

Complaints

Policy Number:	UNI.POL.009	Policy Owner Job Role	Quality Director
Issue Number:	3	Ratified By	Senior Quality Manager
Issue Date:	09.04.2025	Service Type:	All
		Applicable Services:	All
Contributors	Quality / Operations		
Mandatory Policy	Yes		

Table of Contents

Section	
1	Supporting Documents
2	Introduction
3	Aim & Scope
4	Abbreviations/Definitions
5	Policy Principles
6	Procedure for Complaints
7	Training Requirements
8	Equality Impact Statement

1. Supporting Documents

This policy must be read in conjunction with:

- [Safeguarding of Children Policy & Procedure](#)
- [Safeguarding of Adults Policy and Procedure](#)
- [Managing Allegations Policy](#)
- [Grievance Procedure](#)
- [Whistle Blowing Policy](#)
- [Professional Boundaries Policy](#)
- [Equality and Diversity Policy](#)
- [Children's Rights and Participation Policy](#)
- [Duty of Candour Policy](#)
- [Appendix G – CS Flow Chart Stage 1 \(Informal\)](#)
- [Appendix H – CS Flow Chart Stage 2 \(Formal\)](#)
- [Appendix J – AR Complaint Process Flow Chart](#)
- [Acknowledgment Letter Template](#)
- [Investigation Report](#)

2. Introduction

Keys recognises the rights of the people supported and their families, Placing Authorities, neighbours, regulators and interested parties to make representation or complaints to the company.

Keys

A clear procedure for response in this circumstance ensures that issues are addressed professionally and consistently.

3. Aim/Scope

As a responsible provider, Keys recognises the importance of all people supported and their families and other interested parties knowing how to make a complaint; that the complaint is addressed without delay; that they are informed of the process and the company learns and improves services. These principles are part of the ethos and value base of Keys and align closely to those enshrined in legislation, policy and guidance.

First and foremost, the aim is for the people supported or those concerned about a person supported to be given reassurance that:

- They will be listened to, understood and supported; they will be free from reprisal or reproach for exercising their right to make a complaint.
- Their complaint will be taken seriously and the person dealing with the complaint will remain in communication with them to ensure they are aware of the procedures taking place, and any progress and outcomes.

4. Abbreviations and Definitions

Complaint	The definition of a complaint is an expression of, or the cause of, pain, anger, discontent, regret or annoyance.
RADAR	An organisational computerised reporting and monitoring system

5. Policy Principles

Keys welcome the opportunity to respond appropriately to complaints in circumstances where the delivery of service has been experienced or observed as negative. All people supported and stakeholders have the right to make a complaint and receive an appropriate response within agreed timescales.

The key principle underpinning the complaints and investigation procedure is that the welfare of the person is safeguarded, and their wishes and feelings are taken into account.

Upon admission, those supported and their families and placing authorities will be made aware of the Keys Complaints Policy.

Keys

This policy must be displayed prominently / made readily available within the service. Details of how to complain will be included in the Children and Young Person's Guide/ Welcome Guide for adult services or similar document for each service.

Please note that an accessible ***Feeling Safe & Happy*** booklet is available to all people we support in English and Welsh and sets out the complaints process

English: <https://online.fliphtml5.com/symqr/zroe/>

Welsh: <https://online.fliphtml5.com/symqr/djtw/>

All staff will receive training in the operation of the Complaints Policy.

All complaints will be received in a professional manner, investigated and recorded as outlined in the policy. Keys is a learning organisation and values feedback to help to continually improve the quality of all services. When a mistake is made, it is important it is acknowledged, and things put right quickly, and to learn from the experience.

All complaints against current and previous members of staff that could have safeguarding implications must be referred immediately to the Safeguarding Lead - please refer to the Safeguarding Policies. Where an internal investigation is required concerning staff, the Regional/Divisional Manager and relevant Chief Operating Officer/Managing Director must liaise with the Human Resource Department for advice.

Records relating to all complaints must be held within RADAR (an electronic record). Where required the option for the complaint to remain confidential is available on RADAR.

