



# **Complaints Process**

Author: Roko Skocic, Head of Patient Experience

Executive Director: Nikki Brockie, Acting Chief Nurse





### **Executive Summary and useful information**

The Royal Orthopaedic Hospital (Trust) Complaints Procedure is designed to be responsive to the needs of patients. You should be reassured that any concerns you raise with us will be dealt with sensitively and only staff relevant to the investigation will be made aware of your complaint.

There will be no record made of your complaint within your medical notes.

In exercising your right to make a complaint, you should be aware that the Trust would take the following action: -

- Conduct a full investigation into all of your concerns and provide you with a written response from the relevant Divisional Lead. Your response will have been approved by an Executive Director and will include a letter from The Chief Executive.
- ➤ The Trust will provide you with helpful information and contacts to assist you with your concerns regarding advice and advocacy.
- Discuss with you whether you wish to meet with relevant staff, to further discuss your concerns and actions taken.
- Inform you of the outcome of the investigation and actions taken regarding practice, policy or procedure to ensure that these problems do not recur.
- The Trust will respond to you with this information within a mutually agreed timescale, whenever possible. Occasionally this may take longer but we will keep you fully informed of all progress and the reasons for any delay.
- Learning from complaints will be shared in a range of forums across the Trust. This will be done anonymously, to always ensure patient confidentiality.
- ➤ If you remain dissatisfied with the response to your complaint, you should contact us so that we can discuss options to try and resolve your complaint further. This will be handled in the same manner as your original complaint but will be reviewed by different Senior Managers.
- Additionally, you have the right to ask the Healthcare Ombudsman to review your case.
  - The Healthcare Ombudsman is an independent body established to promote improvements in healthcare through the assessment of the performance of those who provide services.

I hope this information is helpful, however if you need further advice, please contact the Patient Services Department via the contact numbers or addresses listed at the end of this document.





### **Formal Complaints Process**

Complaints are a rich source of patient feedback, and this should be regarded as such by all staff members. From time to time, the experience of our service users is not as good as it should be and as a consequence there is an opportunity for us to learn from our mistakes.

The PALS & Complaints process gives the Divisions full ownership and oversight of the formal complaints that are connected to their Division. The Triumvirate has full oversight of all complaints that are received by the Trust; identify the lead and providing divisionally sign off complaints before they go for Executive Director and Chief Executive Officer approval.



Figure 1. Formal complaints process hierarchy

Roles and Responsibilities within Formal Complaints Process

#### Patient Experience Facilitator

- Will receive complaint and act as a first point of contact to the complainant.
- Is responsible for reading and extracting the questions from the complaint, to allow timely investigation, responding and reading of the complainant
- Facilitates all processes for the formal complaint and makes sure that the complaint response is sent within the agreed timescale with the complainant

# Triumvirate - Deputy Medical Director, Deputy Chief Operating Officer and Head of Nursing

- Are responsible for identifying a named individual to lead the complaint investigation.
- Are responsible for identifying a lead and completion of an immediate action plan.
- Are responsible for approving the draft response for a formal complaint before it goes to a Director.
- Quality assures all complaint responses and ensures all aspects of the complaint have been addressed and the response has been written in line with the guidance on writing response letters.
- Review and approve any changes within PALS and Complaints processes or system.





# Investigation Lead - Matrons, Clinical Service Managers, Ward Managers, Deputy Directors and Managers

- Is responsible for ensuring that all staff within their team have read and understood the Trust Policy.
- That all identified staff have received relevant training and understand their responsibilities when responding to the specific needs/requests of patients and service users. Staff should aim to resolve issues locally wherever possible.
- Undertake local investigation into complaints as requested.
- Meet with complainants as required to enable local resolution of concerns/complaints.

#### **Executive Director**

- Is responsible for approval of the final complaint response before CEO approval.
- Executive Director will sign off all complaints within their portfolio.

#### Chief Executive Officer

- Is the named officer with responsibility for ensuring that the Trust complies
  with statutory obligations made under The Local Authority Social Services
  and National Health Services Complaints (England) Regulations 2009,
  and in particular ensuring that action is taken, if necessary, in the light of
  the outcome of a complaint.
- The CEO or nominated deputy in his/her absence will read, review and approve all complaint responses and provide a signed cover letter.

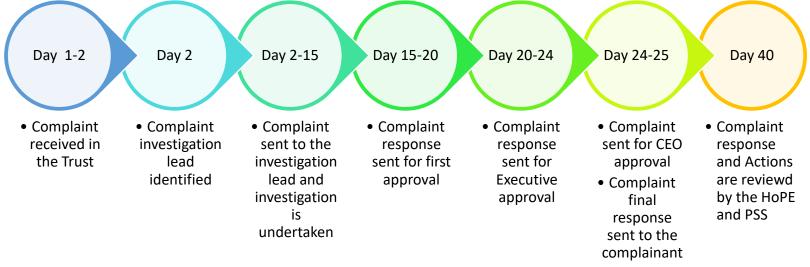
### Head of Patient Experience (HoPE) and Patient Safety Specialist (PSS)

- Are responsible to review final complaint response and decide if complaint is well founded, partially founded, or not founded at all
- Are responsible to review Complaints actions are acted and closed appropriately
- Roles and responsibilities within the complaints process for the Head of Patient Experience are stated in more detail within the section 6.0. of the PALS and Complaints Policy (please click <u>HERE</u> to access policy)





#### **Governance Structure for Approval of the Formal Complaints**



**Figure 2. Formal Complaint Governance Process** 

#### Days 1 and 2 - Complaint Received in the Trust

- Complaints team will read the complaint letter and extract key elements.
- Complaints team phone the complainant to discuss key elements of the complaint and discuss complaint letter and extracted questions with complainant.
- Complaints team offer the complainant a telephone call and meeting with an investigation lead.
- Complaints team will email the Triumvirate requesting that they identify a lead for the complaint, provide the questions that the complainant would like to answer and advise the method of response requested.

