

AGENDA ITEM NO: 14.0.

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Report Title:	Complaints Policy		
Paper Prepared By:	Jacqui Thompson	Date of Paper:	July 2017
Executive Sponsor:	Andrew Bennett	Responsible Manager:	Jacqui Thompson
Committees where Paper Previously Presented:			
Background Paper(s):	None		
Summary of Report:	MBCCG requires an updated complaints policy		
Recommendation(s):	The Governing Body is asked to ratify the MBCCG Complaints Policy 2017-2019		
			Please Select Y/N
Identified Risks:	The CCG being unable to assure its duty to investigate and resolve complaints		Y
Impact Assessment: (Including Health, Equality, Diversity and Human Rights)	The Equality and Diversity Officer at the CSU has undertaken an equality impact assessment on the policy		Y
Strategic Objective(s) Supported by this Paper:			Please Select (X)
To Improve the health of our population and reduce inequalities in health			
To reduce premature deaths from a range of long term conditions			
To develop care closer to home			
To commission safe, sustainable and high quality Hospital Health Care			X
To commission safe, sustainable and high quality Mental Health Care			X
To improve capacity and capability of primary care services to respond to the changing health needs of our population			
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Complaints & Concerns Policy

2017 - 2019

Morecambe Bay Clinical Commissioning Group reaffirms its commitment to Equality and Human Rights and its Equality & Diversity Policy. The Policy shall be applied fairly to all, irrespective of gender, marital status, responsibility for children or dependants, gender reassignment, race, nationality, ethnic/national origin, religion, political beliefs, disability, sexual orientation, age, pregnancy and/or maternity status, trade union activities or any other factor which could lead to the experience of discrimination.

All CCG policies can be provided in alternative formats, translations on request, language line interpreter services are available and website users can use contrast, text sizing and audio tools if required. For further information please contact the CCG at info@morecambebayccg.nhs.uk or 01524 519369.

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1.3	12/07/2017	C McMahon	Inc comments from M Walsh
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1.5	20/07/2017	C McMahon	Sections 5 and 6.5 Updated
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1.0 Purpose and Objective

This Policy sets out the approach of Morecambe Bay Clinical Commissioning Group (MBCCG) to dealing with complaints about the services we commission. It provides a framework for how we will handle, respond to and learn from complaints and how this will influence future commissioning of services.

The policy has been produced in accordance with the legal requirements of Statutory Instrument 2009 No. 309, The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. The Clinical Commissioning Group (CCG) will act in accordance with the NHS Constitution (2013), the Francis Report (2013) and the Clwyd and Hart Report 2013) and we will be guided by best practice.

Midlands and Lancashire Commissioning Support Unit (the CSU) manage complaints on behalf of MBCCG and also offer a Patient Advice and Liaison Service (PALS.) We are committed to working with the CSU to provide the best service for patients, their families and carers.

The purpose of this document is to set out our approach to complaint handling.

The primary objective of this policy is to provide a high quality investigation and resolution of a concern or complaint as quickly as is possible. The aim is to satisfy the complainant that his/her concerns have been addressed, while being fair to staff and the complainant alike. Wherever possible, staff handling complaints will provide 'on the spot' resolution of queries and concerns raised by patients and the public.

The CCG is committed to equality of opportunity. No patient, or any other person involved in the investigation and resolution of a complaint, will receive unfair treatment on the grounds of a protected characteristic or other protected status. The CCG will monitor each complaint within a local database and there will be a record of whether there is any equality impact issue. If so, the CCG will be notified.

All complaints are made in confidence and will not affect the provision of treatment.

2.0 Introduction and Background

The CCG is responsible for ensuring that complaints are considered in accordance with the law and this policy. There are several documents and publications that give helpful guidance in how to deal with complaints and concerns.

