

Concerns and Complaints for Domiciliary Care (England) Policy

Aims and Scope

This policy sets out the values, principles and procedures, which underpin **Shalom Health Recruitment Ltd's** approach to handling complaints. We view complaints as an essential part of person-centred care and as opportunities to improve, build trust and strengthen our service delivery.

We do not consider complaints as threats, nor do we consider the number of complaints which we might receive as indicative of poor-quality care. We do consider them to reflect our open, transparent approach that puts the person we are serving and their wellbeing at the heart of what we do.

We consider the following to be benefits of having an effective and positive approach to our complaints handling.

- Strengthens trust between our staff and the people they are supporting, including family members.
- Prevents distrust and poor relationships by acting promptly and constructively to any concerns.
- Helps staff to gain confidence and competence in their practice.
- Helps care service management to gain insight into frontline problems and challenges and learning from them.
- Generates information to drive service development and improvements.

CQC Policy Specification

Our complaints policy, procedures and protocols, accompanying guidance and resources reflect the Care Quality Commission's (CQC) registration requirements (July 2025).

The complaints policy should clearly state how we will handle complaints effectively including:

- how people can make a complaint
- how we will process complaints
- how will use complaints to improve our service.

1. How people can raise complaints

- How someone can make a complaint about our service.

- How we will support people who want to complain.
- Who complaints should be sent to (name and contact details).

2. Managing complaints

- Our step-by-step approach to handling complaints.
- How long each stage will take.
- How we will keep people updated throughout.
- How we will tell people about the outcome.
- Where we will direct people if they are unhappy with the outcome.
- How we will co-operate with any independent review.

3. Learning from complaints

- How we will record and review all complaints.
- How we will use feedback to improve our service.
- How we will check our complaints system is working well.

4. Special circumstances

- How people can complain about the registered manager.
- Who will handle these complaints.
- If our nominated individual and registered manager are the same person, how complaints about them will be handled fairly and by whom.

5. Regulations we must follow (see below)

- Regulation 16: Receiving and Acting on Complaints.
- Regulation 20: Duty of Candour.
- The Accessible Information Standard.
- The Equality Act 2010.
- UK GDPR and the Data Protection Act 2018.

Section 1: How People Can Raise Complaints in Our Service

Policy Statement

Shalom Health Recruitment Ltd follows the Local Government Social Care Ombudsman's Complaints Handling Code I (Feb 2024) which is based on the following.

1. "Good complaint handling promotes a positive relationship between an organisation and people receiving care.
2. Complaints allow an issue to be resolved before it becomes worse. Those issues not resolved promptly can take significant resource and time to remedy.
3. Involvement in complaint resolution develops staff ownership, decision-making and engagement.
4. Complaints provide senior staff with essential insight into day-to-day operations, allowing them to assess effectiveness and drive a positive complaint handling culture.
5. Data collected about complaints can be analysed and used to inform key business decisions to drive improvement in service provision."

Shalom Health Recruitment Ltd operates a positive complaints culture by promoting transparency and openness and listening to and acting on all comments and complaints about our service.

We work 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.

We will always manage the complaint properly and effectively so that the individuals feel confident that we are listening and responding promptly and fairly to their concerns, worries and complaints.

We respond to everyone's complaint equally and fairly. We do not discriminate, disadvantage, withdraw or reduce a service because of their complaint. We simply try to deal with it as constructively as possible to achieve, wherever possible, the outcomes which the person wants in making the complaint.

We help people with communication difficulties who require different methods to know how to complain and to understand how we will deal with their complaint, for example by producing easy-to-read, large print versions, audio and videotapes and in alternative languages.

We welcome complaints and look on them as opportunities to learn, adapt, improve and provide better services. This policy shows that we address all comments and complaints about our service seriously and diligently. We recognise any failure on our part to listen to

or acknowledge any complaint could lead to an aggravation of problems, dissatisfaction of people who use the service and possible litigation.

We support 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, the care service respects the right of the complainant to escalate the complaint to the appropriate complaints handling body.

In our service context this will either be the local authority, if it has commissioned the service about which the complaint is being made, or the Local Government Social Care Ombudsman in the case of people who have arranged their care privately with us and independently of the local authority.