Any complaint or concern about the service that is received externally, for example by the Support Centre in Halesowen, through the website or dedicated email address – complaints@keys-group.co.uk must be logged in RADAR along with attached copies of any correspondence and reports. If a complaint is received by the Support Centre in Halesowen, the relevant Regional/Divisional Manager will be informed.

Any staff member wishing to complain should use the Grievance Procedure or Whistle blowing Policy.

6. Procedure for Complaints

- On receipt of the complaint the complaints recording workflow must be completed on RADAR. All associated documents such as; letters of complaint, emails, telephone record etc. should be attached with relevant RADAR event.
- Young people/adults should be reminded of their right to access an independent advocate. If the person has an advocate in place they should be offered the

Keys

opportunity/supported to contact them. If they do not have an advocate in place - advice should be sought from the Manager (if appropriate) in securing such services.

- Where a complaint is received, the individual receiving the complaint will record on RADAR. The complainant must be informed that their complaint is serious and that they will be informed of the next stage by letter.
- Managers must issue an acknowledgement in writing within 2 working days and attach the copy of the letter to RADAR.
- In the event of a serious complaint the relevant Chief Operating Officer/Managing Director must assess the appropriateness of making verbal contact with the complainant and ensure a record is maintained on RADAR.
- Any serious complaint or incident will prompt a full investigation at Director Level, culminating in a report which will include recommendations for service improvements to avoid any recurrence. Such an investigation will be instigated at the discretion of a Director.

6.1 Specific Procedures:

- Informal/Minor Complaints – See Flow Chart [Appendix G](#)
- Formal Complaints – See Flow Chart [Appendix H](#)

6.2 Investigation Process

- The responsible Chief Operating Officer/Managing Director will appoint an Investigating Manager, an individual who is not directly involved or implicated in the complaint.
- The Investigating Manager is responsible for ensuring that all complaints are investigated thoroughly, within the prescribed timescales and any resulting action plans are monitored and signed off when completed.
- The Investigating Manager will compile an Investigation Plan/Report and upload to RADAR. The Investigating Manager will consider the information that will be required to be reviewed and examined as part of the investigation - including but not exclusively:
 - Interview with key staff members;
 - Interview with children, young people, adults (the method of this should be considered but not limited to interview with the social worker only);
 - Examination of key documentation;
 - Interview or information gathering from external sources; and
 - Examination of the environment.

Keys

- All relevant documents pertaining to the complaint must be uploaded to RADAR.
- Following completion of the investigation the Investigating Manager will compile a written report. This report will include recommendations and an action plan as required. This report must be uploaded into RADAR.
- The Investigating Manager must ensure that this report is approved by the relevant Chief Operating Officer/Managing Director and copied to the Chief Quality Officer and uploaded to RADAR.
- Once approved the report will then be sent to the complainant (if appropriate) seeking confirmation of the complaint being satisfactorily resolved.
- The complainant will be given the outcome of their complaint in writing; in a format suitable to their age and understanding; alongside the opportunity to discuss this further if they so wish.
- The complainant will be given a full right to appeal the decision that has been made and they will be reassured that there will be no recriminations following this. (See section 10 Complainant Satisfaction).

All complaints must be responded to as efficiently and expediently as possible.

- If the investigation is likely to take more than the required response time of 28 days, a follow-up letter to the complainant should be sent updating them of the circumstances from the Chief Operating Officer/Managing Director.
- Any complaint or investigation cannot be concluded until all agreed actions resulting from the investigation have been signed off as complete by the Investigating Manager.
- The Investigating Manager is responsible for seeking confirmation from the complainant that they are satisfied with the response. All correspondence must be uploaded to RADAR.
- A complainant can withdraw their complaint at any time either verbally or in writing. If this occurs the Investigating Manager must be informed immediately and must contact the complainant to confirm their decision. The Investigating Manager and relevant Director will consider the withdrawal and determine whether any further internal investigation is required. A record must be maintained in RADAR.

6.3 Complaints Review and Audit

- RADAR complaints and their findings will be evaluated and analysed in order to establish any policy, process or practice implications which may need to be acted

Keys

upon in order to drive service improvements and positive learning. This will be shared and discussed at Group Leadership Team Meeting and at the Governance Committee; and embedded into discussions at monthly Managers Meetings, Staff Meetings, and bi-annual Manager Workshops.