The Parliamentary and Health Service Ombudsman (PHSO) (2009) guidance sets out 'Principles of Good Administration, Principles of Good Complaints Handling and Principles for Remedy.' These three sets of principles outline the approach to be taken by public bodies when delivering good administration and customer service, along with how to respond when things do go wrong. They underpin the Ombudsman's assessment of performance, their vision of good complaint handling and their approach to put things right. The same six themes that apply to each of the three principle documents are:

- Getting it right
- Being customer focused
- Being open and accountable
- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement

These documents also provide some specific rights for patients. These include:

- Have their complaint acknowledged and properly investigated
- Discuss how the complaint will be handled and when they can expect a reply
- To be kept informed of the progress and promptly told the outcome
- Have access to further redress through the PHSO, the Information Commissioners Office or legal channels including Judicial Review

The PHSO also issued 'My Expectations for Raising Concerns and Complaints' (2014) which articulates a user led vision for raising complaints and concerns based around a series of 'I' statements across the life cycle of a complaint. For example, when someone is considering making a complaint they should be able to say 'I felt confident to speak up' and they would know they had a right to complain, they knew how to complain, they could receive support to complain and their future care would be unaffected. A summary of the 'I' statements is below.

Stage of Complaint	I Statement
Considering a complaint	I feel confident to speak up
Making a complaint	I felt that making my complaint was simple
Staying informed	I felt listened to and understood
Receiving outcomes	I felt my complaint made a difference
Reflecting on the experience	I would feel confident making a complaint in the future. I felt that my complaint has been resolved.

The 'Good Practice Standards for NHS Complaints Handling' (2013) published by the Patients Association highlights the following summarised standards:

- Openness and transparency, including well publicised and accessible information that is understood by all parties to the complaint
- A consistent approach, centred on evidence based and complainant led investigations and responses
- A logical and rational approach
- Provide opportunities to give feedback on the complaints service
- Offer support and guidance throughout the complaint process
- Provide a level of detail which is proportionate to the complaint
- Identify the cause of the complaint and take action to prevent recurrence
- Using lessons learned to make changes and improvements (see section 6.9)

- Ensure that ongoing care is not affected by having complained.

The CCG's complaints system will enable patients and the public to readily make their own views known, without fear of discrimination and will form part of an integrated process for reporting and handling incidents that ensures that lessons learned are widely disseminated.

Whilst we endeavour to provide a satisfactory resolution to every complaint, there may be occasions where we are unable to resolve a complaint to the satisfaction of the complainant.

The CCG and the CSU will promote equality of access to making a complaint and will ensure that people from minority and disadvantaged communities are given full and equal access to the Complaints and Concerns Policy and Procedure. We acknowledge that it may be difficult for some people to express their concerns and the CCG and CSU will encourage people to voice their opinions where appropriate. The PALs service will be an important point of contact, or referral, to facilitate this.

The handling of complaints must operate to the principles of the Mental Capacity Act (2005) and the Data Protection Act (1998). Confidential patient information should never be disclosed to a third party unless the patient has given their consent to do so. The CCG and CSU will assume a person has capacity to make their own decisions, and support them to do so.

If we assess that a person cannot give consent to investigate a complaint themselves they will seek evidence that the person complaining on the patient's behalf has the authority to pursue the complaint.

3.0 Definitions

- A **complaint** is an expression of dissatisfaction that requires a formal response. It is usually a problem which has not yet been resolved, or which concerns past treatment. It can be made face to face or over the telephone (verbal complaints) or by letter and e-mail (written complaints.)
- A **concern** is a problem which can be dealt with more quickly and informally. This is usually by the end of the working day after it is received. If it is not possible to resolve the concern within 48 hours, the concern will be raised as a formal complaint.
- **Local Resolution** is the investigation and resolution of complaints under the first stage of the NHS complaints procedure. It includes everything we do locally, before a complaint is considered by an Ombudsman.
- A **Serious Incident (SI)** is an incident or near miss occurring on health service premises or in relation to health services provided, resulting in death, serious injury or harm to patients, staff or the public, significant loss or damage to property or the environment or otherwise likely to be of significant public concern.