We have specific protocols to address complaints about the registered manager or the management of the service so that they are addressed impartially. Escalation procedures apply to unresolved complaints as described above.

People who are dissatisfied with the outcome of the local authority's handling of their complaint about their commissioned provider always have the right to escalate their complaint further to the Ombudsman.

Escalation procedures also include the possible need for a referral to a professional regulator where the complaint involves alleged or potential professional misconduct by the registered manager or individuals representing the registered provider.

In the event of a complainant escalating an unresolved complaint to an external independent review body, we will always co-operate fully with their enquiries by providing all the evidence we have to arrive at a decision.

Policy Issues

The difference between a service request and a complaint

Shalom Health Recruitment Ltd recognises the distinction in the Ombudsman's Complaints Handling Code between a *service request* and a *complaint* and how the two interrelate.

Service request: *"a request that this care organisation provides or improves a service, fixes a problem or reconsiders a decision."*

Complaint: *any informal or formal expression of dissatisfaction or concern about our service. This could include expressions of dissatisfaction or concern about our decisions, our actions or the conduct of any person employed or responsible for the care provision. They can be made by anyone who uses our service and others speaking up for them or involved in their care and who expects us to acknowledge and address their concerns.*

The Code of Conduct continues by pointing out that *service requests* are not *complaints* but contain expressions of dissatisfaction. Care organisations should have the opportunity to deal with a service request before a complaint is made.

A complaint occurs when the individual expresses dissatisfaction with the response to their service request, even if the handling of the service request remains ongoing. An organisation should not stop its efforts to address the *service request* if the individual complains. Service requests should be recorded, monitored and reviewed regularly.

The difference in complaints handling between local authority commissioned and non-commissioned service agreements

Shalom Health Recruitment Ltd 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 the care provider corrects any faults found from the investigation of the complaint and could do this through its quality monitoring processes.

Complaint escalation

When it receives a written complaint about a local authority commissioned service it is providing, **Shalom Health Recruitment Ltd** 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.

Shalom Health Recruitment Ltd 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.

Shalom Health Recruitment Ltd 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, Shalom 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).

Who can make a complaint?

Shalom Health Recruitment Ltd expects complaints to come from people using our service, people and representatives involved in their care and friends.

We expect every complaint to be made with the consent of the person receiving our care unless they lack decision-making capacity to make their complaint and require someone

who can lawfully make the complaint by acting in their best interests, for example a power of attorney.

We do not investigate the following complaints.

- A complaint by an employee relating to their employment (we handle this through our grievance procedure).
- A complaint where we were not aware of the issue and can deal with it as a comment, feedback or suggestion first.
- A complaint that has already been investigated and resolved.

In these circumstances, we notify the complainant in writing of our decision not to investigate the complaint and the reasons why.

We expect to receive a complaint as soon as possible and practical after the issue giving rise to the complaint has occurred, so that we can address and remedy the problem in a timely manner. We are unlikely to investigate a complaint after an interval of 12 months at the latest unless there are good grounds for the delay.

Our principles of complaints handling

1. We always make people who use our service, their representatives and carers aware of how to complain from the onset.
2. We produce our complaints policy and procedures in formats that make them accessible to every person who uses the service and others involved in their care.

Examples of how we do this.

- We provide each person at the start of service with a complaints notice that describes our policy, what they should do and who to contact if they have any concern about the service we are providing.
- We display this prominently in the domiciliary care service office (if a public fronting area).
- We include information about how to complain in the information given to people who use the service (“service user guide”).
- We provide an easy-to-read copy of the complaints procedure or complaints notice to all new people receiving care.
- We have our complaints procedure available in alternative formats in line with users’ communication needs.
- We will refer people to the leaflet published by the [Complain About an Adult Social Care Service](#), CQC and to information about when and how to escalate an unresolved complaint to the Local Government Social Care Ombudsman.

