

Policy and Procedure on Complaints Management

LISTENING, RESPONDING & IMPROVING

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| References | <ul style="list-style-type: none"> • The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. • Health and Social Care Act 2012 • Equality Act 2010 and s.149 of the Public Sector Equality Duty. • A Review on the NHS Hospitals Complaint System Putting Patients Back in the Picture, Right Honourable Ann Clwyd MP & Professor Tricia Hart. • Serious Incident Policy & Procedure • Principles of Good Complaint Handling, Parliamentary and Health Service Ombudsman 2009 • Listening... Responding... Improving, A guide to better customer care 2009 • NHS Complaints Reform 'Making Things Right' 2003 • Barnsley Clinical Commissioning Group (BCCG) Freedom of Information Policy. • Data Protection Act 1998. • Mental Capacity Act 2005 • BCCG Integrated Risk Management Framework • BCCG Being Open Policy. <p>Key Organisations referred to:</p> <ul style="list-style-type: none"> • DIAL • Parliamentary & Health Services Ombudsman (PHSO) • Healthwatch | | |
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1. Introduction

- 1.1 Barnsley Clinical Commissioning Group (CCG) is committed to commissioning and ensuring high quality services and being responsive to the needs of its population. It does however recognise that there will be occasions when people will be dissatisfied with the service received and wish to make a complaint. Barnsley CCG places great emphasis on resolving complaints as quickly as possible in an open and transparent manner which is seen as vital to improve services and the patient's experience of the NHS.
- 1.2 This policy sets out the process by which concerns, complaints and compliments may be brought to the attention of Barnsley CCG and subsequently investigated and responded to in accordance with recognised good practice and Department of Health Guidance. It is based on the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. Barnsley CCG has established and maintains procedures to ensure compliance with requirements in the NHS Litigation Authority Risk Management Standards.
- 1.3 It is the responsibility of Barnsley CCG to ensure that the patient's immediate safety and health care needs are being met. This may require urgent attention before any matters relating to the complaint are handled.
- 1.4 Barnsley CCG adhere to the

Equality Act 2010 and Section 149 of the Public Sector Equality Duty which states it is a legal principle to eliminate discrimination and promote equality of opportunity to people and groups. The Equality Act 2010 defines this protection based on protected characteristics which are: race, sex, gender, identity, age, sexual orientation, religion or belief, marriage and civil partnership, pregnancy and maternity. We define diversity as the valuing of our individual differences and talents, and creating a culture where everyone can participate, thrive and contribute. Equality and diversity form the basis of our values and how we operate as an organisation and are accessible to everyone, not just certain groups of people.

The Risks of not having this Policy in place:

Failure to develop a complaints policy and procedures or to comply with its requirements may result in the following corporate risks arising:-

- (i) Staff of the CCG would not be aware of their responsibilities or the actions required in the event of receiving a complaint.
- (ii) Failure to comply with legal obligations.
- (iii) Affect the reputation of Barnsley CCG and the confidence of the public.
- (iv) Litigation resulting in financial loss to the organisation.
- (v) Ineffective management/handling of complaints, comments, concerns and compliments.

- (vi) Failure to ensure that lessons learned from the investigation of a complaint are appropriately actioned to avoid a reoccurrence of events which gave rise to the complaint, comment or concern.

2. Purpose and Scope:

The purpose of this Policy is to set out the remit and responsibilities of the CCG in accordance with complaint handling in both clinical and non-clinical complaints. It relates to complaints about those services commissioned and managed by Barnsley CCG, complaints regarding actions, behaviours or attitude of any person employed by Barnsley CCG, health related complaints that include elements relating to the Local Authority, complaints regarding access to funded care, complaints regarding commissioning decisions and complaints regarding an NHS body or independent provider. It also describes relevant links to our Provider organisations which include South West Yorkshire Partnership Foundation Trust (SWYFT) and Barnsley Hospital NHS Foundation Trust (BHNFT) and includes elements in relation to the Local Authority regarding Commissioning decisions and complaints relating to an independent provider of NHS Services. This Policy should be read in conjunction with other associated Barnsley Clinical Commissioning Group policies, i.e. Serious Incident Reporting Policy and Procedure and the Integrated Risk Management Framework.

The policy does not cover issues relating to Barnsley CCG staff, which are handled through line management arrangements and Human Resources policies e.g. Grievance Procedure, Whistle Blowing Policy and Disciplinary Procedure.

3. Policy Statement:

This policy describes the systems in place to effectively manage all complaints received by the organisation by patients and service users in accordance with NHS complaints regulations and it is our legal duty to have a full and comprehensive complaints procedure in place for our local population. It outlines the responsibilities and processes for receiving, handling, investigating and resolving complaints relating to the actions of the organisation, its staff and services.

Barnsley CCG aims to ensure that all complainants have a right to expect a prompt, open, constructive and honest response and we will ensure that lessons will be learnt by raising a complaint, and there will be no adverse effects on their care or that of their families.

Barnsley CCG will ensure that all complaints are used positively by monitoring trends and patterns to facilitate early detection of systemic problems whilst being fair and supportive to staff and in accordance with our vision and values.

This Policy is informed by:

- Principles of openness, transparency and candour throughout the system
- Patients raising concerns about their care are entitled to have the matter dealt with as a complaint, unless they do not wish it
- Prompt and thorough processing
- Sensitive and accurate communication
- Effective and implemented learning
- Comments or complaints amounting to an adverse or serious untoward incident should trigger an investigation.

