

# OAKHAVEN HOSPICE

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## COMPLAINTS POLICY AND PROCEDURE

Summary:	This document sets out the policy and procedure of Oakhaven Hospice for the management of complaints, together with the mechanisms for the raising of complaints.
Policy Reference Number:	O-2
Circulation list:	<b>IPU – Nurses Office</b> <input checked="" type="checkbox"/> <b>Medical Secretary’s Office</b> <input checked="" type="checkbox"/> <b>Pennington Chase - Day Hospice, Admin</b> <input checked="" type="checkbox"/> <b>Shops</b> <input checked="" type="checkbox"/>
Date of this version:	April 2020
Review Date:	April 2023
Custodian:	Chief Executive
Ratified by:	Risk



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- Is accessible to complainants
- Provides a simple system for making complaints about any aspect of the service provided
- Provides a thorough and effective mechanism for resolving complaints and also investigating matters of concern
- Responds to verbal and written complaints, whether made in a formal or informal manner
- Is a rapid and open process with designated timescales and a commitment to keep the complainant informed on the progress of the investigation
- Is fair to both staff and complainant
- Maintains the confidentiality of everyone concerned.
- Provides the opportunity to learn from the complaint to improve services.

### **Staff Training Requirements**

Training needs to be provided to all staff in the organisation and should include knowledge of this complaints policy and procedure.

### **Audit Plan**

Adherence to the stated policy will be audited through:

- Review after any complaint
- Patient satisfaction surveys
- Staff surveys

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## Complaints Procedure

### Policy Area

Management of Complaints

### Aim and Scope of Procedure

- To provide instructions on how to manage a complaint from receipt through to resolution.
- To provide a range of mechanisms for service users to raise matters of concern;
- To provide the essential information for informing actions that can lead to improvements in client/patient care, treatment and service delivery.
- To provide a detailed complaint procedure flowchart for employee to follow (Appendix A).

Covers:

- Type of complaints
- Receipt of complaints
- Procedure for handling complaints
- Investigation which leads to Disciplinary Action including reporting to professional bodies.
- Recording and monitoring

### Staff Responsibilities

Chief Executive: To oversee the investigation, to respond to the complainant and to ensure the complaint is resolved

Head of Nursing/  
Registered Manager: To use the complaint as a learning process including implementation of any change in practice as a result

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**Staff:** Responsible to respond appropriately to verbal complaints raised by service users and to explain to complainants the process for raising a concern or complaint.

## Method

### Type of Complaints

Complaints may be:

- Informal – a verbal complaint to the staff or an adverse comment made to any member of staff
- Formal – all written letters of complaint or a verbal complaint where a complainant states he or she wishes to make a formal complaint

### Receipt of the Complaint

- Complaints may be initiated with front line staff. Staff need to deal with the complaint sensitively.
  - The following principles should be applied in any communication with the complainant:
    - Be open, fair, flexible and conciliatory
    - Be courteous and sympathetic
    - Explain that we try to learn from times when we might get it wrong.
- Be apologetic where appropriate. An apology is not an admission of liability.
- 1 Section 2 of the *Compensation Act 2006* states: '*An apology, an offer of treatment or other redress, shall not of itself amount to an admission of negligence or breach of statutory duty*'. This section of the Act applies to England and Wales only.
  - Be prompt and follow the established time limits for reply
- If the complaint is received on behalf of the patient, then suitability needs to be clarified. In these cases consent needs to be obtained from the patient for the release of potentially confidential information.
  - Where the patient has died or is unable to give consent, it is necessary to establish in these circumstances that the complainant is suitable to represent the patient.
  - Confidentiality of the patient and any known wishes expressed by the patient that information should not be disclosed to third parties should be respected.

### Procedure for Handling Complaints

The Hospice staff are required to resolve a complaint as soon as possible led by the CEO, Head of Nursing, Head of Fundraising and Communications and other senior managers.

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## Verbal Complaints

- Verbal complaints may be of a minor nature and can best be handled by the senior manager or departmental manager on duty at the time the matter is raised, and a subsequent report should be given to the Head of Nursing/Registered Manager on the nature of the complaint and the action taken. A report will also be made to the Chief Executive who is responsible for the maintenance of the complaints register and for onward transmission to the Trustees and any relevant external body, for example the Clinical Commissioning Group.
- Any complaint involving harm to a patient (whether by accident, neglect) must immediately be brought to the attention of the Chief Executive or designated deputy.