- **The Ombudsman** refers to the Parliamentary and Health Service Ombudsman who are the second stage of the NHS complaints procedure. If the CCG cannot resolve a complaint, the complainant has the option to approach the Ombudsman for a review once local resolution has been concluded and the CCG have written to the complainant and confirmed this formally. The Ombudsman will assess if the CCG has acted fairly in the complaint investigation and if the response has adequately addressed the complaint.
- Local **advocacy** services are available to act on a patient's behalf throughout the complaint process including dealing with the Ombudsman.
- The **Local Authority Social Services and National Health Service Complaints (England) Regulations (2009)** is the legislation which provides the framework for managing complaints in the NHS.
- Reporting of complaints, concerns, PALS and compliments are recorded on the CCG internal database.

4.0 Scope of the Policy

The Local Authority Social Services and National Health Service Complaints (England) Regulations (2009) cover both Adult Social Care and all NHS services including General Practitioners (GPs), Dentists, Pharmacists and Opticians. These are known as Responsible Bodies, this means a Local Authority, NHS Body, Primary Care Provider or Independent Provider.

Services relating to GPs, Dentists, Pharmacists and Optometrists are commissioned by NHS England and so any complaint for these services will be their responsibility and are outside the scope of this policy.

Please note that this policy excludes letters that raise questions rather than complaints that are received from Members of Parliament (MPs), because these are outside of the scope of this policy, however, if the nature of the enquiry is deemed a complaint, it will be taken through the complaints process and a formal response will be provided.

If a person indicates an intention to commence legal proceedings there is no requirement to cease a complaint investigation. MBCCG would be guided by Legal Advisors.

Existing or former users of services provided by the Responsible Body may complain. Other people may complain on their behalf where the Responsible Body accepts them as a suitable representative and where they have consent. This includes any person who is affected by or likely to be affected by the action, omission or decision of the Responsible Body which is the subject of the complaint.

The complaint and concerns policy is not designed to blame staff, but to investigate complaints, to provide a satisfactory outcome for the complainant, to learn any lessons and to make improvements. If a complaint identifies information which

indicates a need for disciplinary action, this will be managed separately under the CCG's Disciplinary Policy and Procedures.

The CCG has a robust 'whistleblowing' policy in place with clear procedures which enable staff to raise concerns where they identify poor practice, causing unnecessary suffering and loss of dignity to service users. If it is decided that the concern or complaint would be more suitably dealt with via the NHS MBCCG Whistleblowing policy, then this will be discussed with the individual who raised the concern before progressing the issue.

In addition to complaints, comments and concerns, NHS MBCCG welcomes all compliments about the NHS services we provide or commission. These will be recorded on the CCG internal database.

4.1 Outside scope of policy (the following complaints are not required to be dealt with under these Regulations)

Some types of complaint fall outside the scope of this policy and procedure. They include:

- 'Service to service' complaints (known locally as professional concern) where a health organisation or Local Authority makes a complaint about another health organisation or local authority
- A complaint by an employee of a Local Authority or NHS body about any matter relating to employment or contractual matters
- A complaint which is made orally and is resolved to the complainant's satisfaction, not later than the next working day
- A concern, the subject matter of which is the same as that of an oral complaint, that has previously been made, resolved and recorded
- A matter that has already been investigated under the complaints regulations
- A complaint the subject matter of which is being or has been investigated by a Local Commissioner under the Local Government Act 1974 or a Health Service Commissioner under the 1993 Act
- A complaint arising out of the alleged failure by a responsible body to comply with a request for information under the Freedom of Information Act (2000)
- A matter arising out of an alleged failure to comply with a data subject request under the Data Protection Act (1998)
- A complaint which relates to superannuation of persons engaged in health service, compensation for loss of office of the Superannuation Act 1972, or to the administration of those schemes. (S.I. 2009 No. 309)
- Complaints about privately funded healthcare
- If a complaint is also part of an on-going police investigation or legal action, it will be discussed with the relevant police authority or legal advisor and only continue as a complaint if it does not compromise the police or legal action
- Matters which are being or have been investigated by the Ombudsman
- Concerns raised under the Public Interest Disclosure Act (1998) regarding 'whistle blowing'

In these circumstances, we will write to the complainant and explain the reasons for not dealing with the complaint.

5.0 Roles and Responsibilities

The Chief Officer has overall responsibility for ensuring compliance with the regulations and is therefore designated as the Accountable Officer.

