

# COMPLAINTS POLICY

**IT IS THE RESPONSIBILITY OF ALL USERS OF THIS POLICY TO ENSURE THAT THE CORRECT VERSION IS BEING USED**

This policy has been approved by the undersigned and will be reviewed on an annual basis. In case of any queries or questions in relation to this policy please contact the Chief Operating Officer (COO) (Sophie McCracken) or CEO (Jane Lambert)

Does this document meet the requirements of the Equality Act 2010 in relation to age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation?

Yes

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<b>Author:</b>	Lorna Pratt / Clara Travers / Helen Hodges		
<b>Position:</b>	Director of Operations / Director of Services and Director of Clinical Standards		
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<b>Author signature:</b>	L.Pratt	<b>Date:</b>	12.01.2024
<b>Approved by:</b>	Sophie McCracken		
<b>Position:</b>	Chief Operating Officer		
<b>Signature:</b>	S.McCracken	<b>Date:</b>	12.01.2024

## REVISION HISTORY

Date	Version No	Revised by	Reason for Update Sections Affected Description	Approved by	Date of next Review
12.01.2023	V4	Helen Hodges	Annual review and introducing – first point resolution.	Sophie McCracken	12.01.2023
15/8/23	V5	Helen Hodges	Review of documentation and escalation process.	Sophie McCracken	15.8.24
12/01/24	V6	Lorna Pratt	Annual review – Director of Operations cover complaints for ECG training	Lorna Pratt	12.01.24

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## 1. Introduction

At ECG we are committed to providing the best quality customer service to all our clients and prospective clients and welcome comments about our service so that we may continually improve.

This Policy sets out our approach to resolving complaints, the process we will follow and the standards we provide.

## 2. Purpose

We want to help you resolve any concerns as quickly as possible and will progress any issues on the following basis:

- We will make sure the earliest possible resolution is sought to any concern or complaint.
- We treat as a complaint any expression of dissatisfaction with our service or products even if it has not been positioned as a formal complaint.
- We will listen to your concerns, treat them seriously, and learn from them so that we can continuously improve our service.
- A complaint is an expression of dissatisfaction and will be treated with respect and fairness with due regard to confidentiality and sensitive situations.
- We will investigate all complaints thoroughly and take necessary and appropriate action if any failures are identified.

### Our policy covers complaints about:

- The standard of service we provide
- The behaviour of our staff
- Any action or lack of action by staff affecting an individual or group our complaints policy does not cover.
- Matters that have already been fully investigated through this complaints procedure
- Anonymous complaints

## 3. Our Approach to receiving complaints.

- To Listen
- To Take Responsibility
- To Learn
- To Record and Report

## 4. Standards for Handling Complaints

- Complaints, although rare, are treated seriously, whether they are made by in person, by letter, phone or email
- You will be treated with courtesy and fairness, and we ask that you approach our staff with the same respect

- Complainants will not be discriminated against or victimised. We will acknowledge the communication preferences of complainants and adhere to these as far as practicable.
- Information and guidance about how to complain will be available and accessible to everyone who uses the service, via the website and via printed information held in our clinics. We will provide support if required to help individuals to make complaints.
- We will listen to any concerns fully and will do all that we can to minimise the stress of the process by keeping you up to date at every stage of your complaint.
- We will deal with your complaint promptly and will acknowledge your concerns within 3 working days
- We aim to complete our investigations in a timely manner. Once the issue has been investigated and resolved, you will receive a full reply detailing the outcomes within 28 days of receiving your complaint.
- All staff will receive appropriate training in customer service and will know how to respond if they receive a complaint.
- Consent and confidentiality will not be compromised during the complaints process unless there are professional or statutory obligations that make this necessary, such as safeguarding.
- We will act in accordance with the Duty of Candour in respect of complaints about care and treatment that have resulted in a notifiable safety incident.
- In line with our ISO 9001 Quality standard, we maintain a report of all complaints received, communication and resolution in order to demonstrate compliance, and to ensure we improve our processes and procedures where possible to avoid future similar issues.
- We will reflect upon and try to learn from each complaint so that we can continue to pursue high standards of practice.
- We will monitor trends arising from any complaints together with any areas of risk that may need to be reviewed.

