

SWBCCG Policy

Complaints Policy and Procedure

DOCUMENT CONTROL

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Amendments			Date	By whom
Update to reflect new structure of CCG and National reports Francis and Berwick			Jan 2017	Customer Care Team
References to Data Protection Act 1998 replaced with Data Protection Act 2018			May 2018	Quality Improvement Team Manager
Intended Recipients: Any individuals either represented or affected by the policy			Group/Persons Consulted: Policy Group Quality & Safety Committee Healthwatch	
Monitoring Arrangements and Indicators: Quality & Safety Committee will receive Monthly Complaints reports and trend information Annual audit of local KPI's will monitor the effectiveness and implementation of the policy				
Training/Resource Implications: 'Complaints made Easy' Training Game for all of the Customer Care Team Training may be utilised and accessed by all CCG staff				
Values: As stated within the CCG constitution (available upon request)				
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Summary

This policy and procedure has been produced in line with the Department of Health Complaints Regulations 2004 and subsequent amendments including The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

Supporting Policies and Documents

This policy and procedure should be read in conjunction with the following organisational policies:

- Being Open Policy

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1. Introduction

Sandwell and West Birmingham CCG is responsible for commissioning healthcare for the residents within its remit, and aims to provide the best possible service for patients and service users. However, it is understood by the organisation that instances may arise where the quality of care or service provision does not meet the standards expected.

This policy details the procedure for managing complaints received by Sandwell & West Birmingham CCG, hereafter known as SWB CCG.

SWB CCG is committed to listening to patients, service users, relatives and carers and acting on their views and experiences. This policy has been formulated in the light of our ongoing commitment, and to ensure that staff (both SWB CCG and Provider) handle complaints to a satisfactory standard; but also that the organisation as a whole learns effectively from the lessons highlighted through the complaints process and is devoted to improvement of patient care as a result.

Implementation of the NHS Complaints Procedure; reference Statutory Instruments 2009 (309) issued by the Department of Health in February 2009 details the process to be followed at each stage of the NHS Complaints Procedure: -

- Local Resolution
- Investigation by Parliamentary and Health Service Ombudsman

Each NHS provider will have their own policy for handling complaints that reflects the NHS Complaints Regulations.

The regulations emphasise the requirement for establishing a joint protocol for handling complaints which relate to more than one health and social care organisation.

2. Statement of Intent /Purpose

This Policy and Procedure is compliant with current legislation and guidance and reflects the vision of the NHS Complaints Procedure.

It ensures that no barriers are in the way of patients, carers or relatives wishing to complain about the provision of health services within the population of SWB CCG. It will listen to the patient voice and opinion throughout the process.

SWB CCG aims to investigate complaints openly, transparently, honestly, flexibly, conciliatory and fairly; to staff and patients. As advised by the Duty of Candour and Berwick Report. To achieve this; SWB CCG will encourage and empower communication from a service

user level and actively learn lessons for improvement in service delivery. These lessons will be published on the organisations webpage.

SWB CCG's complaints service/ Customer Care Team will:

- Provide an identifiable team that any member of the public can turn to if they wish to make a complaint or raise concerns regarding it's providers or the services it provides
- Involve the public and patients in Healthcare through its direct role in dealing with complaints
- Be open, responsive and easy to access by being flexible about the ways people can complain
- Be fair and impartial, providing appropriate and proportionate response with an honest, open and fair investigation without fear of discrimination
- Respect the wishes of individuals and their desire for confidentiality
- Learn and develop. Ensuring complaints are viewed as a positive opportunity to learn from patients experience and drive contractual improvements in service delivery in future
- Ensure that complaints are dealt with efficiently, fairly and in a timely manner
- Inform the complainant of all possible options for pursuing the complaint and the help available to them, including but not restricted to, Independent Complaints Advocacy Service (ICAS)
- Train and encourage staff to adopt a culture of openness and transparency with users as identified in the Duty of Candour
http://webarchive.nationalarchives.gov.uk/20130123195221/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131421.pdf

3. Scope

This Policy should be adhered to by all staff involved in the complaints process and also known to, and accessible by all staff at SWB CCG. The policy will also be shared to the wider community and available via the website or upon request.

4. Definitions & Acronyms

	Definition
SWB CCG	Sandwell and West Birmingham Clinical Commissioning Group
NHS	National Health Service

Complaint	An expression of dissatisfaction that requires a response
Concern	Worry, fear, anxiety that requires reassurance
Compliment	Includes praise, a favourable remark, an expression of approval, acknowledge of a person or teams actions.
Local Resolution	First stage of the Complaints process, with Customer Care and provider service resolving the issue
Investigation by Ombudsman	Second stage of the Complaints process, if a complainant remains dissatisfied following Local Resolution
Provider	NHS Body, independent body or primary care service commissioned to provide care and/or services to the public under contractual arrangements agreed by the CCG
ICAS	Independent Complaints Advocacy Service
Continual/Vexatious Complaints	Please refer to Appendix 8

5. Roles and Responsibilities

The Accountable Officer (the responsible person) is ultimately accountable for the quality of care within NHS Sandwell & West Birmingham CCG (the responsible body).

