

Compliments, Comments, Concerns & Complaints `4Cs' Procedure for Viapath

Author	Benita Playfoot	Version	1
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Contents

1. Introduction	4
2. Key Responsibilities.....	6
2.1 Chief Executive of Viapath	6
2.2 Complaints Lead, Customer Services Manager	6
2.3 Departmental Managers.....	7
2.4 Clinical Governance and Risk Management.....	7
2.5 General Managers.....	7
2.6 Investigating Officers	7
2.7 All Staff	7
2.8 Patient Experience	8
2.9 The Governance ,Risk and Quality Management and Site Specific Committees.....	8
3. Compliments.....	8
3.1 What is a compliment?	8
4. Comments or Questions	10
4.1 What is a comment or question?.....	10
5. Concerns	10
5.1 What is a Concern?	10
5.2 What will happen if a concern is not resolved?.....	12
6. Complaints	12
6.1 What is a complaint and who can complain?	12
6.2 Issues that cannot be dealt with as a Complaint	14
6.3 What will happen if a complaint is not resolved?.....	15
6.4 The Parliamentary and Health Service Ombudsman	15
6.5 Complaints relating in part to other NHS or Local Authority Social Services	15

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

6.6	Complaints relating to another organisation.....	17
7.	Consent	17
8.	Monitoring and Review.....	19
9.	How Information will be used.....	20
10.	Promotion and Communication.....	20
11.	Links to Other Organisation Procedures.....	21
12.	References.....	21
Appendix 1		23
Appendix 2		24
Appendix 3		25
Appendix A.....		28
Appendix B.....		29

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

1. Introduction

Viapath is committed to providing the public with what it needs, not only in respect of excellent clinical care and safe and efficient diagnostics and screening, but also in passing on their thanks, providing them with information, answering their questions and concerns, or resolving their complaints, in an open, efficient and timely way to ensure that they receive an appropriate response to whatever their specific needs are. It will provide a focal point for the provision of accurate, effective and sensitive information, supporting all patients, their representatives or anyone who may be affected by the actions of Viapath or need information from it.

It has therefore developed the following Procedure; Talking to Us – the Four Cs – Compliments, Comments, Concerns and Complaints (the Procedure) which is designed to enable Viapath to manage compliments, comments, concerns and complaints, while ensuring that compliance to the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (the Regulations)¹ is maintained.

Viapath gladly accepts its responsibility for the effective management and performance of Viapath in handling compliments, comments, concerns and complaints. In particular, the Council and or its delegated Management lead (Complaints Lead, Customer Services manager) will ensure that:

- staff managing such issues are appropriately trained, have adequate administrative resources and access to senior management supervision and support, where necessary;
- the Procedure is integrated into the Clinical Governance, Risk Management and Quality framework of Viapath;
- staff who may have a concern or complaints made against them are adequately supported;

Viapath and its managers will adhere to the principle of openness and honesty in all investigations and responses to those who wish to communicate with it in any way or to make any complaint about the care Viapath has provided.

It will take each contact seriously and resolve issues about its services in an open, courteous and conciliatory manner, which meets the satisfaction of the person making the contact and will provide documented procedures for investigating and managing complaints, including clear guidelines relating to staff responsibility and accountability for dealing with complaints. Staff are expected to maintain a professional and caring approach to all contacts and complainants.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Viapath has the right to refuse to investigate any issues raised where the incident happened over 12 months prior to the date received, however, sensitivity should be used in the decision to refuse any investigation and a decision should be sought from the Chief Executive on whether such issues will be investigated.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

It is essential that all issues are managed quickly and effectively through the required procedures, with the aim of satisfying the contact that they have been listened to, offering an apology and explanation as appropriate, ensuring that any actions identified are completed and learning outcome utilised.

