If you are unhappy with any of our services, it is important that you let us know.

If a complaint alerts us to possible abuse or neglect, we will tell the Local Authority's Adult Safeguarding Team. The Safeguarding Team will decide how to investigate and monitor outcomes.

### 2. Making a Suggestion

Often people feel more comfortable suggesting improvements than complaining formally. Suggestions can be made by anyone receiving services, or their friends/family. To make a suggestion you can:

- Speak to the manager or their deputy
- Utilise available comments or suggestion boxes if you would rather make your suggestion that way
- If the suggestion is something that Special People Partnership Ltd. as a company needs to consider, you can send it to:

CEO

Special People Partnership Ltd.

Special people  
Brickworks Community Centre  
42 Crouch Hill  
London  
N4 4BY

020 7686 0253

### 3. Making a Complaint

We aim to handle complaints quickly, effectively and in a fair and honest way. We take all complaints seriously and use valuable information from investigating to help us improve the service we provide. We treat all complaints in confidence.

Special People Partnership Ltd. assures Client/Service Users and their families that it will not withdraw or reduce services because someone makes a complaint in good faith.

### 4. Who Can Complain

Anyone affected by the way Special People Partnership Ltd. provides services can make a complaint.

A representative can make a complaint for the affected person if they:

- Have died
- Cannot make a complaint themselves, or
- Have given consent for the representative to act on their behalf

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If you are not happy about making a complaint yourself and you do not know someone who can talk or write to us on your behalf, we will be happy to find someone from an independent organisation to act as an advocate for you.

**5. How You Can Make a Complaint**

You can complain:

- In person
- By telephone
- In writing
- Through a member of our staff
- Through an advocate or representative

*Where someone complains verbally, we will make a written record and provide a copy of it within 3 working days*

- By letter
- By email

**6. Anonymous Complaints**

We deal with anonymous complaints under the same procedure. However, it should be noted, if you provide contact details, we can update you on the outcome of our investigation.

**7. Responsibility**

The CEO has overall responsibility for dealing with all complaints made about their service.

We will provide, as far as is reasonably practical, support for Client/Service Users, friends and family who wish to make a complaint but understand that they may wish to contact Special People Partnership Ltd or Care Quality Commission directly.

This includes:

- Providing any help needed to understand the complaints procedure
- Providing advice on where you may get that help
- Providing advice and information in an accessible format about making a complaint in a way you can understand

If the complaint relates to the conduct of Mr Constantine Bentai, you may feel more comfortable to direct your complaint to Constantine Bentai or Special People Partnership Ltd.

There may be times where the registered manager and nominated individual are the same person. In order to conduct an investigation impartially, Special People Partnership Ltd. may enlist an external professional such as a health and social care consultant or alternative Social Care provider who is registered with CQC to complete this process on our behalf.

**8. How We Handle Complaints**

The CEO or Special People Partnership Ltd. may ask one of the management team to investigate the complaint. That person will have enough seniority and experience to deal with the issues raised by the complaint.

We will formally acknowledge a complaint within **3** working days and give you the name and contact details of the person investigating it.

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We will keep you informed about the progress of the investigation. We aim to have all complaints finished within **28 working days** unless we agree a different time scale with you.

When we have finished investigating, we will arrange to meet with you to discuss the outcome, and write to you with:

- Details of the findings
- Any action we have taken
- Our proposals to resolve your complaint

**9. Time Limits**

You should complain as soon as you can after the date on which the event occurred or came to your notice. If you complain more than twelve months later, we may not be able to investigate properly. However, we will consider whether you had a good reason for not making the complaint sooner and whether, despite the delay, it is still possible to investigate the complaint effectively and fairly.

**10. Further Steps**

1. At any stage during the process, if you are not happy with the way Special People Partnership Ltd. is dealing with your complaint you can contact Constantine Bentai at:

Special People Partnership Ltd.

Special people  
Brickworks Community Centre  
42 Crouch Hill  
London  
N4 4BY

020 7686 0253

You can also contact your Local Authority Complaints Team to complain. You can contact the Local Authority Complaints Team at:

Local Authority Complaints Team

2. Once we have dealt with your complaint, if you are unhappy with our response or handling of information you have the right to appeal our decision. We will conduct an internal review of how the complaint was handled. The investigation will be conducted by a member of staff with suitable standing that is not the original responder to the complaint, such as Constantine Bentai.