#### Day 2 - Complaint Lead Identified

- Triumvirate to complete an immediate action plan, initial risk rating and identifies lead for the complaint.
- Complaints department will forward the complaint to the investigation lead (the
  following will also be copied into the correspondence: the patient's Consultant, Clinical
  Service Manager and Clinical Service Lead who will contribute to the response if
  applicable) asking them to respond as per instructions.

#### Days 2 to 15 – Complaint Sent for Investigation

- Complaints lead to phone the complainant if instructed to do so, within 5 working days and notify Complaints team of the outcome of that conversation. Telephone response must be followed up with a written response, outlining the discussion with complainant.
- Complaint's lead has 15 working days to respond in the format of a letter.





#### Days 15 to 20 - Complaint Response Sent for First Approval

- Complaint version 1 draft response created and sent to Complaints team, together with final risk rating and final Action plan.
- Complaints team will proofread complaint version 1 response letter.
- Complaints team will notify Triumvirate that version 1 draft response has been created and it is ready for them to review, make comments/amendments or approve.
- Once a complaint draft response is approved by Triumvirate it will be sent for Director approval.

#### Days 20 to 24 Complaint Response Sent for Executive Directors Approval

- Complaints team will send a draft version of the response and final action plan to the Executive Director to review, make comments or approve.
- Executive Director approves draft response, and it is then sent for CEO approval.

#### Days 24 And 25 - Complaint is Sent for CEO Approval and to the Complainant

- CEO reviews draft response for the complaint and once it has been approved it becomes a final response.
- In the cover letter, the CEO will offer the complainant an opportunity to meet with key managers to discuss the outcome of the complaint.
- Final response letter and CEO cover letter is then scanned, and a copy saved on Ulysses.
- Complaint final letter sent to the patient and complaint closed.

#### Day 40- Outcome Decision

- Head of Patient Experience and Patient Safety Specialist will review final response and action plan (if applicable) as independent members of staff.
- Following review of the response they will determined if the complaint was:
  - Upheld: If a complaint is received which relates to one specific issue, and substantive evidence is found to support the complaint, then the complaint should be recorded as upheld.
  - ii. **Partially upheld:** If a complaint is made regarding more than one issue, and one or more of these issues (but not all) are upheld, the complaint should be recorded as partially upheld.
  - iii. **Not upheld**: Where there is no evidence to support any aspects of a complaint made, the complaint should be recorded as not upheld.
- The letter will be sent to the complainant with the outcome of their complaint and outcome of the actions identified by the investigation lead.





NOTES:			



### **Useful Contacts**

### **Patient Advice and Liaison Service:**

For advice about any part of the NHS Complaints Procedure



0121 685 4128



roh-tr.PALS@nhs.net



PALS Department
The Royal Orthopeadic Hospital
Bristol Road South
B31 2AP



PALS (roh.nhs.uk)

# Complaints Department:

For advice about any part of the NHS Complaints Process and to speak to the complaints team



0121 685 4128



roh-

tr.complaints@nhs.net



PALS Department The Royal Orthopeadic Hospital Bristol Road

South B31 2AP



Complaints (roh.nhs.uk)

# POhWER Advocacy Service:

For independent help, support and advice



0300 456 2365



phhwer@poghwer.net



POhWER
P.O. Box 14043
Birmingham
B6 9BL



www.pohwer.net/

#### **The Patient Association:**

This is a healthcare charity which for nearly 50 years has advocated for better access to accurate and independent information for patients and the public; equal access to high quality health care for patients; and the right for patients to be involved in all aspects of decision making regarding their health care



0845 608 4455



helpline@patients-association.com



The Patient Association PO Box 935, Harrow HA1 3YJ



The Patients Association (patients-association.org.uk)

## Parliamentary & Health Service Ombudsman:

if you remain dissatisfied following the result of the final response, you may request an Independent Review



0345 015 4033



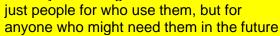
phso.enquiries@ombudsman.org.uk



PHSO
Millbaank Tower
Millbank
London
SW1P 4Q



http://www.ombudsman.org.uk/



0800 652 5278

**Healthwatch Birmingham:** 

Healthwatch is the independent consumer

play a role at both national and local level

considered. Local Healthwatch is all about local voices being able to influence the

delivery and design of their services – not

interests of the public. Healthwatch will

and will make sure that your views on

health and social care services are

champion created to represent the



info@healthwatchbirmingham.co.uk



Healthwatch Birmingham 138 Digbhet Birmingham B5 6DR



Healthwatch Birmingham - champion for health and social care