



## INDEPENDENT HORIZONS

# COMPLIMENTS AND COMPLAINTS POLICY AND PROCEDURE

Version 2026 v2

### DOCUMENT CONTROL

|                                     |                                                                                                                               |
|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| Policy title                        | Compliments and Complaints Policy and Procedure                                                                               |
| Registered provider                 | Independent Horizons Limited                                                                                                  |
| Service                             | Nelson House                                                                                                                  |
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| Policy owner                        | Karen Burton — Director / Registered Service Manager / Nominated Individual                                                   |
| Operational complaints coordination | Karen Burton for ordinary, unconflicted complaints; Michael Robinson for complaints concerning either or both Directors       |
| Applies to                          | All Team Members, managers, Directors, agency workers, volunteers and other persons working on behalf of Independent Horizons |
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| Approved by                         | Independent Horizons management (authorised signatory record below)                                                           |

**Review triggers:** Significant complaint or safeguarding learning; changes in legislation, statutory guidance or Ofsted requirements; changes to management, independent investigation or advocacy arrangements; amendments to the Statement of Purpose or Young Person's Guide; service changes; or evidence that this policy is no longer effective.

# YOUR RIGHT TO COMPLAIN - OR SAY WHEN SOMETHING IS GOOD

*One-page summary for young people aged 16-17*

At Independent Horizons, **you have the right to speak up.**

If something does not feel right, you are unhappy about something, you think you have been treated unfairly, or you are worried about your safety or someone else's, **you can tell us.**

You can also tell us when something has gone well or when somebody has helped you. We call this a **compliment.**

## YOU WILL NOT GET INTO TROUBLE FOR MAKING A COMPLAINT.

Making a complaint will not: get you punished; affect the support you receive; mean Team Members treat you differently; or stop you asking for help. We want you to tell us when something is wrong.

### • What can I complain about?

You can complain about anything connected with Independent Horizons, including:

- how you have been treated;
- the support you receive;
- something a Team Member or manager has said or done;
- a decision you disagree with;
- not feeling listened to;
- feeling unsafe or uncomfortable;
- the house or something that needs fixing;
- discrimination or unfair treatment;
- your personal information;
- or how an earlier complaint was handled.

You do not have to call it a complaint for us to take it seriously.

### • How do I make a complaint?

You can:

- tell any Team Member;
- speak to Michael, Karen or another appropriate person;
- phone, email or write it down;
- ask your social worker, advocate or another trusted adult to help you;
- or use the contact details in your Young Person's Guide.

You do not have to write it down yourself.

You can ask to make a formal complaint straight away.

You do not have to try to sort it out informally first.

### • What if my complaint is about Karen or Gary?

Tell Michael Robinson, House Manager, or use the independent contact route in your Young Person's Guide. Michael will make sure you are safe, record what you have said, contact the right professionals and arrange for an independent person to consider the complaint.

If the complaint is about Karen or Gary, they will not investigate or decide their own complaint.

If your complaint is about Michael, you can speak to Karen where appropriate or use the independent route in your Young Person's Guide.

### • Can somebody help me?

Yes.

You can ask for an advocate or another trusted person to support you.

You can also contact:

- your social worker;
- your Independent Reviewing Officer;
- your Personal Adviser, if you have one;
- your placing/local authority;
- NYAS;
- Ofsted;
- or the Children's Commissioner's Help at Hand service.

You do not need Independent Horizons' permission to contact any of these people.

### • What happens after I complain?

We will normally:

Acknowledge your complaint within 2 working days.

If you choose informal resolution, we normally aim to respond within 10 working days.

A formal investigation will normally be completed within 20 working days.

If you ask for an independent review or appeal, this will normally be completed within 20 working days.

If it needs to take longer, we will tell you before the deadline, explain why, tell you what has already happened, what will happen next and when you will hear from us again.

We will keep updating you until the complaint is finished.

### • What if it is about safety or abuse?

If what you tell us suggests that you or somebody else may be unsafe, we will take the right safeguarding action.

This may mean contacting your social worker, the council responsible for you, Children's Social Care, the police or the Local Authority Designated Officer (LADO), who deals with concerns about adults who work with young people, depending on what has happened.

Not every complaint automatically becomes a safeguarding or LADO matter.

We will explain what is happening as far as we safely and legally can.

### • What happens to what I tell you?

Your complaint will be recorded securely on LEIF.

We will respect your privacy, but sometimes we may need to share information to keep somebody safe or properly investigate what has happened.

We will only share information when it is necessary and appropriate.

### • You can also tell us when we get things right

If a Team Member has helped you, you have felt listened to, something has gone really well or you just want to say thank you, you can give us a compliment.

Compliments are also recorded and help us understand what works well.

**Your views matter — whether you are telling us something went wrong or something went right.**

## 1. PURPOSE AND SAFEGUARDING RATIONALE

Independent Horizons is committed to providing safe, supportive and high-quality supported accommodation for looked-after children and care leavers aged 16 and 17.

This policy establishes a clear, accessible and fair procedure for receiving, recording, considering and responding to complaints, concerns, representations and compliments.

Its purpose is to ensure that:

- young people know that their views, concerns and experiences matter;
- complaints are listened to, taken seriously and responded to fairly;
- young people and others can raise concerns without fear of disadvantage, punishment or retaliation;
- safeguarding concerns and allegations are recognised and addressed through the appropriate procedures;
- complaints are considered by people who are sufficiently impartial and free from conflicts of interest;
- young people receive information about the outcome of their complaints;
- compliments are welcomed, recorded and used to recognise positive practice;
- and learning from complaints and compliments contributes to improvements in the support provided by Independent Horizons.

An effective complaints process is an important safeguarding mechanism.

Young people may find it difficult to raise concerns about adults, services or decisions affecting their lives.

Previous experiences of not being listened to, disrupted relationships, trauma or fear of consequences may influence whether they feel safe speaking openly.

Independent Horizons recognises that complaints can provide important information about a young person's safety, emotional wellbeing, relationships, rights and experiences of support.

Team Members must respond with curiosity, respect and sensitivity rather than defensiveness or judgement.

**Young people must never be made to feel that complaining will damage their relationships with Team Members or affect the support they receive.**

Independent Horizons also recognises the importance of positive feedback. Compliments help identify what works well, recognise the contribution of Team Members and understand the aspects of the service that young people and others value.

Both complaints and compliments support accountability, reflection and continuous improvement.

## 2. SCOPE

This policy applies to complaints, concerns, representations and compliments relating to Independent Horizons and the accommodation and support it provides.

It includes matters raised by:

- young people currently supported by Independent Horizons;
- young people who have previously lived at Independent Horizons;
- family members, friends and other people important to a young person;
- advocates or representatives acting on behalf of a young person;
- social workers, Personal Advisers, Independent Reviewing Officers and other professionals;
- placing or accommodating authorities;
- visitors, neighbours and members of the community;
- and Team Members or others raising concerns about the service.

Complaints may concern any aspect of Independent Horizons, including:

- the support provided to a young person;
- whether a young person feels listened to, respected or safe;
- communication or delays;
- decisions affecting a young person;
- the behaviour, conduct or professional boundaries of a Team Member or manager;
- the physical environment, maintenance or safety of Nelson House;
- equality, dignity, discrimination or accessibility;
- safeguarding concerns;
- the handling of personal information;
- or the way an earlier complaint has been managed.

This policy operates alongside the Safeguarding Policy, Allegations Against a Team Member Policy, Whistleblowing Procedure and other relevant Independent Horizons procedures.

Employment-related grievances involving a Team Member's own employment should normally be considered under the relevant workforce grievance procedure. However, a concern involving a young person's safety,

professional conduct or safeguarding must also be considered under the appropriate safeguarding or complaints arrangements.

