

B013 SCO - COMPLIMENTS AND COMPLAINTS, SCOTLAND POLICY

Policy owner: Laura Davies - Chief Operating Office

Date of last review: 25/06/2026

PURPOSE

- As a regulated provider The Good Care Group (TGCG) recognises its responsibility to have effective and accessible systems for identifying, receiving, handling and responding to complaints from people using the service, people acting on their behalf or other stakeholders as set out in The Health and Social Care Standards and the Regulation of Care (Scotland) Act 2001.
- The Good Care Group welcomes complaints as opportunities for learning, and encourages compliments as opportunities to celebrate success. This policy exists to outline the relevant procedures for compliments and complaints.

SCOPE

- 'Complaints' relate to complaints made by clients of TGCG and / or their representatives with the relevant authority to act on their behalf. 'Complaints' made by employees is not within the scope of this policy, but would be treated as a grievance
- This policy sets out how TGCG will ensure all complaints are dealt with in a timely fashion and a robust manner
- This policy sets out responsibilities for all employees of TGCG
- 'Compliments' can come from a variety of sources including clients, external partners and professionals, or colleagues within TGCG

POLICY

Compliments

The Good Care Group recognises that success should be celebrated and shared. Compliments may be communicated to the company either verbally or in writing. If provided verbally the person who takes receipt of the complement will request permission to formalise in writing. All compliments will be recorded internally on our record management system. The line manager of the recipient of the compliment is responsible for sharing the compliment with them. The client account owner i.e. the Care Manager will also request permission from the person who provided the

compliment to share the compliment anonymously for the purposes of marketing / client testimonials and document this where it is obtained.

Complaints

The Good Care Group (TGCG) (“Company”) accepts the rights of clients and their representatives to make complaints and to register concerns about the services received. It further accepts that they should find it easy to do so. It has a positive attitude towards complaints, looking upon them as an opportunity to learn, adapt and, where necessary, improve the service delivered, rather than apportion blame.

The Company believes that failure to listen to or acknowledge complaints can lead to an aggravation of problems, clients’ dissatisfaction and possible litigation. The Good Care Group supports the idea that most complaints, if dealt with early, openly and honestly, can be sorted at a local level between just the complainant and the Company.

Aims

The Good Care Group aims to ensure that its complaints procedure is properly and effectively implemented and that clients feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Specifically it aims to ensure that:

- Clients and their representatives are aware of how to complain and that The Good Care Group provides easy to use opportunities for them to register their complaints
- A named person will be responsible for the administration of the procedure
- Every written complaint is acknowledged within 2 working days
- The investigation process begins immediately
- All complaints will be responded to as quickly as possible and within an agreed timeframe between 28-60 working days depending on the complexity of concerns raised
- Complaints are dealt with promptly, fairly and sensitively, with due regard to the upset and worry that they can cause to both staff and clients

Responsibilities

Chief Operating Officer has responsibility for following through complaints for The Good Care Group at a Regional level. The overall named responsible person is Jonathan Byrd, Managing Director.

Email: concerns@careinspectorate.gov.scot
Telephone: 0345 600 9527
Care Inspectorate
Compass House,
11 Riverside Drive
Dundee
DD1 4NY

Procedure

Stage one

Verbal complaints and concerns:

- The Good Care Group accepts that all concerns either verbal or written must be taken seriously
- The Good Care Group reserves the right to escalate a verbal concern to be managed as a formal written complaint
- Front-line care staff who receive a verbal complaint are expected to acknowledge the complaint and escalate to their line manager without delay. The Manager will offer the client or their representative the opportunity to formalise their complaint which will involve providing the complaint in writing
- Staff are expected to remain polite, courteous, sympathetic and professional to the complainant. They are taught that there is nothing to be gained by adopting a defensive or aggressive attitude
- At all times in responding to the complaint, staff are encouraged to remain calm and respectful
- Staff should not accept blame, make excuses or blame other staff
- If the complaint is being made on behalf of the client by a representative, it must first be verified that the person has permission to speak for the client, especially if confidential information is involved. (It is very easy to assume that the representative has the right or power to act for the client when they may not). If in doubt it should be assumed that the client's explicit permission is needed prior to discussing the complaint with the representative
- If a concern is reported verbally the manager managing the concern will talk the problem through, before suggesting a course of action to resolve the concern. If this course of action is acceptable then the member of staff should clarify the agreement with the complainant and agree a way in which the outcome of the complaint will be communicated to the complainant (i.e. through another meeting or by letter)
- If a verbal concern cannot be dealt without a formal investigation process or to the satisfaction of the complainant the complaint will be formalised in writing.

