



Policy: **ADVERSE COMMENTS and COMPLAINTS POLICY**
Policy number: **6.04**

1. Policy Statement

At Hospice in the Weald (HitW) we aim to maintain the highest standards of care. When people using our services or those acting on their behalf offer praise - or criticism - we listen carefully. All comments or complaints will be taken seriously and dealt with promptly, sympathetically, and effectively. At the Hospice we accept that mistakes can happen; we view such instances as an opportunity to learn and take action to improve the service. We also keep our policies under constant review and have reviewed this policy considering the Care Quality Commission (CQC) publication: 'Complaints Matter' (December 2014) and we will keep this policy under constant review.

Under our core value of being open, honest & transparent and our duty of candour, as part of the process of investigating adverse comments and complaints, we will offer all relevant information to relevant persons who have, or may have been harmed while in our care, including when the relevant person is unaware of the event and has not made a complaint.

We also collect the plethora of positive comments we receive and have a separate policy (Positive Comments Policy) in place to collect and share them across the organisation.

2. Related policies, guidelines and procedures

Patient Access to Medical Records Policy 4.01
Positive Comments Policy 6.08
Incident Policy
Whistleblowing Policy 6.03

3. Responsibility and Accountability

Policy formulation and review:	CEO (HLT)
Approval:	Care Director
Compliance:	All staff and volunteers

4. Relevant Dates

Policy originated:	January 2005
Previous Review Date:	June 2019
This Review Date:	December 2022

5. Aims

The aims of this policy are to ensure that:

- Making an adverse comment or complaint is as straight forward as possible.
- We treat an adverse comment or complaint as a clear expression of dissatisfaction with our service which calls for an immediate response.
- We deal with it promptly, politely and, when appropriate, confidentially.
- We respond in the right way; apologise profusely, do all possible to put things right and learn lessons.
- We learn from complaints and use them to improve. There is active review of complaints and how they are managed and responded to, and improvements are made as a result across the Services and Departments.
- We make it clear that complainants know that they will not be discriminated against for making a complaint.
- We handle adverse comments and complaints in accordance with our values and the requirements of the CQC.
- We strive to have what the CQC would see as “a user led vision for raising concerns & complaints” (but we don’t generally refer to our patients, families & carers as ‘users’). We have included a figure of what this vision might look like at appendix B.

We recognise that many adverse comments will be raised informally and dealt with quickly. Our aims are to:

- Resolve informal concerns and solve problems related to adverse comments quickly.
- Avoid unnecessary internal escalation unless the CEO and/or HLT decide escalation is required.

An informal approach is appropriate when it can be achieved. If concerns cannot be satisfactorily resolved informally, then the formal complaints procedure should be followed.

6. Definition of an adverse comment and a complaint

A distinction is made between an adverse comment and a complaint.

An adverse comment is any expression of dissatisfaction which can be resolved relatively easily at the level of discussion with an individual Hospice staff member or involving that staff member’s manager in conjunction with the member of staff.

A complaint is any expression of dissatisfaction with anything provided by, or on behalf of, the Hospice about which the complainant would like to register formal dissatisfaction, and which cannot be resolved at the level of a comment. In addition, the CEO and/or the HLT may decide to deal with an adverse comment or contentious issue as a formal complaint regardless of whether others see it as a formal complaint. This can be with or without the agreement of the person making the adverse comment. Anonymous complaints will be investigated as far as possible but recorded in the appropriate comments section on the HitW common server (see section 7 – Adverse Comments below).

7. Adverse comments

Patients, carers, families, caregivers and visitor’s adverse comments should be taken seriously. Trends should be examined via HLT and/or its sub-groups and improvements made, where appropriate. Adverse comments from all Services/Departments should be submitted via Hospice Web* using the Adverse Comment Form and any relevant documentation should be attached to it (anonymizing it if necessary i.e. patients should be referred to by their first name and Hospice EMIS number) and a copy of the form must also be given to the relevant Head of Service/Department.

*For those unable to access Hospice Web, upon receipt of an adverse comment, please email information under the headings below to the Complaints Administrator (pauline.brown@hospiceintheweald.org.uk) with the relevant manager copied in:

- Date adverse comment is received
- Who was it received by?
- Name of person making the adverse comment (and contact details if applicable)
- How was it made? I.e. letter, email etc.
- What was the adverse comment about?
- Brief summary of content
- Service or Department it relates to
- Is a response required?

No patient identifiable information must be included in the form; patients should be referred to by their first name and Hospice EMIS - number.

Adverse comments are reviewed via the HLT at their monthly meetings.

If a person has requested a response from their comment (and it is clear that it is not a complaint) then we will respond within 10 working days from the date the comment is collected.

The Complaints Administrator will keep a record of adverse comments, their resulting actions and responses.