### 3. LEGISLATIVE AND REGULATORY FRAMEWORK

This policy has been developed with reference to the following legislation, regulations and guidance.

| Legislation or guidance                                                          | Relevance                                                                                              |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Supported Accommodation (England) Regulations 2023 — Regulation 4                | Leadership, management and effective service oversight                                                 |
| Regulation 5                                                                     | Protection of young people from harm and avoidable risk                                                |
| Regulation 7                                                                     | Individualised support, participation, advocacy and accessible information                             |
| Regulation 20                                                                    | Safeguarding policy and safeguarding arrangements                                                      |
| Regulations 24–26                                                                | Records and secure information management                                                              |
| Regulation 27                                                                    | Notification of specified serious events                                                               |
| Regulation 31                                                                    | Complaints and representations                                                                         |
| Regulation 32                                                                    | Monitoring and reviewing the quality of support                                                        |
| DfE Guide to the Supported Accommodation Regulations including Quality Standards | Guidance on meeting the supported accommodation requirements                                           |
| Ofsted Social Care Common Inspection Framework — Supported Accommodation         | Inspection expectations concerning young people's experiences, safeguarding, leadership and complaints |
| Children Act 1989 and Children Act 2004                                          | Children's welfare, safeguarding and relevant statutory responsibilities                               |
| Children Act 1989 Representations Procedure (England) Regulations 2006           | The separate statutory complaints procedure for certain local authority children's services matters    |
| Working Together to Safeguard Children 2026                                      | Multi-agency safeguarding, information sharing and allegations concerning adults working with children |
| Equality Act 2010                                                                | Equality, non-discrimination and reasonable adjustments                                                |
| Human Rights Act 1998                                                            | Relevant rights, dignity, privacy and proportionality                                                  |
| Data Protection Act 2018 and UK GDPR                                             | Lawful, necessary and secure management of personal information                                        |

#### Regulation 31 — Complaints and Representations

Regulation 31 requires registered supported accommodation providers to establish a procedure for considering complaints and representations made by or on behalf of children.

It requires:

1. A procedure for considering complaints and representations.
2. The person who is the subject of a complaint not to participate in its consideration or investigation, except for limited involvement at the informal-resolution stage where the registered person considers this appropriate.
3. A record of complaints and representations, action taken and investigation outcomes.
4. Protection against reprisal or detriment for children making complaints or representations.
5. The ability to provide Ofsted, on request, with a summary of complaints and representations received during the preceding 12 months and the action taken.

Regulation 31 also recognises the separate statutory complaints procedure established under the Children Act 1989 Representations Procedure (England) Regulations 2006. Where that procedure applies, the relevant statutory route must be followed. The protection against reprisal or detriment remains applicable.

Independent Horizons will support young people to access the correct route while continuing to address any concerns relating to its own service.

## 4. DEFINITIONS

### 4.1 Complaint

A complaint is an expression of dissatisfaction or concern about any aspect of the service provided by Independent Horizons.

A person may complain because:

- they feel they have not been listened to or treated fairly;
- the support provided is not meeting their needs;
- a decision has negatively affected them;
- they feel unsafe, unhappy or uncomfortable;
- communication has been poor or unnecessarily delayed;
- they are concerned about a Team Member's behaviour;
- or they believe Independent Horizons has not acted appropriately.

A complaint does not need to use the word 'complaint' or be submitted on a particular form.

### 4.2 Representation

A representation is a view, request or concern raised by or on behalf of a young person about their accommodation, support, treatment or another matter affecting their interests.

A representation may seek a change or reconsideration without necessarily expressing dissatisfaction.

Where a representation amounts to a complaint, it will be considered through the complaints procedure.

### 4.3 Concern

A concern is an issue or worry that somebody wishes to raise, seek clarification about or resolve.

Some concerns can be addressed promptly through ordinary communication. However, a matter must not be treated solely as an informal concern where the person wishes to make a formal complaint.

### 4.4 Compliment

A compliment is positive feedback about Independent Horizons, Nelson House, the support provided or an individual Team Member.

Compliments help identify strengths, recognise good practice and understand what contributes to positive experiences and outcomes.

### 4.5 Safeguarding Concern

A safeguarding concern is information suggesting that a young person may be experiencing, or be at risk of, harm, abuse, neglect, exploitation or another threat to their safety or wellbeing.

Safeguarding concerns require an appropriate safeguarding response, whether or not the person raising them wishes to make a formal complaint.

### 4.6 Allegation About an Adult Working with Children

An allegation may meet the relevant threshold where an adult who works or volunteers with children has:

- behaved in a way that has harmed, or may have harmed, a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child or children in a way indicating that they may pose a risk of harm;
- or behaved, or may have behaved, in a way indicating that they may not be suitable to work with children.

Where the threshold is met or may be met, the appropriate allegations procedure and Local Authority Designated Officer (LADO) arrangements must be followed.

**Not every complaint about a Team Member or Director is automatically a LADO matter.**

### 4.7 Conflict of Interest

A conflict of interest exists where a person's involvement, personal relationships, professional responsibilities, previous actions or other interests may compromise, or reasonably appear to compromise, the fairness and independence of a complaint investigation or decision.

Independent Horizons considers actual, potential and perceived conflicts of interest.

## 5. POLICY PRINCIPLES

Independent Horizons will ensure that:

1. Complaints are treated seriously, fairly, promptly and sensitively.
2. Young people are supported to understand and use the complaints procedure.
3. No young person is subjected to punishment, withdrawal of support, disadvantage or retaliation for making a complaint or representation.

4. Complaints can be made verbally, in writing, electronically or with support from another person.
5. A complainant does not have to complete an informal stage before requesting a formal complaint.
6. Independent advocacy is available and actively promoted.
7. Individuals who are the subject of complaints do not control their investigation or outcome.
8. Actual or perceived conflicts of interest are identified and appropriately managed.
9. Safeguarding and statutory responsibilities take priority where necessary.
10. Confidentiality and privacy are respected, subject to lawful safeguarding and information-sharing requirements.
11. Decisions are based on relevant evidence, fair consideration and clear reasoning.
12. Complainants are informed of outcomes in a way they can understand.
13. Complaints and compliments are recorded on LEIF.
14. Organisational learning is identified, implemented and reviewed.

These principles apply even where a complaint is not upheld.

The fact that a young person's account differs from another person's account must not result in the young person being disbelieved, criticised or discouraged from raising concerns.

Equally, the person who is the subject of a complaint must be treated fairly and given an appropriate opportunity to respond to relevant information through the authorised investigation process.

## 6. MAKING A COMPLAINT AND ACCESSING SUPPORT

### 6.1 Who Can Make a Complaint?

Complaints can be made directly by a young person or by another person raising a concern about Independent Horizons.

Young people may ask a trusted adult, advocate, social worker or other appropriate person to help them explain or submit a complaint.

A person may raise concerns on behalf of a young person, subject to appropriate consideration of the young person's wishes, understanding, consent, privacy and safeguarding needs.

A young person should be involved in the consideration of a complaint affecting them wherever appropriate and safe.

### 6.2 How Complaints Can Be Made

Complaints may be made:

- in person to a Team Member or manager;
- by telephone;
- by letter;
- by email;
- using the Independent Horizons complaints arrangements identified in the Young Person's Guide;
- through an advocate or trusted adult;
- through a social worker or placing authority;
- or by another accessible means of communication.

A complaint does not need to be written or signed before action can be taken.

Where possible, the person receiving a complaint should establish:

- what the concern is about;
- when it happened;
- who was involved;
- whether anyone may currently be unsafe;
- what the complainant would like to happen;
- whether they want an informal resolution or formal investigation;
- and what support or adjustments they need to participate.

A person may still make a complaint even if some of this information is unavailable.

### 6.3 Accessible Communication

Independent Horizons recognises that young people may have different communication needs.

Team Members will offer appropriate support, including:

- explaining the complaints process in clear language;
- helping a young person put their views into words;
- providing written information in an accessible format;
- using alternative communication methods;

- allowing time for a young person to express themselves;
- arranging interpretation or communication support where required;
- making reasonable adjustments for disability or additional needs;
- and supporting involvement from an advocate or trusted adult where appropriate.

Young people will not be required to confront the person they are complaining about.

They will not be pressured into informal resolution, mediation or withdrawing a complaint.

#### 6.4 Independent Advocacy

Young people have the right to seek independent advocacy and to receive support in understanding and exercising their rights.

Independent Horizons will explain how advocacy can help and support young people to make contact where they wish.

An advocate may help a young person:

- understand the complaints process;
- explain their concerns;
- understand relevant decisions;
- attend meetings;
- consider outcomes;
- and request a review or appeal.

Young people may contact an advocate independently and do not need permission from Independent Horizons.

Current advocacy information, including NYAS and other relevant independent services, is provided in the Young Person's Guide.

#### 6.5 Complaints Made Anonymously

Anonymous complaints will be recorded and considered.

The absence of a name or contact details must not automatically prevent action where a concern appears credible or raises safeguarding issues.

The person receiving the information must consider:

- the nature of the concern;
- whether a young person or another person may be at risk;
- what information is available;
- what reasonable enquiries can be made;
- and whether safeguarding or other reporting is required.

Where the complainant cannot be identified or contacted, it may not be possible to seek clarification or provide a personal response.