3. We treat every expression of dissatisfaction made verbally or in writing, informally or formally as a complaint to be responded to in a professional manner.
4. We have protocols for responding to different types of complaint so that we can respond to each one proportionately in line with their capability for resolution and seriousness.
5. They will show how any person to whom the complaint is initially made or sent — which could range from care worker to the managing director or external organisation — will decide how to proceed and who to inform so that a due process follows.
6. We have a designated role with a named person who is responsible for setting up, triggering and administering the complaints handling process.
7. We acknowledge every written complaint within two working days of receipt with a letter describing how we will handle the matter, who will be responsible for the process and the person to contact on the progress.
8. We aim to complete our complaint investigations within 28 working days and will always inform the complainant of how we are proceeding and the timescales we are working towards.
9. We will inform the complainant of any reasons for failing to complete the investigation within the 28 days.
10. We will always inform the complainant of our findings in writing immediately after completion, in addition to any face-to-face discussion and meetings which has been held as part of or at the end of the process. We will always try to achieve a satisfactory resolution for the complainant as quickly as possible.
11. We always deal with complaints 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.
12. To develop our complaints handling we follow national guidance which recommends a three-stage (two stages for some self-funding people) model of:
 - a. local or line manager resolution which if unsuccessful or because of the nature of the complaint should lead to a
 - b. complaints review following an independent investigation process, and which if still unresolved might be escalated to
 - c. independent external adjudication by Local Government and Social Care Ombudsman (LGSCO).

13. For any enquiries made under b above, we will always appoint a person who can investigate the complaint impartially to avoid any actual or potential conflicts of interest in the process and outcome.
14. We will only appoint people who:
 - are competent to address the issues raised
 - provide honest explanations that are based on facts
 - include the reasons for the decisions made.
15. The detailed records created from the complaints process help to map out a documented audit trail of all the steps being taken and the decisions to be reached.
16. In our service, the person responsible for receiving and managing all complaints requiring stage two review is the Registered Manager.

The next section shows how we apply these principles in our detailed procedures.

Section 2: How We Manage Complaints in Our Service

Our Complaints Procedures: Stage One — Frontline and Local Resolution

In an open care culture such as ours, we expect people to speak up whenever they have a concern or problem about their care. We ask them to do this directly with their immediate care workers, which will in the main be in the form of a *service request* and who if they can, will take immediate action to put matters right.

The frontline and local resolution element of our Complaints Policy means that wherever possible, our staff will address complaints directly with the people making them so that they can put matters right as quickly as possible with an apology or explanation for any mistakes they might have made.

If a care worker cannot do this, they or their care worker might refer the matter to their line manager to assist, who will address and resolve the matter as soon as possible depending on the nature of the problem.

The line manager will initially acknowledge and record the request or complaint, the actions taken in response and the outcome, including if resolved to the satisfaction of the complainant or not and if the complainant proposes to escalate their request or concern to a formal stage two complaint.

We will work within the Complaints Handling Code which recommends we complete a stage 1 complaint response within 10 working days of the request or complaint being made and acknowledged.

If we fail to achieve resolution by these means we will prompt people of their right to have their complaint investigated further by requesting a stage two complaints review, by putting their complaint in writing our complaint's form.

Our complaints form asks the person to provide the following.

- Provide details of the person about whose care the complaint concerns.
- Details of the person making the complaint and in what capacity, eg as POA.
- State how you would like us to deal with the complaint.
- State the outcome you would like to get from the procedure, ie how we should resolve the matter to your satisfaction, eg an acknowledgement that we have been at fault, a formal apology or changes to the care we provide to the person.
- Say if they want any independent support (or further support) such as an advocate to represent their views and evidence for the enquiry (and we will help to arrange if needed).
- State how we might change and improve our service so that they would not need to complain.

Shalom Health Recruitment Ltd will then invoke its formal complaints procedures in response.

This will usually involve setting up an impartial enquiry led by someone who is not involved in any line management role in relation to the complaint. Before proceeding we will:

- clarify with the individual any aspects of the complaint they are unclear about
- deal with complaints on their merits, act independently and have an open mind
- give the individual a fair chance to set out their position
- take measures to address any actual or perceived conflict of interest
- consider all relevant information and evidence carefully.

If the complaint raises a safeguarding issue, we will alert the local safeguarding adults authority and take their advice on how to proceed.