Viapath will ensure that the way it manages all issues will also:

- Enhance the reputation of Viapath
- Avoid protracted correspondence
- Avoid unnecessary litigation
- Use complaints as a means of improving services
- Be fair to contracted clinicians and staff
- Maintain proper accountability for the actions of Viapath and its staff;
- Guarantee that all contacts and complainants will be dealt with fairly and impartially and therefore will not be treated differently as result of making a complaint/concern;

Appendix 1 of this Procedure provides a flowchart illustrating how contacts in respect of such issues will be managed by Viapath.

2. Key Responsibilities

2.1 Chief Executive of Viapath

Is the Accountable Officer for all Patient, Partner and Stakeholder related contact with Viapath and will be responsible for ensuring that a specified Manager oversees the successful management of such issues. The Chief Executive has delegated responsibility to the Chief Operating Officer for the performance of Complaints, Comments, Compliments and Concerns (`4C'). The COO is a member of the Governance, Quality & Risk Committee where the 4 `C's are discussed.

2.2 Complaints Lead, Customer Services Manager

Is the Management Executive level lead responsible for complaints and concerns and submits a monthly summary report of all complaints to the Management Executive Committee.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

2.3 Departmental Managers

Are responsible for ensuring that such issues are completed in a timely and appropriate way within their service area. They will sign off and respond to complainants on behalf of the Chief Executive where required.

2.4 Clinical Governance and Risk Management

Below are a list of individuals who collectively will be responsible to the Medical Director and the Chief Operating Officer for the development of effective Companywide procedures. Specific responsibilities in conjunction with the Complaints Lead, Customer Services Manager will include monitoring all areas of Risk Management, complaints, concern, comments and compliments, issue log, maintaining and developing the Viapath Risk Register and acting as the point of reference within Viapath for all internal and external contacts in relation to all matters relating to risk management.

2.5 General Managers

Have joint responsibility for implementing and managing the relevant procedures on behalf of the Chief Operating Officer and reports to the Management Executive committee. Issues of particular seriousness or which would have a serious impact on Viapath will be directed immediately to the Chief Operating Officer and or the Chief Executive. The matter will be managed throughout the process by the Complaints Lead, Customer Services manager, who will be the direct contact for the management of these issues.

They will provide guidance, support and where necessary direct assistance to other staff in respect of these matters.

The General Managers will develop awareness throughout Viapath, keeping accurate records and statistics and monitoring performance targets, ensuring that any changes in national guidance are disseminated appropriately. They will also monitor trends and any learning will be disseminated throughout Viapath.

2.6 Investigating Officers

(Relevant line manager or those identified) are responsible for undertaking a detailed investigation, complying at all times with this Procedure and any relevant Trust procedures where applicable.

2.7 All Staff

Share a responsibility to read and understand the `4 Cs' Procedure. If they have been asked for information pertaining to an issue or complaint, whether

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

it involves them or not, they must co-operate and provide any relevant information to any investigating officer when asked to do so. They must also forward written details of any verbal issues they receive to Complaints Lead, Customer Services manager with a copy to their line manager as soon as possible. If required to be interviewed, either when on or off duty, in order to complete an investigation on time, staff are expected to give their full support as part of this Procedure.

2.8 Patient Experience

Is a standing agenda on the Governance, Risk, Quality Management Committee whereby all contacts made with Viapath will be reviewed which are covered by this Procedure and all areas of patient experience.

2.9 The Governance ,Risk and Quality Management and Site Specific Committees

Monitors and reviews on behalf of the management executive for VIAPATH governance arrangements, which includes co-ordinating and prioritising clinical and non-clinical risk management issues. They will therefore monitor the performance of VIAPATH in respect of its response to all issues of compliment, comment, concern or complaint and review trends identified from these as identified within this Procedure and relevant procedures.

3. Compliments

All compliments received by Viapath through whatever route should be directed to the Complaints Lead, Customer Services manager and managed in line with this Procedure.

3.1 What is a compliment?

Compliments are the appreciation or expressions of thanks, received from anyone who has received clinical treatment or used one of the services Viapath provides. It is as essential that these compliments are treated with the same respect and importance as concerns or complaints. To this end, Viapath has a compliments procedure that will be used when such communications are received.