Vision

“We are a clinically led commissioning organisation that is accountable to the people of Barnsley. We are committed to ensuring high quality and sustainable health care by putting the people of Barnsley first”.

Values

Barnsley Clinical Commissioning Group has the following values:

- Equity and fairness
- Services are designed to put people first
- They are needs led and resources are targeted according to need
- Quality care delivered by vibrant primary and community care or in a safe and sustainable local hospital
- Excellent communication with patients

We will also continue to work closely with all providers of NHS Services to ensure that a similar customer focussed approach is taken to complaint handling.

4. Objective and Aims:

The objective of the Policy and its Procedure is to provide accessible, clear and easy to understand procedures for managing complaints, ensure that complaints are dealt with swiftly, appropriately and as close to the source of the problem as possible; to provide the fullest possible opportunity for investigation and resolution of the complaint and to assist in promoting an open, honest and transparent organisational culture. Ensuring that patients have a positive experience and that we are open and receptive to hearing people’s views is a key outcome for Barnsley CCG.

This will be achieved using the ‘Principles of Good Complaint Handling and ‘Principles of Remedy’ as laid down by the Parliamentary and Health Service Ombudsman. These are:

- Getting it right
- Being customer focused
- Being open and accountable
- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement.

The Policy aims to adopt an approach to dealing with complaints in accordance with the Department of Health Guidance. 'Listening, Responding, Improving'. This approach encourages a proactive process of early contact with the complainant and robust systems for organisation learning from complaint outcomes.

5. Roles and Responsibilities:

Barnsley CCG Governing Body is committed to ensuring that any concerns or complaints about NHS commissioned services are responded to effectively to ensure high quality of care for the people of Barnsley. The Governing Body will oversee the complaints management process to satisfy itself that the required quality of service by all providers and of commissioning activity and decisions is achieved and maintained. This includes the responsibility for approving Barnsley CCG's Policy and Procedures for the Management of Complaints.

The Chief Officer is ultimately responsible for all complaints received by Barnsley CCG.

However, this responsibility is delegated at Governing Body level to **The Chief Nurse**. The advice of the **Medical Director** will be sought where appropriate.

Quality & Patient Safety Committee

Is accountable to the Governing Body for assurance on Complaints and is chaired by the Medical Director. The Quality and Patient Safety Committee will monitor the implementation of the policy and review comprehensive quarterly reports whilst monitoring trends and themes to ensure appropriate learning is identified.

The Patient Experience Designated Nurse will act as the designated 'complaints manager' in accordance with the requirements of the NHS Complaints Procedure and will take responsibility to ensure the Quality Team:

- Ensuring effective implementation of the complaints procedures
- The satisfactory management of complaints handling. Coordinating the complaints process
- Grading all complaints received and preparing reports for the QPSC Governing Body, NHSCB and the Health Service Ombudsmen

- Assess the severity of the complaint, whether escalation is required and the need to contact other agencies
- Provision of advice/support to Barnsley CCG staff dealing with complaints
- Providing information to complaints regarding source of support such as interpreters
- Ensuring publicity, explaining how to raise concern/complaint/complement is accessible to the public and complainant
- Providing/ensuring appropriate training for commissioning staff on the handling of complaints
- Summarising complaints information and conclusions to inform commission quality monitoring and responding across providers
- Maintain a data base to categorise and record all complaints received
- Providing standard acknowledgment and responses within the required time scale.

All Members of Barnsley CCG Staff are responsible for acquainting themselves with the complaints Policy and Procedure relevant to their area of work. Members of staff will be expected to assist as required in any complaint investigation. Members of staff with specific duties under the complaints procedure should ensure that a suitable colleague is nominated to deputise on his or her behalf in their absence.

All Providers are required to have their own arrangements for complaints handling in accordance with the Local Authority Social Services and National Health Service complaints (England) Regulations 2009.

The NHS Standard Contract for acute services requires each provider to

- Operate and publicise a complaints procedure that complies with the law
- Provide such details of its complaints procedure as the commissioner may reasonably require
- Implement lessons learned from complaints and demonstrate at reviews the extent to which service improvements have been made as a result.

Independent Providers are required to provide the commissioners with an annual report giving the numbers of complaints received; of those the number justified complaints, the subject matter of the complaint and the actions taken to improve services as a result of the complaint. The CCG will have sight of all complaints that are RAG rated red and orange.

6. Definition of a Complaint

For the purpose of this policy a complaint is defined as an 'expression of dissatisfaction' received from a patient, carer or service user about any aspect of the local health services which require a response, whether it be verbally or in writing.

Expressions of dissatisfaction may be made in a variety of ways, verbally in person, by telephone, in writing including electronically by e mail or fax.

The decision as to whether the complaint is dealt with informally as a concern or as a formal complaint will be tailored to meet the needs of the complainant following discussion with the complainant and will depend on the nature of the complaint.

7. Who can make a Complaint?

Anyone who is receiving, or has received, NHS treatment or services or who is affected by an action, omission or decision can complain. This includes services provided by independent contractors who have a contract with the organisation to provide NHS services that are provided by independent providers as part of the NHS contract.

If a patient is unable to complain themselves then some else, usually a relative or friend can complain on their behalf providing written consent is given.

If a complainant is the parent or guardian of a child under the age of 18 (to whom the complaint relates) the CCG must be satisfied that there are reasonable grounds for the complaint being made by the representative instead of the child.

If a patient is unable to act, for instance due to physical incapacity or lack of capacity within the meaning of the Mental Capacity Act (2005) consent is not appropriate. This will be agreed on an individual basis and explained to the complainant.