If we receive a complaint from someone whose care has been arranged or commissioned by the local authority under the Care Act 2014 or jointly arranged with an NHS trust, we will notify the local authority of the complaint and discuss with it as the accountable body the best way of proceeding.

The local authority which operates its procedures under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 might seek to conduct

an investigation jointly with the care provider or ask the care provider to investigate on its behalf with agreed reporting procedures and potential future action.

If we are responding to a complaint requiring a stage two review from someone who is paying for their own care independently of any local authority involvement or in relation to a joint enquiry with a Local Authority we will proceed as follows.

Our Complaints Procedures: Stage Two — Complaints Review

If we record, receive a letter or a completed complaints form we will, in writing (taking communication needs into account) and/or verbally:

- acknowledge receipt of the complaint within two working days
- describe how we will review the complaint and in what timescale (28 working days or agreed timescale)
- state who will be responsible for handling the complaint. This will not be anyone the involved at stage one. This will usually exclude the registered manager from leading the investigation
- describe the evidence and information, including from relevant witnesses, which the review will consider and who will provide it
- describe how we will involve the person in the review (with advocacy help as needed)
- include contact details of the person leading the review and how and when to get hold of them to check on their progress or to offer further information
- provide details of any meeting to be arranged to discuss findings or outcome or to agree other means
- provide reassurance that the review will be fair, impartial and without adverse consequences for the complainant
- communicate our findings in writing (as well as verbally) as follows.
 - A summary of the procedures followed in line with the stage two policy.
 - Our understanding of the complaint.
 - The decision made about complaint and the reasons for making it.
 - With an upheld complaint the details of any remedy offered to put things right.
 - Details of any outstanding actions.

- Details of how to escalate the matter to the Local Government and Social Care Ombudsman if the complainant remains dissatisfied with the process or outcomes.

Findings and remedies

Where from the complaint findings it is evident that we have got something wrong we will acknowledge this and set out the actions taken or will take, to put things right. These can include:

- apologising (as also in line with our Duty of Candour)
- acknowledging where things have gone wrong
- providing an explanation, assistance or reasons
- taking action if there has been delay
- reconsidering or changing a decision
- amending a record or adding a correction or addendum
- providing a financial remedy, particularly if the complaint is about invoicing and charges
- changing policies, procedures or practices and staff training.

We offer any remedy to reflect the impact on the individual as a result of any acknowledged fault on our part.

We will explain to the complainant what will happen and by when and act accordingly.

We will inform the complainant if we cannot deliver the proposed remedy and the reasons for this, possibly offer an alternative and reminded them of their right to complain to the Local Authority and Social Care Ombudsman.

Independent external adjudication

If complainants are still dissatisfied with the management and outcome of their complaint, the care service is aware that they can refer the matter to the Local Authority and Social Care Ombudsman.

How we deal with different types of complaint

Verbal complaints

Shalom Health Recruitment Ltd adopts the following procedures for responding to complaints and concerns made verbally to care staff in the course of their providing care or by telephone to managers.

1. **The care provider** expects its staff to treat all verbal service requests, concerns and complaints, no matter how seemingly unimportant, seriously and to acknowledge, report and record them.
2. If a person expresses a service request, concern or complaint to their care worker while receiving care, the care worker should agree to address the matter immediately, resolve it if possible and apologise as appropriate.
3. If the care worker cannot address the person's complaint immediately, they should say they will refer the matter to their manager without delay.
4. Care 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 request or concern 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 or resend a copy of the care service's complaints procedure to enable them to do this.
7. The care staff member receiving the initial complaint in addition to any reporting should always record the matter on the person's care records and in the care service's concerns and complaints book or log.
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 care worker, for example a relative or friend on behalf of the person who uses the service, the care worker should respond in the same professional manner as described above at the same time as confirming that they have the consent of the person receiving our care to make the complaint.
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 care 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 care 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 care and treatment that they are providing to the person receiving their care and how it is affecting them.

12. If the complaint appears to be valid in that respect, the care worker or manager, whoever is responding, might suggest that as a first step they discuss the matter directly with the person receiving their care 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 care 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 the care provider or put in a written complaint.
15. **Shalom Health Recruitment Ltd** staff must not disclose to a third-party information that is confidential to the person receiving care without the person's valid consent.