These compliments will be reviewed by the Complaints Lead, Customer Services manager who will write to and send a copy to any staff involved and

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

thank the originator of the communication. Copies of correspondence will be lodged on the personal files of members of staff, a database will be kept of all compliments and these will be reported on by department.

An update on all compliments received by Viapath will be regularly shared with staff via the News Bulletin.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

4. Comments or Questions

All comments or questions received by Viapath through whatever route should be directed to the Complaints Lead, Customer Services manager and managed in line with this Procedure.

4.1 What is a comment or question?

Anyone is free to communicate with Viapath and provide it with their views and comments about the services it provides. They may also need to ask a question of Viapath or seek advice or signposting within the wider NHS or social care network. This may be a patient, those affected by the actions of Viapath, member of the public, GP, or MP, or any other person.

These comments and questions will be logged under the direction of the Complaints Lead, Customer Services manager, acknowledged and responded to as appropriate in line with procedures and the comments and any response will be used in the monitoring and review process in order to influence the development of services Viapath provides where appropriate.

5. Concerns

All concerns received by Viapath through whatever route should be directed to the Complaints Lead, Customer Services Manager and managed through this Procedure.

5.1 What is a Concern?

A concern is an issue or worry which has not been specified as a formal complaint.

This may be identified by anyone, either a patient, those affected by the actions of Viapath, a member of the public, GP or MP, or any other person, who has concerns about the actions Viapath or any member of its staff has taken. Although these issues may not have been specified as a complaint, they will be as seriously and investigated in the same way to ensure a fair and effective resolution.

These concerns will be managed and logged under the direction of the Complaints Lead, Customer Services Manager, acknowledged and responded

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

to, the comments and any responses will be used in the monitoring and review process in order to influence the development of services Viapath provides where appropriate.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Healthcare Professionals – may write directly to the Chief Executive or a manager of Viapath and these concerns will be also be managed and logged under the procedure, under the direction of the Complaint Manager. Some issues however, may be raised at a local level and these will be addressed under the individual professional feedback process that is in place locally. It is important however to ensure that if these issues are of a serious or significant nature that may impact on Viapath or Viapath/person raising the issue, that they are forwarded to the Complaints Lead, Customer Services manager for managing centrally.

5.2 What will happen if a concern is not resolved?

If the person involved feels that their concern has not been addressed appropriately or adequately, the matter will be reviewed by the Complaints Lead, Customer Services Manager and referred to the Head of the Department concerned for further investigation if necessary and a second response will be provided. If this is not possible or the result still unacceptable, then the matter will be escalated if the issue or the person contacting Viapath fits the criteria for a formal complaint.

6. Complaints

All complaints received by Viapath through whatever route should be directed to the Complaints Lead, Customer Services Manager and managed in line with this Procedure.

Viapath has an effective complaints procedure which is in line with Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 which provides the statutory framework for NHS complaints procedures. This procedure will be managed directly by the Complaints Lead, Customer Services Manager. Complaints to Viapath will only be managed through this procedure. Complaints by association will be investigated via the (associate) trusts procedure.

6.1 What is a complaint and who can complain?

A complaint is an expression of dissatisfaction in respect of any actions of Viapath and the complaints procedure is designed, in line with the Regulations mentioned above to address such expressions made by a patient or someone on their behalf.

A complaint may be made by:

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

- a person who receives or has received services from Viapath; or
- any person who is affected by, or likely to be affected by, the action, omission or decision of the organisation which is the subject of the complaint providing they fit the criteria for someone who is able to make a complaint;

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Patients have a right to complain and the fact that a patient or their advocate has made a complaint will not affect the patient's current or future care and may not be just related to clinical care.

A complaint may be made about a decision taken by the Viapath that is likely to affect the complainant or about the behaviour or attitude of a member of Viapath staff or someone acting on its behalf. Each complaint must be taken on its own merit and responded to appropriately.

