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1. Introduction.

Tynedale Hospice at Home aims to achieve the highest standards of care and practice in all areas of our service and operations.

Assuring the Quality of our Care Service

Our vision is that our services will be maintained at an outstanding level and our values and behaviours underpin everything we do as we work together to achieve our vision. We are caring and compassionate, professional, trustworthy and accountable, positive and have a 'can do' approach.

We recognise that quality is a work in progress and we continually aim to improve. We operate a quality framework of policies and reporting systems, which sets out how we aim to ensure the highest quality standards throughout our organisation to ensure we are safe, caring, responsive and well led.

However, we accept on occasion that our operations may not meet the expectations of service users, the public or partners. If this happens we want the chance to respond to your concerns and to try to put things right, to assure and enhance the quality of our work. We take seriously and will act speedily to address any adverse comment or resolve genuine complaint made against the Hospice, its Trustees, staff and volunteers. The following policy and procedure outlines how we will respond to such complaints from their receipt to satisfactory resolution.

2. Aims.

This policy outlines the key steps and processes that will be followed by us when dealing with a complaint made by a person outside the Hospice organisation about our service delivery or other operations carried out by the Hospice.

It does not deal with complaints made by a member of staff or volunteer which are dealt with under our internal HR policies.

A complaint is a formal expression of dissatisfaction, whether justified or not, about the Hospice's actions or lack of action or standard of service which needs an informed or investigative response.

Tynedale Hospice at Home want to help you resolve your complaint as soon as possible, appreciating that making a complaint may be a daunting experience to some people. You will be treated with courtesy and fairness at all times - we would hope, too, that you will be courteous and fair in your dealings with our staff at all times. We recognise that complaints can act as key indicators of performance and quality and welcome the opportunity to resolve any concerns and provide you with helpful information or actions. We treat all complaints seriously, confidentially and without prior judgement.

We hope that in the vast majority of situations that we can work together to resolve any concern that you have through listening, acting very promptly, maintaining our professional relationships and working in the best interests of yourself and staff to address any issues.

The policy does not cover

- anonymous complaints
- persistent or vexatious complaints
- complaints that have already been dealt with under this policy
- complaints under access to information (GDPR)

You can find our complaints policy on our website, or you can request a copy of this policy by email or telephone or write to the personal assistant (PA) to the Chief Executive Officer (CEO). She is contactable by telephone on 01434 610046 or by emailing mandy@tynedalehospice.com

We distinguish two levels of feedback from users of our services and operations:

- Raising an informal query, suggestion or concern
- Making a formal complaint.

These are described in detail in the following sections.

3. Raising an informal query, suggestion or concern

If you as a patient, a carer, a client or a member of the public have a query, suggestion or a concern about our services that you wish to raise in person immediately, and informally then:

- You may raise it verbally or in writing with a member of staff who will either respond to you immediately or if unable to provide a satisfactory answer, report your query or concern to their line manager within 24 working hours from receipt.
- You may raise it verbally or in writing with the volunteers who will either respond to you immediately or if unable to provide a satisfactory answer, report your query or concern to their line manager within 24 working hours from receipt.
- You may directly contact verbally or in writing the personal assistant to the CEO who will direct your questions to the relevant senior line manager within 24 working hours from receipt.

She is contactable by telephone on 01434 610046 or by email: mandy@tynedalehospice.com

The line manager or head of the team managing the relevant area of the service will contact you promptly (within 48 hours unless extenuating circumstances prevent this). This person may be able to give an answer or explanation verbally or by email to resolve your query, suggestion or concern in that first contact, or may explain that it will need a little time to make enquiries. He/she will then contact you again to follow up. If action has been, or is to be taken, then this will be explained to you, as we work towards achieving a satisfactory resolution.

- We aim to respond to and resolve informal complaints within the timescales below:
- *Immediate resolution* (within 5 working days) – acknowledgment by telephone: if resolution can be achieved within 5 working days then no acknowledgment by email / and or in writing will normally be given. Resolution will be by telephone normally.
- *No immediate resolution* - acknowledgment by telephone, followed by acknowledgment by email and /or in writing within 5 working days explaining the further enquiries required. We would aim to give a full response within 10 working days of receipt. Resolution will be by telephone, followed by confirmation in email or in writing.