The Clinical Commissioning Group is responsible for the delivery of the NHS complaints procedures and ensuring that complaints are undertaken within a timely and sensitive manner.

The Customer Care Team in the CSU are responsible for the day to day handling of the process and are also responsible for the co-ordination of information requests from the Parliamentary and Health Service Ombudsman (PHSO).

The Customer Care Team is responsible for providing service users and staff with all appropriate information on the Complaints Procedure.

Designated investigating leads, either from CCG or CSU will be identified and be responsible for undertaking a detailed investigation of each complaint. The investigation will be conducted through the local resolution stage, on behalf of the Accountable Officer.

6.0 The Stages in the NHS Complaints Procedure

The Responsible Body must involve the complainant at the beginning of the process. Agreement must be reached on how to get the most satisfactory outcome and this will depend on the complainant's expectations.

All Responsible Bodies have to ensure that information about individual service users and patients is protected, in line with the requirements of the Data Protection Act (1998), Caldicott Principles and the confidentiality policies of each signatory organisation.

Whilst the complaints procedure itself is not confidential, we have a duty to enforce Data Protection and protecting Patient Identifiable Data (PID) is a priority unless there is consent to view. However, under certain circumstances such as child protection issues, other responsibilities override this duty. In these circumstances we will follow the guidance in the Confidentiality - NHS Code of Practice (2003), Data Protection Act (1998) and local Caldicott and Confidentiality Policy.

The complainant must give their consent before information about the complaint is passed between organisations. Wherever possible, this should be in written form although if consent is given verbally, this should be recorded and logged. If the complainant does not agree to the complaint being passed to other organisations, the Responsible Body should:

- Seek to resolve any issues or concerns with the complainant regarding the scope and remit of any investigation
- Offer any liaison that could contribute to resolving the matter, remind the complainant of their entitlement to contact the specific organisation or agency directly

When making a complaint, the complainant may expect to:

- Have a complaint dealt with efficiently and have it properly investigated
- Know the outcome of any investigation into the complaint
- Take their complaint to the Independent Parliamentary and Health Service Ombudsman if they are not satisfied with the way their complaint has been handled and with the outcome (see section 6.5)
- Make a claim for Judicial Review if they think they have been directly affected by an unlawful act or decision
- Receive compensation where they have been harmed by negligent treatment

Sometimes agreed deadlines cannot be met. Where this is a delay, the CSU will contact the complainant, explain to them the reasons for the delay and discuss an extension in timescale. The CSU will escalate cases of excessive delay to the CCG.

All complaint files will be retained for a minimum of ten years. Archived files will be stored separately and securely for the CCG. To preserve confidentiality, all paper complaint files will be held in a locked cabinet at the CCG headquarters. Data held electronically on the CCG database will be password protected and access restricted.

6.1 Time Limits for making a complaint

A complaint must be made no later than 12 months after the date on which the matter that is the subject of the complaint occurred. Or, if later, the date on which the matter that is the subject of the complaint came to the notice of the complainant. In the latter case, the complainant must lodge the complaint as soon as is reasonably practicable. Concerns may be considered at any time.

The time limit above will not apply if the CSU are satisfied that the complainant had good reasons for not making the complaint within the time limits and it is still possible to investigate the complaint effectively and fairly (Appendix 1).

6.2 Patient Advice and Liaison Service (PALS)

PALS is a service provided by the CSU as a first point of contact for any complaints. PALS offer important support to both staff and patients and wherever possible, will aim to answer enquiries directly. PALS deal directly with patients and individuals on behalf of a patient, but only with the patient's consent. They will endeavour to answer all enquiries within one working day, but if this is not possible, the enquirer will be informed that they may make their concerns a formal complaint at any time.

6.3 Safeguarding of Vulnerable Adults and Children

The CCG and the CSU customer care team will deal with complaints in line with the CCG's safeguarding policy.

Any concern, enquiry or complaint that may be deemed to have a safeguarding issue will be shared with the CCG's safeguarding team for advice and information.

Any concern, enquiry or complaint that has an element of compromised patient safety will be shared with the CCGs quality team for advice and information.