A complaint may be made by a representative acting on behalf of a person mentioned above if that person:

- has died;
- is a child;
- is unable by reason of physical or mental capacity to make the complaint themselves;
- has requested the representative to act on their behalf;

In all but the latter, the Complaints Lead, Customer Services Manager is required to have confidence that the representative has sufficient interest in the person's welfare, is a suitable person to act as representative and is acting in the best interests of the person on whose behalf the complaint is being made. If this confidence is not held, the Customer Services Manager must notify that person in writing stating their reasons.

Appendix 2 of this Procedure provides definitions of a complaint and concern and who may raise them.

6.2 Issues that cannot be dealt with as a Complaint

There are some instances where Viapath is unable to investigate and report an issue as a complaint and they are:

- those from other NHS or Local Authority Social Services bodies
- those made by an employee about any matter relating to their contract of employment, their current or past work or employment
- anyone applying to work for Viapath
- those arising out of the alleged failure to comply with a request for information under the Freedom of Information Act 2000
- complaints made by an independent provider or an NHS Foundation trust about any matter relating to arrangements made with them
- complaints that have been investigated by the Parliamentary and Health Service Ombudsman

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

- where someone has stated specifically in writing that they will take legal proceedings
- an investigation of a criminal offence
- a complaint which has already been investigated by Viapath

Although the aforementioned cannot be investigated as a complaint, these issues should still be treated seriously and investigated under the appropriate Viapath Procedure where necessary.

6.3 What will happen if a complaint is not resolved?

The response to the person will include the information on how they can contact Viapath again if they feel that their complaint has not been resolved to their satisfaction and they may then refer the matter back to Viapath. The matter will then be reviewed by the Complaints Lead, Customer Services manager and if required will be re-investigated and a second response provided.

6.4 The Parliamentary and Health Service Ombudsman

If Viapath has done everything it can to resolve a complaint and the complainant is still not satisfied with the outcome, they may ask the Parliamentary and Health Service Ombudsman to review the matter.

The Ombudsman will ensure that the complaint falls within their jurisdiction after which they may check that everything has been done to resolve the issue locally. If they think more can be done they will refer the issue back to Viapath.

Before taking the matter on, the Ombudsman will consider several factors including what has gone wrong, what injustice this has caused and what is the likelihood of achieving a worthwhile outcome. If the case is taken on, the Complaints Lead, Customer Services manager must provide the Ombudsman with the full complaint file.

If the Ombudsman believes there is a case to answer, they will direct Viapath to take actions which are specified by them.

Viapath will take steps to ensure that all complainants are aware of their right to approach the Ombudsman if they are not satisfied.

6.5 Complaints relating in part to other NHS or Local Authority Social Services

A complaint may be received which relates not only to Viapath but also raises issues which pertain to another health or local authority. Organisations

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

should in this case co-operate in order to try to co-ordinate the handling of the complaint and ensure that the complainant receives a co-ordinated response unless the complainant has requested separate responses.

Where required, organisations involved will agree where appropriate, on which will take the lead in co-ordinating the handling of the complaint and communicating with the complainant. Different organisations/ Trusts have a different procedure however where possible the lead investigating Trust/Organisation will utilise their procedure to be inclusive of Viapath requirements as far as possible.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Viapath will cooperate in resolving the complaint and share any relevant information and attend any joint meetings reasonably arranged to consider the complaint in order to facilitate a more effective outcome. The complaint will be identified as belonging to the Viapath where it is identified as the lead and as a concern where the Viapath is providing information for another organisation to lead and respond.

6.6 Complaints relating to another organisation

Viapath is only required to respond to complaints about services it provides or manages but may receive complaints about another NHS organisation. In these cases the complainant will be informed of this and asked if they wish the matter to be forwarded directly to that organisation on their behalf, naming them in the correspondence. If the complainant agrees, the complaint will be forwarded appropriately and the decision and actions taken recorded in writing.

Where this applies to the actions of a local authority, within 5 working days the complainant will be asked if they want the matter to be forwarded to the local authority involved on their behalf, naming them in the correspondence. Again, if the complainant agrees, the complaint will be forwarded appropriately and the decision and actions taken recorded in writing.

