

ST COLUMBA'S HOSPICE



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Management of Compliments, Concerns and Complaints

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This document should be read and understood by the following personnel:

All Hospice staff.

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Management of Compliments, Concerns and Complaints Policy

St Columba's Hospice strives for high standards in service delivery and welcomes feedback from patients, families, visitors, anyone who works or volunteers with us or is affected by any of our services. Such feedback is invaluable in helping us evaluate our services and to continually improve our patient and family's experience.

Our Side by Side strategy details our commitment to ensuring participation in monitoring and developing our services. There are times when people may feel dissatisfied or concerned about aspects of the services we provide. The Hospice is committed to an open learning culture and maintaining a high standard of safe and effective care. All complaints or concerns received will be examined to determine any action needing to be taken to avoid a recurrence and where appropriate, learning will be shared across the organisation.

There are clearly defined occasions involving staff where either the Disciplinary or Capability policy will be involved. Examples may include a criminal act, malicious acts, professional misconduct or an act of deliberate harm. These incidences are managed out with this complaints policy.

The aims of this policy are to:

- Ensure everyone knows how a compliment, concern or complaint can be shared and how they will be managed.
- Ensure that compliments, concerns or complaints are managed consistently, fairly and sensitively within clear time frames.
- Ensure that compliments, concerns or complaints are monitored and used to continually improve our services.

The Hospice will ensure that we:

- Listen carefully to all feedback and treat concerns and complaints as confidential, where possible.
- Investigate a complaint fully, objectively and within the stated time frame.
- Notify the individual of the results of any investigation and any right of appeal.
- Inform the individual of any action that will be implemented as a result of the investigation.
- All compliments and comments will be shared with staff, volunteers and public via 'You Said, We Did' reports.
- All concerns raised will be recorded on the 'Register of Concerns' and monitored for any emerging themes and learning.
- The Director of Clinical Services will report to the management committee on a monthly basis the number of complaints received, the outcomes of any investigations and any actions taken.

This policy takes into account the different requirements to meet the standards set by regulators including the Fundraising Standards Board (FSB) and Healthcare Improvement Scotland (HIS) and takes into account our statutory duty of candour.

The focus is on local resolution in the first instance focussing on corrective action and improving systems.

At St Columba's Hospice we are constantly developing our approach to communicating and engaging with people who use our services, in an open honest way. This open culture is guided by the [Being Open in NHS Scotland: Guidance on implementing the Being Open principles January 2015](#).

Purpose

The Policy reflects the needs of those who access or use our services, with regard to person centredness, accessibility, timeliness, empathy, clear communication, simplicity, confidentiality, transparency and quality of service delivered. The policy also clearly defines a process that allows everyone involved – patients, family members, staff, volunteers, public and others – to be confident they know what to expect, what is expected of them and the correct actions to take.

Scope

This policy applies to all Hospice staff and volunteers.

Compliments

A compliment is generally an expression of praise or commendation. They are received verbally or in writing and are shared with relevant others in the organisation who may be specifically named and with all staff via 'You Said, We Did' report.

Comments

A comment is a personal opinion or belief, feedback or remark expressed by an individual.

Comments help us to recognise any particular areas for development or equally to celebrate areas in which are performing well. Comments cards are available in both ward areas and in the Hospice reception. They are reviewed weekly and personal responses are sent if names and addresses are provided. All actions taken are shared in 'You Said, We Did' reports.

Concerns

A concern is something that causes worry or anxiety to an individual. Concerns are recorded on a Concerns / Complaints form and passed to Director of Clinical services

who will support staff to ensure that appropriate actions are taken to enable resolution. **(Appendix 1).**

Complaints

A complaint occurs when someone expresses concern or dissatisfaction in relation to the services provided or activities undertaken. A complaint might relate to something which is against a person's choice or wishes; perceived discrimination against an individual or dissatisfaction with the way an event was organised or managed.

Complaints may be received by the CEO, directors, managers, staff or volunteers. They can be received in person, by telephone, by letter, by e-mail or through the Hospice website. They may be formal or informal.

This policy relates only to feedback received about the Hospice and its services. Individuals who make complaints about partner organisations will be notified in writing within one working day of receipt of the complaint that they need to complain directly to the organisation they have the complaint with and, where possible they will be provided with contact details.