6.4 Multi Agency Complaints

Where someone is receiving a mix of social and health care, the regulations provide for co-operation between the different authorities so that the complainant should only have to deal with one lead body. Where there are two or more NHS bodies providing treatment, the complainant should only receive one co-ordinated response.

A complainant can complain directly to the service they are unhappy with, or alternatively, to the CCG who commission the service.

6.5 Serious Incidents (SIs) and Complaints

The procedure for investigating SIs is separate from the complaints procedure and is managed in accordance with the CCGs Serious Incidents Policy. If during the course of investigating an SI, a complaint is also received, the incident procedure will normally take precedence in terms of the investigation. In either case, both investigations will be run independently of one another as per legislation. If a complaint investigation reveals the need to take action under the SI procedure, the incident procedure will normally take precedence in terms of investigation.

In these circumstances the complainant will be notified of the SI investigation and will be kept updated on the progress by the Customer Care Team. The issues raised in a complaint will not always be exactly the same as those investigated under the SI procedure and a separate and full response to the complaint will be required. In these cases the policy for dealing with SIs should be read in conjunction with this policy.

6.6 Local Resolution

If a patient, their family or carer has a concern or complaint, any member of staff identified in the scope of this policy can provide information and possibly an early resolution. This may avoid the need to formalise a complaint in some cases. All concerns and complaints may be received in writing, verbally (Appendix 2) or electronically. They must be reported to the CSU Customer Care Team and recorded on the CCG database by the responsible team administrator.

Under the NHS complaints process, complaints can be made directly to the provider of services or to the commissioner of services. When a CCG receives a complaint about a service it commissions, they may decide to deal with the complaint or decide that it is more appropriate for the provider to do so. In the latter case, and with the patient's consent, the complaint will be forwarded to the provider for investigation and details of the outcome will be forwarded to the CCG for monitoring purposes.

The Patient Advice & Liaison Service (PALS) provided by the CSU can act as a gateway to Independent Complaints & Advocacy Support (ICAS) if a patient wishes to make a formal complaint.

At all times in the procedure, the complainant will be advised of the availability of (ICAS) to assist them with their complaint, and this is routinely confirmed in the formal acknowledgement letter.

The Responsible Body receiving the complaint must acknowledge the complaint within three working days and discuss the following with the complainant:

- The manner in which the complaint is to be handled; e.g. written, verbal, face-to-face and does the complaint have any specific communication or access requirements
- Consent to share information
- The period in which the investigation of the complaint is likely to be completed (normally within 40 working days and no later than six months as this may result in referral to the Ombudsman)
- That they will receive correspondence approved by the Accountable Officer within the agreed response period
- This is the Local Resolution process and it is anticipated that most cases will be resolved at this stage (Appendix 5)

6.7 Conciliation

If the complainant remains dissatisfied following receipt of the written response, they will be offered a meeting with a senior representative of the CCG if this has not already taken place. Complainants have the right to be accompanied by a friend, relative or advocate. It is acknowledged that Conciliation meetings with a layperson, appointed by CSU, to act as Conciliator may also be appropriate.

6.8 The Parliamentary and Health Service Ombudsman (PHSO)

If the complainant remains dissatisfied following receipt of the outcome, they have the right to ask the PHSO to review their complaint. They are independent of the NHS and will advise the complainant in writing of the outcome of their application. They can be contacted at the following:

Parliamentary & Health Service Ombudsman
Millbank Tower, Mill bank
London SW1P 4QP
Tel: 0345 015 4033
www.ombudsman.org.uk

6.9 Monitoring of Compliance and Learning from Complaints

In addition to complaints and concerns, MBCCG welcomes all compliments about the NHS services provided. Details will be recorded on our database.

To monitor compliance, accurate records will be kept to provide evidence which can be collated and reported anonymously to the Quality and Safety Committee on a quarterly basis. This will include evidence of outcomes, trend analysis and resulting changes to service/practice.