Where the complainant does not want their complaint forwarded they will be advised that Viapath is unable to deal with it and if they wish to pursue it further they must contact the relevant organisation directly. These actions will be recorded in writing.

7. Consent

Consent is required from the patient or person involved for the outcome of any investigation to be released to a third person. In the case of a minor, the permission should be sought from the parent or guardian.

If it is not possible to gain formal consent, for instance if the patient's clinical condition is such that it would make it inappropriate for it to be sought, or a similar genuine barrier exists in gaining it, then the Complaints Lead, Customer Services Manager may use their discretion in waiving consent.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

If consent could be reasonably expected, but not received, Viapath has the right to refuse to investigate further or can provide limited information as appropriate, with advice to the contact that no further action can be taken.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Should a complaint be made via an MP on behalf of a constituent, the letter will be passed to the Complaints Lead, Customer Services Manager for registering and acknowledgement in the normal way. If the letter is categorised as a complaint and a letter from the constituent is enclosed then consent is implied. If the constituent has not written to the MP or if it is a third party who has contacted the MP, then the constituent's written consent should be obtained, although it is understood that it may not always be possible to gain this and the Complaints Lead, Customer Services Manager's discretion may be used in these cases. If the constituent's details are known, the acknowledgement and final response will be sent to them as well as the MP.

8. Monitoring and Review

The Governance, Risk and Quality Management Committee will be the primary committee for the review and monitoring of all compliments, comments, concerns and complaints. The Group is chaired by the Quality managers under the direction of the Chief Operating Officer and outcomes from this meeting will be reported to the Management Executive Committee of Viapath.

Ad hoc reports on numbers, outcomes and trends of all contacts with Viapath by any process, will be provided to any manager of Viapath for any department when requested; also to any commissioning body for whom Viapath provides services.

Regular reports will also be made to the Governance, Risk and Quality Committee to establish:

- the effectiveness of the complaints management process
- consistency of management and remedial action taken
- whether systems for dealing with complaints are integrated with clinical governance and risk management processes and systems for improving the patient experience
- trends in the subject of contacts are identified and that lessons are learnt
- the effectiveness of any changes to the complaints management process identified as a result of contacts
- review action plans and ensure any recommendations are implemented Organisation wide, if appropriate.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Viapath is committed to the use of the outcomes from all issues to inform its actions and to use as positive steps to improve the quality of the service it provides.

It will learn from its mistakes and incorporate any lessons into its operational procedures to prevent a reoccurrence.

9. How Information will be used

All information in respect of all such contacts with Viapath will be treated confidentially and only those who are required to enable a satisfactory resolution to be achieved will have access to it. It will be subject to the rules of confidentiality which all directors, managers and staff agree to within their contract of employment and not divulged to anyone other than those required for a satisfactory conclusion of the matter without the permission of the person expressing the concern or complaint.

All personal data is held in accordance with the Data Protection Act 1998 and the NHS Confidentiality Code of Practice. Closed files will be stored securely in the relevant Organisation offices until archived within secure archive facilities provided by Viapath and kept for the period of 10 years for compliments, comments and concerns and 8 years for complaints.

10. Promotion and Communication

It is key that patients and/or their representatives are aware of how to access Viapath to make it aware of their needs.

Viapath therefore will ensure that all relevant routes for contact are advertised via up to date information on its website, in leaflets and on posters available across Viapath area. Staff should also be aware of these procedures in order for them to pass this information directly to the patients they may support.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

11. Links to Other Organisation Procedures

- Risk Management Procedure
- Adverse Incident and Investigation Procedure
- HR Procedures
- Information Governance Procedure
- Patient Public Involvement

These can be accessed through the relevant Complaints and Risk managers in other organisations by written request and likewise Viapath's

All Organisation Procedures are available on request in paper format from centrally held files.