If a complaint is raised concerning a patient who is deceased, this must be made by a suitable representative, for example next of kin. If Barnsley CCG does not consider that the complainant is a suitable representative, they may decline to deal with the complainant and recommend that another person acts on the deceased patient's behalf.

If a Member of Parliament makes a complaint on behalf of a constituent the complaint will be handled following the procedure and in such cases a letter stating that this is happening may be an appropriate reply to the Member of Parliament.

8. Time Limits:

Complaints should normally be made within 12 months of the event or 12 months of the date of discovering the problem.

Barnsley CCG has the discretion to extend this time limit where it would be unreasonable in the circumstances of a particular case for the complainant to have made their complaint earlier providing it is still possible to investigate the complaint effectively and fairly.

9. Confidentiality/Patient Consent:

It is important that anyone who raises a complaint with Barnsley CCG are reassured that their confidentiality will be respected and that future care will not be compromised.

All personal information relating to complaints must be treated confidentially and protected in accordance with the requirements of the Caldicott Guardian and the Data Protection Act 1998. Information will only be disclosed to those persons with a need to know to enable them to investigate and/or respond to specific matters.

The consent of the patient is required when investigating a complaint made on their behalf by a relative, carer or friend. This is particularly important when the complaint is of a clinical nature and in responding would require by necessity the disclosure of clinical information to the complainant. The receipt of the complaint will be acknowledged enclosing a consent form for the patient to sign and return to the Quality Team. This must be done before confidential or information is released to a third party.

Where the patient has died, or is deemed to lack capacity under the Mental Capacity Act to give consent, it will be necessary to establish that the complainant is appropriate to represent the patient. Particular attention shall be paid to the need to respect the confidentiality of the patient, and to any known wishes expressed by the patient that information should not be disclosed to third parties.

10. Safeguarding Children and Vulnerable Adults:

When a complaint is received that raises child or adult safeguarding concerns, the responsibility for highlighting this lies with the person who has received the concern. If there is any doubt about how an issue should be handled then the person dealing with the complaint must speak to the CCGs Designated Nurse for Safeguarding Children or Adults as appropriate. If there is an immediate risk of harm then advice should be sought urgently. The safety of the child and the vulnerable adult must be paramount.

It must be noted that complaints relating to safeguarding processes eg. the passing of information from NHS to Social Care, or information which may be shared in a case conference, may be subject of the complaint.

However, in circumstances where the safety of children or adults is paramount, a response to the complaint can be refused whilst concerns are investigated.

11. Exclusions to Making a Complaint:

The following complaints are not required to be dealt with in line with the regulations

- A complaint regarding privately funded treatment
- A complaint made by a responsible body to another responsible body. For example disputes on contractual matters between independent contractors should not be handled through this procedure
- A complaint made by an employee of a NHS body about their employment. These matters will be handled via the Human Resources Procedure
- A complaint that has already been resolved
- A complaint that has already been investigated under these regulations or previous regulations
- A complaint arising from the alleged failure to comply with a request for information under the Freedom of Information Act 2000. These will be dealt with via the governance processes
- Complaints that have already been locally investigated under the complaints regulations or which are being or have been investigated by a Local Commissioner under the Local Government Act 1974 or the Health Service commissioner under the 1993 Act
- Where a complaint is received that is disputing a funding decision for example an individual funding request/continuing healthcare case, this will be handled in accordance with the appropriate appeals process. However, the complainant can use the complaints procedure to raise concerns about the processes used.

Where there are allegations relating to assault or other criminal matters the Chief Nurse must be informed immediately for a decision to be taken on whether to refer the matter to the Police.

Complaints Involving Continuing Health Care (CHC)

Barnsley CCG has outsourced concerns involving Continuing Health Care to the Commissioning Support Unit (CSU) and an internal process has been agreed with the CSU to ensure that all complaints are processed within a timely manner. When a complaint is received it is recorded and an acknowledgement is sent to the complainant within 3 working days after which it is the responsibility of the CSU to look into the concerns raised and provide an appropriate response to the CCG.

The final response is collated by the Designated Nurse and forwarded to the Chief Nurse for final approval and sign off before it is sent to the complainant.

In the event that the CSU Continuing Health Care Team receives a complaint directly, this should be forwarded to the Designated Nurse to formally acknowledge but the investigation ultimately lies with the CSU Team, the CCG will take responsibility for direct correspondence with the complainant.

Complaints Involving the Former Primary Care Trust (PCT)

The CCG may receive complaints which relate to issues investigated by the former PCT referred to as a 'legacy complaints'. In these circumstances, the complaint should be directed to the Department of Health Reviews & Information Team who holds corporate records in this regard. Their contact details are as follows:

Reviews & Information Team
Legacy Management Team
Group Operations and Assurance Directorate
Department of Health
204A Skipton House
80 London Road
LONDON
SE1 6LH

Complaints about any Services Commissioned by NHS Barnsley Clinical Commissioning Group (CCG)

If Barnsley CCG receives a complaint regarding one of our main providers, the Quality Team will support and advise the complainant regarding raising the complaint directly with the provider.

We aim to ensure that our providers supply Barnsley CCG with a summary of their wider patient experience feedback drawn from complaints, concerns, comments, compliments as well as how information about complaints is being used to improve services and delivery of care across the organisations. Promoting a culture of openness and honesty is widely regarded as a prerequisite to improving patient safety and quality of healthcare systems.