8. *Who may make a complaint? (Sometimes called a formal complaint)*

Anyone who is, or has been, the recipient of any of the Services/Departments (clinical or non-clinical) or care/treatment provided by, or on behalf of HitW This is not limited to patients, carers, caregivers or relatives but includes participants at fundraising events, donors and customers of our retail outlets. Staff and volunteers should not use this policy to raise complaints or concerns but should refer to our internal personnel policies.

People may complain on behalf of existing or former patients providing that the patient has agreed that the other person may act on their behalf.

Where a patient lacks capacity within the definition of the Mental Capacity Act 2005, a representative can make a complaint (or adverse comment) on their behalf. Written permission to disclose information should be given by the patient or the patient's representative on whose behalf the complaint is made.

Any request for access to patient notes or other documentation in connection with a complaint against the Hospice should be put in writing to the Complaints Administrator.

A complaint (or adverse comment) should be made as soon as possible after the event.

9. *Implementation of Policy*

All members of Hospice staff undergo training on handling adverse comments and complaints as part of their mandatory training. In all instances they will endeavour to handle adverse comments and complaints sensitively and appropriately and will report all adverse comments and complaints to their line manager as soon as possible.

10. *How to complain*

- Complainants may register a complaint with any member of Hospice in the Weald staff, in writing or verbally.
- Details on how to complain will be made available to all our users from the outset of their treatment via the patient, and carers leaflet, the 'A Guide to making an Adverse Comment or Complaint' leaflet and our website.

11. Receiving an adverse comment or complaint

- All members of staff should be polite, actively listen and acknowledge the individual's/complainant's concerns.
- Establish if it is an adverse comment that can be dealt with using an informal approach, or if a formal complaint is being made.
- If the member of staff is unable to deal with the issue, they are to inform the individual/complainant of the steps that are being taken to pass the adverse comment or complaint on and the timescales for response. The staff member should ensure that it is passed for immediate attention to the appropriate Director and the Complaints Administrator.
- All staff receiving a formal complaint must document details of the complaint and any conversation/action taken on the Hospice Web Complaint Recording Form as soon as possible (ASAP) and no later than the end of the same day, as well as notifying their line manager at the first opportunity. The Complaints Administrator is to inform the relevant Director, Head of Service/Department and CEO asap. No patient identifiable information must be included on the Vantage Complaint Recording Form; patients should be referred to by their first name and Hospice EMIS number.
- All formal complainants should be given a copy of this policy as soon as possible.
- All staff should be offered support and guidance from their line manager, HR and CSS and also offered the opportunity to speak to their union representative (if applicable) and or governing body.

12. Investigating a complaint

- The investigation should be carried out by the person nominated by the CEO or HLT.
- Investigations should be both proportionate and sufficiently thorough with all details being recorded to provide an audit trail of the steps taken and decisions made.
- The investigation should provide honest explanations that are based on facts and include the reasons for decisions made.
- Conclusions drawn by the person carrying out the investigation will be discussed initially with the relevant Director before a formal response to the complainant is sent.
- If the complainant still feels that the response is inadequate, the CEO or HLT may initiate a further investigation.
- The CEO will be kept fully informed of the details of the complaint and outcomes by the relevant Director.

13. Resolution of the complaint

- An offer to meet with the complainant to discuss the findings of the investigation should always be made. This can also be followed up with a letter documenting the findings.
- Be open and honest in response and admit when mistakes have been made.
- The resolution should be to the satisfaction of the person raising the complaint. We will not use in any way, shape or form the ex-Healthcare Commission ideas of not upheld or partially upheld.

14. Timescales

Maximum time responses are as follows:

- An acknowledgment of the receipt of a complaint will be made to the complainant within 3 working days by the person nominated to investigate the complaint. At this time, an offer must be made to

discuss with the complainant at a time of their choosing, how the complaint is to be handled and the response period required.

- A formal response from the member of staff charged with investigating the complaint will be sent ASAP and in normal circumstances, whenever possible, within 20 working days.
- If it is not possible to respond within 20 working days, an interim response will be sent, informing the complainant of the progress that has been made and setting out the expected timeframe for completion.

15. Complaints Management/Governance

We fully accept that our whole approach to complaints crosses management (that the HLT deals with) and governance (that the Trustees deal with) and so our policy names the CEO and the Chairman – so it's both with overall responsibility for complaints. This makes clear that complaints really matter to us.

The HLT is responsible for ensuring that there is a timely, co-coordinated and effective system for reporting, investigating, monitoring and recording complaints. The administration of this has been delegated to the Complaints Administrator (the Executive Assistant). The CEO is to keep the Chairman informed about complaints and our effective use of this policy.