12. References

The Local Authority Social Services and
National Health Service Complaints
(England) – Regulations 2009

www.dh.gov.uk/statutoryinstruments

Code of Conduct for NHS Managers

www.dh.gov.uk/publications

National Patient Safety Agency – Being Open

www.npsa.nhs.uk

Listening, Responding, Improving

www.dh.gov.uk/mec

A guide to better customer care – DoH 2009

The Parliamentary and Health Service
Ombudsman

www.ombudsman.org.uk

Independent Complaints Advocacy Service

www.seap.org.uk/icas

Page **21** of **32**

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

(ICAS)

Care Quality Commission

www.cqc.org.uk

Data Protection Act 1998

www.legislation.gov.uk/ukpga/1998

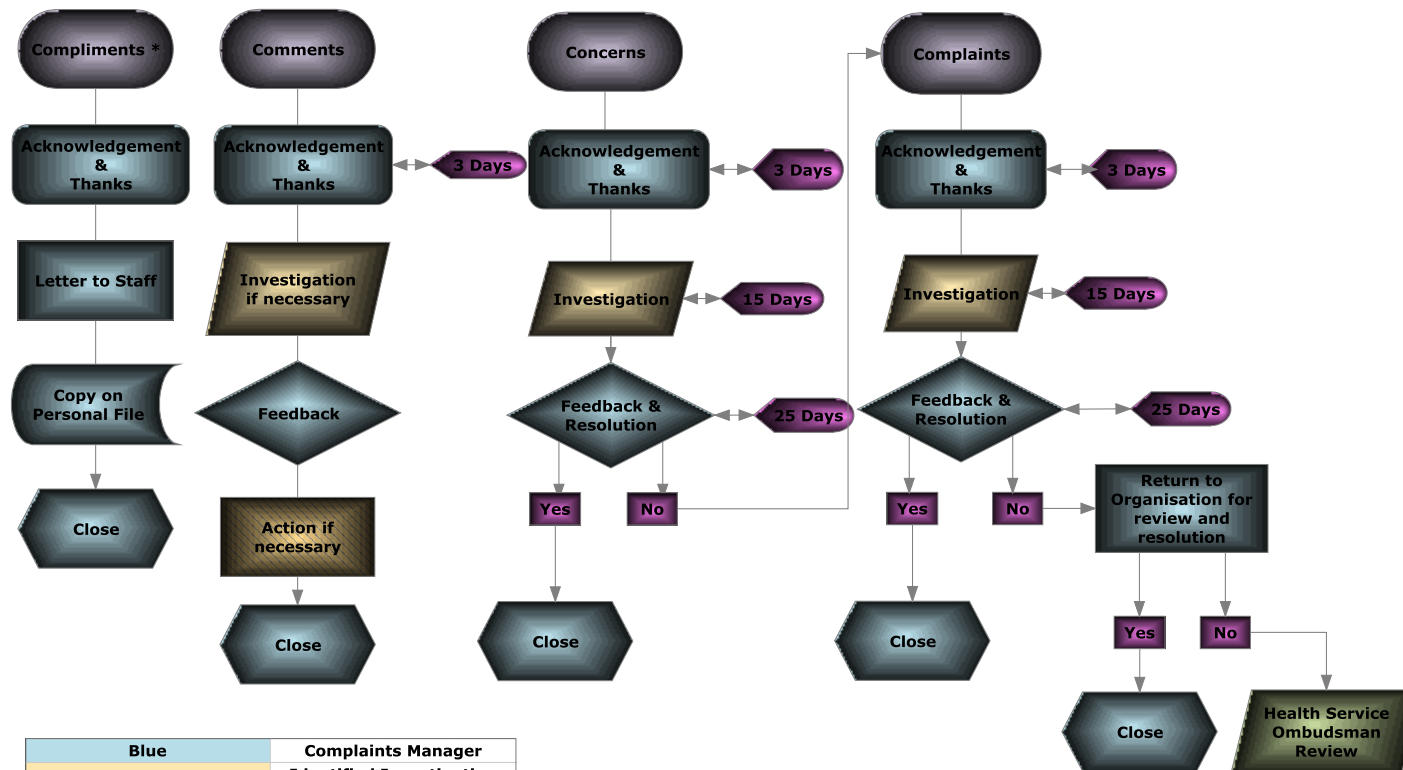
NHS Confidentiality Code of Practice

www.dh.gov.uk/publications

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan Jonathan Edgeworth	Issue date	20 th February 2014