## Written Complaints

- A written complaint received by any Departmental Head should be brought to the immediate attention of the Chief Executive or other appropriate senior manager in his absence. It will then be agreed between the Departmental Head concerned and the Chief Executive how this matter should be handled.
- An acknowledgement of the complaint will be sent within two working days, normally by the Chief Executive (unless a full reply can be sent within five working days).
- The Chief Executive will ensure that a thorough investigation is made of the complaint and a full response will be sent by the Chief Executive to the complainant within 20 working days. If for any reason it is not possible to meet this time period the complainant will be kept informed on the progress together with an indication of the reason for the delay in responding. A full response will be made within 5 days of a conclusion being reached.
- In some complaints it is appropriate to invite the complainant to visit the Hospice to discuss the complaint once the investigation has been carried out. However, a written response should always be sent following this meeting. The meeting will generally include any other appropriate senior members of the Hospice team concerned in a complaint.
- If a complainant is invited to the Hospice to discuss the complaint, he or she will have the opportunity of being accompanied by a third party.
- The Chief Executive will report all resolved written complaints to the Board of Trustees annually. If it appears that a complaint cannot be resolved then this will be reported immediately to the Chair of Trustees by the Chief Executive or his/her deputy.
- Any complaints which may fall within their jurisdiction are referred to the appropriate professional bodies or to the police in the case of criminal offences.
- The Hospice Trust is responsible for monitoring the overall procedures, processes and responses to individual complaints. The Trustees will not normally have a role to play in the local resolution of the complaint.
- In some cases it may be appropriate to raise an incident report as well. For example in a situation where a patient might have fallen and the family make a complaint about this.

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## **Investigation which could lead to Disciplinary Action**

Disciplinary action is not part of the procedure of investigating a complaint. However, staff must be aware that the outcome of an investigation procedure may lead to disciplinary action being initiated. Any statements or reports taken in the course of investigating a complaint may be presented as evidence at a disciplinary hearing.

Any member of staff involved in a complaint must be informed of any allegation at the outset and must be advised of their right to seek the help and advice of a professional association or trade union before commenting on the complaint.

## **Suspension**

The Trust reserves the right to suspend an employee on basic pay for a period whilst the alleged misdemeanour is being investigated.

The Departmental Head has the authority to suspend an employee for 48 hours after which it must be authorised by the Chief Executive or Head of Human Resources. The Hospice may inform the Care Quality Commission of such disciplinary processes through the CQC Notifications scheme.

## **Recording and Monitoring**

- All documentation on complaints will be filed securely and separately from patient notes and/or staff files. Where possible mention of a complaint should not appear in the clinical record. The exception to this is normally where there is a safeguarding issue.
- The Chief Executive will supply an annual statement containing a summary of the complaints made during the preceding twelve months and the action taken in response.

## **Care Quality Commission**

The Hospice is a registered independent healthcare provider under the Health and Social Care Act 20018. The Care Quality Commission is the regulatory body under the Act and its address is CQC National Customer Care Centre, Citygate, Gallowgate, Newcastle-upon-Tyne NE1 4PA. Tel: 03000 616161. Individuals who have complaints about the Hospice may raise the matter with the Commission in the first instance at the above address. The Commission will seek to achieve agreement for the complaint to be handled by the Hospice Trust with subsequent report to them. Individuals dissatisfied with the handling of a complaint by the Hospice Trust may also refer the matter to the Commission.