The CCG actively encourages patients, carers and their families to share their experiences of NHS services locally. This information is collated and triangulated with a range of data to monitor themes and trends. As part of the CCG's patient experience monitoring regular reports that include 'soft intelligence' are presented to the CCG's Quality and Safety Committee and contain information on peoples' experiences through other sources to a complaint, such as the web based Patient Opinion site.

The Clinical Commissioning Group has an obligation to ensure that all complaints are evaluated and changes to procedures or services made as appropriate. Therefore the CCG will provide:

- An anonymised bi-monthly report will be submitted to the Quality Improvement Committee giving an analysis of all the identified trends and subsequent actions taken
- An anonymised bi-monthly report will be submitted to the Governing Body giving an analysis of all the identified trends and subsequent actions taken
- An anonymised report outlining key themes and areas of learning and improvement will be published on the CCG website at least annually
- Complaints Service Evaluation: A patient questionnaire relating to the management of the complaint will be sent by the CSU to the complainant on completion of local Resolution. Any lessons learned will be disseminated accordingly (Appendix 3 and 4)
- A Quarterly Complaints Report will be submitted to NHS England.

6.10 Publicity

Each Responsible Body must make information available to the public about its arrangements for dealing with complaints and how further information about those arrangements may be obtained.

7.0 Negligence Claims

The complaints procedure should not stop if the complainant is taking legal advice. However, where legal action is started by the complainant then the CSU and/or CCG will seek legal advice to consider whether handling the complaint could adversely impact the legal action. The CSU and/or CCG will follow the legal advice.

8.0 Coroner's Cases

If a death has been referred to the Coroner's office, there is no requirement for complaint investigations to be suspended. Investigations will continue and a copy of the final response will be sent to the Coroner for information.

9.0 NHS Litigation Authority (NHSLA)

If the CSU identifies a complaint which meets the NHSLA referral criteria, this will be raised with the CCG who will then report the complaint to the NHSLA.

10.0 Identifying and managing inappropriate and vexatious complaints and/or complainants

The CCG recognise that occasionally there may be inappropriate and vexatious complaints and/or complainants. MBCCG has therefore introduced a process to address this. This process should be used as a last resort and only after all other reasonable measures have been taken. The process is designed to protect and support staff who are the subject of inappropriate and/or vexatious complaints.

10.1 Identifying Vexatious complaints and/or complainants

Complaints and/or complainants may be deemed to be inappropriate or vexatious where current or previous contact with them shows that they have met any of the following criteria:

- If the NHS Complaints Procedure has been fully and properly implemented and exhausted
- If complainants seek to prolong contact by unreasonably raising further concerns or questions after receiving a response, or, while the complaint is still at the investigation stage
- If the complainant is unwilling to accept documented evidence of treatment given as being factual, or, if the complainant denies receipt of an adequate

response despite correspondence specifically answering their questions/ concerns

- If the complainant does not clearly identify the precise issues requiring investigation despite reasonable efforts to assist with this and/or the concerns identified are not within the remit of the CCG to investigate. In the latter case, the Customer Care Team will assist in advising the complainant of the relevant organisation to contact
- If physical violence, harassment, bullying and/or abusive behaviour has been used or threatened towards staff or their families/associates at any time. All such incidents will be documented and reported, as appropriate, to the Police
- If unreasonable demands or expectations are made by the complainant to the CCG

10.2 Managing inappropriate and vexatious complaints and/or complainants

In all circumstances complaints will be dealt with in accordance with the complaints regulations. However, if complaints and/or complainants have been identified as being inappropriate or vexatious, in accordance with the above criteria, the CCG Chief Nurse will decide on appropriate action.

The Customer Care Team will implement such action and notify complainants promptly and in writing of the reason why they have been classified as inappropriate or vexatious and the action to be taken.

This notification must be copied promptly for the information of others already involved in the complaint. A record must be kept in the complaints specific correspondence, not within patient's clinical records, of the reasons why a complainant has been classified as inappropriate or vexatious.

11.0 Equality Impact Assessment

An Equality Analysis Checklist has been completed for this policy. The system for collecting the protected characteristics of complainants is being developed. This will enable information to be analysed for themes and trends and then shared with providers.