This limitation and the actions taken must be recorded on LEIF.

#### 6.6 Complaints from Family Members, Professionals and Other Third Parties

Independent Horizons welcomes legitimate concerns from family members, friends, professionals, placing authorities, visitors and others.

A complaint will be considered according to its nature, relevance and any associated safeguarding concerns.

Where a complaint is made on behalf of a young person, Independent Horizons will consider the young person's views and whether the person making the complaint has appropriate authority or consent to receive confidential information.

Receiving or investigating a complaint does not automatically entitle a third party to access the young person's personal records or private information.

Information will be shared only where lawful, necessary and proportionate.

## 7. RECEIVING AND RESPONDING TO A COMPLAINT

### Step 1 — Listen and Establish Immediate Safety

The Team Member receiving a complaint must:

- listen respectfully and without judgement;
- allow the person to explain what has happened;
- take the concern seriously;
- avoid making assumptions or promises about the outcome;
- establish whether there is any immediate risk to a young person or another person;
- and take appropriate safeguarding or emergency action where required.

Where there is immediate danger, serious injury, urgent medical risk or another emergency, Team Members must contact the appropriate emergency services, including 999 where necessary.

Immediate protective action must never be delayed while awaiting a management response or formal complaints process.

### Step 2 — Identify the Correct Reporting Route

The Team Member must consider whether the complaint concerns:

- ordinary support or service matters;
- a Team Member;
- Michael Robinson;
- Karen Burton;
- Gary Burton;
- both Directors;
- or a wider safeguarding or statutory matter.

Ordinary complaints should be referred promptly to Karen Burton where she is not implicated and there is no actual or perceived conflict of interest.

Complaints concerning Karen Burton, Gary Burton or both Directors must be directed to Michael Robinson, House Manager, through the established confidential complaints route.

Where Michael is implicated or cannot appropriately coordinate the matter, the complainant must be supported to use the appropriate unconflicted or independent contact route contained within the Young Person's Guide.

A complaint must not be referred to a person whose involvement would compromise its independent consideration.

### Step 3 — Record and Preserve Information

The complaint must be recorded on LEIF.

The initial record should include the complainant's account, available facts, immediate actions, relevant safeguarding considerations and the route used for escalation.

Where relevant, original correspondence, messages or other evidence must be preserved securely.

Team Members must not alter records, influence witnesses or carry out unauthorised investigative questioning.

### Step 4 — Acknowledge the Complaint

Independent Horizons will acknowledge complaints within **2 working days**.

The acknowledgement will explain, as appropriate:

- that the complaint has been received;
- who is responsible for coordinating or considering it;
- the proposed process and expected timescale;
- how advocacy can be accessed;
- any immediate safeguarding actions that can appropriately be shared;
- and when the complainant can expect further communication.

Where information cannot be shared because of safeguarding, confidentiality or an ongoing external investigation, this will be explained as far as appropriate.

### Step 5 — Consider and Investigate

The complaint will be allocated to an appropriately impartial person.

The person who is the subject of the complaint must not investigate, decide or control its consideration.

Any permitted involvement in informal resolution must be lawful, appropriate, carefully considered and consistent with the young person's safety and wishes.

### Step 6 — Explain the Outcome and Follow Up

The complainant will receive an understandable explanation of the outcome.

Any agreed actions, improvements, safeguarding follow-up or organisational learning will be recorded.

The young person will be offered support to understand the decision and consider further steps where they remain dissatisfied.

## 8. COMPLAINTS INVOLVING SAFEGUARDING, ALLEGATIONS OR CRIMINAL CONDUCT

Complaints are an important source of safeguarding information. However, not every complaint is a safeguarding allegation.

Team Members must distinguish between dissatisfaction about a service, conduct or decision and information indicating actual or possible harm.

### 8.1 Safeguarding Concerns

Where a complaint includes a safeguarding concern, Team Members must follow the Safeguarding Policy and relevant individual safeguarding arrangements.

Depending on the circumstances, action may include:

- immediate protective measures;
- contacting the young person's social worker;
- informing the placing or accommodating authority;
- contacting Children's Social Care or the Emergency Duty Team;
- seeking medical or mental health support;
- consulting or informing police;
- and considering whether an Ofsted notification is required.

The response must be proportionate to the information available and the level of risk.

### 8.2 Allegations About Adults Working with Children

Where information indicates that an adult working with children has behaved in a way that meets or may meet the relevant allegations threshold, the Allegations Against a Team Member Policy must be followed.

**The appropriate Local Authority Designated Officer (LADO)/designated officer must be informed without delay and in any event within one working day.**

Where there is uncertainty about whether the threshold is met, appropriate LADO consultation should be sought rather than dismissing the concern without advice.

The person receiving the complaint must record what has been said accurately and avoid conducting an investigative interview.

Any internal investigation must be appropriately coordinated with the LADO and, where relevant, police or Children's Social Care.

Immediate safeguarding, preservation of information and necessary referrals must not be delayed.

### 8.3 Complaints Involving Possible Criminal Conduct

Where a complaint raises concerns about a possible criminal offence, Independent Horizons will assess whether police involvement is necessary.

Police must be contacted immediately where there is an emergency or immediate danger.

For non-emergency matters, the appropriate safeguarding, management and police-reporting procedures must be followed.

Independent Horizons recognises the importance of avoiding unnecessary criminalisation of young people. Police contact must not be used as a substitute for appropriate support or behaviour management.

### 8.4 Regulation 27 Notifications

Where the circumstances meet the requirements for a serious-event notification under Regulation 27, the appropriate notification must be made without delay in accordance with the Regulations and the Independent Horizons Notifications of Serious Events Policy.

**A complaint does not automatically require an Ofsted serious-event notification.**

The nature of the incident, allegation, risk or statutory event determines whether notification is required.

The decision and the rationale must be recorded.

### 8.5 Where Safeguarding and Complaints Processes Overlap

Where safeguarding and complaints processes overlap, safeguarding and statutory action take priority.

The complaints process must remain appropriately recorded and managed.

Where necessary to protect safeguarding enquiries, evidence or the fairness of an investigation, elements of the complaint investigation may be paused or coordinated with the relevant external agency.

The reason for any pause, outstanding actions and communication with the complainant must be recorded.

A safeguarding referral or police investigation must not automatically result in the complaint being closed without appropriate consideration of its outcome.

## 9. COMPLAINTS ABOUT DIRECTORS, MANAGERS AND TEAM MEMBERS

Independent Horizons recognises that complaints about people in positions of authority require particular attention to impartiality, transparency and conflicts of interest.

### 9.1 Ordinary Complaints — Karen Burton

Karen Burton, Director / Registered Service Manager / Nominated Individual, is the Complaints Manager for ordinary complaints where:

- she is not the subject of the complaint;
- she has not been materially involved in the matter in a way that compromises impartiality;
- and there is no actual or perceived conflict of interest.

Karen will ensure that the complaint is appropriately considered, recorded and responded to within the agreed service standards.

### 9.2 Complaints Concerning Karen Burton, Gary Burton or Both Directors

Where a complaint concerns Karen Burton, Gary Burton or both Directors, **Michael Robinson, House Manager, will receive and coordinate the complaint.**

Michael will:

1. Ensure any immediate safety or safeguarding needs are addressed.
2. Preserve relevant information, records and evidence.
3. Inform the young person's social worker and placing or accommodating authority as appropriate.
4. Consider whether the complaint includes an allegation about an adult working with children that meets or may meet the LADO threshold.
5. Where appropriate, ensure that the LADO is informed without delay and the Allegations Against a Team Member Policy is followed.
6. Arrange referral to an appropriately experienced and genuinely independent external professional through the agreed insurance-company arrangement.
7. Ensure that the complainant is offered independent advocacy.
8. Explain the proposed complaints process and expected timescales.
9. Maintain appropriate communication with the complainant while the matter is being considered.
10. Ensure that the complaint, communications, safeguarding actions, referrals, investigation progress and outcome are appropriately recorded on LEIF.

**Michael must not investigate, determine or quality-assure a complaint himself where independent consideration is required.**

His role is to coordinate the correct process, maintain communication and help ensure safeguarding responsibilities are met.

### 9.3 Exclusion of Implicated Directors

Where Karen Burton is the subject of a complaint, the complaint must bypass Karen.

Where Gary Burton is the subject of a complaint, Karen must not manage or determine the complaint because of their relationship and the recognised conflict of interest.

Where both Directors are implicated, both must be excluded from consideration, investigation, determination and quality assurance.