It may occasionally be necessary to extend the timescales outlined above, for example when staff are on holiday. If this is the case, we will keep the complainant informed of progress, the reasons for the delay, and the new deadline. We or you may ask for any verbal conversations to be followed up with written correspondence or email to assist in the recording process.

If you wish to check on the progress of your query or concern please, in the first instance, contact the PA to the CEO who will direct onto the staff person dealing with it.

4. Making a formal complaint

If you have raised a query or concern and it has been dealt with as above, but you are still dissatisfied you may wish to raise the matter to a formal complaint for further investigation. Alternatively, you may choose to raise a formal complaint in the first instance.

We ask that formal complaints are made by email or in writing signed by the complainant, and addressed to:

PA to Chief Executive Officer
Tynedale Hospice at Home
1 Legion House
Beaufront Park
Anick Road
Hexham
NE46 4TU
email mandy@tynedalehospice.com

To help us respond promptly please give as much detail as possible regarding the nature of the complaint by including relevant details of the event itself, location, dates, times, occurrences, individual(s) involved and any witnesses. We advise that you keep a record for yourself of what you have said, when and to whom, and retain copies of all correspondence to help you, should the complaint progress to an investigation stage.

A formal complaint can be made verbally or by telephone or email to any member of our staff or volunteers if you so wish in the first instance, but it must be confirmed in writing or by email by the complainant to the PA of the Chief Executive Officer before we can proceed to resolve it under this policy. We are not able to take it forward on the basis of a conversation.

If you make a complaint verbally or over the phone but are unable to put it into writing, then please discuss this with us and we can make suitable arrangements to give you a written copy of your complaint.

If you are making a verbal complaint in the presence of other persons, you will be offered a more private space or office in which to speak to retain confidentiality. Our staff and volunteers will seek support from colleagues to protect themselves if they feel at risk from aggressive behavior or abuse from you when you are making the complaint. Please appreciate that our staff and volunteers when receiving the complaint will do so respectfully and objectively but, at this stage, will not be able to take action themselves or be in a position to tell you whether your complaint is likely to be upheld. You will be asked to make your formal complaint in writing or by email to PA to Chief Executive before it can proceed to be resolved:

Where the complaint is made by a representative acting on behalf of a patient or service user (e.g. in the case of someone who is unable to give consent, or where a patient has died), we shall ask for further information to confirm that the person is empowered to act on the patient's/service user's behalf so that we avoid the release of confidential information to third parties and in order to respect the known express wishes of the patient.

We will contact the relevant team Head on receiving the written complaint and ask them to deal with your complaint or in certain cases (see below) direct it to the Chief Executive Officer (CEO).

Handling of your formal complaint

We will try to get your complaint resolved by the Head of the area or team against whom the complaint has been made. Upon receipt of your complaint we will contact the relevant team Head and ask them to deal with your complaint.

In the first instance, the Head of the team against whom the complaint is made will contact you promptly to discuss your complaint (within 48 hours unless extenuating circumstances prevent this). We may be able to give a satisfactory answer or explanation verbally or by email to resolve your complaint at this first contact, or may explain that it will need a little time to make enquiries and then contact you again to feedback to you. If you wish, we will follow up any verbal conversations with written correspondence or email.

If we cannot resolve the complaint satisfactorily and promptly through our initial contact with you, or if there is merit in seeking fuller information to establish the facts of the case in order to determine if the complaint is upheld, then the Head of the team will initiate an investigation.

The investigation phase will be conducted in a confidential, fair, transparent, professional, timely, and Human Resources compliant manner. The extent and manner of fact gathering, conducting of interviews, taking of witness statements and the collation of evidence will be determined by the particular substantive nature of the complaint.

We expect that you will assist us by providing full information about the matter leading to the complaint and by taking part in any investigation.

At any stage in this procedure, the CEO will be informed immediately by the person(s) responsible for resolving the conflict (line manager, Head of the team or investigation officer) if there is any consideration:

- of criminal actions
- of significant clinical negligence
- of need for external professional advice to be sought
- of conflict of interest with our own staff member in a management role
- of potential for disciplinary HR issues to arise.