The Accountable Officer of SWB CCG or any person authorized by SWB CCG to act on behalf of the responsible person is accountable for responding in writing to complaints received in any form. The Chief Officer (Quality) has delegated responsibility for complaints within SWB CCG.

5.1 The Complaints Lead will:

- Be responsible for ensuring that all staff are aware of and understand the Complaints Policy and Procedure
- Provided adequate training and advice to staff regarding complaints handling
- Ensure all complaints are recorded on the Datix database and that each complaint has a 'hard copy' established

- Ensure that a risk assessment is completed and plan drawn up
- Ensure that the complaint file is available to the complainant under the Access to Health Record Policy
http://www.legislation.gov.uk/ukpga/1990/23/pdfs/ukpga_19900023_en.pdf
- Ensure record management is in line with the Data Protection Act 2018
<http://www.legislation.gov.uk/ukdsi/2018/9780111165782/contents>
- Ensure that appropriate operating procedures are in place to deliver the Complaints policy
- Ensure that any results and/or feedback acquired from the complaints process is feedback into the Commissioning decisions process
- Ensure recommendations made by the Parliamentary and Health Service Ombudsman are carried out and completed

5.2 SWB CCG Customer Care Team will:

- Be readily accessible to the public and provider complaints teams
- Provide advice on any aspect of the complaints procedure and resolution
- Act as a 'liaison' between complainant and service provider
- Provide access to the service for the resolution of complaints where appropriate, this may include arranging and facilitating meetings between the parties involved
- Ensure that all complaints are recorded on a database (Datix) and that a complaints file is established and held securely. They will also ensure that this file is accessible to the complainant under the Access to Health Records Policy
- Manage and administer the complaints file, signpost the complainant to the Parliamentary and Health Service Ombudsman when local resolution has failed

5.3 All Directors, Managers and Leads are responsible for the distribution and awareness of the Complaints Policy and Procedure within their Teams.

They should:

- Ensure staff are aware of and have access to the policy
- Ensure their staff understand and comply with the policy

- Assist the Customer Care Team in the implementation of the policy
- Assist the Customer Care Team in gathering written statements from staff and preparing a written response report addressing all questions raised
- Ensure that staff(s) that who has a complaint made against them are fully supported throughout the process
- Share monitoring information with staff teams and report actions taken and lessons learnt

5.4 Quality & Safety Committee will receive monthly reports regarding complaints and ensure compliance with the Complaints Policy and Procedure.

5.6 The CCG Governing Body will receive the Annual Complaints Report, highlighting patterns, trends, number of complaints, category of complaints, service and learning outcomes from the Complaints Lead. The CCG Governing Body may ask for action plans to be developed and completed as a result of the Complaints Report.

They will also ensure that learning outcomes are published on the website as advised by the Francis Report 2013.

6. Process

6.1 Who Can Make a Complaint?

Complaint can be made by:

- a. a patient (former or existing); or
- b. any person who is affected by, or likely to be affected by, the action, omission or decision of the NHS body which is the subject of the complaint.

A complaint may be made by another individual acting on behalf of a person detailed above, in any case(s) where that person:

- has died
- has parental/shared responsibility for a child
- is unable, by reason of physical or mental incapacity, to make the complaint themselves; or
- has requested a representative to act on their behalf (patients written consent will usually be required for the person to pursue the complaint on the patients behalf)

In the case of patient or person affected who has died or who is incapable, the representative must be a relative or other person who, in the opinion of the Customer Care Team, has or had a sufficient interest in his/her welfare and is a suitable person to act as a representative.

If, in any case the Complaints Lead (in capacity of complaints manager) is of an opinion that a representative does, or did not, have sufficient interest in the persons welfare, or is unsuitable to act as a representative they must notify that person in writing, stating the reasons for their decision.

In the case of a child, the representative must be parent, guardian or other adult person who has care of the child and where the child is in the care of the Local Authority Organisation, the representative must be a person authorised by the Local Authority or Voluntary Organisation.

If the patient is unable to give consent then it is advisable to seek expert advice as each case will be judged on its own merit.

Anonymous complaints will be accepted, (e.g. letter, telephone call) however, where possible the person will be encouraged to provide a name or other relevant details. Should a complaint be made anonymously the Complaint Lead will record it and investigate if appropriate and possible. The outcome(s) will be reported to the Quality Manager.

6.2 What is a complaint and what can be complained about?

A complaint is an expression of dissatisfaction regarding any aspect of service relating to patient care, clinical or non-clinical; relating to attitudes or behaviour, the environment, facilities or systems; that requires an organisational response.

Complaints can be made verbally, in writing and electronically and are included under this term along with formal complaints raised by Members of Parliament on behalf of their constituents.