Although the complaint will be investigated by the person nominated by the CEO or HLT, the complaints administrator will keep an overview of the complaint and the timing of responses. He/she is responsible for keeping the HLT and CEO informed at all stages. He/she is responsible for ensuring that an investigation takes place in situations where the complainant does not wish to discuss their concerns with the people directly involved, or where staff feel unable to deal with a complaint. In the absence of the Complaints Administrator, his/her deputy in this role is the CEO.

The Complaints Administrator will also ensure that the line manager and relevant Director of any member of staff who is the subject of a complaint are notified at the earliest opportunity, to ensure the member of staff is notified, is kept informed at each stage of the complaints procedure and is given the opportunity to respond.

All complaints (anonymised) will be reported on a quarterly basis to the Trustees via the Clinical Governance Committee and to the Care Quality Commission when requested to do so by them. If the complaint is Lottery related, the Lottery Coordinator is responsible for submitting information to the Gambling Commission.

If a complainant feels that their complaint has not been adequately addressed or dealt with by the Hospice, then the matter may be referred directly to the CEO and onwards to the Chairman of Trustees if still not satisfied. However, if a complainant is not happy with this, they can go externally and contact the Health Service Ombudsman to ask them to investigate it. The ombudsmen are free, independent complaints services. Their details are:

Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP
Tel: 0345 015 4033

16. Fundraising Complaints

If a complaint about fundraising cannot be resolved directly with Hospice in the Weald, the complainant may refer the complaint to the Fundraising Regulator. The Fundraising Regulator is the independent regulator of charitable fundraising, established following the Etherington review of fundraising self-regulation (2015) to strengthen the system of charity regulation and restore public trust in fundraising.

Hospice in the Weald is registered with the Fundraising Regulator and is committed to uphold the highest standards of fundraising practice.

The Fundraising Regulator can be contacted through their online complaints form (<http://www.fundraisingregulator.org.uk/make-a-complaint/complain-about-a-fundraising-approach/>), by phone on 0300 999 3407, or in writing to

Fundraising Regulator
2nd Floor, CAN Mezzanine Building
49-51 East Road
London
N1 6AH

17. Lottery Complaints:

The complainant may refer the matter to the Independent Betting Adjudication service (IBAS):
IBAS
PO Box 62639
London
EC3P 3AS
Tel: 020 7347 5883

Through the Hospice Lotteries Association (HLA) we are registered with IBAS. Complainants may register their complaint with them but only after the other steps above have been completed.

IBAS acts as an impartial adjudicator on disputes that arise between gambling operators who are registered with them and their customers.

18. Legal Matters

- All direct communication with the complainant should cease if the complainant explicitly indicates an intention to take legal action in respect of the complaint or if it is likely that it may lead to litigation.
- Complaints which have a significant possibility of litigation should be handled by working closely with the CEO and in consultation with the HLT with advice from the Hospice's legal advisors, insurers and professional bodies representing members of staff.
- The possibility of legal proceedings should not prevent any investigations being carried out as it is important to uncover faults in procedures or make recommendations to prevent recurrence.
- Where allegations are serious and may constitute a criminal offence, the CEO should be informed and the police must be notified immediately by the CEO or in their absence by the Chairman.

19. This policy is supported by the following documentation:

All incidents, complaints, positive & adverse comments should be logged onto Vantage: [Here on Hospice Web](#)

- [Incidents are discussed at Medicines Optimization Subgroup](#)
- [Incidents are discussed at Quality working group](#)
- [Incidents discussed at the Clinical Safety Working group](#)
- Advice about raising complaints with external organisations (Appendix 1)
- A user led vision for raising concerns & complaints (Appendix 2)
- Complaints log
- A guide to making an Adverse Comment or Complaint flyer
- Whistleblowing Policy (6.3)
- Adverse Comments log

Appendix 1: Raising concerns/complaints about other organisations

Hospice in the Weald works in collaboration with many organisations. There will be times when people in these organisations fall short of what we expect. Any member of staff can and should point out to the people involved when this happens. We should seek to resolve concerns in a polite and timely manner. If the concern is more serious or a repeat of some offending behavior when staff should consider making a formal complaint using the organization in questions own complaints policy. The Hospice staff member is to discuss with their Head of Service/Department before making a formal complaint or in their absence the relevant Director or CEO. We should register formal complaints as soon as possible after any incident occurs.

We do not make formal complaints to other organisations on behalf of patients, families, caregivers or carers but a Director or the CEO may decide to advise them how to make a complaint and help them decide whom to make it to.

Hospice in the Weald is a values driven organization and our core values means we will not collude to prevent legitimate formal complaints from being made. We will also be prepared to whistle blow when we feel the care of patients, families, caregivers and/or carers is compromised.

A USER LED VISION FOR RAISING CONCERNS & COMPLAINTS