An implicated Director must not:

- control the complaint referral;
- select or influence the investigation findings;
- direct witnesses or alter evidence;
- determine the outcome;
- decide an appeal;
- or quality-assure the individual complaint.

This does not prevent the person complained about from being given an appropriate opportunity to provide their account or respond to relevant allegations as part of a fair, independently managed process.

Any limited informal-resolution involvement must fall within the narrow circumstances permitted by Regulation 31, be specifically appropriate and not compromise the young person's safety or the impartiality of the process.

### 9.4 Independent External Investigation

Independent Horizons uses an Independent Social Worker arranged or provided through its insurance company to support genuinely independent complaints investigation where required.

The appointed professional must have the appropriate experience and independence for the nature and complexity of the matter.

Before undertaking the investigation, the professional must identify and declare any relevant actual, potential or perceived conflict of interest.

The independent investigator will determine an appropriate investigative approach, consider relevant evidence, take account of the complainant's views and provide a reasoned written outcome.

Their independence must not be compromised by either Director, the House Manager or another person with a relevant conflict.

The governance arrangement must remain effective if a particular independent professional is unavailable or conflicted.

### 9.5 Complaints About Michael Robinson or Another Team Member

Complaints about Michael Robinson or another Team Member will be directed to Karen Burton where she is not conflicted and the matter can appropriately be managed through the ordinary complaints process.

Where a complaint involves an allegation meeting or potentially meeting the safeguarding threshold, the Allegations Against a Team Member Policy takes priority.

Where Karen is also implicated, has a relevant conflict of interest or cannot provide impartial consideration, the independent complaints route must be used.

The person complained about must not investigate or determine the complaint.

## 10. COMPLAINTS PROCEDURE — THREE STAGES

Independent Horizons operates a three-stage complaints procedure.

The stages provide opportunities for early resolution, formal investigation and independent or impartial review.

**A complainant is not required to complete Stage 1 before requesting Stage 2.**

The process will be adapted where safeguarding, allegations, statutory enquiries or conflict-of-interest arrangements require a different route.

### Stage 1 — Optional Informal Resolution

Where appropriate and acceptable to the complainant, a concern may be resolved informally.

This may involve a discussion, clarification, practical action, apology or agreement about how something will be improved.

Informal resolution should only be used where:

- the matter is suitable for early resolution;
- the complainant wishes to use this approach;
- it does not compromise safeguarding;
- and it is consistent with independence and conflict-of-interest requirements.

The complaint will be acknowledged within **2 working days**.

A response will normally be provided within **10 working days**.

The outcome and any agreed actions must be recorded on LEIF.

If the complainant is satisfied, the matter may be closed, subject to any outstanding safeguarding or other necessary actions.

If they remain dissatisfied, they may request formal investigation.

A complainant may also request a formal investigation immediately without attempting Stage 1.

### Stage 2 — Formal Investigation

A formal complaint may be requested at the outset or following an unsatisfactory informal outcome.

The complaint will be acknowledged within **2 working days**.

The Complaints Manager or appropriate independent coordinator will ensure that an impartial investigator is appointed.

The investigator will consider, as appropriate:

- the complaint and the outcome being sought;
- the young person's views;
- relevant records and correspondence;
- the accounts of people involved;
- safeguarding or statutory information;
- any relevant policies, decisions and professional standards;
- and whether the actions taken were reasonable and appropriate.

The person complained about must not control the investigation.

A full written response will normally be provided within **20 working days**.

The response should explain:

- the matters considered;
- the investigation findings;
- whether the complaint is upheld, partly upheld, not upheld or otherwise concluded;
- the reasons for the outcome;
- any actions or improvements agreed;
- any relevant limitations on information that can be shared;
- and how the complainant may request a review.

The outcome must be explained in an accessible manner, including verbally where this is helpful to the young person.

### Stage 3 — Independent Review or Appeal

Where a complainant remains dissatisfied following a formal investigation, they may request a review or appeal.

The review will consider whether the complaint was handled fairly and whether the investigation and outcome were reasonable.

Where the formal complaint was investigated by an independent external professional, **the review or appeal must be undertaken by a different appropriately experienced and independent professional.**

The same investigator must not review or determine an appeal against their own investigation.

Independent Horizons will use the agreed insurance-company arrangement to support the appointment of a suitable independent reviewer where required.

For ordinary complaints, the reviewer must also be appropriately impartial and must not have been responsible for the original decision. Where a genuinely impartial internal review cannot be provided, independent external review must be arranged.

The reviewer will be provided with relevant information, subject to appropriate confidentiality and information-sharing safeguards.

The review should consider:

1. Whether the original complaint was handled fairly.
2. Whether relevant evidence was considered.
3. Whether safeguarding and statutory procedures were followed where required.
4. Whether the findings were reasonable and supported by the evidence.
5. Whether the complainant's views were properly considered.
6. Whether any actions or learning identified were appropriate.
7. Whether any further action or investigation is necessary.

The review will normally be completed within **20 working days**.

A clear written outcome will be provided, explaining the review findings, any recommendations and any further actions required.

The complainant will be supported to understand the outcome and any appropriate external options remaining available to them.

## 11. RESPONSE TIMESCALES, DELAYS AND EXTENSIONS

Independent Horizons will apply the following service standards:

| Stage                        | Service standard                |
|------------------------------|---------------------------------|
| Acknowledgement              | Within 2 working days           |
| Optional informal resolution | Normally within 10 working days |
| Formal investigation         | Normally within 20 working days |
| Independent review or appeal | Normally within 20 working days |

These are Independent Horizons service standards, not statutory complaint deadlines.

For the purpose of this procedure, working days are Monday to Friday, excluding bank holidays in England. Timescales apply to the relevant complaint or stage request.

Where a complaint or appeal cannot reasonably be completed within the stated timescale, the complainant must be informed **before the existing timescale expires**.

The update must explain:

- why additional time is needed;
- what work has already been completed;

- the continued path of action;
- what will happen next;
- who is responsible for progressing the complaint;
- what enquiries or information remain outstanding;
- the revised expected completion date;
- and when the complainant will next receive an update.

Further updates must continue at appropriate intervals until the complaint or review is concluded.

The person coordinating the complaint must maintain oversight of outstanding actions and deadlines.

Extensions must not be used to allow complaints to remain open without active progress.

All extensions, reasons, revised dates and communications must be recorded on LEIF.

Where a statutory safeguarding or criminal investigation affects the complaints timetable, Independent Horizons will explain the position as far as it can lawfully and appropriately do so.

**No complaint timescale or extension may delay immediate safeguarding, welfare or statutory action.**

## 12. INDEPENDENT AND EXTERNAL COMPLAINTS ROUTES

Young people may raise concerns directly with professionals and organisations outside Independent Horizons.

They do not need to complete the Independent Horizons complaints process or obtain permission before contacting:

- their social worker;
- their placing or accommodating authority;
- their Independent Reviewing Officer;
- their Personal Adviser, where relevant;
- an independent advocate;
- Ofsted;
- the Children's Commissioner's Help at Hand service;
- or an appropriate safeguarding or statutory authority.

Team Members must not discourage external contact or suggest that doing so will have negative consequences.

Where a young person wishes to contact an external organisation, Team Members should provide practical support where appropriate, while respecting the young person's privacy and wishes.

Independent Horizons will cooperate appropriately with external agencies where concerns are raised about its service.

### 12.1 Contact Information

The current Young Person's Guide contains the confirmed complaints, advocacy and independent contact details for:

- Karen Burton — Director / Registered Service Manager / Nominated Individual;
- Gary Burton — Director of Operations;
- Michael Robinson — House Manager;
- National Youth Advocacy Service (NYAS);
- and the independent complaints route.

These arrangements form part of the operational implementation of this policy.

The Young Person's Guide must remain accessible to young people, and Team Members must help young people obtain or understand the relevant information where requested.

A young person wishing to complain about a Director must be able to access the appropriate confidential route without first approaching that Director.

Where contact details or independent arrangements change, the Young Person's Guide and this policy must be reviewed to ensure they remain consistent.

### 12.2 External Regulatory and Advocacy Contacts

- **Ofsted**

General enquiries: 0300 123 1231

Concerns about a provider: 0300 123 4666

Email: [enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk)

Website: [www.gov.uk/government/organisations/ofsted](http://www.gov.uk/government/organisations/ofsted)

Ofsted can receive concerns about registered supported accommodation services.

It may use information received to inform its inspection and regulatory activity but does not ordinarily investigate or resolve individual complaints on behalf of complainants.