## 5. Procedure

The individual who receives the complaint will acknowledge the complaint and respond to concerns with appropriate empathy.

### 5.1 First point of resolution – informal complaint.

We acknowledge that not all complaints require a lengthy investigation, and that sometimes the client is looking for an early resolution of their situation and will make an informal complaint.

- Where possible, ECG/Makewell will thank the client for bringing the issue to our attention and will attempt to resolve the complaint to the client's satisfaction at the first point of contact, ideally on the same day that the complaint is received.
- If a staff member receiving a complaint is able to resolve the situation promptly, ECG encourages them to do so whenever possible and will support staff to do this.
- If appropriate for the member of staff receiving the complaint to apologise, they will do so.
- Where the complaint is resolved at the first opportunity the appropriate Head of Department or Director will be informed within one working day so that they may review the outcome of the complaint.

## 5.2 Handling a formal complaint

5.2.1 All complaints received will be treated in the strictest confidence.

5.2.2 All complaints, written or verbal, will be investigated.

## 5.3 Investigating Complaints

5.3.1 Where a complaint needs further investigation, complainants will receive an acknowledgement of their complaint within three working days.

5.3.2 The acknowledgement will include the name and contact details of the person investigating the complaint and advise the complainant of the next steps and expected timescales.

5.3.3 ECG/MakeWell/ will carry out an investigation of the nature of the complaint and provide a full written response to the complainant within twenty (20) working days of the complaint being received.

5.3.4 Where appropriate, ECG/MakeWell may arrange a discussion with the complainant, as far as this is reasonable, to discuss the manner in which the complaint is to be handled and how the issue(s) might be resolved.

5.3.5 When investigating the complaint ECG/Makewell will:

- Consider how the person wishes to be kept informed, e.g., in writing by letter or email, by telephone or through an agreed third-party representative or advocate
- Where appropriate, confirm with the person if they give their consent to access healthcare or training records for the purposes of investigating the complaint
- Confirm if the person has any disabilities that need to be considered during the investigation
- Advise the person that they can have a representative to support them through the complaints process (with provision of an interpreter if needed)
- Seek to establish what the complainant is looking for as an outcome to the complaint's investigation, e.g., an apology, explanation, replacement course or appointment, reimbursement of costs and agree a plan of action.

5.3.6 An impartial and transparent review of the complaint will be carried out by the appropriate Director or Head of Department. This will include a review of all relevant records, witness statements, statements provided by clinicians, and other relevant parties, correspondence, policies, procedures and codes of practice if applicable.

5.3.7 When undertaking a review the Director or Head of Department will establish the level of investigation and identify any immediate action/s required, including referral to external bodies where appropriate.

5.3.8 Where a complaint names a member of staff, the complaint should be shared with that person. Written statements should be obtained from any members of staff named in a complaint.

- 5.3.9 ECG and Makewell will maintain regular contact with the complainant throughout the investigation.
- 5.3.10 ECG and Makewell will update the complaints log at every stage of the complaint investigation and response process.
- 5.3.11 ECG and Makewell will identify any lessons that can be learned following the investigation and will share details of how processes may be improved to deliver continuous improvement across our teams.
- 5.3.12 ECG and Makewell will identify any further actions required following the investigation.

#### **5.4 Responding to Complaints**

- 5.4.1 Once the investigation is complete the Director or Head of Department will prepare a detailed, written, response including the outcomes of the investigation, a summary of any lessons learned, and any remedies offered. Where the investigation is complex this will be accompanied by a cover letter.
- 5.4.2 If a full response cannot be given within twenty (20) working days of receiving the complaint, ECG/MakeWell will write to the complainant to explain the reason for the delay.

