**COMPLAINTS PROCEDURAL GUIDELINES**

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| **POLICY REFERENCE NUMBER:** | CPG2 |
| **VERSION NUMBER:** | 3 |
| **KEY CHANGES FROM PREVIOUS VERSION** | Three year review New Appendix 3  All content revised and updated to align with new Complaints Process as launched Jan 23 |
| **AUTHOR:** | Claire Lawrence, Head of Complaints |
| **CONSULTATION GROUPS:** | Trust Volunteers / PIPE (Patient Information & Plain English) Volunteers / Service User with Lived Experience of Complaints Process |
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| **PATIENT & CARER EXPERIENCE STEERING GROUP APPROVAL:** | 19 June 2023 |
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| **PROCEDURE SUMMARY** |
| The purpose of this procedural document is to provide guidance on how to make a complaint to the Trust, and to ensure that complaints about services provided by the Trust are dealt with in line with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and in line with the Parliamentary and Health Service Ombudsman NHS Complaint Standards (December 2022). |
| **The Trust monitors the implementation of and compliance with this procedure in the following ways:** |
| Monthly accountability measures for complaints responsiveness  Monthly Lessons Learned updates to Service Directors and Deputy Directors of Health & Safety for each Care Unit.  Regular assurance and exception reports to ICBs and Quality Meetings.  Quarterly Thematic Reports to Care Units  Internal audits to monitor and check key areas of complaints process.  Non-Executive Directors (NEDs) review and monitor a selection of complaints as an independent quality assurance check. |

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| **Services** | Applicable | Comments |
| Trustwide | 🗸 |  |
| Essex MH & LD | 🗸 |  |
| CHS | 🗸 |  |

**SCOPE**

**The Director responsible for monitoring and reviewing this procedure is**

**Executive Director of Strategy, Transformation and Digital**

**ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST**

**COMPLAINTS PROCEDURAL GUIDELINES**

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**ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST**

**COMPLAINTS PROCEDURAL GUIDELINES**

**Assurance Statement**

The purpose of this procedural document is to provide guidance on how to make a complaint to the Trust, and to ensure that complaints about services provided by the Trust are dealt with in line with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and in line with the Parliamentary and Health Service Ombudsman NHS Complaint Standards (December 2022).

**Equality and Diversity Statement**

The Trust is committed to ensuring that equality, diversity, and inclusion is considered in our decisions, actions and processes. The Trust and all trust staff have a responsibility to ensure that they adhere to the Trust principles of equality, diversity, and inclusion in all activities. In drawing up this policy all aspects of equality, diversity, and inclusion have been considered to ensure that it does not disproportionately impact any individuals who have a protected characteristic as defined by the Equality Act 2010

# 1.0 [MAKING A COMPLAINT TO THE TRUST](#MAKING)

* 1. People using EPUT services can raise concerns and complaints directly to The Trust in the following ways:
  + By raising it with a member of staff from the service the complaint is concerning, either by telephone, email or by speaking to a member of staff from the service in person.
  + By contacting the Patient Advice & Liaison Service (PALS) either by email ([epunft.PALS@nhs.net](mailto:epunft.PALS@nhs.net)) or by telephone (0800 085 7935).
  + By contacting the Complaints Team either by email ([epunft.complaints@nhs.net](mailto:epunft.complaints@nhs.net)) or by telephone (01268 407817).
  + By writing to EPUT’s Chief Executive: Mr Paul Scott, The Lodge, Lodge Approach, Runwell, Wickford, Essex, SS11 7XX.
  + By completing the web form on the ‘Complaints & Compliments’ page, accessible via the ‘Contact Us’ page of the EPUT website: [Complaints & Compliments | Essex Partnership University NHS Trust (eput.nhs.uk)](https://eput.nhs.uk/contact/complaints-compliments/)
  1. People who require assistance with raising a complaint can contact an Independent Complaints Advocacy Service between 09.00 and 17.00:
* POhWER on 0300 4562370
* Rethink on 0300 790 0559
* Healthwatch on 01702 41632 (for Southend residents)
  1. A complaint should be made as soon as possible after the action giving rise to it, to enable a full investigation whilst all the facts regarding the complaint are still readily available. We therefore ask that you make a complaint within 12 months of the event, or within a year of when you became aware of the problem you are complaining about.
  2. It may not be possible for us to investigate complaints that are raised outside of this time limit, and if we find that we are unable to investigate a complaint because of the time elapsed, we will respond and explain this.
  3. The time limit outlined in paragraph 1.3 will not be applied arbitrarily. Where it is possible to investigate a complaint effectively and fairly despite there being a delay in raising it, we will do so. We will also take into account where it would be unreasonable in the circumstances of a particular case for the complaint to have been made earlier.
  4. In any case where the Trust has decided it is unable investigate a complaint on the grounds that it was not made within the time limit, the complainant can request the Parliamentary and Health Service Ombudsman (PHSO) to consider it.