Appendix 1

4 C's Contact Management Flowchart



Blue	Complaints Manager
Yellow	Identified Investigating Officer
Stripes	Both Complaints Manager and Identified Investigating Officer
Green	Outside Investigation
Pink	Timeline

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan/ Jonathan Edgeworth	Issue date	20 th February 2014

Appendix 2

DEFINITIONS – COMPLAINTS AND CONCERNS			
	WHO	WHAT	HOW
COMPLAINT	<ul style="list-style-type: none"> - a patient; - someone acting on behalf of the patient who has specified that they wish to make a complaint	<ul style="list-style-type: none"> - any complaint about the actions of the Viapath or its employees or anyone acting on its behalf 	<ul style="list-style-type: none"> - verbally - either directly or by telephone; - by e mail; - in writing;
CONCERNS	<ul style="list-style-type: none"> - a patient; - someone acting on the behalf of the patient; - anyone directly affected by the actions of the Viapath; - any MP or GP; - any member of the public; - other NHS organisations, stakeholder or their 	<ul style="list-style-type: none"> - any concern in relation to actions of Viapath or its employees or someone acting on their behalf; - any question in respect of the Viapath; - requests for Information; - advice; - request for 	<ul style="list-style-type: none"> - verbally – directly or by telephone; - by e mail; - in writing;

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan/Jonathan Edgeworth	Issue date	20 th February 2014

	representative; - any other non NHS organisation; - any other organisation;	support during an investigation;	
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Appendix 3

Complaints Handling Procedures

1. General Statement

- 1.1 Viapath is committed to resolving complaints about its service in an open, efficient and conciliatory manner, which aims to satisfy the complainant's concern.
- 1.2 The Company aims to learn from its mistakes and will seek to incorporate any lessons into operational procedures to prevent reoccurrence.
- 1.3 Viapath promises to investigate complaints in the strictest of confidence.
- 1.4 This procedure documents the process for investigating and managing complaints.

2. Procedure for Handling Complaints

2.1 Verbal Complaints

- 2.1.1 Wherever possible, verbal complaints should be dealt with "on the spot" and if possible resolved at a local level. Guidelines for dealing with "on the spot" complaints is outlined in Appendix A of this procedure. Details of the complaint and action taken should be recorded on the Verbal/Informal Complaints Form (Appendix B) and passed to Viapath Complaints department for further action if necessary or filing if the matter is resolved.
- 2.1.2 If the matter is resolved, the verbal complaint form should be filed within the complaints department with monthly reports of operational complaints being

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan/Jonathan Edgeworth	Issue date	20 th February 2014

analysed and submitted to the Management Executive Committee and clinical complaints being analysed and submitted to the Governance, Quality & Risk Committee and then sent on to the Board.

- 2.1.3 If the complainant is not satisfied, they should be requested to put their complaint in writing to the Chief Executive where the complaint will be handled through the written complaint procedure. The verbal complaint form should be passed back to Viapath complaints department and held to await the arrival of the complainant's written correspondence.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan/Jonathan Edgeworth	Issue date	20 th February 2014