#### **5.5 Escalating Complaints**

- 5.5.1 If a complainant is not satisfied with the outcomes after a complaint has been investigated, ECG/MakeWell will offer a review by a Director who was not involved in investigating the original complaint, or in the matters that led to the complaint, or the handling of the complaint.
- 5.5.2 ECG/Makewell will provide further information to the complainant in terms of potentially escalating the complaint to an external body depending on the nature of the complaint.
- 5.5.3 ECG/MakeWell will co-operate with any independent review of a complaint that has been escalated.

### **6 Information given to clients about how to feed back a concern, compliment or complaint**

- 6.1 Written information on the concerns, compliments and complaints procedure will be available on the ECG and MakeWell websites.
- 6.2 Clients will be assured that they will not be discriminated against for providing a concern, compliment or complaint.
- 6.3 Clients can also access information about the data we hold about them via our websites.
- 6.4 Clients may use a local advocacy service if they would like help in making their complaint. These may be found via citizen's advice bureau, local council or local

Healthwatch.

## **7 Receiving and recording a concern, compliment or complaint**

- 7.1 Concerns, compliments or complaints can be made by a client, a former client, or someone acting on a client's behalf.
- 7.2 All received concerns, compliments or complaints, whether written or verbal, will be recorded.
- 7.3 Recorded details will include:
- The date and time the feedback was received
  - A description of the feedback
  - Details of the investigation carried out and the outcome of that investigation.
  - Any actions taken, and whether or not a complaint (if applicable) was upheld.
  - Where no actions are taken, the reasons must be recorded.
- 7.4 Where a complaint is received anonymously, ECG / MakeWell will carry out an investigation as far as it reasonably can, depending on the content of the complaint.
- 7.5 ECG / MakeWell will maintain a complete record of all concerns, compliments or complaints received and copies of all related correspondence. These records will be kept separately from any healthcare records.

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## **7 Making a complaint to ECG/Makewell**

### **7.1 Complaints about ECG Training**

Concerns, compliments, or complaints to be made to the Director of Operations either verbally or in writing.

By email [bookings@ecgtraining.co.uk](mailto:bookings@ecgtraining.co.uk)

By post ECG The Gatehouse Bradwell Abbey Alston Drive Milton Keynes MK13 9AP

By Phone 0845 423 8993

If you are not satisfied with the outcome of the investigation into your complaint, you may ask to have your complaint reviewed by another Director by using the contact details above.

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### **7.2 Complaints about Clinical Services and MakeWell Clinic**

Concerns, compliments, or complaints to be made to the Director of Nursing and Quality either verbally or in writing.

By email [bookings@wemakewell.co.uk](mailto:bookings@wemakewell.co.uk)

By post ECG The Gatehouse Bradwell Abbey Alston Drive Milton Keynes MK13 9AP

By phone 01908 731293

If you are not satisfied with the outcome of the investigation into your complaint, or feel that it has not been addressed as you would want, you may ask to have your complaint reviewed by the CEO, Jane Lambert, at [Jane@ecgtraining.co.uk](mailto:Jane@ecgtraining.co.uk)

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### 7.3 Complaints about Professional Support

Concerns, compliments, or complaints to be made to the Director of Pharmacy Services either verbally or in writing.

By email [carolynne@ecgtraining.co.uk](mailto:carolynne@ecgtraining.co.uk)

By post ECG The Gatehouse Bradwell Abbey Alston Drive Milton Keynes MK13 9AP

By phone 0845 423 899

If you are not satisfied with the outcome of the investigation into your complaint, you may ask to have your complaint reviewed by another Director by using the contact details above or by emailing [bookings@wemakewell.co.uk](mailto:bookings@wemakewell.co.uk)

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## 8 External Bodies.

If you are unhappy with the response you have received from us, you have the option to raise your concerns with your local NHS board, the health service parliamentary ombudsman, the care quality commission (CQC) or other relevant regulatory service.