Complaints are handled to enable patients, service users or their representatives to feedback on the services they receive as easily as possible.

The Complaints Service /Customer Care Service can also feedback learning to the Commissioning decisions process.

A complaint to an NHS Body may be about any matter reasonably connected with the exercise of its functions including, in particular:

- Its provision of healthcare or any other services, including in the case of CCG's
- Services provided by a provider under contractual arrangements with the CCG.

- Matters where patients are involved in research projects being undertaken by the CCG.

Matters **excluded** from consideration include:

- A complaint made by an NHS body which relates to the exercise of its functions by another NHS body
- A complaint made by Primary Care Practitioner / Provider which relates either to the exercise of its functions by an NHS body or to the contract or arrangements under which it provides primary care services
- A complaint made by an employee of an NHS body about any matter relating to his/her contract of employment
- A complaint which is being or has been investigated by the Parliamentary & Health Service Ombudsman
- A complaint made to local services providers which has been responded to cannot be investigated by the CCG
- A complaint about which the complainant has stated in writing that he intends to take legal proceedings
- A complaint which is made verbally and is resolved to the complainant's satisfaction not later than 24 hours from the point of raising it.
- A complaint subject matter of which is the same as that of a complaint that has previously investigated and resolved for that individual
- A complaint alleging failure by CCG not complying with the request for information under the Freedom of Information Act 2000. Refer to Freedom of Information Policy.

6.3 Making a complaint

6.3.1 Time limits on Initiating Complaints

The complaint should be registered with SWB CCG within 12 months of the date of the incident that caused the problem or within 12 months of the date of discovering the problem. Discretion to extend the timescales can be used, i.e., if a complaint is received outside of the above timescales it is for the complaints lead to decide whether the complaint can be investigated.

The criteria used to make this decision is that it would have been unreasonable for the complainant to make the complaint any earlier (i.e. due to a prolonged illness), and it is still possible to investigate the complaint properly.

6.4 Joint Working on Complaints

If a complaint is about care delivered by more than one organisation the complainant will be provided with a single point of contact; and may receive a single response to their complaint. However, the complainant also request individual responses to be forwarded upon receipt.

The Complaints Team will liaise with all parties involved with the complaint in effort to resolve issues as timely as possible.

The Customer Care Team will work alongside any ICAS representative supporting the complainant. All correspondence will be copied to the Advocate.

Independent Complaint Advocacy Service (ICAS) can be contacted at any point before or during the complaints process.

Contact details for ICAS are available within Section 7.5 of Appendix 1.

6.5 Complaint / Disciplinary Procedure

A complaint will continue to be investigated even if disciplinary action is being considered or taken against a member of staff, provided SWB CCG has regard to good practice around restrictions in providing confidential/personal information to the complainant.

The position in cases where legal action is being taken or the police are involved maybe different. On receipt of a complaint in these circumstances, SWB CCG will hold discussions with relevant authority (for example, legal advisors, the police, other crown prosecution services) to determine whether progressing the complaint may prejudice subsequent legal or judicial action.

6.6 Complaints against Employees

Employees should be fully informed at the outset of any complaints made against them personally. They should be advised of their right to seek advice and assistance from their Trade Union or Professional Regulatory Bodies making their formal response, although the response should be made in compliance with complaints handling timescales.

6.7 Confidentiality

It is not necessary to obtain the patient's expressed consent for the use of their personal information to investigate a complaint. However, care must be taken at all times throughout the Complaints Procedure to ensure that any information disclosed about the patient is confined to that which is relevant to the investigation of the complaint, and should only be disclosed to those people who have a demonstrable need to know. It is good practice to explain to the patient that information from

his/her health records may need to be disclosed to the Complaints Manager and Investigating Officer.

6.8 Special Circumstances

Any complaint received by an employee of CCG that indicates at any time during the investigation, that the matter may need referral to any of the following, or relate to the categories set out below, should be passed immediately to the Complaints Lead or authorised representative:

- Investigation under disciplinary procedure.
- Referral to one of the professional regulatory bodies.
- An independent enquiry called by the Secretary of State into a serious incident under Section 84 of the NHS Act (1977).
- An investigation of a criminal offence.
- If a complaint indicates a possible case of negligence or there is any indication that the complainant intends to, or has instigated legal action.

6.9 Advice and Assistance

The Customer Care Team will offer advice and support to any persons wishing to make a complaint, share a concern or impart a compliment. However, independent advice, support and assistance is also available from ICAS.

6.9.1 Independent Complaints Advocacy Service (ICAS)

ICAS can help individuals make a complaint or express a concern about Health and Social Care services. Staff at ICAS can support individuals if they wish to make a complaint, and give advice about the complaints process. They can also write letters on an individual's behalf and attend complaints meetings.

Details of how to contact ICAS are available at Section 7.5 of Appendix 1.

6.9.2 The Parliamentary & Health Service Ombudsman for England

Should the complainant remain dissatisfied with the local resolution process and response a request to the Parliamentary and Health Service Ombudsman can be made.