# 2.0 Our Assurance

2.1 If you make a complaint about one of our services, we are committed to:

* Listening carefully
* Taking you seriously
* Doing all we can to put matters right
* Taking accountability for any mistakes we have made
* Learning from what happened, and taking action to improve our services

Your care will not be adversely affected by any comments or complaints you make – in fact, it is more likely to help things improve for everyone.

# 3.0 Complaints RAISED WITH THE SERVICE (Informal Complaints)

3.1 Complaints and concerns can be raised directly to the service the complaint is about, either by telephone, email or by speaking to a member of staff from the service in person.

3.2 If the member of staff first contacted is unable to immediately resolve the concerns raised, they may need to refer to a more senior staff member within the service for assistance.

3.3 Wherever possible, we will attempt to resolve matters locally, thus providing a prompt resolution. This may be achieved with a conversation, or by an email exchange. In some cases we may arrange a meeting for you with a senior person from within the service to discuss your concerns.

3.4 The service will pass details of complaints that are resolved locally to the Complaints Team, so that the issues raised can be recorded on our complaints database (Datix), along with the outcome that was agreed, actions taken and lessons identified.

3.5 If the service is unable to provide a satisfactory resolution to the concerns raised, they will refer the person to the PALS or Complaints Team for further assistance.

# 4.0 Patient Advise and Liaison Service (PALS)

4.1 PALS can help sort out any concerns or queries you may have about the services the Trust provides, giving you information and support.

4.2 PALS is the recommended route if the service concerned has been unable to resolve matters for you directly, and if either of the following applies to your concerns:

* The complaint relates to an ongoing/current issue, which requires immediate or urgent action.
* You do not wish to make a formal complaint.

4.3 PALS staff will escalate your concerns to a senior member of staff within the service, and follow this up on your behalf to provide you with a response as quickly as possible.

4.4 If PALS are unable to provide a satisfactory resolution to the concerns raised (e.g. because they are complex and require a more thorough investigation) they may refer you to the Complaints Team for further assistance.

4.5 For more information about the PALS procedure please see Appendix 2.

# 5.0 Complaints made to THE Complaints Team

# (Formal Complaints)

5.1 The Complaints Team is part of the Patient Experience directorate within EPUT.

5.2 The Complaints Team is the recommended route if:

* Your concerns relate to a past event, which does not require immediate/ urgent action.
* The complaint is complex, and could not be satisfactorily resolved without a formal complaint investigation.
* You wish to make a formal complaint.

5.3 Complaints are received into the complaints team by:

* Email: [(epunft.complaints@nhs.net](mailto:epunft.complaints@nhs.net)
* Telephone: 01268 407817
* Letter (Complaints Team, Essex Partnership University NHS Trust, The Lodge, Lodge Approach, Runwell, Wickford, Essex, SS11 7XX )
* Website submission: [Complaints & Compliments | Essex Partnership University NHS Trust (eput.nhs.uk)](https://eput.nhs.uk/contact/complaints-compliments/)
* By referral from PALS or another EPUT service, with the consent of the complainant.
* Via an external source (e.g. where a person has raised a complaint about our service to their MP, the CQC, NHS England etc. and it is forwarded to EPUT)

5.4 Complaints received directly to the Complaints Team are logged as Formal Complaints (please see exceptions to this listed below under point 5.5). The details are recorded on our Complaints Database (Datix), and the complaint record is kept separately from a patient’s medical records.

5.5 Complaints will not be logged as Formal Complaints if they are:

* Directed elsewhere for resolution (with the consent of the complainant) e.g. to PALS, to a different NHS Trust or an external organisation.
* Not in scope of the NHS Complaints Procedure (see section 7 of the Complaints Policy)
* Not accepted for investigation by the Trust for another reason e.g. on the grounds that it was not made within the time limits (see section 1.3 above), or because the complaint is considered unreasonable (see Appendix 3 of the Complaints Procedure).