Complaints about or Involving another Sector of the NHS and/or the Local Authority/Inter Agency and Multi Agency Complaints

Sometimes complaints will require multi-agency investigation. Local protocols are in operation and in such cases discussions will take place between the relevant complaints managers of the organisations involved as to who will coordinate and lead the response.

Complaints may sometimes need to be redirected to another agency within the NHS or to the Local Authority. This should be done promptly in consultation and with the consent of the complainant, and details of the forwarding process should be recorded.

Complaints about Primary Care Services

Complaints received relating to primary care services are managed by NHS England. If complainants wish to make a complaint about independent contractors including GPs, GP Practices, Pharmacies, Optometrists and Dentists they should be advised, in the first instance, to approach the relevant practice directly with the aim of achieving a local resolution.

However, if they are unhappy with the response to their concerns they can raise the complaint with NHS England as follows:

By post: NHS England
PO Box 16738
Redditch
B97 9PT

Telephone: 0300 311 22 33

E mail: England.contactus@nhs.net

Process for Handling Joint NHS and Local Authority Complaints

When complaints are received about health and local authority services, with the complainant's consent, the organisations involved will co-operate with each other to deal with the aspects of the complaint that relates to them. Both agencies will agree who will lead on the complaint and will aim to provide a single co-ordinated response.

Irrespective of lead responsibility each organisation retains its duty of care to the complainant and must handle its part of the complaint in accordance with its own procedures.

Process for Complex Complaints that Span Several NHS Organisations

Where a complaint is received that spans a number of NHS provider organisations Barnsley CCG will seek assurance that there will be a co-ordinated approach to the handling of the complaint across the various parties involved, prior to passing the complaint to the lead organisation.

Complaints involving Barnsley Clinical Commissioning Group

The National Health Service and Social Care Complaints Procedure has two main stages, Local Resolution and Independent Review where complaints are made locally or the option of referral to the Health Service Ombudsman.

Local Resolution

At the local resolution stage it is the responsibility of Barnsley CCG, or the Providers in whom we commission services to investigate and response to the complaint.

Staff dealing with complaints must maintain accurate and up to date records at all times in accordance with the principles of good record keeping and the complaint report will be held in the Quality File within the Quality Drive.

All staff must complete a Pro Forma when recording verbal complaints, comments or concerns (Appendix A). The completed form must be returned to the Quality Manager and recorded in the Quality File within the Quality Drive.

12. Management of Complaints Process

Complaints may be received verbally over the telephone or during a face-to-face meeting; in writing or by e mail and we will ensure that if the complainant requires additional support in making their complaint support will be offered.

It is recognised that a number of people using the word 'complaint' do not wish to make a formal complaint, but they do require a swift and effective resolution of their issues. If it is unclear whether the issue is a complaint or not the person who has raised this issue should be asked.

Where appropriate, the Patient Experience Designated Nurse will liaise directly with the complainant to agree the approach.

When an approach is agreed, the complainant should be provided with details of how the investigation will take place, and the appropriate NHS timescales will apply. The time limit for responding to a complex complaint will be agreed with the complainant, and any delay will be put in writing with an explanation for the delay and a new response date given. Where necessary, a written response is collated and forwarded to the Chief Nurse within the CCG for approval and signature within the timescale agreed by the complainant.

Barnsley CCG will ensure that complainants are aware of independent advocacy services.

Responses will be written in plain English, free of jargon, and wherever possible, include an apology. All responses will contain:

- An explanation as to what took place
- What actions have been, or will be taken to prevent a recurrence of the incident
- Information about the Parliamentary and Health Service Ombudsman (PHSO)
- All responses will include contact details of a named person who will discuss the complaint and the content of the response letter with the complainant if required.

A meeting can be offered as part of the resolution process to aid the process. Interpreting will be offered for any meeting where this would aid communication and complainants will be informed that they are welcome to bring a friend and/or advocate to any meeting if they wish.

The CCG will ensure that when mistakes happen or if the patient is harmed whilst receiving healthcare, that they receive an appropriate explanation and apology, delivered with sensitivity and recognition of the trauma they have experienced.

13. Recording of a Complaint

All complaints must be recorded for monitoring purposes. This will demonstrate that the CCG is responsive to comments, complaints, concerns and compliments and will provide management information for monitoring the current quality of service provision and to inform future service developments. When a complaint is received it must be recorded on the computer system by the Quality Team and an acknowledgement sent to the complainant within 3 working days.

14. Retention of Records

Complaint files relating to CCG complaints investigations will be held by the organisation for a minimum of 10 years.

15. Persistent Complainants

Barnsley Clinical Commissioning Group is committed to treating all complaints equitably and considers that it is the right of every individual to pursue a complaint. Staff at Barnsley CCG will endeavour to resolve all complaints to the complainant's satisfaction.

However, on occasions, the CCG may consider that a complainant, who persists in making complaints by raising the same or similar issues repeatedly, despite having received full responses to all the issues they have raised, may be identified as a persistent complainant.

Where a complaint is considered persistent in nature, the Chief Nurse will undertake a review to ensure that the complaint procedure has been followed and that no element of the complaint is overlooked or inadequately addressed.

It is our emphasis that the identification of a complaint as persistent should only be used as a last resort and after all reasonable measures have been taken to resolve the complaint.

Complainants that meet the definition of habitual, persistent or vexatious, as deemed by the Chief Nurse will be sent a formal letter or email setting out the ways in which the complainant can use the complaints service, behaviour that is and is not acceptable and how to communicate with the Quality Team.