Details of how to contact the Ombudsman are available within Section 7.4 of Appendix 1.

6.10 Redress (Remedy)

SWBCCG shall endeavour to provide appropriate redress to those who have made a complaint, and to those who may have been affected in the same way, in the form of an apology or other means deemed appropriate by the Managers who were involved in the investigation of the complaint.

7. Procedure

The local complaints procedure is attached as Appendix 1.

8. Training

Training will take place as identified with SWBCCG training needs analysis and will include the utilisation of an interactive Board Game.

9. Monitoring the Compliance and Effectiveness of this Policy

The effectiveness of the policy will be undertaken each year as part of the Development of Corporate Governance and the Complaints Lead who will undertake an audit. This process will partly be informed by the collection and sharing of the Monitoring Form (appendix 8). This form will collect data relating to the individuals accessing the service and will identify where works to reach protected groups may be required.

10. Reference(s)

Department of Health

<https://www.gov.uk/government/organisations/department-of-health>

National Health Service, England, Social Care, England The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009

http://www.opsi.gov.uk/si/si2009/uksi_20090309_en_1

Consultation on Strengthening the NHS Constitution, Government Paper

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/170642/Consultation_on_strengthening_the_NHS_Constitution_Government_response.PDF

Access to Health Records

http://www.legislation.gov.uk/ukpga/1990/23/pdfs/ukpga_1990023_en.pdf

Data Protection Act 2018

<http://www.legislation.gov.uk/ukdsi/2018/9780111165782/contents>

Berwick Report

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/226703/Berwick_Report.pdf

11. Other Organisations' relevant to this Policy

NHS Choices –Advice and Contacts for NHS Complaints

<http://www.nhs.uk/choiceintheNHS/Rightsandpledges/complaints/Pages/NHScomplaints.aspx>

Independent Complaints Advocacy Service (ICAS)

<http://www.pohwer.net/>

HealthWatch England

<http://www.healthwatch.co.uk/>

Your Rights

<http://www.yourrights.org.uk/yourrights/the-right-to-know/data-protection-act/access-to-health-records.html>

Parliamentary & Health Service Ombudsman

www.ombudsman.org.uk

12. Translation

Should any individual require this information in other format i.e another language, brail, audio, please contact the Customer Care Team on 0121 612 4110.

7. Local Complaints Procedure

Where an individual wishes to make a complaint, he/she may make the complaint to the Customer Care Team, Complaints Lead and any other member of SWBCCG.

Wherever possible, staff within SWBCCG receiving a verbal complaint should, with their manager if necessary, endeavour to resolve that complaint through an immediate informal response. If staff are unable to do this, or the complainant wishes to take the complaint beyond that level, staff should, with the complainant's assistance, detail the cause for the dissatisfaction and send this written information to the Customer Care Team explaining to the complainant that this complaint will be dealt with in accordance with SWBCCG's Complaints Procedure.

Some complainants may prefer to make their initial complaint to someone who has not been involved in their care. In these circumstances, they should be informed how to contact the Customer Care Team.

7.1 Procedure to Follow

A complaint may be made verbally or in writing (including electronically) and:

- Staff receiving a written complaint directly **must** contact the Customer Care Team **immediately**, in order for the Complaints Procedure to be invoked without delay. The Customer Care Team will receive and record all formal complaints and instigate investigation in accordance with the agreed Complaints Procedure.
- The Customer Care Team will arrange for any translation services to be contacted and put into place prior to discussion should any be required.
- Where it is made verbally, the Customer Care Team must make a written record of the complaint which includes the name of the complainant, the subject matter of the complaint and the date on which it was made. This will then be sent with the acknowledgement to the complainant within 3 working days, as part of the complaints plan requesting they confirm the content of the complaint is correct. (see Appendix 2 - Complaints Plan)
- Where it is made in writing, the Customer Care Team must make a written record of the date it was received and written acknowledgement sent within 3 working days of receipt of the initial letter.
- The complainant will be signposted to Powher Advocacy Service for support throughout the complaints procedure should they require or want this service (Please see definitions). Details of how to contact Powher will be provided and can also be found at Section 7.5 of the Procedure.

