



COMPLAINTS PROCEDURE

Approved by:	Hospice Board of Trustees
Date of approval:	May 2026
Originator:	Chief Executive Officer
Review Date:	May 2029

Responsibilities	
Complaint Handler and DPO	To ensure that the complaint is logged correctly and the procedure followed. To keep a record of all complaints made and actions taken. To ensure the content of the policy is in line with statutory requirements and professional guidance. To ensure that all data protection complaints are handled in line with UK GDPR, Data Protection Act 2018 and ICO guidance and will be reviewed or overseen by the Data Protection Officer.
Managers	To log initial complaints when the Complaints Handler is not available. Address informal issues and carry out a thorough investigation and draft a response for formal complaints.
Chief Executive Officer	To use complaints as a learning process. Inform the Board of Trustees of complaints. To handle complex complaints and appeals involving members of staff. To ensure the content of the policy is in line with statutory requirements and professional guidance.
Director of Clinical Services:	The Director of Clinical Services with relevant department managers will, if appropriate, inform the Care Quality Commission and NMC where registered nursing staff are involved in a complaint. Ensure that care staff, as appropriate, are aware of the procedure and how to apply it.

Directors:	Nominate an appropriate manager to investigate the complaint. Approve formal response and ensure that actions are implemented in line with any plans.
All staff	Responsible for compliance with the policy and procedure.

Type of Complaint.

Informal and Formal complaints

The key differences between informal and formal complaints are the level of formality and the process involved. An informal complaint can often be resolved more quickly, while a formal complaint is a more formal and structured process that can take longer to resolve.

An informal complaint is the first step in the procedure and involves raising an issue in an informal way with the relevant person or department. This could be done by making a phone call, sending an email or talking to someone in person. The aim of an informal complaint is to resolve the issue as quickly as possible, without the need for a formal investigation.

A formal complaint, on the other hand, is a more structured and formal process that follows a specific procedure. It involves submitting a written complaint which will then be investigated in a thorough and formal manner. Formal complaints are usually made when the issue cannot be resolved informally, or when the complaint is more serious and requires a formal investigation to be conducted.

Complainants raising concerns about the use of their personal data do not need to follow a separate process. Data protection complaints will be handled under this procedure, with additional safeguards where required by law.

How to make a complaint (Informal & Formal)

Complaints can be made:

1. **Verbally:** by approaching any member of staff and asking to see a manager to lodge a complaint.
2. **Telephone:** where a complainant will be put through to the Complaints Handler or a departmental manager who will then log the complaint.
3. **Webpage:** go to the Hospice website and click on 'Raise a Complaint' at the bottom of the page or type 'Complaint' in the search box. The link is here: [Raising a complaint - Treetops Hospice](#)
4. **In Writing:** Complaints in writing can be given to any member of staff or addressed to:
FTAO Complaints Handler, Treetops Hospice, Derby Road, Risley, Derbyshire
DE72 3SS

When making a complaint the following should be considered:

Is your complaint Formal or Informal?	The key differences between informal and formal complaints are the level of formality
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	and the process involved. An informal complaint is usually less formal and can often be resolved more quickly, while a formal complaint is a more formal and structured process that can take longer to resolve.
Nature and details of the complaint.	• Please provide as much detail as possible about the issue. • What service you were accessing. • Time and date.
Any actions already taken to resolve the issue.	• Have you discussed this with anyone previously?
What would be your preferred outcome.	• What can we do to make things better or stop something happening again?
*Name and preferred method of being contacted.	• Email • Phone • Post

*Our preferred methods of contact would be by Email and phone.

Receiving and recording.

- If a member of staff is approached by anyone wanting to make a verbal complaint they will inform an appropriate manager who will then log the details on the staff web page.
- Complaints received in writing will be handed to the Complaints Handler or if not available to a manager who will log the complaint.
- All complaints will be assessed to determine whether they involve personal data or constitute a data subject rights requests under UK GDPR and will be managed accordingly.