Written Complaints

Shalom Health Recruitment Ltd adopts the following procedures for responding to written complaints, which might be made by letter, email or on a form which Shalom makes available. The contents of a written communication could reflect a service request or concern that can be addressed promptly and which resolves the matter. The following describes our procedures for a matter that falls within the definition of a complaint that has not yet been resolved and requires a stage two process to resolve it.

Preliminary steps

1. When **Shalom Health Recruitment Ltd** receives a written complaint, it passes it to a designated person or complaints handler, eg the registered manager who records it in the complaints book and sends an acknowledgement letter which describes the procedures they will follow. **Shalom Health Recruitment Ltd** will send the acknowledgment letter within two working days of receipt.
2. The designated person, eg the registered is responsible for dealing with the complaint throughout the complaints handling process, including for any review 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 care to proceed with the complaint as a valid complaint related to their care and treatment.
4. **Shalom Health Recruitment Ltd** reserves the legal right to seek legal advice if the nature of the complaint raises questions of law. The care provider recognises that this is likely to delay the completion of the investigation and will inform the complainant of this possibility. **Shalom Health Recruitment Ltd** 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, **Shalom Health Recruitment Ltd** 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, **Shalom Health Recruitment Ltd** 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, **Shalom Health Recruitment Ltd** 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. **Shalom Health Recruitment Ltd**, 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. **Shalom Health Recruitment Ltd** 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. **Shalom Health Recruitment Ltd** 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. **Shalom Health Recruitment Ltd** 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.

Section 3: How We Learn from Complaints

- We use complaints as a source of intelligence to identify issues and introduce positive changes in service delivery. We do this by keeping detailed records of:
 - each complaint received
 - the subject matter and outcome of each complaint
 - details of the reasons for delay where an investigation took longer than the agreed response period agreed
 - the date of the report sent to the complainant.
- Our designated complaints office or manager will conduct at least a quarterly audit of all recorded service request and complaints, including a review of the types of complaints so that we can identify patterns and trends which indicate needs for improvement.
- We will examine our service requests and complaints records to see if there are patterns or trends which indicate shortfalls or weaknesses in our service provision, and delivery and plan improvements accordingly.
- We will conduct at senior management level at least an annual review of policy to check that it is in line with all requirements and to evaluate assess the service improvements made as a result of our learning from complaints.
- We do this by examining and evaluating:
 - the number of complaints
 - how they were investigated
 - the outcomes, including numbers of complaints upheld as against those not established
 - number of complaints escalated to the Ombudsman and the outcomes
 - actions taken in response and actions still needed to learn the full lessons.

Section 4: How We Address “Special Circumstances”

Managing Conflicts of Interest

The CQC policy specification asks us to explain:

- how people can complain about the registered manager
- who will handle these complaints
- if our nominated individual and registered manager are the same person, how complaints about them will be handled fairly and by whom.

We consider all complaints made about our service to be complaints against the registered manager who is accountable for the delivery of our care services and by implication against the care provider.

If we follow our complaints procedure correctly, there is actually no difference in principle between a complaint made about **Shalom Health Recruitment Ltd** or a care worker and the registered manager or another member of the management of the care service.

Our policy therefore is to arrange for any stage two review to be carried out by a suitable person who is outside of the line of accountability for the activities or conduct resulting in the complaint. With most complaints, this excludes the registered manager from carrying out the review. This follows Ombudsman guidance that no one involved in achieving local resolution (stage one) should lead a (stage two) complaints review.

If our registered manager receives a complaint or management of the service, they will in line with the principle of local resolution address the matter directly in the first instance. They will if admitting fault try to correct the matter, for example, by apologising or offering a suitable remedy.

If the complainant is dissatisfied with the response and escalates their complaint, the matter will be referred to and dealt with by the nominated individual or another senior member of the Shalom who will become responsible for the complaints review process.

The nominated individual or other representative of **Shalom Health Recruitment Ltd** will arrange the review to be carried out by a competent independent person or body. This could be the local authority as commissioner of the service subject to the complaint.

In the case of a privately funded service, the nominated individual as the representative of **Shalom Health Recruitment Ltd** will, if unable to achieve local resolution, recommend that the complainant escalates the matter to the Local Government Social Care Ombudsman.