- **National Youth Advocacy Service (NYAS)**

Freephone: 0808 808 1001

Website: [www.nyas.net](http://www.nyas.net)

NYAS provides independent advocacy information, advice and support to children and young people.

- **Children's Commissioner — Help at Hand**

Freephone: 0800 528 0731

Website: [www.childrenscommissioner.gov.uk/help-at-hand](http://www.childrenscommissioner.gov.uk/help-at-hand)

Help at Hand provides advice and assistance for children in care, children living away from home, children with social workers and care leavers.

- **Social Worker, Independent Reviewing Officer and Placing Authority**

Young people may contact their allocated social worker, Independent Reviewing Officer, Personal Adviser or placing/accommodating authority directly.

Relevant contact details are maintained within the young person's records and the information provided to them.

Team Members must support access to these professionals when requested.

Independent Horizons must not prevent, obstruct or discourage a young person from raising concerns externally.

## 13. COMPLIMENTS AND POSITIVE FEEDBACK

Independent Horizons welcomes compliments and positive feedback from young people, families, professionals, visitors and others.

Compliments are valued as part of service development, recognition of positive practice and Team morale.

They help Independent Horizons understand what is working well, what young people appreciate and which aspects of the service contribute positively to their experiences and outcomes.

Compliments must be given meaningful consideration alongside complaints, safeguarding information and other service feedback.

### 13.1 What May Be Considered a Compliment?

A compliment may relate to:

- the home environment;
- feeling safe, welcomed, respected or listened to;
- positive relationships with Team Members;
- the quality of support provided;
- a Team Member's kindness, reliability or professionalism;
- a positive experience or achievement;
- the way a difficult situation was handled;
- support that helped a young person build confidence or independence;
- or Independent Horizons as a whole.

Compliments may be received verbally, in writing, by telephone, by email or through ordinary conversations and feedback opportunities.

A compliment does not need to be submitted on a particular form.

### 13.2 Receiving a Compliment

When a compliment is received, the Team Member should:

1. Listen and acknowledge the positive feedback appropriately.
2. Thank the person for sharing their experience.
3. Establish what the person particularly valued, where appropriate.
4. Record the compliment on LEIF.
5. Bring the compliment to the attention of the appropriate manager.
6. Consider whether the feedback identifies good practice that could be shared or developed.

Team Members must not pressure young people to provide compliments or positive feedback.

Feedback should be freely given and reflect the person's genuine experience.

### 13.3 Recording Compliments on LEIF

**All compliments must be recorded on LEIF.**

The record should include, where appropriate:

- the date received;
- the person providing the compliment;
- the young person concerned, where relevant;
- the individual Team Member or aspect of the service being recognised;
- the nature of the positive feedback;
- any relevant context;
- whether the compliment has been shared;
- and any learning or follow-up identified.

Where possible, the person's own words should be reflected accurately.

The record should distinguish between direct feedback and a Team Member's interpretation.

A young person's wishes, privacy and confidentiality must be considered before their personal comments are shared more widely.

### 13.4 Sharing Compliments and Recognising Good Practice

Compliments should be shared with the appropriate manager and, where suitable, the individual Team Member or Team concerned.

Positive feedback may be used to:

- recognise kindness, reliability and professionalism;
- acknowledge excellent or thoughtful support;
- reinforce positive communication and relationship-based practice;
- celebrate achievements and progress;
- contribute to reflective supervision;
- and encourage consistent good practice across the service.

Where a compliment concerns an individual Team Member, the feedback may be discussed during supervision or professional development.

Recognition should be proportionate and respectful of confidentiality.

A young person's personal information must not be disclosed unnecessarily when positive feedback is shared.

### 13.5 Learning from Compliments

Independent Horizons recognises that positive feedback provides useful information about effective practice.

Compliments may help identify:

- communication approaches that young people value;
- successful ways of building trusting relationships;
- effective trauma-informed responses;
- practical approaches that promote independence;
- examples of consistency, patience and professional boundaries;
- positive experiences of safeguarding support;
- and actions that help young people feel safe, included and understood.

Where appropriate, learning will be shared through:

- Team discussions;
- reflective supervision;
- Team development and training;
- management oversight;
- monthly governance activity;
- and wider service-improvement work.

Positive practice should be considered for use elsewhere in the service where it is appropriate to individual young people's needs.

### 13.6 Compliments and Quality Assurance

Compliments form part of the evidence considered during management quality assurance and the Regulation 32 Quality of Support Review.

Compliments should be considered alongside:

- complaints and representations;
- young people's views;
- safeguarding information;
- incident records;
- professional feedback;
- and evidence of outcomes.

A compliment may demonstrate that a particular approach was valued, but it does not automatically establish that every aspect of the service is effective.

Similarly, a complaint does not automatically demonstrate that support has been poor.

Both positive and critical feedback should be considered thoughtfully and proportionately.

## 14. RECORDING, CONFIDENTIALITY AND INFORMATION SHARING

### 14.1 LIEF Recording

**LIEF is the central recording system for all Independent Horizons complaints and compliments.**

Records must be accurate, timely, factual, respectful and appropriately detailed.

Complaint records must include, as appropriate:

- the date the complaint was received;
- the person raising the complaint;
- the young person affected, where relevant;
- the nature and details of the complaint;
- the complainant's own account and views;
- any immediate safeguarding or welfare concerns;
- actions taken to secure safety;
- the conflict-of-interest assessment;
- the person responsible for coordinating the complaint;
- the appointed investigator or reviewer;
- the complaint stage;
- acknowledgement and response dates;
- relevant evidence and investigation activity;
- communications with the complainant;
- referrals and notifications;
- response timescales;
- any extensions and the reasons for them;
- the continued path of action where an extension is required;
- investigation findings;
- the complaint outcome and reasons;
- appeal or review activity;
- recommendations;
- organisational learning;
- agreed actions and responsible persons;
- and the date and reason for closure.

Relevant complaint information may be linked to other LEIF records, including safeguarding, incident, Risk Assessment, Positive Behaviour Support, Support Plan or Key Work records where appropriate.

Sensitive information must not be duplicated unnecessarily.

### 14.2 Recording Standards

Team Members and managers must ensure that records distinguish between:

- what was directly seen or heard;
- what was reported by another person;
- the young person's own account;
- other relevant evidence;
- professional analysis;
- and the decisions or actions taken.

Records must not minimise, exaggerate or alter the substance of a complaint.

Where exact words are important, particularly in relation to threats, disclosures, allegations or discriminatory language, these should be recorded accurately.

Complaint records must provide a clear audit trail showing what happened, who acted, why decisions were made and whether agreed actions were completed.

### 14.3 Restricted Access and Conflicts of Interest

Where a complaint concerns a Director or another person with an actual, potential or perceived conflict of interest, the record must be managed using appropriate confidentiality and restricted-access controls.

A conflicted person must not have inappropriate access to investigation or decision-making material.

Access must be restricted to individuals who have a legitimate role in:

- receiving or coordinating the complaint;
- ensuring immediate safeguarding;
- preserving relevant information;
- carrying out an authorised investigation;
- undertaking an independent review;
- making a permitted decision;
- or fulfilling statutory or regulatory responsibilities.

Where a complaint concerns Karen Burton, Gary Burton or both Directors, Michael Robinson will coordinate appropriate records and information sharing without becoming the independent investigator or decision-maker.

Independent external professionals must receive the information necessary to undertake their role, subject to appropriate confidentiality and information-sharing arrangements.

#### 14.4 Confidentiality

Independent Horizons will handle complaint and compliment information in accordance with the Data Protection Act 2018, UK GDPR and its information-governance procedures.

Confidentiality will be respected, but it cannot be guaranteed absolutely.

Information may need to be shared where necessary and lawful to:

- safeguard a young person or another person;
- respond to an allegation;
- support police or statutory enquiries;
- meet regulatory responsibilities;
- conduct a fair investigation;
- support appropriate professional decision-making;
- or fulfil another lawful responsibility.

Information sharing must be necessary, proportionate and restricted to relevant information.

Where appropriate and safe, young people will be informed what information is being shared, with whom and why.

#### 14.5 Information Relating to Third Parties

Receiving or investigating a complaint does not automatically entitle a family member, friend, professional or other third party to access a young person's confidential information.

Where somebody complains on behalf of a young person, Independent Horizons must consider:

- the young person's wishes and understanding;
- whether consent is required and has been obtained;
- whether the person has appropriate authority to act;
- the purpose of sharing information;
- any safeguarding concerns;
- and the young person's rights to privacy and confidentiality.