The letter will also set out the time period that the complainant will be considered habitual, persistent or vexatious and when the procedure will be reviewed and the complainant will be reassessed. **(see Appendix B, Policy for Persistent Complainants and/or request for information)**

16. Second stage- Independent Review- Parliamentary and Health Service Ombudsmen (PHSO)

A complainant who is not satisfied with the outcome of local resolution may ask the Health Service Ombudsmen for a review of the complaint. At the end of local resolution the complainant must be advised of their right to take their complaint to the Health Service Ombudsman.

Complainants, who are dissatisfied with the local response, may in the first instance contact the Designated Nurse who will review any further requests for resolution. If the request is reasonable e.g. further questions arising from a response, then it is likely further work at a local level would be carried out and the issue resolved the level of further work required must be proportionate to the complaint. Further action at the local level should be taken in a timely manner so not to delay any referral to the Ombudsman.

When informed that a complainant has approached the PHSO, Barnsley CCG, will cooperate fully with the PHSO and provide all information requested in relation with the complaint investigation.

Details of the PHSO are as follows:

Parliamentary Services Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP
Tel: 0345 015 4033
E mail: phso.enquiries@ombudsman.org.uk
Website: www.ombudsman.org.uk

17. Judicial Review:

A judicial review is a procedure that enables someone to challenge a decision of a public body, such as an NHS organisation or the Secretary of State for Health, on the basis that the decision is unlawful. A decision might be unlawful if:

- the decision is irrational
- the procedure followed by the decision-maker was unfair or biased
- the decision was in breach of the Human Rights Act, or
- the decision breaches European Community (EC) law.

Judicial review is not a form of appeal. The judge will look at how decisions are made, rather than judging the decision itself. To be entitled to make a claim for judicial review, someone must have direct, personal interest in the action or decision being challenged. Further guidance on judicial review can be found on Her Majesty's Court Service website <http://www.justice.gov.uk>. The right to make a claim for judicial review is derived from administrative law. If someone is considering taking legal action they should get professional legal advice in the first instance.

19. Further Guidance and Support

DIAL

DIAL provides a free, impartial and independent service for people who wish to make a complaint about the NHS or Social Care Services in Barnsley. DIAL can be contacted at <http://www.dialbarnsley.org.uk/contactus>

Being Open

The principles of the Being Open Policy applies to all cases of concerns, complaints and issues raised i.e. being open, responsive, honest and apologetic where appropriate, when explaining what happened to patients and/or their relatives and carers.

HealthWatch

Barnsley Healthwatch is an independent consumer champion created to gather and represent the views of the Public. Healthwatch will play a role at both National and local level and will provide advice, information and signposting service, making sure that the views of the public and people who use the Services are taken into account. The service is available to all those who live and work in Barnsley and all those interested in accessing health and social care services locally. Details are included in '**How to make a Complaint about NHS Services in Barnsley – Appendix C**' or on the website www.healthwatchbarnsley.co.uk.

Independent Conciliation Service:

Barnsley Clinical Commissioning Group commissions an Independent Conciliation service which is offered to complainants and those being complained about, particularly if they are experiencing problems in resolving the complaint. The complainant will be informed of this option in the formal response. It involves using an independent, impartial person to liaise between the conflicting parties, and can only go ahead with the agreement of both parties.

Interpreting Service:

Barnsley Clinical Commissioning Group will arrange for translating and interpreting services to be available to help complainants whose first language is not English or who need to communicate in other ways.

20. Expressions of Gratitude

Barnsley CCG receives expressions of gratitude for services commissioned and other letters of appreciation from patients, carers and relatives. It is in the nature of such communications (which often take the form of greeting cards etc) that little hard evidence is obtained which can be fed into the clinical governance mechanisms.

The Quality Manager will maintain a database of such information which will be used in quarterly performance monitoring reports and the annual reports.

21. Service Improvement and Clinical Governance

Commissioning Managers will use any relevant intelligence gained from complaint information to develop a greater awareness of services commissioned and where these may not meet quality standards to explore and, where appropriate, initiate service improvements.

Whenever concern is expressed about the clinical care provided, the appropriate Service Manager should arrange a prompt re assessment of the Service in light of the complaint.

In line with risk analysis and quality processes the Patient Experience Designated Nurse will, at the conclusion of a complaint, routinely share, as part of quality reports, issues raised, with appropriate colleagues e.g. Contract Managers.

The Quality & Patient Safety Committee will receive quarterly complaint reports as part of governance and performance reporting. The report will identify any trends and patterns arising from complaints, and any subsequent action taken as a result of lessons learned.

If information from complaints and their investigation indicates that patients could be at risk, the matter must be reported immediately to the Chief Officer, Chief Nurse and Medical Director, where appropriate.

As part of our vision to be accountable to the public we will appropriately share trends and learning from complaints with the public.

Barnsley CCG's philosophy for the management of complaints is to recognise their positive value in effecting changes to improve care.

22. Communications/Publicity

Barnsley Clinical Commissioning Group is required to ensure that the right to complain and advice about how to use the Complaints Procedure is well publicised, including details of Healthwatch, DIAL, Independent Conciliation, and the Health Service Ombudsman, should they be dissatisfied with how a complaint had been handled throughout the local resolution.

Information on these services and the NHS Barnsley Clinical Commissioning Group leaflet, 'Useful information on How to Make a Complaint about NHS Services in Barnsley' will be forwarded in response to all written complaints and to all verbal complaints, where appropriate **(Please see 'How to Make a Complaint about NHS Services in Barnsley – Appendix A)**.