12.0 Implementation and Dissemination

This policy will be disseminated in accordance with CCG policy and procedures.

The Policy will be available electronically on the CCG website and it is the responsibility of individual staff to comply with this policy.

Managers and Staff can seek advice from the Head of Quality, or the Head of Complaints at the Midlands and Lancashire Commissioning Support Unit.

13.0 Monitoring and Review Arrangements

The CCG will monitor the application and effectiveness of the policy and it will be reviewed every two years to ensure that this policy takes into account:

- Legislative changes
- Good practice guidance
- Case law
- Significant incidents reported
- Changes to organisational infrastructure

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APPENDIX 1

Summary of Time Limits/Performance Targets

EVENT	TIME ALLOWED
Original Complaint	A complaint must be made not later than 12 months after the date on which the matter which is the subject of a complaint occurred, or if later, the date on which the matter which is the subject of a complaint came to the notice of the complainant.
LOCAL RESOLUTION	
Oral, written or electronic complaint	Acknowledgement issued – 3 working days of receipt. Response period – agreed with complainant – not later than 40 working days, unless agreed with complainant, or in the case of a multi-agency complaint, not later than 60 days.
Complainant remains dissatisfied	Offer Conciliation. Contact Parliamentary and Health Service Ombudsman (PHSO)
Comments and Concerns	All comments and concerns may be written or oral. Response to be made within a reasonable, timely period of time.
Glossary of terms:	
Compliment – positive expression of satisfaction with service or treatment provided.	
Comment – feedback on service or treatment, to inform commissioners and/or providers.	
Concern – expression of dissatisfaction which requires attention but has not been taken to formal complaint level.	

APPENDIX 2

Verbal Complaints Form (Completed by Staff)

Date

Name of Reporting Manager

Department/Service

Telephone Contact

Details of Verbal Complaint

Name of Complainant

Address

Telephone Contact

Patient/Relative/Carer/Other (please delete as applicable)

Outline of Complaint

.....
.....
.....
.....

Action Taken (if any)

.....
.....

Complaint Resolved/Further action required by Complaints Department (delete as appropriate)

Further action required

.....

Please scan and forward to: info@morecambabayccg.nhs.uk or MBCCG Admin Team at Morecambe Bay CCG, NHS North Lancashire, Moor Lane Mills, Moor Lane, Lancaster, LA1 1QD

OR

MLCSU.customercarelancashire@nhs.net Customer Care Team, Midlands and Lancashire Commissioning Support Unit, Jubilee House, Lancashire Business Park, Centurion Way, Leyland, PR26 6TR

APPENDIX 3 COMPLAINTS PROCEDURE/SERVICE EVALUATION

Date: As postmark.

Dear Patient

I am writing about your recent involvement in the NHS complaints procedure.

We want to provide a high quality service to patients who make a complaint so I am writing to ask whether you will comment on the service you have received. If you are then please complete the enclosed questionnaire and return it in the envelope provided.

If you prefer not to fill in the form but would still like to make a comment, you are very welcome to do so. You can do this in writing or by email to:

Customer Care Team

Midlands and Lancashire Commissioning Support Unit

Jubilee House, Lancashire Business Park

Centurion Way

Leyland

PR26 6TR

Email: MLCSU.customercarelancashire@nhs.net

Telephone: 0800 032 24 24.

I do hope that you are able to find time to provide your comments as your feedback will be very much appreciated.

Yours sincerely

Customer Care

Enc

APPENDIX 4 Patient Questionnaire

1. I felt that information regarding the complaints process was readily available

- Yes
- No

2. I felt confident to speak up

- Yes
- No

3. I felt that making my complaint was simple

- Yes
- No

4. I felt listened to and understood

- Yes
- No

5. I felt that my complaint made a difference

- Yes
- No

6. I would feel confident making a complaint in the future

- Yes
- No

(Optional)

Name..... Tel.....
Address..... Mobile

..... Email.....

If you have any further suggestions or comments that might help us to improve the handling of complaints, please outline them below:

Additional comments:

Thank you for taking the time to complete this questionnaire.