**When to Appeal:**

- You believe that the outcome of a complaint was incorrect and disagree with the initial decision
- You disagree with the initial decision as you suspect there was a failure in the complaint process
  - Such as insufficient investigation
  - A misunderstanding of your complaint
  - A misinterpretation of evidence
- You can provide new evidence or information that wasn't available during the initial complaint that affects the outcome

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- You feel the decision is unfair or unreasonable

We will conduct our review and aim to respond with our findings within 20 working days.

3. Following this process, if you are not happy with the outcome you can refer your complaint to the Local Government and Social Care Ombudsman and ask for it to be reviewed. The Local Government and Social Care Ombudsman provides a free, independent service.

You can contact them at:

The Local Government and Social Care Ombudsman  
PO Box 4771  
Coventry CV4 0EH  
Tel: 0300 061 0614  
Email: [advice@lgo.org.uk](mailto:advice@lgo.org.uk)  
Website: <https://www.lgo.org.uk/>  
Complaint form: <https://www.lgo.org.uk/complaint-form>

***NB: The Ombudsman will not normally investigate a complaint until the provider has had an opportunity to respond and resolve matters.***

3. The services of Special People Partnership Ltd. are registered with, and regulated by, the Care Quality Commission. The CQC cannot get involved in individual complaints about providers but is happy to receive information about services at any time.

You can contact the CQC at:

Care Quality Commission National Correspondence

Care Quality Commission (CQC)  
National Correspondence  
Citygate, Gallowgate  
Newcastle upon Tyne NE1 4PA  
Tel: 03000 616161  
Fax: 03000 616171

Website: [www.cqc.org.uk](http://www.cqc.org.uk)

**\*We can provide this policy in other languages or in other formats on request**

**Complaints and Compliments Register - QQ03**

Date	Name of person making complaint/giving a compliment	Summary of complaint/compliment	Action taken

## Complaint Acknowledgement Letter Template - QQ03

[Insert date]

[Insert name]

[Insert address]

**Our ref:** [Insert reference]

**Your ref:** [Insert reference]

**Our contact details:** [Insert name, email address and phone of person managing this complaint]

Dear [Insert title and name]

[Insert heading. For example, Complaint about..... ]

Thank you for bringing to our attention your concerns in [your letter/your email/our conversation] of [date]. I am sorry that you are not happy with the service provided by Special People Partnership Ltd..

As I understand it, you are concerned that [Insert your understanding of the issues of concern, using a bulleted or numbered list if there is more than one point]. Please contact me straight away if I have misunderstood your concerns.

I would be happy to meet you to discuss the issues you have raised and our investigation procedures, if that would be helpful. [Suggest a date and/or ask them to contact you to arrange].

I am looking into the points you have made as a matter of urgency and shall be in touch with you with a full response by [insert anticipated response time – not longer than 28 working days].

Please do contact me again in the meantime if I can be of further assistance. My email and phone number are provided above.

Yours sincerely,

[Insert name and job title]

## Complaint Final Response Letter Template - QQ03

[Insert date]

[Insert name]

[Insert address]

**Our ref:** [Insert reference]

**Your ref:** [Insert reference]

**Our contact details:** [Insert name, email address and phone of person managing this complaint]

Dear [Insert title and name]

[Insert heading. For example, Complaint about..... ]

My investigation into the concerns you raised on [Insert date] is now complete.

I will address each of the points as outlined in my earlier acknowledgement letter to you.

[Repeat each individual point of complaint and follow each one with what you found in the investigation. Put this as a numbered list if there is more than one issue.]

Point one, I have found that...

Point two, I have found that...

### Outcome

As a result of your complaint, we have taken the following action (if not already mentioned above).

[action one]

[action two]

[action three]

I would like to thank you for bringing these matters to our attention. We welcome comments from people who use our services and aim to use these to improve our services.

If you are not fully satisfied with the way we have handled your complaint, you have the right to take your complaint to the Local Government and Social Care Ombudsman, whom you can contact at:

Tel: 0300 061 0614

Email: [advice@lgo.org.uk](mailto:advice@lgo.org.uk)

Website: [www.lgo.org.uk](http://www.lgo.org.uk)

Yours sincerely,

[Insert name and job title]