- Where the complaint is received from another organisation the complaint must be acknowledged within 3 working days after receipt of the forwarding letter.
- If consent is required this will be obtained at the time of acknowledging the complaint (see Appendix 3 – Sample consent forms)
- At time of acknowledging a complaint the Customer Care Team at SWBCCG will offer to discuss with the complainant at a mutually agreed time how their complaint will be investigated and responded to within provider agreed response times. The Customer Care Team will advise the complainant of the appropriate timescales and inform the complainant in writing.
- A complaints plan should be created, which will (see Appendix 2 - Complaints Plan) detail the ways in which the complaint will be handled. This should include.
 - what has been agreed to resolve the issue,
 - timescales, (NB SWBCCG would expect to respond to serious complaints within 25 working days)
 - how and when you will update the complainant on progress,
 - whether they require a meeting to discuss the complaint
 - any support that is required
 - immediate actions to be taken
- The Customer Care Team will request the complaint is investigated and will provide the service provider with a copy of the complaint plan and any other relevant information.
- It is considered good practice initially for the Investigating Officer to contact the complainant to further discuss their complaint and agree the outcomes.
- The investigating officer/provider will be required to provide a written response letter, and a Complaints Outcome Form (see Appendix 5 – Outcomes Form), within the specified timescales
- Where a Local Resolution cannot be achieved within the agreed timescales, the Investigating Officer/provider must contact the Customer Care Team by telephone and explain the reason why the complaint cannot be responded to on time, and obtain an agreement for an extension.
- The Customer Care Team will then contact the complainant to inform them of the extension, explaining the reasons for the request. The Customer Care Team should record the details of any discussions and agreed extensions on the Datix database.

- Where action plans remain outstanding it is the responsibility of the Customer Care Team to ensure these are completed and complainant is kept informed of progress and completion.

7.2 Organisational Learning Outcomes

As a result of complaints received, SWBCCG will:

- Ensure Managers use the issues raised in individual complaints to explore and, where appropriate, initiate service improvements.
- Review and analyse concerns and complaints received
- Take action to improve service delivery as a result of individual complaints
- Take action to improve service delivery using the analysis of trends from complaints data
- Report regularly on the number, type and outcome of complaints received.

Complaints are a rich source of information and SWBCCG should clearly demonstrate that positive action has been taken as a result of complaints, and that learning from complaints is embedded across the organisation. Learning will be shown on the SWBCCG website.

This will be achieved by utilising the “Complaints Outcome Form” at Appendix 4. The Complaints Outcome Form is circulated to Investigating Officers/providers when the complaint is allocated to them for investigation. On conclusion of their enquiries the Investigating Officer/provider is required to complete the Complaints Outcome Form reflecting:

- ◆ Lessons learnt as a result of the complaint
- ◆ Actions taken
- ◆ Person responsible for this action, and
- ◆ Date by which the action(s) are to be completed.

Organisational learning will be led by the Quality and Safety Committee who will identify patterns, trends and areas of concerns which will be addressed by the services concerned and learning across the organisation will be shared.

7.3 Possible Claims for Negligence

If there is a prima facie (clear) case of negligence or the likelihood of legal action, the person dealing with the complaint should inform the Complaints

Lead. Investigation should not cease unless the complainant explicitly indicates an intention to take legal action. If formal legal action is instigated, the complaints process should be brought to an end, and the complainant informed.

7.4 Investigation by the Parliamentary & Health Service Ombudsman

A complainant whom remains dissatisfied may contact the Parliamentary & Health Service Ombudsman either verbally or in writing, after receiving a final formal letter of response from the organisation about whom the complaint was made against.

The Parliamentary and Health Service Ombudsman undertakes independent investigations into complaints including clinical judgement. In deciding whether to investigate a complaint, the Ombudsman will have access to all papers relating to the Local Resolution.

The Parliamentary & Health Service Ombudsman can be contacted using the following details:

Telephone: 0345 015 4033

Address: Parliamentary & Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP

Email: phso.enquiries@ombudsman.org.uk

Web: www.ombudsman.org.uk

7.5 Contact Details of useful organisations

❖ Pohwer Advocacy Agency

Telephone: 0300 456 2370

Email: pohwer@pohwer.net

Web: <http://www.pohwer.net/>

❖ Citizens Advice Bureau

Telephone: 0121 500 2703 – Telephone Advice Line

Address: Various Centres and Public areas have Citizens Advice Bureau Clinics. Please use the web link below to find your nearest Bureau

Web: <http://www.citizensadvice.org.uk/>

❖ Healthwatch Birmingham

Telephone: 0800 652 5278

Web: <http://healthwatchbirmingham.co.uk/>

❖ Healthwatch Sandwell

Telephone: 0121 569 7210

Web: <http://www.healthwatchsandwell.co.uk/>

Appendix 2

COMPLAINT PLAN

Reference number:
Service Concerned:
Date Received:
Complainant's name and address (include title):
Complainant's contact details: Telephone: Mobile: Email: Preferred method and time of contact: Special Requirements i.e. large print, Braille, interpreter:
Patient's name and details if different from above
Relationship to patient:
Name of staff member who contacted the complainant:
Summary of discussion:

It was agreed that the following issues would be investigated:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Outcome the complainant is seeking (i.e. apology, explanation):

Agreed plan for addressing the issues:
i.e. who will investigate the issues, how these will be addressed

Agreed timescale for response:

Agreed feedback following investigation:

(Please tick)

Meeting

Phone call

Letter

Complainant informed about Pohwer?

Pohwer is an independent NHS Complaints advocacy that can provide support and assistance to individuals throughout the Complaints Process. The service can be contacted on: 0300 456 2370

I agree with the issues stated and give permission to SWBCCG to pursue them with **{insert service provider}** and for them to provide SWBCCG with a copy of their findings.