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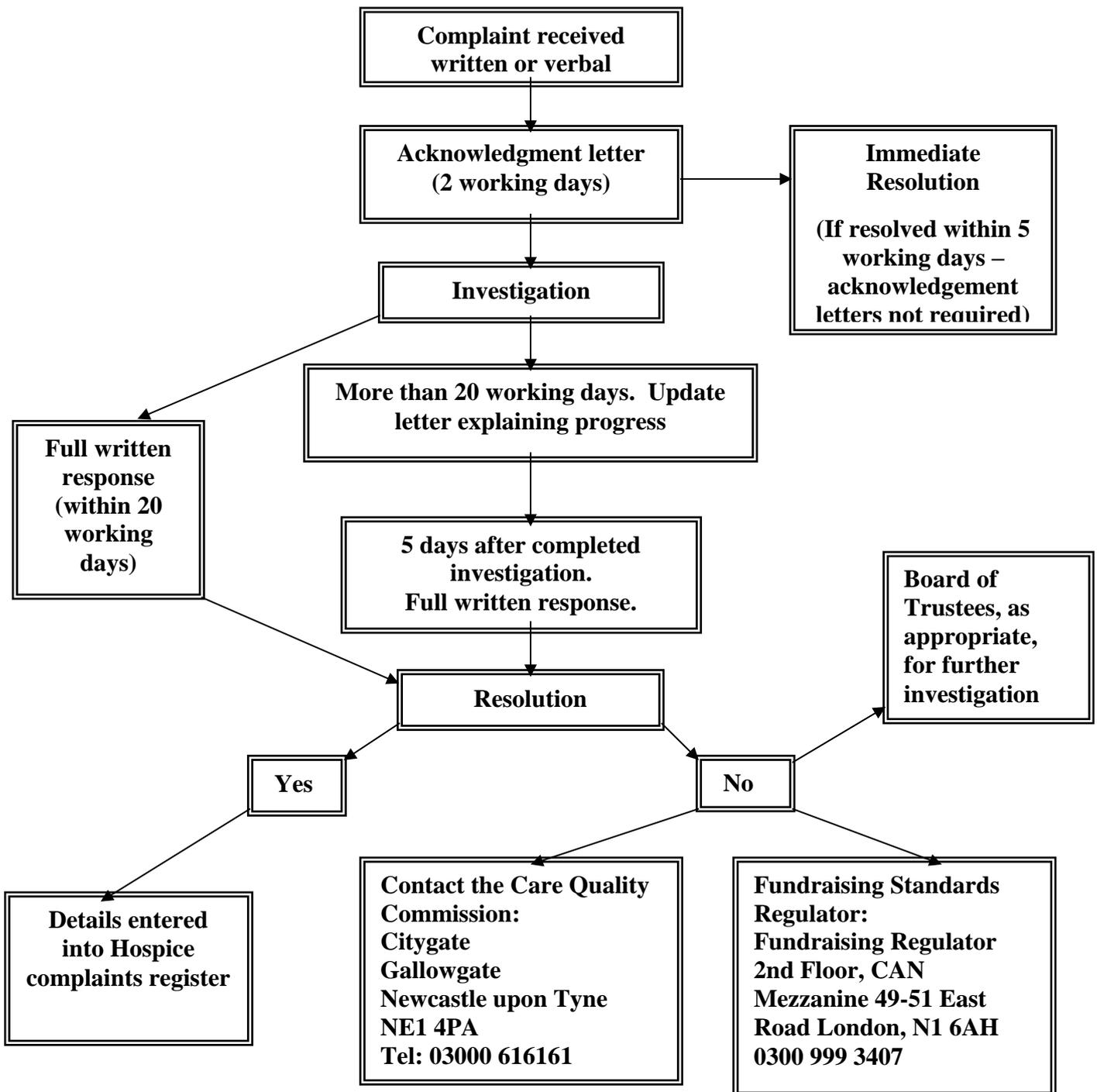
### **Audit Plan**

Adherence to the stated procedure will be audited annually through

- Patient surveys
- Staff surveys
- Complaint register

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## Complaints Procedure Flowchart



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## COMMENTS AND COMPLAINTS

Oakhaven Hospice Trust takes pride in providing a high quality of service. We welcome your comments, compliments – and even your complaints – they give us the opportunity to learn from your experience and to make improvement wherever possible. There is no need to worry that by letting us know of a concern your future treatment will be affected. All complaints are treated in strictest confidence.

### **When to Complain**

A complaint should normally be made within six months of the incident that caused the problem, or within six months of the date of discovering the problem, provided that this is within twelve months of the incident. The Hospice has discretion to extend this time limit where it would be unreasonable in the circumstances of a particular case for the complaint to have been made earlier and where it is still possible to investigate the facts.

### **How to Complain**

Concerns are often best dealt with promptly when they arise, and we would encourage you to speak directly to a member of staff involved with your care. Alternatively, you can ask to speak to a senior member of staff (or the duty manager out of hours) and they will do their best to resolve the problem.

If you are not satisfied with the outcome, or are unable to approach the person involved, please contact Andrew Ryde, Chief Executive or Lucy Smith, Head of Nursing/Registered Manager on 01590 613025 between 9.00 am and 5.00pm Monday to Friday.

Another option would be for you to make a formal complaint by writing to:

Andrew Ryde  
Chief Executive  
Oakhaven Hospice  
Lower Pennington Lane  
Lymington  
Hampshire SO41 8ZZ

Any written complaint will be acknowledged within two working days and a full investigation will begin. The Chief Executive will aim to provide you with a full response to your complaint within 20 working days. If the investigation is taking longer than expected, you will be informed of progress.

If you are not satisfied with the reply you receive, please write to the Chief Executive to see if the outstanding issues can be resolved. The Chief Executive will write to you again to let you know if there is anything further the Hospice can do to address your concerns.

If you are unhappy with the outcome of a complaints investigation, or if you would prefer to have your complaint investigated by an agency that is independent of Oakhaven Hospice, please contact:

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The Care Quality Commission (South East Region)  
Citygate  
Gallowgate  
Newcastle-upon-tyne  
NE1 4PA