5.6 We acknowledge Formal Complaints within three working days of receipt.

5.7 Complaints are allocated to a Complaints Liaison Officer (CLO) within the Complaints Team, who will provide you with a single point of contact and keep you informed and updated throughout the process.

5.8 The Complaints Liaison Officer will attempt to contact you directly to discuss your concerns, so that they can:

* Clarify their understanding of the issues and the outcome you are looking for.
* Discuss the different options for resolution and agree with you how to proceed.
* Provide an anticipated timescale for the investigation and response to your complaint.

5.9 The Complaints Liaison Officer will write to you after this discussion to confirm what was agreed and to summarise their understanding of your concerns. This will give you the opportunity to let us know if there is anything you feel we have missed, misunderstood or you would like to change.

5.10 If the Complaints Liaison Officer is unable to contact you by telephone, they will write to you to introduce themselves, to summarise their understanding of your concerns and to explain the next steps.

5.11 If you wish to raise additional issues for investigation at any point whilst your complaint is under investigation, these will be added to the original complaint if they relate to the same period of care or are broadly connected to the original complaint. If they relate to a separate period of care and are not connected to the existing complaint, they may be logged as a separate complaint.

5.12 If additional issues are added to the original complaint, the CLO will let you know how this will impact the response timescale.

5.13 With your agreement, the CLO may be able to facilitate an informal resolution of your complaint by the service. They could arrange for you to speak or meet with somebody senior within the service, or arrange a resolution meeting with the service that they could attend with you. This might be a preferable option if:

* The complaint relates to an ongoing/current issue, which requires immediate/ urgent action.
* The complaint is not complex, and could be resolved without carrying out a formal complaint investigation.
* You do not wish to make a formal complaint.

5.14 Alternatively, the CLO will conduct a formal complaint investigation, liaising with the complainant and the service. When they have completed their investigation, the CLO will prepare a formal response letter for approval at an appropriate senior level.

# 6.0 Formal Response Letter (FRL)

6.1 Following a formal complaint investigation, you will be sent a Formal Response Letter (FRL) that will address the issues raised, as agreed and confirmed by the Complaints Liaison Officer (as described in point 5.8).

6.2 The FRL will be approved and signed by an appropriate senior person within The Trust; this person will be either the Chief Executive or someone who has been authorised by the Chief Executive to act on their behalf in respect of the responsibility for ensuring compliance with the arrangements made under the Local Authority Social Services and NHS England Complaints Policy (2009).

6.3 In the FRL we will explain how the complaint has been considered, and explain the results of the investigation. Where we have found failings in our service we will explain what happened, take accountability and set out what action we have taken to put matters right.

6.4 In the FRL we will detail any lessons identified and improvement actions that were taken as a result of the complaint investigation (see section 18 of the Complaints Policy for more detail).

6.5 In the FRL we will notify the complainant of their right to refer the complaint for an independent review by the Parliamentary and Health Service Ombudsman (PHSO).

6.6 The date the FRL is sent will be recorded on the Datix complaint record, and the case will be closed.

# 7.0 [Next Steps: If the complainant](#_7.0__) is not satisfied with

# the response

7.1 If the complainant is not satisfied with the response, we will re-open the complaint in the following circumstances:

* If we have misunderstood or failed to address a complaint issue.
* If we have overlooked or misinterpreted key information or evidence in our original investigation that would have impacted the outcome.
* If the complainant brings new information or evidence to our attention that is relevant to the complaint and may impact the outcome.

7.2 In these circumstances we will investigate further and send you a second FRL.

7.3 If the circumstances explained in section 7.1.do not apply, we will not re-open the complaint but we will remind you of your right to request an independent review of your complaint by the Parliamentary and Health Service Ombudsman (PHSO).

7.4 To request an independent review of your complaint you may contact the PHSO Customer Helpline by phone on 0345 015 4033, or by visiting their website: <https://www.ombudsman.org.uk/making-complaint>

# 8.0 Reference to other Trust Policies

* Complaints Policy (CP2)

# 9.0 Glossary

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| **Term** | **Meaning** |
| CLO | Complaint Liaison Officer |
| HUP | Habitual, Unreasonable and Persistent (complaint) |
| PALS | Patient Advice & Liaison Service |
| PHSO | Parliamentary and Health Service Ombudsman |

**END**