The complainant will be given a copy of The Good Care Group's complaints procedure if they do not already have one

- Details of all complaints will be recorded on the client's online account file

Written complaints:

- Preliminary steps:
 - All complaints will be acknowledged in writing by the Regional Operations Manager / relevant Head of Department within 2 working days
 - The Regional Operations Manager / relevant HOD will also include a copy of this policy detailing the company's procedure for the complainant
 - A complaints manager will be assigned to investigate (this may be the Care Manager or another named individual. If necessary, further details are obtained from the complainant; if the complaint is not made by the client but on the client's behalf, then consent of the client, preferably in writing, must be obtained from the complainant or sufficient evidence that the representative has appropriate authority to act on their behalf (e.g. POA)
 - If the complaint raises potentially serious matters, advice could be sought from a legal advisor. If legal action is taken at this stage, any investigation by the Company under the complaints procedure immediately ceases
- Investigation of the complaint by the Company:
 - Immediately on receipt of the complaint, the complaints manager will start an investigation and within 28 working days will aim to be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned
 - If the issues raised are complex and require a longer time frame the complainant will be informed and a revised time frame agreed with the complainant. We aim to close all complaints within 60 working days
 - Complainants may be asked to participate in a complaint investigation either by providing a statement or evidence to support any allegations raised. If the complainant fails to participate in the process within a reasonable timeframe, TGCG will be required to complete the investigation to the best of their abilities with information available to them
 - The investigation process may require escalation to our regulatory body, the Care Inspectorate or to the local Adult Support and Protection team

- Meeting:
 - If a meeting is arranged, the complainant will be advised that they may if they wish to bring a friend or relative or a representative such as an advocate
 - At the meeting a detailed explanation of the results of the investigation will be given and also an apology if it is deemed appropriate (apologising for what has happened need not be an admission of liability)
 - Such a meeting gives both The Good Care Group and the complainant the opportunity to discuss the process and the outcome of the investigation in an open and transparent manner
- Follow-up action:
 - After the meeting, or if the complainant does not want a meeting, a written account of the investigation will be sent to the complainant
 - The outcomes of the investigation and the meeting are recorded on an internal Complaints Case with any learnings identified, and an action plan which will be acted upon
 - A complainant will be given the opportunity to accept the findings of the response, or otherwise escalate if they are not satisfied with the outcome. If we do not hear from the client within 14 working days TGCG will consider the matter closed and will notify the complainant of such
 - All complaints are reviewed by the Chief Operating Officer and Head of Quality Assurance every month as part of its quality monitoring and improvement procedures to identify the lessons learned
 - All complaints are available for review by the Care Inspectorate as part of their inspection process

Stage 2

If the complainant is not satisfied with the outcome from the stage one investigation the complaint will be escalated to stage two, where it will be reviewed by an independent senior manager of The Good Care Group. The complainant will be informed of the name and role of the senior manager and the timescale for the review. As for stage one, the outcome of this review will be provided in writing and a meeting offered.

If we do not hear from the complainant within 14 working days of sending the stage 2 response we will consider the matter closed and will notify the complainant as such.

Stage 3

If the complainant still remains unsatisfied after the stage two investigation the complaint will be escalated to the Chief Operating Officer or a member of the Senior Leadership team, for full review. As for stage two, the complainant will be informed of the name and role of the appointed individual and the timescale for the review, and the outcome will be provided in writing and meeting offered.

Stage 4

If after stage 3 the complainant is still unhappy they reserve the right to escalate their complaint to the Care Inspectorate.

<https://www.careinspectorate.com/index.php/complaints>

concerns@careinspectorate.gov.scot

0345 600 9527

RELATED POLICIES

- TGCG Policy B010 - Managing Accidents, Incidents and Emergencies
- TGCG Policy B011 SCO - Adult Support and Protection
- TGCG Policy D013 - Grievance Policy

Members of the Regional Team should refer to the [Complaints Process](#) for guidance which supports this policy.