Informal Complaint	Formal Complaint
• Will be handled by the relevant manager to provide an adequate resolution.	• The manager who initially logs the complaint will not by default be the manager who handles the complaint. • Once a formal complaint is lodged a director will then nominate an appropriate manager to handle the complaint who is independent of the issue being complained about.

- All complainants will receive a written acknowledgement of the complaint within 3 working days via email (48 hours – lottery complaint) or post from the Complaints Handler (or nominated manager).

For Care Complaints only

- Suitability to represent a patient normally depends on the patient's knowledge and consent that a specific person may act on their behalf. In these cases,

consent needs to be obtained from the patient for the release of potentially confidential information.

- Where a patient has died or is unable to give consent, it is necessary to establish in their circumstances that the complainant is suitable to represent the patient.
- Confidentiality of the patient and any known wishes expressed by the patient that information should not be disclosed to third parties will be respected.
- If front line staff do not feel empowered to handle a verbal complaint, written details should be passed onto the Complaints Handler or appropriate manager.

Investigating & Recording

- The manager nominated to deal with the complaint will undertake a thorough investigation.
- All findings and any communication from the investigation will be recorded using the complaints investigation form.
- The investigating manager and SLT lead will decide if the matter needs reporting to the relevant regulatory authority.
- The complaint investigation should be handled in a manner which acknowledges that being subject to a complaint can be a stressful and anxious time for staff and all concerned.
- A full response, approved by the appropriate SLT member, should be sent to the complainant within **25** working days of receipt of the complaint (10 days - lottery complaint / 30 days Data Complaint) outlining the findings and proposed actions.
- If it is not possible to send a full response within the **25**-day time scale (10 days – lottery complaint / 30 days Data Complaint), a letter explaining the delay will be sent to the complainant with new timescales for a response by the manager handling the complaint.
- A written record of all complaints will be held on the hospice's Vantage portal ([Vantage](#)) and be reported per complaint to the CEO.

Resolution of complaint

- The complainant has been provided with a suitable response and is satisfied that appropriate actions have or will be implemented.
- The findings of the complaint, together with the action to be taken, will be updated on the Vantage portal.
- Action plans following the complaint should be completed together with a time scale for actions and review. This will be managed by the director of the section to ensure actions are implemented within a reasonable time frame.
- The outcome of the complaint will be reported to the CEO by the relevant director to ensure lessons are learned and practice is improved with particular emphasis on complaints relating to a protected characteristic.
- The Board of Trustees will receive a report on all complaints at quarterly intervals or as deemed necessary depending on the seriousness of the complaint.

Non-Resolution

- If the complaint is not resolved to the satisfaction of the complainant, in the first instance an appeal can be made by the complainant and the incident escalated to be reviewed by the Chief Executive Officer.
- An outcome will usually be given within ten working days. This may vary depending on the nature of the complaint.
- If the complaint is then not resolved to the satisfaction of the complainant an appeal can be made to the Board of Trustees.

Referral to Appropriate Governing Body:

- If the complainant is still unhappy with the outcome of the complaint, they can complain one of the following:

Care Quality Commission	https://www.cqc.org.uk/
Integrated Care Board Derby & Derbyshire	https://joinedupcarederbyshire.co.uk/
Information Commissioners Office	https://ico.org.uk/
Charity Commission	https://www.gov.uk/government/organisations/charity-commission
Independent Betting Adjudication Service	www.ibas-uk.com

References:

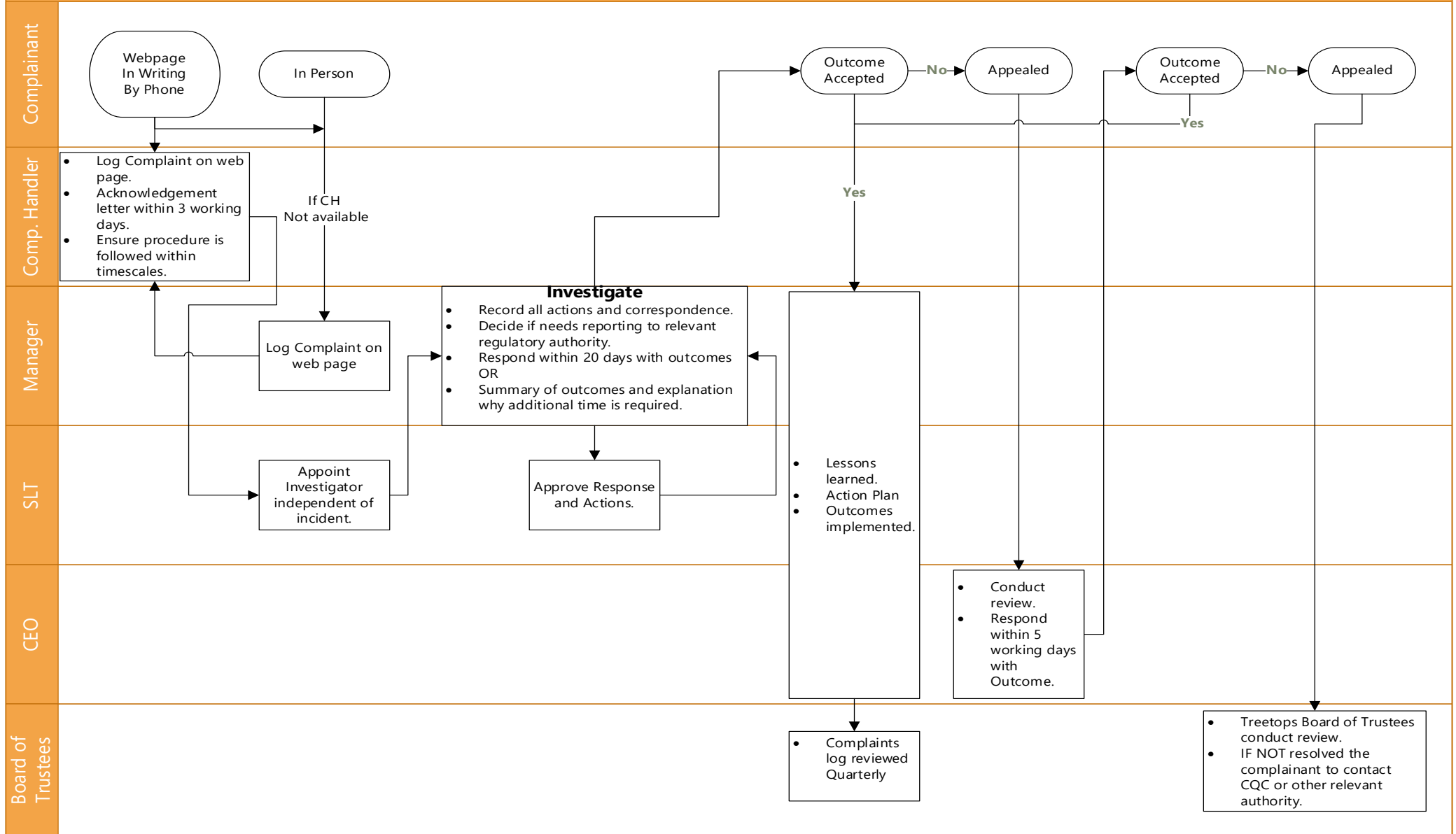
Private and Voluntary Health Care (England) Regulations 2001; Chapter 1:
 Quality of service provision, Regulation 23
 CQC Core Standard: Management of Complaints (C14)
 NHS Complaints Procedure
 Information Commissioners Office (ICO) Data Complaints Guidance

Trustee Signature

Date

A SIGNED HARD COPY OF THIS POLICY IS HELD AT THE HOSPICE BY THE COMPLIANCE OFFICER

Treetops – Complaints Procedure Flowchart



3.1.2 Complaints Procedure