2.2 Written Complaints

- 2.2.1 All written complaints – including those received via the Patient Monitoring Survey, should be sent to Viapath complaints department for the complaints to be registered onto the electronic complaint log with a unique complaints reference number and a complainant file will be opened.
- 2.2.2 A copy of the written complaint will be passed to the appropriate operational manager/clinical lead on the day of receipt of the complaint. The complaints administrator will send out an acknowledgment of receipt letter **within 3 working days** to the complainant. The original correspondence will be filed in the complainant's file pending further investigation/action.
- 2.2.3 The investigating manager/clinical lead will immediately investigate the complaint and compile a response which will be forward to the Chief Executive if it is an operational complaint for ratification and or the Clinical Executive if it is a clinical complaint for ratification. The investigation and written response should be completed **within 10 working days**. Exceptions to this timeline will only be considered if external input/evidence is required to be submitted to assist the investigation. This extension would need to be agreed with the Complaints Lead, Customer Services manager and the complainant and must be completed **within 20 working days** should they choose to complain further.
- 2.2.4 The final letter will be sent out via the complaints administrator who will log the response onto the log sheet. The file will remain open for **3 months** from the date of final letter being sent out to the complainant.
- 2.2.5 The written complaint letter will be filed within the complaints department with monthly reports of operational complaints being analysed and submitted to the Management Executive Committee and clinical complaints being analysed and submitted to the Quality, Governance, Patient Safety and Risk committee and then discussed by the Committee.
- 2.2.6 Any lessons learned are shared with all staff and used to reviewed and update all systems and processes where necessary.

2.3 Outcomes Communicated to all parties

- 2.3.1 The investigating manager/clinical lead must ensure the outcome of the investigation is conveyed to the member(s) of staff as appropriate.

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan/Jonathan Edgeworth	Issue date	20 th February 2014

Appendix A

Procedure for Dealing with “On the Spot” Complaints (Face to Face or Made by Telephone)

At all times remain calm and courteous.

1. Ask the Complainant if they wish for more privacy to discuss the issue.
2. Allow the Complainant every opportunity to talk about his/her grievance. This may mean that you will have to deal with some strong language as the complainant may show signs of aggression. Assess the situation and seek support from a senior member of staff if needed.
3. Summarise the complaint with the complainant at intervals; this ensures the message has been understood and also reassures the complainant that their concerns are being taken seriously.
4. Try not to take the complaint personally, do not be defensive, or attempt to deny any criticism. An apology may often be appropriate and does not admit liability.
5. Make notes about the conversation (use the informal complaints report form as a checklist; see Appendix B).
6. Ensure you have understood the exact nature of the complaint.
7. Before concluding the conversation, agree any immediate or relevant action that needs to be taken (make sure you can deliver on this).
8. The complainant should also be clear on when they can next expect to hear from us.
9. Forward the completed Verbal Complaint Form to Viapath Complaints department.
10. If the complainant wishes to make a formal complaint, advise them that they must put the complaint in writing to the Chief Executive, who will submit to the complaints department for central processing. Also provide the complainant with contact details of how to do this (such as the patient leaflet).

Author	Benita Playfoot	Version	1
Authorised by	Rab McEwan/Jonathan Edgeworth	Issue date	20 th February 2014

Appendix B

Record of Verbal Complaint	
Reference Number:	<input style="width: 95%;" type="text"/>
Date complaint received:	<input style="width: 95%;" type="text"/>
Section 1 – Detail of Complainant	
Name of complainant:	<input style="width: 95%;" type="text"/>
Address of complainant:	<input style="width: 95%; height: 80px;" type="text"/>
Daytime contact telephone No.:	<input style="width: 95%;" type="text"/>

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Status of complainant:

(Please tick)

☐ **Patient**
☐ **Relative**
☐ **Visitor**
☐ **Other (Please state)**

Section 2 – Detail of Complaint

Date of complaint

Time of Complaint

Brief details of complaint:

Action the complainant would like to see taken
Formal written reply: ☐ Yes ☐ No

Please specify: (as a written reply for a verbal complaint would normally be a confirmation that the complaint has been resolved there and then and that if it is not resolved there and then a written complaint would be required from the complainant).

Section 3 – Action Taken

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Details of Staff Member Receiving the Complaint:

Name:

Designation:

Signature:

Summary of Action Taken by member of staff receiving the complaint:

Section 4 – Action by Investigating Officer

Details:

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Signature of Investigating Officer:

Date:

Complaint resolved

☐

Yes

☐

No

Unresolved

☐

Yes

☐

No

Written Complaint Expected

☐

Yes

☐

No

Form to be returned to Viapath Complaints Department.

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