23. Performance Monitoring/Reports/Sharing the Learning

Monitoring of Complaints is undertaken in order to extract the learning points which arise from complaints that have been investigated and to identify any serious concerns or themes. The Quality Manager will maintain a database of information gathered from the Complaints Process.

The Designated Nurse will use the information from complaints, together with that obtained from user satisfaction surveys, letters of gratitude and other areas related as part of the information for identifying improvements in service delivery.

The Quality and Patient Safety Committee will prepare a suitably anonymised report for the Patient Council in relation to complaints and compliments to ensure they have a broad awareness of the issues which have been addressed.

The Complaints Report will detail acknowledgement times, the type and causes of complaints, concerns and compliments, trends, themes and action taken, or proposed action for lessons to be learned to prevent recurrence including any changes made as a result.

Learning is disseminated to staff as widely as deemed appropriate and these reports will be shared within NHS Barnsley Clinical Commissioning Group and externally with the main providers to provide learning opportunities, to effect change locally and throughout the health community. Mechanisms for achieving this dissemination will include Team Briefings, Staff Newsletter, posting on NHS Barnsley Clinical Commissioning Group website and Learning Events.

An annual Complaints Report will be produced and summary details included in Barnsley Clinical Commissioning Group Annual Report.

All reports will be rigorously anonymised to avoid patient identification.

24. Dealing with Media Interest

All enquiries from the media must be immediately referred to the communications department ensuring that confidentiality is maintained at all times.

25. Performance Targets

The Barnsley Clinical Commissioning Group aims to acknowledge all complaints within 3 working days.

All complaints to be responded to in the timescale agreed with the complainant.

Complainants will receive an interim holding letter if the originally agreed response timescale will not be met, explaining the reason for the delay and setting a new target date.

26. Equality & Diversity

Equality Act 2010

The purpose of this policy is to ensure that all complaint received about Equality and Diversity issues are handled respectfully and efficiently regardless of individual protected characteristics as outlined in the Equality Act 2010.

27. Review of Complaints Policy and Procedure

A review of the Complaints Policy and Procedure will be undertaken by Barnsley Clinical Commissioning Group every two years or earlier if new NHS Guidance or directions are issued.

Monitoring effectiveness and compliance will be monitored by the Quality and Patient Safety Committee. Effectiveness will be monitored by measuring performance against quality indicators, e.g. timeliness of response, feedback from complaint evaluation forms, progress of any relevant recommendations and actions as a result of complaints investigations.

28. Compliments, Comments and Suggestions

If you are happy with the service you have received from Barnsley CCG or if you have any suggestions that could improve the services we offer we would like to hear from you by contacting the Quality Manager (see contact details below).

29. Further Contact Details:

Chief Officer
NHS Barnsley Clinical
Commissioning Group
Hillder House
49/51 Gawber Road
Barnsley
S75 2PY

Quality Manager
NHS Barnsley Clinical
Commissioning Group
Hillder House
49/51 Gawber Road
Barnsley
S75 2PY

NHS Complaints Advocacy
DIAL
Suite 6 – 9, 3rd Floor
McLintocks,
Summer Lane
Barnsley
S70 2NZ

Parliamentary Health Service
Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP

Barnsley HealthWatch
The Core
County Way
Barnsley
S70 2JW

NHS Barnsley Clinical Commissioning Group

PRO FORMA FOR RECORDING VERBAL COMPLAINTS, COMMENTS OR CONCERNS

Information to be obtained from caller:

Date and time of telephone call:

| |
|--|
| Complainant's name, address and daytime telephone number |
| Patient's name and address, if different (date of birth and GP would also be helpful, if known) |
| Brief details of complaint/incident (including date, time, place and names of people or staff involved and any relevant background information) |
| Is any on the spot action possible which would resolve the matter to the satisfaction of the complainant? If so, give details. Ascertain whether the complainant would be satisfied with the action proposed and whether they require written confirmation |
| If matter judged to be more serious and requiring further investigation, inform complainant of action to be taken e.g. referral to a senior member of staff, and tell them that the senior member of staff will contact them |

Action taken following telephone call:

Has complaint been resolved/referred to senior member of staff (please delete as appropriate)

If so, please specify

.....

Name/Designation:.....

Date/Time:

Please return the form to the Quality Manager, NHS Barnsley CCG, Hilder House, 49/51 Gawber Road, Barnsley, S75 2PY

STAFF OPERATIONAL GUIDANCE FOR HANDLING HABITUAL OR UNREASONABLY PERSISTENT COMPLAINANTS

The following form of words – or a very close approximation – should be used by any member of staff who intends to withdraw from a telephone conversation with a complainant. Grounds for doing so could be that the complainant has become unreasonably aggressive, abusive, insulting or threatening to the individual dealing with the call or in respect of other NHS personnel. It should not be used to avoid dealing with a complainant's legitimate questions/concerns which can sometimes be expressed extremely strongly. Careful judgement and discretion must be used in determining whether or not a complainant's approach has become unreasonable. Attention is drawn to the fuller provisions set out in the body of this procedure for handling unreasonably persistent complainants (see section 15).

FORM OF WORDS

"I am afraid that we have reached the point where your approach has become unreasonable and I have no alternative but to discontinue this conversation. Your complaint(s) will still be dealt with by the CCG in accordance with the NHS complaints procedure. I am now going to put the telephone down but wish to assure you that the situation will shortly be confirmed in writing to you".

FOLLOW-UP ACTION

The incident should immediately be reported to the Chief Nurse or their deputy and agreement reached on future means of communication with the complainant, together with any further action deemed necessary which should also be alerted to the Communication Manager.

