

# Complaints policy



Your feedback is important to us. We need your feedback, good and bad, to help us improve the service we provide to our residents. All feedback will be handled sensitively, respectfully and seriously. Our complaints policy is transparent and honest so you can be assured of a fair assessment and outcome.

## Step 1

Raise your concern with a member of staff. Staff will make an effort to resolve the issue to your satisfaction.

## Step 2

### Jennifer Mackie

**e:** Jennifer.mackie@ben.org.uk  
**t:** 01289 382216

Birch Hill Care Home  
Norham  
Northumberland  
TD15 2JZ

### Manjeet Stone

**e:** Manjeet.stone@ben.org.uk  
**t:** 02476 651472

Ben Centre  
Arthur Wilson House  
Humber Road  
Coventry CV3 1LL

### Debbie Dale

**e:** Debbie.dale@ben.org.uk  
**t:** 01788 833311

Town Thorns Care Centre  
Brinklow Road  
Easehall  
Rugby CV23 0JE

### Nicola Hall

**e:** Nicola.hall@ben.org.uk  
**t:** 01344 298100

Lynwood Care Centre  
Lynwood Court  
Rise Road  
Ascot SL5 0FG

If you are not satisfied that your concerns have been resolved you can send in a formal complaint to the relevant Care Centre Manager for an investigation. This can be done verbally, via email or use the attached form. You will receive an acknowledgement within 3 working days, and invited in to discuss if you wish.

## Step 3

Following the investigation you will be contacted in writing to advise of the outcome, within 28 days of receiving the complaint (with some exceptions).

If you are satisfied with the outcome, the case will be closed. If we have not heard from you within 1 month of sharing the outcome, we will assume you are happy for it to be closed.

## Step 4

If you are unsatisfied with the outcome of the complaint you can ask the Head of Care Services for an internal review of the case. Your request will be acknowledged within 2 working days and you will be contacted within 28 days to share the findings of this internal review.

## Step 5

If you are unsatisfied with the outcome of the internal review we will help you to access relevant bodies for an external review.

**Local Government Ombudsman for self-funded residents**

**Your local authority or NHS for funded residents**

# Complaints policy



Name of complainant:

Date:

Address:

Postcode:

Telephone:

Name of person the  
complaint relates to:

Date of birth:

Do you have consent to complain  
on the resident's behalf?

Please provide details of  
your complaint

Has this issue been raised with a  
member of staff already?  
Please provide details.