Information about one young person must not be unnecessarily disclosed to another.

#### 14.6 Complaints Register and Audit Trail

LIEF must provide a central complaint and compliment record and an appropriate audit trail.

Independent Horizons must be able to identify:

- complaints received;
- complaints currently open;
- the person responsible for each complaint;
- outstanding actions;
- response deadlines;
- extensions and updates;
- investigations and reviews;
- complaint outcomes;
- and recurring themes or areas for improvement.

LIEF must also support the production of a summary of complaints and representations received during the preceding 12 months and the actions taken in response, where requested by Ofsted under Regulation 31.

Appropriate restricted access must be maintained when producing reports, monitoring information or audit summaries.

#### 14.7 Recording and Implementing Outcomes

The conclusion of a complaint must be recorded clearly.

The outcome should identify whether the complaint was:

- upheld;
- partly upheld;
- not upheld;
- withdrawn;
- or otherwise concluded, with an explanation.

Where an investigation cannot reach a conclusion on a particular matter, this must be explained rather than recorded as a finding that is unsupported by the evidence.

The complaint record should identify any actions required, the person responsible and the expected completion date.

The complainant must receive an appropriate explanation of the outcome, subject to confidentiality and lawful information-sharing limitations.

## 14.8 Complaint Closure

A complaint should only be marked as concluded when:

- the appropriate complaints consideration or investigation has been completed;
- the outcome has been recorded;
- the complainant has been informed appropriately;
- any review or appeal position has been explained;
- and outstanding actions have been identified and allocated.

Actions arising from a concluded complaint must remain subject to follow-up until completed.

A complaint must not be closed simply because it is difficult, sensitive, involves management or has been referred to an external agency.

Where an external safeguarding, police or statutory process remains ongoing, the relationship between that process and complaint closure must be considered and documented.

## 15. ROLES AND RESPONSIBILITIES

### 15.1 Karen Burton — Director / Registered Service Manager / Nominated Individual

Karen Burton is responsible for:

- implementing and reviewing this policy;
- ensuring Team Members understand their responsibilities;
- acting as Complaints Manager for ordinary complaints where she is not conflicted;
- ensuring complaints are considered fairly and within agreed timescales;
- maintaining appropriate recording and management oversight;
- identifying organisational learning and service improvements;
- supporting young people's access to advocacy;
- ensuring safeguarding and regulatory responsibilities are met;
- and ensuring complaints and compliments contribute to quality assurance.

Karen must not manage, investigate, determine or quality-assure a complaint concerning herself, Gary Burton or another matter in which she has an actual or perceived conflict of interest, except for any limited involvement that is lawful and specifically appropriate.

### 15.2 Gary Burton — Director of Operations

Gary Burton supports service improvement within his operational responsibilities.

His responsibilities may include responding to learning relating to:

- premises and maintenance;
- health and safety;
- resources;
- operational systems;
- business continuity;
- and other relevant operational matters.

Gary may provide information required for an appropriately managed complaint investigation where this does not compromise independence.

He must not investigate, determine or quality-assure a complaint concerning himself, Karen Burton or another matter in which he has an actual or perceived conflict of interest.

Gary is not the automatic final appeal decision-maker under this policy.

### 15.3 Michael Robinson — House Manager

Michael Robinson supports the day-to-day implementation of this policy.

His responsibilities include:

- ensuring Team Members understand how to receive complaints and compliments;
- supporting young people to express concerns;
- promoting access to independent advocacy;
- responding to immediate safeguarding needs;
- supporting accurate LEIF recording;
- ensuring complaints reach the correct route;
- supporting communication and follow-up;
- identifying learning from feedback;
- and supporting consistent Team practice.

**Where a complaint concerns Karen Burton, Gary Burton or both Directors, Michael is responsible for receiving and coordinating the complaint.**

In these circumstances, Michael will:

1. Ensure immediate safety and safeguarding concerns are addressed.
2. Preserve relevant information and records.
3. Inform the social worker or placing authority as appropriate.
4. Consider whether the complaint meets or may meet the relevant LADO threshold and ensure the appropriate statutory route is followed.
5. Arrange referral to an appropriately experienced, genuinely independent external professional through the agreed insurance-company arrangement.
6. Ensure advocacy is offered.
7. Maintain appropriate communication with the complainant.
8. Ensure the complaint is accurately recorded on LEIF.
9. Maintain oversight of relevant procedural deadlines and updates without influencing the independent findings.

Michael must not investigate, determine or quality-assure the complaint himself where independent consideration is required.

### 15.4 All Team Members

All Team Members must:

- read and understand this policy;
- listen to concerns respectfully;
- take young people's experiences and views seriously;
- ensure young people are not disadvantaged or discouraged from complaining;
- identify and respond to immediate safeguarding concerns;
- support young people to access advocacy and external routes;
- record complaints and compliments accurately on LEIF;
- ensure complaints reach the appropriate person promptly;
- maintain confidentiality;
- preserve relevant information;
- cooperate with authorised investigations;
- and participate in reflective learning and improvement.

Team Members must not carry out unauthorised complaint investigations.

They must not pressure a young person to withdraw a complaint, change their account or accept an informal outcome.

### 15.5 Independent External Professionals

Independent investigators and reviewers must:

- have suitable professional experience and competence;
- declare any actual, potential or perceived conflict of interest;
- act impartially;
- consider relevant evidence;
- ensure the complainant's views are appropriately considered;
- recognise safeguarding and statutory responsibilities;
- handle information securely and confidentially;
- provide clear, reasoned written findings;
- and identify appropriate recommendations or learning.

Where a formal investigation has been undertaken by an independent professional, an appeal or review must be conducted by a **different appropriately experienced independent professional**.

The original investigator must not review or determine an appeal against their own investigation.

## 16. MONITORING, QUALITY ASSURANCE AND ORGANISATIONAL LEARNING

Independent Horizons will use complaints, representations, compliments and other feedback to monitor the effectiveness of its support and improve young people's experiences.

### 16.1 Complaints and Compliments Monitoring

Management monitoring will consider:

- the number and nature of complaints received;
- concerns raised informally;
- compliments and positive feedback;
- whether young people can access the complaints procedure;
- whether safeguarding concerns were identified and addressed;
- whether conflicts of interest were appropriately managed;
- whether acknowledgement and response standards were met;
- outstanding investigations and reviews;
- delays and extensions;
- the fairness and clarity of outcomes;
- appeals and independent review findings;
- repeated themes or emerging concerns;
- and progress against agreed improvements.

Monitoring must be proportionate to the size and nature of Independent Horizons.

The purpose is to understand young people's experiences, maintain accountability and identify improvements, rather than simply count complaints.

### 16.2 LIEF Recording Audits

The accuracy and completeness of complaint and compliment records will be considered through routine management oversight and quality assurance.

Audits should consider whether:

- complaints and compliments have been recorded;
- safeguarding concerns were appropriately assessed;
- records contain the person's own views;
- conflicts of interest have been identified;
- the correct procedure was followed;
- deadlines and extensions were recorded;
- communications were appropriate;
- outcomes were clear and supported by evidence;
- and actions and learning have been followed through.

Where an audit identifies missing information, unexplained delays or incomplete actions, these must be addressed.

Audits of complaints concerning a Director or another conflicted person must preserve restricted access and independent scrutiny.

### 16.3 Monthly Independent Horizons Governance

Independent Horizons undertakes monthly internal management governance and assurance activity, as described in the October 2026 Statement of Purpose.

This ordinarily involves Karen Burton, Gary Burton and Michael Robinson and provides an opportunity to review service quality, safeguarding, recording, practice and operational performance.

Complaints and compliments will inform this activity where appropriate.

Monthly governance may consider:

- emerging complaints and compliments themes;
- repeated concerns;
- progress against agreed service improvements;
- recording quality;
- young people's experiences;
- Team learning and supervision needs;

- and matters requiring policy or practice review.

This is an internal management arrangement and is **separate from the statutory six-monthly Regulation 32 Quality of Support Review**.

**Where an individual complaint concerns any person who would ordinarily participate in the management or governance discussion — including Karen Burton, Gary Burton or Michael Robinson — that person must not participate in the consideration, investigation, determination or quality assurance of that individual complaint and must not receive restricted complaint information through ordinary governance arrangements.**

Appropriately anonymised organisational learning may still be considered where this does not compromise confidentiality, independence or an ongoing investigation.

#### 16.4 Regulation 32 — Quality of Support Review

Independent Horizons completes a formal Quality of Support Review at least once every six months in accordance with Regulation 32 of the Supported Accommodation (England) Regulations 2023.