Contact Details are below

- 8.1 The Ombudsman: [ombudsman.org.uk](http://ombudsman.org.uk) or call them on 0345 015 4033
- 8.2 The Care Quality Commission (CQC): Find out more about how to [complain about a service or provider](#). If you are not able to use their [online form](#), you can contact them on the telephone: 03000 616161 (lines are open Monday to Friday, 08.30am to 5.30pm, excluding bank holidays) or email: [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)
- 8.3 The Nursing and Midwifery Council (NMC): If you are reporting a concern about someone on the NMC register, or telephone on 020 7637 7181 (lines are open Monday to Friday, 08:00–17:45 excluding bank holidays) or email: [newreferrals@nmc-uk.org](mailto:newreferrals@nmc-uk.org) (you will receive an automatic email response to confirm receipt and an acknowledgement in writing, with your unique case reference number, within seven days)
- 8.4 The Health and Care Professions Council (HCPC): Telephone on 0800 328 4218 or email: [ftp@hcpc-uk.org](mailto:ftp@hcpc-uk.org)
- 8.5 The General Pharmaceutical Council to report concerns about a Pharmacist <https://www.pharmacyregulation.org/reporting-concerns>
- 8.6 Trading Standards. Find your local office. <https://www.gov.uk/find-local-trading-standards-office>

## 9.0 Receiving and handling unreasonable complaints

9.1 In situations where the person making the complaint can become aggressive or unreasonable, ECG/MakeWell will instigate appropriate actions from the list below and will advise the complainant accordingly:

- Ensure contact is being overseen by an appropriate senior member of staff who will act as the single point of contact and make it clear to the complainant that other members of staff will be unable to help them
- Ask that they make contact in only one way, appropriate to their needs, e.g. in writing
- Place a time limit on any contact
- Restrict the number of calls or meetings during a specified period
- Ensure that a witness will be involved in each contact
- Refuse to register repeated complaints about the same issue
- Do not respond to correspondence regarding a matter that has already been closed; only acknowledge it
- Explain that ECG/MakeWell will not respond to correspondence that is abusive
- Make contact through a third person such as an independent advocate (where appropriate)
- When using any of these approaches to manage contact with unreasonable or aggressive people, provide an explanation of what is occurring and why
- Maintain a detailed, dated and timed, record of each contact with the complainant during the ongoing relationship

## 10.0 Feedback and Learning

Head of Departments and Directors will provide timely, anonymised feedback to their teams arising from complaints to support learning and continuous improvement.

## 11. Annual review and audit of comments and complaints

ECG/MakeWell will audit all concerns, compliments, and complaints quarterly and produce an annual report to the Senior Management Team. This will include:

- The number of complaints received, as well as concerns and compliments
- The issues that these complaints raised in terms of any trends or areas of risk that might need to be addressed
- Whether complaints have been upheld
- Improvements or changes to the service that were made in adherence to the quality improvement policy

## 11.0 References and Further Reading

- Being open – communicating patient safety incidents with patients and their carers (NPSA, 2009).
- Data Protection Act 1998  
<http://www.legislation.gov.uk/ukpga/1998/29/contents>



- Department of Health guidance *Complaints in the NHS*  
<https://www.gov.uk/government/publications/nhs-hospitals-complaintssystem-review>
- Listening, improving, responding: a guide to better customer care (DH, 2009)
- MIND – complaining about health and social care  
<http://www.mind.org.uk/information-support/legal-rights/complainingabout-health-and-social-care/>
- NHS Constitution  
<https://www.gov.uk/government/publications/the-nhs-constitution-for-england>
- NHS Litigation Authority guidance about complaints
- Principles of Good Complaint Handling (PHSO, 2009)  
<http://www.ombudsman.org.uk/reports-and-consultations/reports/health>
- Public Interest Disclosure Act 1998  
<http://www.legislation.gov.uk/ukpga/1998/23/contents>