**Complaints: Policy for
Unreasonably Persistent
Complainants
and/or
Requests for Information**

1. INTRODUCTION

- 1.1 There may be times when nothing further can be reasonably done to assist a complainant to rectify a real or perceived problem.
- 1.2 Following the introduction of the Freedom of Information Act (2000) from January 2005, the public and press have a right to make requests for information held or owned by Barnsley CCG. The majority of those requests will be processed using the Barnsley CCG Freedom of Information Procedure. However, there may be occasions where the requests for information may be deemed unreasonably persistent (see definition in section 4 below). In those instances, the principles and procedures held within this Policy apply to those requests. Barnsley CCG does not have to comply with repeated or substantially similar requests from the same person other than at reasonable intervals.
- 1.3 In determining arrangements for handling such complainants and/or requests for information staff are presented with two key considerations:-
- To ensure that the Complaints Policy and/or the Freedom of Information Act have been correctly implemented and that no material element has been overlooked or inadequately addressed. In doing so it should be appreciated that even persistent complainants may have issues which contain some substance. The need to ensure an equitable approach is, therefore, crucial.
 - To be able to identify the stage at which a complainant/person requesting information has become unreasonably persistent.
- 1.4 One approach is implementation of this approved policy on how to deal with unreasonably persistent complaints or requests for information. Implementation of this policy would happen only in exceptional circumstances. Information on the handling of unreasonably persistent complainants would be available to the public as part of the material made available on the complaints process.

2. PURPOSE

- 2.1 The purpose of this policy is to give Barnsley CCG a framework to implement and take appropriate action against those complainants and requests for information, which are deemed to be unreasonably persistent.
- 2.2 Any complaints received by the Trust must be processed in accordance with the Barnsley CCG Complaints Policy and requests for information must be processed in accordance with the Freedom of Information Procedure. During this process, Trust staff will inevitably have contact with a small number of individuals who may take up an unwarranted amount of NHS resources. The aim of this procedure is to identify situations where this could be considered unreasonably persistent and to suggest ways of responding to such

situations.

- 2.3 This procedure **should only be used as a last resort** and after all reasonable measures have been taken (i.e. an effort to resolve complaints following the NHS complaints procedures or exhaustion of all reasonable measures under the Freedom of Information Act).
- 2.4 Careful judgement and discretion must be used in applying the criteria to identify potential unreasonably persistent complaints and requests for information and in deciding what action to take in specific cases. This procedure should only be implemented following careful consideration with authorisation of, the Barnsley Clinical Commissioning Group (CCG) Chair and Chief Officer.

3. RISKS OF NOT HAVING THIS POLICY IN PLACE

- 3.1 Staff of the CCG would not understand the agreed definition of unreasonably persistent complainants or persons requesting information.
- 3.2 Staff of the CCG would not be aware of their responsibilities or the action required in the event of such behavior.
- 3.3 Increased levels of stress may be caused to staff who are required to deal with persistent complainants.
- 3.4 Patients and the public would be unaware of the definitions adopted by the CCG in relation to unreasonably persistent complainants or persons requesting information.

4. DEFINITION OF UNREASONABLY PERSISTENT COMPLAINTS AND/OR REQUESTS FOR INFORMATION

- 4.1 Complainants or persons requesting information (and/or anyone acting on their behalf) may be deemed to be unreasonably persistent where current or previous contact with them shows that they have met two or more (or are in serious breach of one) of the criteria set out below in the following paragraphs.
- 4.2 Persisting in pursuing a complaint where the NHS complaints procedure has been fully and properly implemented and exhausted. For example, where investigation is deemed to be 'out of time' or where the Parliamentary Health Service Ombudsman has declined a request for independent review.
- 4.3 Persisting in pursuing a request for information where the Freedom of Information Act Procedure has been fully and properly implemented and exhausted.
- 4.4 Changing the substance of a complaint or persistently raising new issues or seeking to prolong contact by unreasonably raising further concerns or questions upon receipt of a response whilst the complaint/request is being

dealt with. Care must be taken not to disregard new issues, which differ significantly from the original complaint/request - these may need to be addressed separately.

- 4.5 Unwilling to accept documented evidence of treatment given as being factual (e.g. drug records, GP manual or computer records, nursing records) or deny receipt of an adequate response despite correspondence specifically answering their questions/concerns. This could also extend to include those persons who do not accept that the facts can sometimes be difficult to verify after a long period of time has elapsed.
- 4.6 Focusing on a trivial matter to a degree which is out of proportion to its significance and continuing to focus on this point. It should be recognised that determining what is trivial can be subjective and careful judgement must be used in applying this criterion.
- 4.7 Physical violence has been used or threatened towards staff or their families/associates at any time. This will, in itself, cause personal contact to be discontinued and will thereafter, only be pursued through written communication. All such incidents should be documented and reported using the Barnsley CCG Policy and Procedure on the Reporting, Recording and Investigation of Accidents and Incidents, and notified as appropriate, to the police.
- 4.8 Had an excessive number of contacts with the CCG when pursuing their request or complaint, placing unreasonable demands on staff. Such contacts may be in person, by telephone, letter, fax or electronically. Discretion must be exercised in deciding how many contacts are required to qualify as excessive, using judgement based on the specific circumstances of each individual case.
- 4.9 Have harassed or been abusive or verbally aggressive on more than one occasion towards staff - directly or indirectly - or their families and/or associates. If the nature of the harassment or aggressive behaviour is sufficiently serious, this could, in itself, be sufficient reason for classifying the complainant as unreasonably persistent. Staff must recognise that complainants may sometimes act out of character at times of stress, anxiety or distress and should make reasonable allowances for this. All incidents of harassment or aggression must be documented in accordance with Barnsley CCG's Policy and Procedure on the Reporting, Recording and Investigation of Accidents and Incidents.
- 4.10 Are known to have electronically recorded meetings or conversations without the prior knowledge and consent of the other parties involved. It may be necessary to explain to a complainant at the outset of any investigation into their complaint(s) that such behaviour is unacceptable and can, in some circumstances, be illegal.