If, as possible in a small business, the registered provider and registered manager are the same person then the issue will be handled following the same processes as described above.

Complaints made against more than one organisation

If we receive a complaint which is also a complaint made against another organisation also responsible for an individual's care, for example, a local authority under its Care Act 2014 statutory duties or a healthcare provider, we will co-operate as partners in any joint

complaints review agreed in line with the Ombudsman's guidance which recommends a single investigation process.

Section 5: Regulations We Must Follow

We consider from the above that our policy with the accompanying procedures and protocols will comply with the following.

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 16: Receiving and Acting on Complaints.
- Regulation 20: Duty of Candour.
- The Accessible Information Standard.
- The Equality Act 2010.
- UK GDPR and the Data Protection Act 2018.

It also shows how we meet Quality Statement 4: Listening to and Involving People, which the CQC includes in its assessment framework.

"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, **Shalom Health Recruitment Ltd** 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
- enable people who use the service to 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 our separate Supporting People Who Need Advocacy (England) Policy).

How we comply with specific legislation

Accessible Information Standard: we make our complaints policy and procedures for making a complaint available in formats suitable to the communication needs of the people using our service.

Equality Act 2010: we are aware of our duties under the Equality Act 2010 and anticipate the needs and reasonable adjustments of individuals who need to access the complaints process.

We accept that individuals should be able to raise their complaints in any way and with any member of staff. We make all staff aware of the complaints process including how they should apply the Equality Act 2010 so that they can pass details of the complaint and the support they need to make their complaint to the designated complaints lead/manager.

We keep a record of all reasonable adjustments agreed to enable the complainant to make effective and equitable use of the complaints process. We keep any agreed reasonable adjustments under active review.

We will only place any restrictions on an individual's involvement in the complaints process if their behaviour is proving unacceptable, and which is adversely influencing the course of the investigation; we will impose these with due regard to the provisions of the Equality Act 2010.

UK GPR and Data Protection Act 2018: we assure all complainants that we will treat their complaint in the strictest of confidence in line with our consent, confidentiality of information, record keeping and data protection policies.

Section 6: Additional Considerations

Role of the CQC

Shalom Health Recruitment Ltd makes its users aware that the 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 guidance, *Complain About an Adult Social Care Service*.

Shalom Health Recruitment Ltd also sends to the CQC any information about complaints requested or required as part of the CQC's compliance reviewing policy within CQC's 28 working days notification timescale.

Safeguarding Issues

In the event of the complaint involving alleged abuse or a suspicion that abuse has occurred, the care service 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.

Shalom Health Recruitment Ltd 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".

Related Policies

This policy should be read and used in relation to other policies on the following.

- Responding to the Experiences of People Who Use the Service: this describes how we obtain and use different kinds of feedback from the people who use our service and how we learn from studying and reviewing it, including from complaints as a for of feedback.
- Quality Assurance and Improvement: this shows how we include our learning from complaints as an intrinsic part of our quality assurance system in order to make improvements to our service.
- Escalation: this indicates the different circumstances, including complaints, in which issues should be referred to another level of the organisation or to an external organisation such as the Local Authority or CQC.
- Duty of Candour: this describes how we address openly and transparently by issuing an apology and remedying any faults which we acknowledge to have made or have been found to have made and which could be the outcome of a complaint.

- Safeguarding policies: we describe in this policy as well as in our safeguarding policies how complaints which require safeguarding enquiries are dealt with and the different procedures which might be involved.

Training

Shalom Health Recruitment Ltd expects its staff to respond correctly to complaints of any kind and gives complaints training a high priority.

It includes complaints policy training in the induction training for all new staff and updates it in respect of any changes in its policy and procedures and in the light of experience of addressing complaints.

Shalom Health Recruitment Ltd arranges relevant training at the appropriate level for staff responsible for complaints handling and management.

Review

This policy and procedures is subject to regular and at least annual review and will be amended accordingly in the light of the complaints which we receive and our evaluation of how we have addressed them.

Signed: _____ PA

Date: _____ 10/01/2026

Policy review date: _____ 10/01/2028