I understand that to investigate this/these issue(s) access to my medical files may be necessary.

Name of Complainant: _____

Signed: _____

Date: _____

Sample Consent Forms

 Sandwell and West Birmingham Clinical Commissioning Group	
CONSENT FORM 1 Consent form where patient has deceased	
Full Name of Complainant:	.....
Address:	..... .....
Relationship to Patient:	.....
Patient's Name:	.....
Patient's Address:	..... .....
Patient's Date of Birth:	.....
Patient's Date of Death:	.....
<p>I confirm that the above information is true and accurate to the best of my knowledge and provide proof to support this. (see attached information)</p> <p>I give my permission for SWBCCG to investigate this complaint, and where necessary, obtain disclosure of relevant personal and confidential information relating to the above named person, including any clinical notes. I understand that SWBCCG will use any information gathered to assist in the investigation of my complaint.</p>	
Signature of Complainant:	.....
Name in Capitals:	.....
Date:	.....

CONSENT FORM 2

Part 1 - Where the patient is a child

Full Name of Patient:

Address:

.....

.....

Date of Birth:

**Name of
Complainant:**

Address:

.....

Relationship to Child:

**Do you have parental
responsibility for the
child:** YES:

NO:

**Is the child in the
care of a local
authority or voluntary
organisation?** YES:

NO:

(If YES, written confirmation is required that you are authorised to pursue this complaint)

I confirm that the information set out above is true and accurate

Signature of Complainant:

Name in Capitals:

Date:



CONSENT FORM 3

Patient authorises a proxy to complain

Full Name of Patient:

Address:
.....
.....

Patient's Date of Birth:

I hereby authorise:

Complainant's Name:

Address:
.....

Relationship to Patient:

To act on my behalf and to receive any and all information, including personal and confidential information that may be relevant to my complaint.

I give my permission for SWBCCG to investigate this complaint and, where necessary, obtain disclosure of relevant personal and confidential information relating to me, including my clinical notes.

I understand that SWBCCG will use any information gathered to assist in the investigation of this complaint.

Signature of Patient/Date:

Name in Capitals:



CONSENT FORM 4

Patient's permission to forward complaint to another organisation for investigation and response

Complainant's Name:

Address:

.....

.....

Relationship to Patient:

I hereby authorise SWBCCG to forward my complaint to

.....

in order for my complaint to be investigated, and responded to.

I authorise

to provide SWBCCG with a copy of the response to my complaint.

Signature of Complainant:

Name (print in capitals):

Date:

COMPLAINT OUTCOMES

Name of Person Completing Form	
Name of Complainant	
Service Concerned	
Complaint Reference Number	{insert reference number}

Lessons Learnt as a result of the complaint	
Actions Taken	
Person responsible for action(s)	
Date by which action(s) are to be completed	
Risk Rating following investigation	

UPON COMPLETION, PLEASE RETURN THIS FORM TO THE COMPLAINTS LEAD

Meeting Proforma

Notes of Complaint Meeting

(Date of meeting & venue)