The review considers the quality and impact of the accommodation and support provided.

Relevant evidence includes:

- young people's views, experiences and feedback;
- complaints and representations;
- compliments and positive feedback;
- the impact of support on young people's lives;
- young people's experiences of preparing to move into and out of supported accommodation;
- feedback from placing or accommodating authorities;
- Team Member and professional feedback;
- safeguarding and incident information;
- placement stability;
- support outcomes;
- workforce development;
- and relevant research, guidance and developments.

Following the review, Independent Horizons must produce a written report setting out the findings and intended actions.

A copy of the report must be provided to Ofsted within **28 days beginning with the day the report is completed**, in accordance with Regulation 32.

The report must also be made available on request to each young person's accommodating authority.

Complaints and compliments should contribute to identifying strengths, concerns, improvement priorities and evidence of progress.

#### 16.5 Learning from Complaints

Where a complaint identifies areas for improvement, Independent Horizons will consider appropriate action.

This may include:

- improving communication;
- reviewing Team Member practice;
- strengthening professional boundaries;
- reviewing Support Plans or Risk Assessments;
- changes to the physical environment;
- additional reflective supervision;
- targeted Team training;
- reviewing operational arrangements;
- improving safeguarding processes;
- or revising relevant policies and procedures.

Learning must be translated into practical actions where appropriate.

Records should identify:

- the learning identified;
- the action required;
- the person responsible;
- the expected completion date;
- and the evidence that improvement has occurred.

## 16.6 Team Supervision and Development

Relevant learning from complaints and compliments will inform Team supervision and workforce development.

Reflective supervision may consider:

- communication with young people;
- the impact of trauma and previous experiences;
- professional boundaries;
- responsiveness to concerns;
- equality and discrimination;
- decision-making;
- safeguarding judgement;
- and the way Team Members respond to challenge or criticism.

Complaints must not automatically be treated as evidence of misconduct or poor professional practice.

Where a complaint identifies an individual practice concern, this must be considered fairly and through the appropriate management, safeguarding, supervision or workforce procedure.

Compliments may also inform supervision by recognising strengths, achievements and effective practice.

Independent Horizons will use relevant learning to identify Team development needs and support consistent, reflective practice.

## 16.7 Checking Whether Improvements Have Worked

Completing an action is not necessarily the same as achieving an improvement.

Where changes have been introduced following a complaint, Independent Horizons will consider whether those changes have:

- addressed the original concern;
- improved the young person's experience;
- reduced relevant risks;
- improved consistency or accountability;
- and had the intended positive effect.

Where appropriate, the young person's views should be sought when evaluating the improvement.

# 17. IMPLEMENTATION AND ASSURANCE

Independent Horizons will ensure that this policy is understood, accessible and implemented in day-to-day practice.

## 17.1 Team Member Awareness

All relevant Team Members must be made aware of the current policy and their responsibilities.

This includes understanding:

- how to receive a complaint;
- how to recognise immediate safeguarding needs;
- how to record complaints and compliments on LEIF;
- how to identify the correct complaints route;
- how to respond to complaints about a Director;
- the importance of advocacy;
- and the need to maintain confidentiality and independence.

Relevant learning will be incorporated into induction, Team discussions, supervision and ongoing development.

## 17.2 Young People's Awareness

Young people will be supported to understand their rights and the complaints arrangements when they join Independent Horizons and throughout their placement.

Information should be explained in accessible language and reinforced through ordinary conversations, Key Work and other appropriate opportunities.

Young people must know:

- that they can complain;
- that they will be listened to;
- that making a complaint will not result in punishment or withdrawal of support;
- how to contact someone outside Independent Horizons;
- how to obtain independent advocacy;
- and how to raise a concern about a Director without approaching that Director.

The Young Person's Guide must provide accessible and current information.

### 17.3 Recording and System Assurance

Independent Horizons will maintain the LEIF arrangements necessary to record, monitor and review complaints and compliments.

This includes appropriate restricted access for sensitive complaints and independent investigations.

Management assurance must consider whether:

- records are complete;
- complaints can be tracked through to conclusion;
- timescales can be monitored;
- relevant information can be produced for Ofsted;
- and confidentiality safeguards are effective.

### 17.4 Independent Investigation Assurance

Independent Horizons must maintain a workable arrangement for independent consideration of complaints concerning Directors or other conflicted matters.

The agreed insurance-company arrangement for an Independent Social Worker must remain accessible when required.

An independent investigator must be appropriately experienced and free from relevant conflicts.

Where the original investigation was undertaken by an external independent professional, a different independent professional must be appointed to undertake any subsequent independent review or appeal.

The process must not depend permanently on the availability of a single named individual.

### 17.5 Implementation Review

Following approval and implementation, Independent Horizons will consider whether the policy is operating as intended.

This should include reviewing:

- whether Team Members understand the procedure;
- whether young people can access complaint and advocacy routes;
- whether independent complaint arrangements function effectively;
- whether LEIF records provide an adequate audit trail;
- and whether complaints and compliments result in meaningful learning.

Any significant weakness must be addressed through appropriate management action or policy review.

## 18. POLICY REVIEW AND DOCUMENT CONTROL

This policy will be reviewed at least annually or earlier where circumstances require.

An earlier review may be triggered by:

- a significant complaint or safeguarding concern;
- learning from a serious incident;
- an allegation concerning a Team Member or Director;
- changes in legislation, regulation or statutory guidance;
- Ofsted inspection findings or regulatory feedback;
- changes to the Independent Horizons Statement of Purpose;
- changes in management or workforce arrangements;
- changes to the independent investigation or insurance-company arrangements;
- evidence of weaknesses in complaints handling;
- recurring complaints themes;
- changes to advocacy arrangements;
- changes to complaints contact details;
- or changes to the Young Person's Guide.

### 18.1 Policy Ownership

Karen Burton, Director / Registered Service Manager / Nominated Individual, is the policy owner.

She is responsible for ensuring the controlled policy remains current and is reviewed through appropriate management arrangements.

This policy ownership does not authorise Karen to investigate, manage or determine an individual complaint where she is implicated or has an actual or perceived conflict of interest.

The independent governance safeguards established within this policy must be maintained.

## 18.2 Review and Approval

Any amendments must be considered through the appropriate management review and approval process before the revised document is issued.

The controlled document must identify:

- the policy title;
- version number;
- document status;
- policy owner;
- approval date;
- effective date;
- next review date;
- and approval or signature arrangements.

Superseded versions must be managed in accordance with Independent Horizons' document-control arrangements.

## 18.3 Consistency with Other Independent Horizons Documents

Changes to this policy must be considered alongside relevant linked documents.

In particular, any change affecting:

- complaints routes;
- management responsibilities;
- independent investigation arrangements;
- safeguarding or allegations processes;
- advocacy;
- or contact details

must trigger consideration of corresponding amendments to the Statement of Purpose, Young Person's Guide and other affected policies or operational documents.

The complaints procedure must remain consistent with the current approved Statement of Purpose.

# 19. LINKED INDEPENDENT HORIZONS DOCUMENTS AND REGULATORY REFERENCES

## 19.1 Linked Independent Horizons Documents

This policy should be read alongside the following documents where relevant:

- Independent Horizons Statement of Purpose — October 2026 v3;
- Young Person's Guide;
- Safeguarding Policy and Procedure;
- Allegations Against a Team Member Policy and Procedure;
- Whistleblowing Procedure;
- Positive Behaviour Support and Behaviour Management Policy;
- Notifications of Serious Events Policy and Procedure;
- Confidentiality and Data Protection / Information Sharing Policy;
- Equality and Diversity arrangements;
- LEIF recording procedures and relevant forms;
- Incident Reporting procedures;
- Support Planning and Risk Assessment procedures;
- Team Member Induction, Training and Supervision Policy;
- Quality Assurance and Regulation 32 arrangements;
- and relevant individual safeguarding and support plans.

## 19.2 Principal Regulatory References

The main legislation and guidance relevant to this policy include:

### The Supported Accommodation (England) Regulations 2023

Particularly Regulations 4, 5, 7, 20, 24–27, 31 and 32.

[www.legislation.gov.uk/ukxi/2023/416](http://www.legislation.gov.uk/ukxi/2023/416)

### Department for Education — Guide to the Supported Accommodation Regulations including Quality Standards

[www.gov.uk/government/publications/providing-supported-accommodation-for-children-and-young-people](http://www.gov.uk/government/publications/providing-supported-accommodation-for-children-and-young-people)

**Ofsted — Social Care Common Inspection Framework: Supported Accommodation**

Current supported accommodation inspection framework, updated April 2026.