- Information sharing and discussion will be undertaken in response to any findings/learning from serious complaints; with suggestions, and views will be embedded into the learning discussions within staff teams and used to inform policy updates.
- The Manager will review all complaints and concerns as part of the review of service, and this will include an evaluation/analysis of any findings and update any outcomes and positive action taken.
- Complaints are reviewed as required by senior managers as part of Governance Committee and Group Leadership Team Meetings. Complaints are also reviewed monthly as part of the key performance indicators.

6.4 Complainant Satisfaction

- Complainants will be made aware, that if their complaint has not been dealt with to their satisfaction, they may make their complaint known to the regulatory body.

Contact Details

Ofsted

Piccadilly Gate
Store Street
Manchester
M1 2WD

Email enquiries@ofsted.gov.uk

Tel: 0300 123 1231

Complainants may contact an OFSTED Inspector directly without having made their complaint directly to the service if they feel that this is appropriate.

Complaints about adult social care

If the care is funded or arranged by a council/local authority, you can make a complaint to them if it pays for your care. If you are unhappy with the outcome of your complaint, you can contact the [Local Government Ombudsman](#).

Website: <https://www.lgo.org.uk/make-a-complaint/>

Tel: 0300 061 0614

Children/young people may contact the “Office of the Children’ Commissioner’ for advice and assistance

The Children’s Commissioner
Sanctuary Buildings
Great Smith Street
London SW1P 3BT

Free phone: 0800 528 0731

Keys

Email: advice.team@childrenscommissioner.gsi.gov.uk

The phone number is free from a landline, but may cost from a mobile.

Children's Commissioner for Wales

Llewellyn House
Harbourside Business Park
Harbourside Road
Port Talbot
SA13 1SB

Tel: 01792 765600

Email: post@childcomwales.org.uk

CIW		The Ombudsman
Wales	CIW South East Wales Rhud y Car Merthyr Tydfil CF48 1UZ Tel: 0300 7900 126 Email: CIW@gov.wales	Public Services Ombudsman for Wales 1 Ffordd yr Hen Gae Pencoed CF35 5LJ Tel: 0300 790 0203 http://www.ombudsman-wales.org.uk
CQC		
England	CQC Eastern/South West/West Midlands Citygate Gallowgate Newcastle upon Tyne NE1 4PA Tel: 03000616161 Email: enquiries@CQC.org.uk	The Local Government Ombudsman PO Box 4771 Coventry CV4 0EH Tel: (0300) 061 0614 Fax: 024 7682 0001 http://www.lgo.org.uk/adult-social-care You can also text 'call back' to 0762 481 1595.
External Contact details (Service specific)		
Name Organisation: Contact Number: Contact email address:		

6.5 Complaints subject to concurrent consideration

Concurrent consideration includes any matters: -

- Where a complainant has stated in writing that they intend to take the matter to tribunal or court.
- Where the registered person is proposing to take disciplinary proceedings.

Keys

- Where the registered person has been notified that criminal proceedings are being considered.
- A meeting to consider any potential child protection or vulnerable adult's issues has been called.
- Where the registered person has been notified that there is a current investigation under the Care Standards Act.
- The investigation of a complaint that is subject to concurrent consideration can be discontinued if it is felt that to continue would compromise or prejudice any other investigation.
- If a complaint that is subject to concurrent consideration is discontinued for reasons outlined above then the registered person must notify the complainant. The complainant must be informed when any concurrent investigations are concluded.
- The investigation complaint can be resumed once it is certain that concurrent investigations are discontinued or concluded.

7. Training Requirements

Where appropriate Managers will ensure that familiarisation with this policy is a part of the induction process for all employees.

8. Equality Impact Statement

All policies will be developed and implemented in a manner that promotes equality, diversity, and inclusion, ensuring fair and equitable treatment for all individuals. Policies must align with relevant equality legislation and reflect the expectations and standards set by our regulatory bodies. They will demonstrate a commitment to eliminating discrimination, advancing equality of opportunity, and fostering an inclusive environment that respects and values the diverse needs, backgrounds, and experiences of those we support, as well as our workforce.