Present

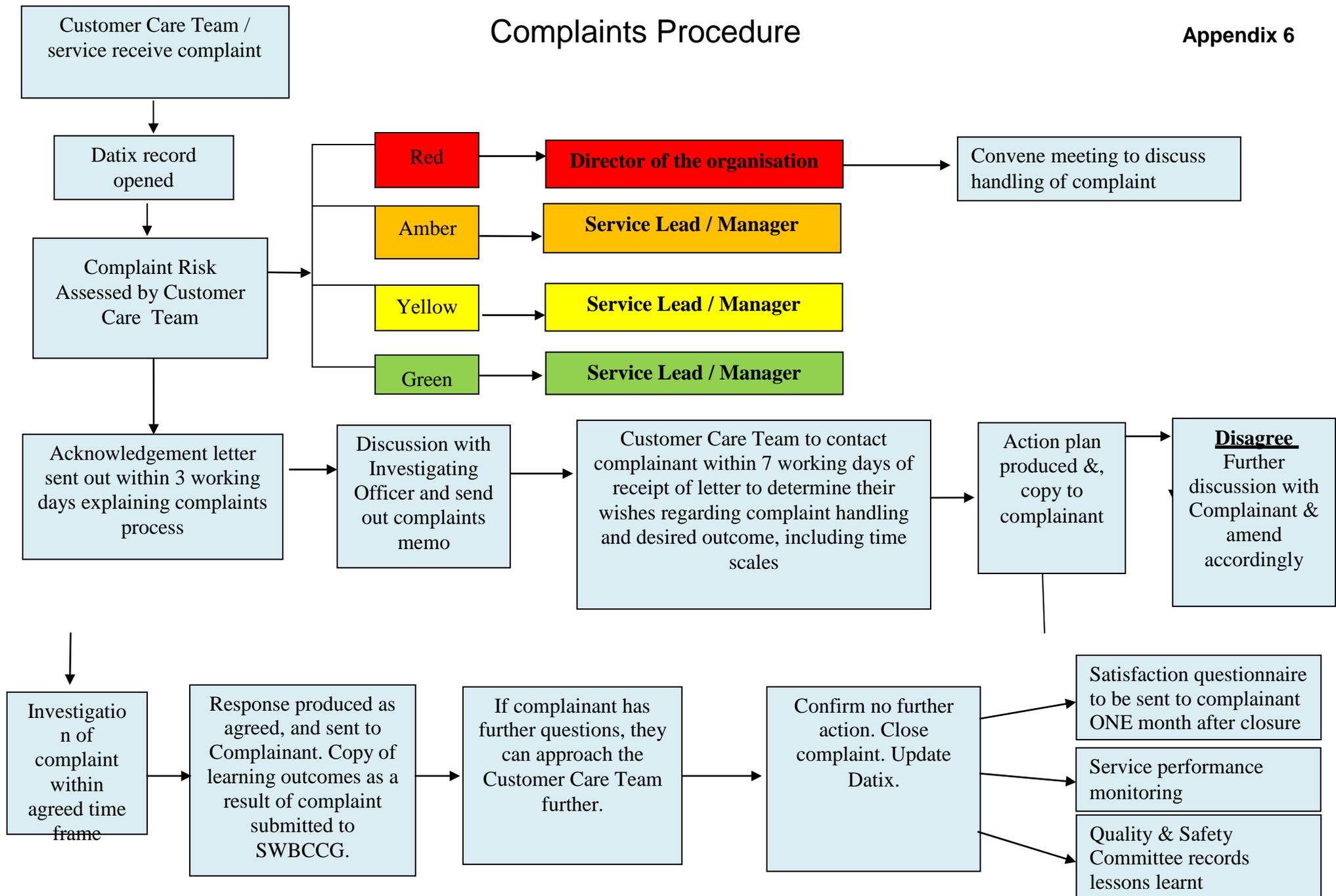
Name	Title

Content of conversation

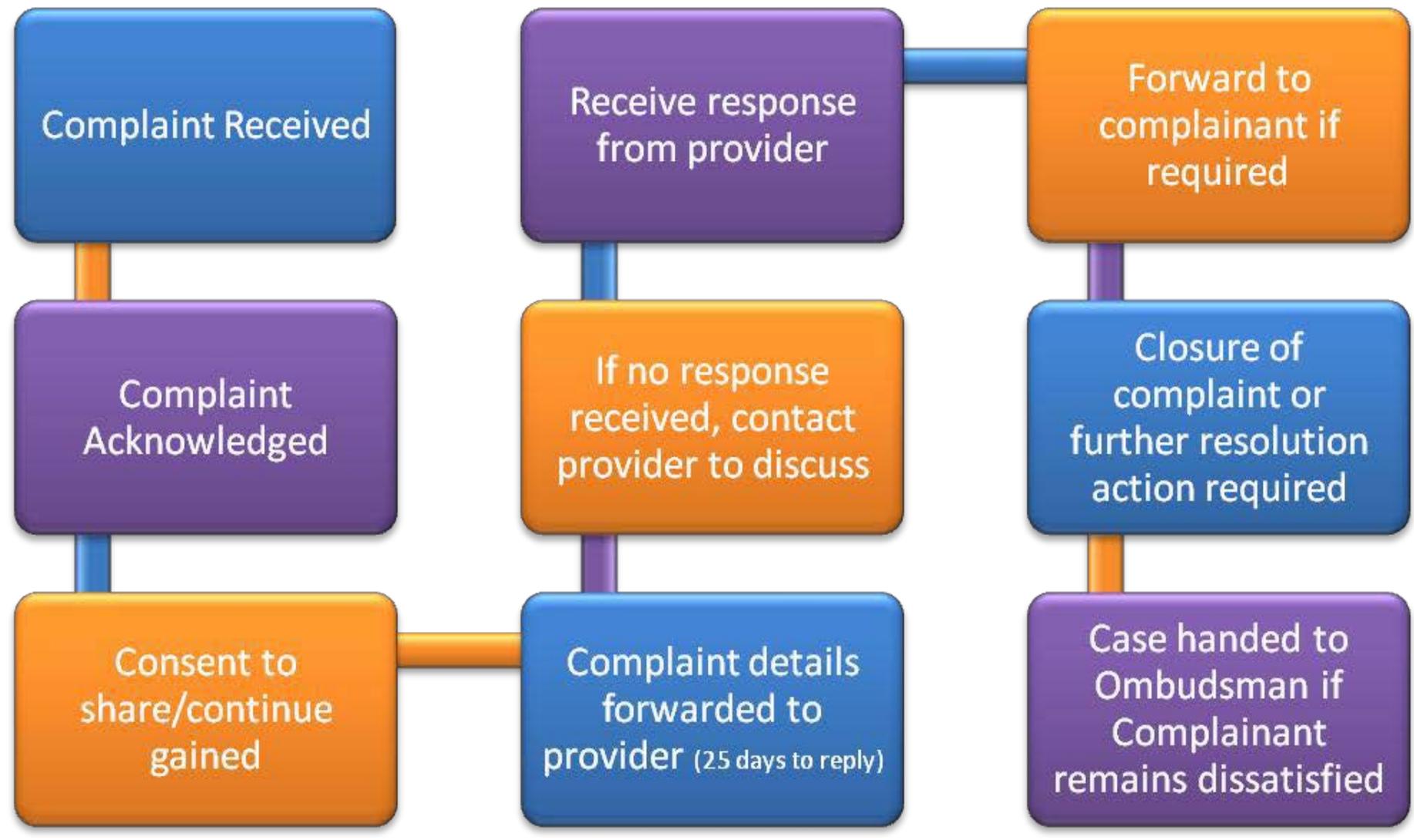
Action Plan

Action	Whom to complete	Date to complete	Date Completed

Complaints Procedure



Complaints Process – A Complainant Guide



Continual/Vexatious Complainants Policy

Purpose of the Policy

This policy should be used to identify situations where the complainant may be considered to be continual or vexatious, and suggests ways of responding to these situations.

The policy should only be used as a last resort and after all reasonable measures have been taken in attempt to resolve complaints following the SWBCCG Complaints Procedure, i.e. through local resolution or conciliation.

The policy should only be implemented in exceptional circumstances and then only with the approval of both the Accountable Officer and the Chair of SWBCCG.

Definition of a Continual/Vexatious Complainant

Complainants (and/or anyone acting on their behalf) may be deemed to be continual or vexatious complainants where previous or current contact with them shows that they meet two or more of the following criteria:

Where the complainant:

- Is in frequent contact with the Customer Care Team. They make contact every day, and in some cases, more frequently, either by telephone, email, or by physically visiting the office space.
- Persist in pursuing a complaint where SWBCCG Complaints Procedure has been fully and properly implemented and exhausted.
- Changes the substance of a complaint or continually raises new issues, or seeks to prolong contact by continually raising further concerns or questions upon receipt of a response whilst the complaint is being addressed. (Care must be taken not to discard new issues that are significantly different from the original complaint. These might need to be addressed as separate complaints.)
- Challenges written documentation by claiming that the records have been altered. Refuses to accept contemporaneous notes, even when separate individuals have made them.
- Receives a response from the organisation and immediately responds by either raising new concerns, or presenting a previous issue in an alternative manner
- Seeks an unrealistic outcome and intends to continue until that outcome is achieved. Example could include wanting to have a member of staff dismissed.

- Tries to manipulate the complaint by:
 - complaining about the member of staff dealing with the complaint
 - dictating who they will and will not have contact with, e.g. wanting to speak directly to the Chair of SWBCCG, or the Accountable Officer