It would be helpful to us if you would supply the following details about yourself:

THIS INFORMATION WILL BE HELD IN CONFIDENCE AND WILL NOT BE ATTRIBUTED TO ANY INDIVIDUAL.

Please tick the appropriate box.

- You are the patient.
- You are complaining on behalf of a patient.

What is your/the patient's ethnic origin?	
White	Black or Black British
<input type="checkbox"/> British	<input type="checkbox"/> Caribbean
<input type="checkbox"/> Irish	<input type="checkbox"/> African
<input type="checkbox"/> Any other white background	<input type="checkbox"/> Any other Black background
Mixed	Other Ethnic Groups
<input type="checkbox"/> White and Black Caribbean	<input type="checkbox"/> Chinese
<input type="checkbox"/> White and Black African	<input type="checkbox"/> Any other ethnic group
<input type="checkbox"/> White and Asian	<input type="checkbox"/>
<input type="checkbox"/> Any other mixed group	<input type="checkbox"/>
Asian or Asian British	Not Stated
<input type="checkbox"/> Indian	<input type="checkbox"/> Not stated
<input type="checkbox"/> Pakistani	
<input type="checkbox"/> Bangladeshi	
<input type="checkbox"/> Any other Asian background	
What is your/the patient's gender identity?	Do you/the patient have a disability, long term illness or health condition?
<input type="checkbox"/> Male	<input type="checkbox"/> Yes
<input type="checkbox"/> Female	<input type="checkbox"/> No
<input type="checkbox"/> Transgender	
What is your/the patient's age?	
<input type="checkbox"/> 0-18 years	<input type="checkbox"/> 55-64 years
<input type="checkbox"/> 19-24 years	<input type="checkbox"/> 65+ years
<input type="checkbox"/> 25-34 years	<input type="checkbox"/> Prefer not to say
<input type="checkbox"/> 45-54 years	

Please return the completed form in the enclosed envelope.

Appendix 5

The Complaints Procedure (Local Resolution)

A formal complaint has been received by CCG/CSU either verbal or written (letter/email). (MP Letters are dealt with through a separate procedure)

Complaint to be forwarded **IMMEDIATELY** by email to Customer Care Team (CCT) using the email address: MLCSU.customercares Lancashire@nhs.net)

Assessment Phase

CCT assess if complaint is within the scope of service and acknowledge.
Advocacy services offered
Consider early or informal resolution – look at whether it can be resolved by the end of the next working day

Summary of Complaint Phase

CCT Personal contact to agree a summary of the complaint and desired outcomes.
Explanation of process and timescales.
Consent sought.

Investigation Phase

CCT agree with CCG for provider of service to investigate where applicable.
CCT to send to appropriate contact for investigation with agreed timescale and desired outcome.
Investigation response of adequate quality received and accepted.
If necessary, independent opinion on clinical comments given will be sought.

Complaint Response Phase

Co-ordinated response to complaint drafted by CCT for sign off.
Response agreed by senior management and signed and sent out to complainant.
Copy of signed response sent to CCT for logging and closure of case.

'Lessons Learned Phase'

Further actions identified to resolve the individual complaint.
Wider service improvements identified and implemented.

Useful Contacts

First point of contact:

Customer Care Team
Midlands and Lancashire Commissioning Support Unit (CSU)
Jubilee House
Lancashire Business Park,
Centurion Way
Leyland PR26 6TR
Telephone: 0800 032 24 24
Textphone: 01772227005
Email: MLCSU.customercarelancashire@nhs.net

Morecambe Bay CCG
Moor Lane Mill
Lancaster
LA1 1QD
Telephone: 01524 519369
Email: info@morecambebayccg.nhs.uk

If complaint unresolved:

Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
London SW1P 4QP
Tel: 0345 015 4033
Email: <mailto:phso.enquiries@ombudsman.org.uk>

For Independent Contractor complaints:

NHS England
PO Box 16738
Redditch B97 9PT
Tel: 0300 311 22 33 Mon – Fri 8am – 6pm, excluding Bank Holidays
Email: mailto:england.contactus@nhs.net

Please note, the Customer Care Team are happy to signpost to other useful organisations.