Where the complaint relates to a member of staff employed by another organisation but providing a Hospice service, the Hospice will liaise with the employing organisation regarding this complaint.

Who can make a complaint?

Complaints can be made by:

- Anyone directly affected by the way a Hospice service is carried out.
- Anyone acting directly on such a person's behalf e.g. parent, family member, carer, advocate.
- Anyone having reasonable concern about a Hospice service.

If someone other than a patient or their representative wishes to make a complaint about an individual's clinical care, we will seek consent from the patient in the first instance before responding. In the event that the patient is since deceased then their nominated next of kin will be contacted. In the event that consent is not received from either the patient or their next of kin we will still investigate the complaint and identify any learning or actions required but we will not share the full report.

When a complaint can be made

Complaints should normally be made at the time an issue or a concern becomes apparent. Wherever possible they should be dealt with immediately, as the passage of time could hamper resolution.

The normal timescale for accepting a complaint is:

- Up to 6 months after the event which is the cause for the complaint, or
- Up to 6 months from an individual becoming aware of a cause for complaint, but normally no longer than 12 months from the event.
- If it is possible to carry out a fair and robust investigation complaints may be investigated out with this timescale. The decision to do this will be made by the Chief Executive in consultation with a member of the senior management team and shared with the complainant.

Related Legislation and Guidance

- The Healthcare Improvement Scotland (requirements as to independent healthcare services) regulations 2011.
- Healthcare Improvement Scotland – Guidance on records to be kept by registered independent healthcare services – 22/03/12.
- Healthcare Improvement Scotland – Notifications guidance for providers – April 2013.
- National care standards – Hospice Care.

Responsibility/Accountability

Chief Executive Officer

- Overall accountability for hospice governance, leadership and fostering a culture of openness.
- To oversee the overall handling of feedback including overseeing any investigations, their responses and ensuring a resolution.
- Confirm that the Investigating Officer (IO) has the appropriate knowledge, skills and expertise to carry out a timely high quality investigation.
- Ensure staff and volunteers receive appropriate training and support during induction period to enable their understanding of this policy.

Senior management team

- Ensure all staff and volunteers are aware of the contents of this policy and their responsibilities.
- Investigate any complaint received in their departments to identify lessons to be learnt, changes required and to recognise and promote the importance of feedback.
- Ensure any agreed actions and resolution are recorded accurately.
- Where other departments or agencies are involved, agree who will take responsibility for coordination of the investigation.

- Monitor staff performance and support and manage performance following a staff complaint.
- Keep CEO informed of progress in resolving complaints and capture and share learning and improvement across the organisation.
- Provide support for the complainant and for any staff members involved.

Investigating Officer

- To carry out a thorough investigation of the complaint, document full details of the investigation in a formal report and make recommendations and identify learning as necessary.
- To report to CEO on outcome and recommendations.
- To oversee timely delivery of recommendations.
- To ensure final report and signed off action plan returned to Director Clinical Services for storage and reporting.

Staff and Volunteers

- Ensure they are fully aware of the contents of this policy and their responsibilities.
- Take all complaints seriously and take appropriate action in response.
- Where possible, local 'on the spot' resolution of complaints is advisable.
- Verbally acknowledge all face to face comments, suggestions and concerns received about the service or organisation however trivial and to let the person making them know that their feedback will be treated constructively.
- Inform their line manager about all complaints or concerns received, detailing any immediate action taken.
- Complete a Concerns / Complaint form before completing their shift and pass to their line manager.
- Where a complaint is from a member of staff/volunteer about the actions of another staff member or volunteer, the complainant should be reminded of the protection offered to them by the hospice Whistleblowing policy if appropriate.

Related Hospice Policies (numbers required)

[Data protection HR23](#)

[Whistleblowing HR06](#)

[Access to Health Records](#)

Person Centred

We will:

- Put people at the heart of the complaints process ensuring where possible, that outcomes are linked to what the complainant would like to see as a result of making their complaint.

- Listen to, aim to understand and act upon the views and experiences of the people who use our services.
- Have arrangements in place to encourage feedback.
- Deal with all complaints received on a fair and equitable basis.
- Treat and respond politely to anyone wishing to complain, and with respect, patience and empathy.
- Aim to deal with complaints quickly and fully at the level at which they are raised.
- Handle complaints in a way which is open and fair to patients and our staff and volunteers.
- Support the person making the complaint and any individual named in the complaint.
- Use complaints and other feedback, as a means of identifying where service improvements can be made.