 - stating they wish to meet with a person, and then either refusing to arrange a date, or not attending when the meeting has been arranged
 - raising the same, or slightly varied, complaint to other organisations and /or people, e.g. the Press, the local Member of Parliament, the Health Secretary, etc.

Should a complainant or their representative threaten, or use physical violence towards staff at any time, personal contact (ie. Meetings), with the complainant and/or their representatives to be discontinued with immediate effect.

Handling Continual/Vexatious Complainants

The Accountable Officer and the Chair of SWBCCG should agree that the complainant falls into the category of a continual/vexatious complainant. The decision should be recorded and the reason for the decision should also be noted.

To check that the complainant's concerns have been fully investigated and that the information has been forwarded, the complainant should be encouraged to request a review by the Parliamentary & Health Service Ombudsman.

This would mean that the initial complaints handling process would be scrutinised by independent people and if, in their opinion, the aims of local resolution had been met, the request would be refused.

If the complainant is not prepared to request a review, or insists on raising the same issue again, they should be advised that as the Accountable Officer has responded fully to the points raised and the matter is now closed. The following should be advised:

- No further correspondence will be entered into unless they have a new complaint
- Staff will no longer deal with the complainant over the telephone
- Complainants have the right to contact the Parliamentary & Health Service Ombudsman should they remain dissatisfied.

If the complainant replies again, response will be to inform them that the letter has been received and the contents noted. A copy of any letter answering the

complaint will be enclosed with a statement to the effect that there is nothing further to add to the response.

In extreme cases, where abusive behaviour continues, complainants may have to be informed that SWBCCG's Solicitors may have to become involved. As a last resort an injunction may be sought, following legal advice.

Withdrawing Continual or Vexatious Status

Once complainants have been determined as 'continual or vexatious' there must be a mechanism for withdrawing this status at a later date.

This decision will be made by the Accountable Officer and the Chair of SWBCCG, and will reflect facts such as the complainant subsequently demonstrating a more reasonable approach, or further complaint is submitted for which the usual Complaints Procedure would appear appropriate.