[www.gov.uk/government/publications/social-care-common-inspection-framework-sccif-supported-accommodation](http://www.gov.uk/government/publications/social-care-common-inspection-framework-sccif-supported-accommodation)

**Working Together to Safeguard Children 2026**

Current statutory multi-agency safeguarding guidance.

[www.gov.uk/government/publications/working-together-to-safeguard-children--2](http://www.gov.uk/government/publications/working-together-to-safeguard-children--2)

**Children Act 1989 and Children Act 2004**

Including relevant arrangements for looked-after children, safeguarding and children's services.

**Children Act 1989 Representations Procedure (England) Regulations 2006**

Relevant where a matter falls within the separate local authority statutory complaints procedure.

**Equality Act 2010**

Including reasonable adjustments and protection against discrimination.

**Data Protection Act 2018 and UK GDPR**

Including lawful, necessary and proportionate information sharing and secure records management.

**APPENDICES****APPENDIX A — QUICK COMPLAINTS RESPONSE GUIDE FOR TEAM MEMBERS**

When a complaint or concern is received:

| Step                          | Action                                                                                                                                               |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Listen                     | Take the concern seriously. Remain calm, respectful and non-judgemental.                                                                             |
| 2. Check safety               | Identify immediate welfare or safeguarding risks and take necessary action without delay.                                                            |
| 3. Identify the correct route | Ordinary complaints to Karen where unconflicted; Director complaints to Michael; safeguarding allegations through the appropriate statutory process. |
| 4. Record                     | Make an accurate LEIF record and preserve relevant information.                                                                                      |
| 5. Offer advocacy             | Explain the young person's right to independent support and external contact.                                                                        |
| 6. Acknowledge                | Ensure acknowledgement within 2 working days.                                                                                                        |
| 7. Progress                   | Follow the agreed informal, formal or independent process.                                                                                           |
| 8. Communicate                | Keep the complainant informed, including before any deadline is extended.                                                                            |
| 9. Conclude                   | Record the outcome, explain the decision and provide appropriate review information.                                                                 |
| 10. Learn                     | Record improvements, allocate actions and follow through.                                                                                            |

**Important reminders**

- A complaint is not automatically a LADO matter.
- A safeguarding concern must not wait for a complaints investigation.
- The person complained about must not control the complaint investigation.
- Young people may access independent advocacy or external routes without IH permission.
- All complaints and compliments must be recorded on LEIF.

**APPENDIX B — COMPLAINTS ROUTING AND INDEPENDENCE**

| Nature of complaint                         | Appropriate coordination and consideration                                       |
|---------------------------------------------|----------------------------------------------------------------------------------|
| Ordinary service complaint with no conflict | Karen Burton as Complaints Manager                                               |
| Complaint about a Team Member               | Karen Burton where unconflicted; safeguarding/allegations route where applicable |
| Complaint about Michael Robinson            | Karen Burton where unconflicted, or an independent route where required          |
| Complaint about Karen Burton                | Michael Robinson coordinates referral for independent external consideration     |
| Complaint about Gary Burton                 | Michael Robinson coordinates independent external consideration; Karen excluded  |

| Nature of complaint                                      | Appropriate coordination and consideration                                               |
|----------------------------------------------------------|------------------------------------------------------------------------------------------|
| Complaint concerning both Directors                      | Michael Robinson coordinates independent external consideration; both Directors excluded |
| Appeal following an independent external investigation   | A different appropriately experienced independent professional                           |
| Complaint involving a possible LADO-threshold allegation | Appropriate allegations process and LADO referral or consultation without delay          |
| Other safeguarding concern                               | Appropriate safeguarding pathway; complaint remains recorded and managed                 |
| Concern about local authority statutory services         | Appropriate local authority complaints or statutory representations procedure            |

Where Michael is conflicted or unavailable, the established independent contact route contained within the current Young Person's Guide must remain accessible.

The person who is the subject of a complaint must not control its investigation or determination.

## APPENDIX C — LEIF RECORDING AND QUALITY ASSURANCE CHECKLIST

This checklist supports the requirements set out in the policy. It does not replace the relevant LEIF forms.

### Complaint Recording

- ☐ Date complaint received
- ☐ Complainant and relevant young person identified
- ☐ Nature of complaint and original account recorded
- ☐ Immediate safeguarding and welfare considerations recorded
- ☐ Conflict-of-interest assessment completed
- ☐ Correct complaint route identified
- ☐ Advocacy offered
- ☐ Complaint acknowledged within the required timescale
- ☐ Investigator or reviewer identified where required
- ☐ Relevant information and evidence preserved
- ☐ Communications and actions recorded
- ☐ Referrals and notifications recorded where applicable
- ☐ Response deadlines monitored
- ☐ Extensions and continued path of action documented where relevant
- ☐ Investigation findings and outcome recorded
- ☐ Outcome communicated appropriately
- ☐ Appeal or independent review recorded where applicable
- ☐ Learning and improvement actions identified
- ☐ Outstanding actions allocated and monitored
- ☐ Complaint appropriately concluded

### Compliment Recording

- ☐ Date received
- ☐ Person providing the compliment recorded where known
- ☐ Positive feedback accurately recorded
- ☐ Relevant Team Member or aspect of service identified
- ☐ Confidentiality considered
- ☐ Appropriate recognition or sharing completed
- ☐ Learning considered
- ☐ Relevant feedback included within quality assurance

### Management Audit

Management audits should consider:

- completeness of records;
- fairness and timeliness;
- safeguarding and notification decisions;
- correct allocation and independence;

- restricted access where required;
- the quality of responses;
- recurring themes;
- evidence of completed improvement actions;
- and the contribution of complaints and compliments to Regulation 32.

Restricted complaints must be audited through an appropriately unconflicted process.

## APPENDIX D — CONTROLLED CONTACT ARRANGEMENTS

The current **Independent Horizons Young Person's Guide** is the confirmed source of current internal complaints, advocacy and independent contact details.

It contains the relevant arrangements for:

- Karen Burton;
- Gary Burton;
- Michael Robinson;
- NYAS;
- and the independent complaints route.

Where a person needs these details, the current Young Person's Guide must be made available.

A young person making a complaint about a Director must not be required to obtain contact details through the Director concerned.

The independent professional used for complaints and reviews will be arranged through the agreed insurance-company arrangement as required.

External contacts include:

| Organisation                           | Contact                                                                                            |
|----------------------------------------|----------------------------------------------------------------------------------------------------|
| Ofsted — general enquiries             | 0300 123 1231                                                                                      |
| Ofsted — concerns about a provider     | 0300 123 4666                                                                                      |
| NYAS                                   | 0808 808 1001                                                                                      |
| Children's Commissioner — Help at Hand | 0800 528 0731                                                                                      |
| Social worker / placing authority      | Individual contact information held in the young person's records and provided to the young person |

Any future changes to internal or independent contact arrangements must trigger a corresponding review of the Young Person's Guide and this policy.

## FINAL CONTROLLED-DOCUMENT APPROVAL AND REVIEW RECORD

**Independent Horizons Limited**

**Policy title:** Compliments and Complaints Policy and Procedure

**Version:** 2026 v2

**Status:** Approved

**Previous version:** January 2026 v1

**Policy owner:** Karen Burton — Director / Registered Service Manager / Nominated Individual

| Approval and review detail | Record                                                                                              |
|----------------------------|-----------------------------------------------------------------------------------------------------|
| Content finalised          | 10 August 2026                                                                                      |
| Management review          | Complete                                                                                            |
| Approved by                | Independent Horizons management (authorised signatory record below)                                 |
| Approval date              | 10 August 2026                                                                                      |
| Effective date             | 10 August 2026                                                                                      |
| Next planned review        | 10 August 2027                                                                                      |
| Trigger review             | Earlier where regulatory, safeguarding, governance, service or significant practice changes require |
| Superseded version         | January 2026 v1                                                                                     |

| Approval and review detail | Record                               |
|----------------------------|--------------------------------------|
| Controlled-copy status     | Approved — current controlled policy |

**Approval and Authorisation**

Name: \_\_\_Karen Burton \_\_\_\_\_

Position: \_\_\_RM & NI \_\_\_\_\_

Signature: \_\_\_confirmed \_\_\_\_\_

Date: 10th August 2026

**This is the current controlled version of the Independent Horizons Compliments and Complaints Policy and Procedure, effective 10 August 2026.**