The Head of the team will be responsible for keeping in contact with you, although the seriousness of the complaint may escalate the internal management of the complaint resolution process to the CEO, reporting to subcommittees and ultimately to the Board. If a complaint appears to be of a serious substantial nature and to have legal implications, such as safeguarding, abuse, or if a criminal offence has been committed, the CEO/ Board will refer to the Hospice's Legal Advisor, insurers and the police where appropriate.

The investigation will be carried out by one of the following (known as an Investigation Officer (IO):

- the Head of the team
- another team Head not directly involved with the incident being investigated
- Human Resources consultant or other relevant consultant
- an independent external investigator with appropriate skills and experience.

Time scales for resolving a formal complaint

In the normal course of events we will try to deal with a formal complaint within the following timescale:

- Verbal contact and discussion to seek early resolution *within 5 working days* of receipt of the formal complaint in writing
- Acknowledgment by email or in writing *within 5 working days* from receipt of the formal complaint in writing if not able to be resolved straight away
- A full response *within 20 working days* from receipt of the formal complaint in writing.

If it is anticipated that it will take longer than 20 days to complete and report the findings of an investigation, then *at 20 days and agreed intervals thereafter* we will keep you updated on the anticipated conclusion date for the report. A full response will be made to you *within 10 working days* of the conclusion of the reporting of the investigation.

If you wish to check on the progress of your query or concern please, in the first instance, contact the PA to the CEO who will direct you onto the staff person dealing with it (see section 2 for details).

Reasons for extending time limits

We aim to complete all complaints within the timescales above; however, if a complaint is complex or serious leading to an extensive investigation it may occasionally be necessary to extend the time limits. If this is the case, we will keep the complainant informed of progress with the investigation, the reasons for the delay, and the new deadline.

Recording of complaints

Formal complaints will be recorded on their receipt in writing on the Complaints record form and clinical matters may require a separate reporting known as a Significant Event Analysis. All formal complaint records are updated as investigations are made and the final outcome determined, with their storage complying with our internal policies.

These forms which are for our internal use only include:

- *Complaint Record Form*
- *Significant Event Analysis Form*

The IO is responsible for maintaining records of the investigation phase, including copies of any interview statements, letters, emails, meetings, advice and final outcome report which will be retained and stored in the appropriate manner in compliance with our internal policies.

A written response will be sent to the complainant outlining the findings of the investigation and the proposed action to be taken. If it is found that the complaint is upheld then a sincere and meaningful apology is normally appropriate, explaining what went wrong and why and how we are putting things right by making any changes required to prevent future difficulties of a similar kind, either for the complainant or others.

If having followed our formal complaints procedure you still remain dissatisfied, you can ask to have a closure meeting with the CEO and two trustees within 14 days of receipt of our full response.

5. When we get things wrong we will act

The internal senior management team will analyse all the query or concern records as well as those for formal complaints and Significant Event Analyses (SEA) at their regular internal meetings, reviewing outcomes and positively learning from them to improve performance and risk mitigation. The CEO will be responsible for reporting on the outcomes of the investigations and remedies taken to the relevant Trustee subcommittees and to the Board.

The remedy chosen, if a formal complaint is upheld, needs to be proportionate and appropriate to the failure in service, and to take into account what people are looking for when they complain.

All feedback from users of our services and operations helps us focus on how we can improve our quality of service delivery through the learning experience. This could include for example:

- Discussion at staff meetings for reflection on best practice
- Staff training and / or supervision for an individual / team
- Improving our communications
- Provision of more resource
- Changes in our internal procedures and / or service delivery
- Review of internal policies and practice
- Disciplinary action an individual member of staff / volunteer.

If you remain dissatisfied

If having followed the 2 stages of our formal complaints procedure you still remain dissatisfied, you can ask to have a closure meeting with the CEO and two trustees within 14 days of receipt of our full response.

6. Supplementary information regarding care complaints

The Care Quality Commission (CQC) is the independent regulator of health and adult social care services in England, which includes regulation of THH. Their purpose is to make sure health and social care services provide people with safe, effective, compassionate, high-quality care. Their role is to monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety.

They do not settle individual complaints but if you have experienced poor care, or you know that poor care is being provided somewhere, you may tell them. The information about how to do this is available on their website:

<https://www.cqc.org.uk/contact-us/how-complain/complain-about-service-or-provider>