Communication and Support

We will:

- Publicise our complaints policy in the hospice and on our website so that patients and visitors are aware of the right to complain and the support available to them if they choose to do so.
- Provide information and advice to people wishing to complain on how the Hospice complaints procedure works and the options open to them.
- Share learning from complaints across the organisation ensuring transparency and a culture of learning.

Equality and Diversity

We will:

- Recognise equality and diversity and promote a complaints system that responds sensitively to individual needs, background and circumstances of people's lives.
- Understand how factors such as age, disability, gender, race, religion, sexual orientation or socio-economic status may impact on an individual's ability to access the complaints process and that they may need to be supported effectively.
- Ensure that complainants have ready access to communication and language support, including translation and interpretation services.

Consistency of Approach

We aspire to deliver a complaints procedure which is always:

- Credible
- Easily accessible

- Easy to use
- Demonstrably fair
- Effective and sensitively applied
- Open and honest
- Not defensive
- Apologetic for any failings
- Willing to provide effective feedback
- Able to demonstrate that we have learned from issues raised and taken action to secure improvement.

Disclosure of Information and Confidentiality

- If a complainant requests information, staff or volunteers should always consider their duties in relation to the Data Protection Act (1998) and Access to Healthcare Records Act (1990) which define statutory regulations.
- Information should not be disclosed unless the person, who has provided the information, has expressly consented to disclosure of that information e.g. If a complainant requests access to all or part of his/her medical records, the Hospice Caldicott Guardian must give consent before those records are released.

Supporting Complainants

- St Columba's Hospice is committed to ensuring that the service provided to people who make complaints about our services is not adversely affected because they have complained.
- Raising concerns when a person is receiving healthcare can be daunting and should be received by Hospice staff /volunteers as a positive opportunity to improve services.
- It is essential that the complainants are not treated any differently as a result of the concerns being raised and they should be reassured that raising a concern will not impact the quality of service they will receive.
- If a mistake has been made, we will acknowledge this and offer an apology.
- All communication will be open and honest and the investigation must ascertain what actually happened.
- An investigating officer will offer to meet with the complainant and make every effort to reach a resolution within agreed timeframes.
- Any extensions to these timescales should be mutually agreed with the complainant.
- It is not acceptable to request extensions due to error, or delays caused by St Columba's Hospice.
- The investigating officer must be in regular contact with complainant to provide progress updates. In the case of a serious complaint this should be at least weekly.

Supporting Staff and Volunteers

Complaints are everyone's business. All staff and volunteers should respond positively to any complaints and should feel confident to do so. Defensive or negative responses should be avoided.

Complaints may be perceived as a threat by staff because they may be inherently critical by nature. Complaints can challenge decisions and generate uncomfortable discussion.

St Columba's Hospice has systems in place to ensure staff are supported and can feel confident in responding to a complaint. These systems include risk and incident management (which looks to the root cause of a problem rather than seeking to blame individuals); sound management practices; a clear Human Resource structure and various functional governance Boards (e.g. the Fundraising Standards Board).

In addition, the Grievance, Disciplinary and Capability Policies are clearly defined, and operate separately from this complaints policy.

Prolific, Vexatious or Abusive Complainants

Staff and volunteers will respond sympathetically to complaints. There are occasions when there is nothing more that can be reasonably achieved to assist the complainant.

The decision to define a complainant as vexatious rests solely with the CEO who must be satisfied that the Hospice has made every effort to answer the complaint appropriately and the complainant is exhibiting one or more of the following:

- Acting in a personally abusive and irrational manner without a sense of proportion.
- Rejecting accurate documented evidence.
- Unable to define a complaint that can be investigated.
- Continuing to evolve the content of the complaint to prolong the complaint unreasonably.
- Using threats and attention-seeking behaviour such as involving the media to "short-circuit" the agreed complaints procedure.
- Has an unreasonable expectation about what can be achieved through the complaints process.

In these circumstances, the complainant will receive a letter from the CEO stating that no further correspondence will be entered into unless a new issue is raised or new information is provided to enable a proper investigation.

References

This policy is adapted from Marie Curie and Prince & Princess of Wales Hospice complaint policies.