- 4.11 Display unreasonable demands or expectations and fail to accept that these may be unreasonable once a clear explanation is provided to them as to what constitutes an unreasonable demand (i.e. insisting on responses to complaints or enquiries being provided more urgently than is reasonable or recognised practice, presenting similar or substantially similar requests for information).

5. PRINCIPLES

- 5.1 Barnsley CCG will continue to adhere to all the principles set out in its Complaints Policy & Procedure.
- 5.2 Barnsley CCG will continue to comply with the statutory requirements laid down in the Freedom of Information Act 2000.
- 5.3 Barnsley CCG and its staff will manage unreasonably persistent complaints or requests for information in accordance with this document.

6. ROLES AND RESPONSIBILITIES

6.1 Responsibility of the CCG Quality & Patient Safety Committee

It is the responsibility of the Committee to ensure that an up-to-date Policy and Procedure for Unreasonably Persistent Complaints and/or Requests for Information is in place.

6.2 Responsibility of Chair and Chief Officer

It is the responsibility of the Chair and Chief Operating Officer to determine whether decisions on individual cases should be delegated to a nominated officer. The Chief Officer, or the officer nominated will ensure implementation of the agreed actions.

6.3 Responsibility of the Chief Nurse

It is the responsibility of the Chief Nurse to:-

- (1) Ensure that the Policy is implemented
- (2) Ensure that arrangements are in place to monitor compliance with the Policy
- (3) Ensure that reports are submitted as appropriate to the Quality and Patient Safety Committee.

6.4 Responsibility of the Quality Manager and Freedom of Information Officer

The Quality Manager and Governance, Assurance & Engagement Facilitator will have responsibility for:-

- (1) the identification of unreasonably persistent complainants or persons

- requesting information in accordance with the definition laid down within the Policy;
- (2) the documentation of evidence;
 - (3) the implementation of actions agreed by the organisation.

7. PROCEDURE

- 7.1 When complainants/persons requesting information have been identified as unreasonably persistent, in accordance with the above criteria, the CCG Chair and Chief Officer (or their nominated deputy) will decide what action to take. The Chief Officer (or deputy/representative) will implement such action and notify the individual(s) promptly, and in writing, the reasons why they have been classified as unreasonably persistent and the action to be taken.
- 7.2 This notification must be copied promptly for the information of others already involved such as practitioners, conciliator, Independent Complaints Advocacy Service, Member of Parliament, advocates etc. Records must be kept, for future reference, of the reasons why the decision has been made to classify as unreasonably persistent and the action taken.
- 7.3 The Barnsley CCG Chair and Chief Officer (or delegated deputies/representatives) may decide to deal with unreasonably persistent complainants in one or more of the following ways:-
- 7.3.1 Once it is clear that one of the criteria in section 4 above has been seriously breached, it may be appropriate to inform the individuals, in writing, that they are at risk of being classified as unreasonably persistent. A copy of this procedure should be sent to them and they should be advised to take account of the criteria in any future dealings with the Trust and its staff. In some cases it may be appropriate, at this point, to copy this notification to others involved and suggest that complainants seek advice in taking their complaint further (e.g. via the Independent Complaints Advocacy Service, Parliamentary Health Service Ombudsman, Patient Advice and Liaison Service);
- 7.3.2 NHS Barnsley CCG should try to resolve matters before invoking this procedure, and/or the sanctions detailed within it, by drawing up a signed agreement with the complainant/persons requesting information (if appropriate, involving the relevant practitioner) setting out a code of behaviour for the parties involved, if the CCG is to continue dealing with the complaint. If this agreement is breached, consideration would then be given to implementing other actions as outlined below;
- 7.3.3 NHS Barnsley CCG can decline further contact either in person, by telephone, fax, letter or electronically, or any combination of these, provided that one form of contact is maintained. Alternatively, a further contact could be restricted to liaison through a third party. A suggested statement has been prepared for use if staff are to withdraw from a telephone conversation. This is shown in the attached staff operational guidance.

- 7.3.4 Notify complainants/persons requesting information in writing that the CCG Chair or Chief Officer (or delegated deputies/ representatives) has responded fully to the points raised and has tried to resolve the issues but there is nothing more to add and continuing contact on the matter will serve no useful purpose. This notification should state that that correspondence is at an end and that further communications will be acknowledged but not answered;
- 7.3.5 Inform complainants/persons requesting information that in extreme circumstances the CCG reserves the right to refer unreasonably persistent complaints to the organisation's solicitors/the Information Commissioner and/or, if appropriate, the Police;
- 7.3.6 Temporarily suspend all contact, whilst seeking legal advice or guidance from NHS England, the Parliamentary Health Service Ombudsman, Information Commissioner's office or other relevant agencies.
- 7.4 Once classified as unreasonably persistent, there needs to be a mechanism for withdrawing this status if, for example, a more reasonable approach is subsequently demonstrated or if the subject submits a further complaint/request for information for which the normal complaints procedures or Freedom of Information Act procedures would be appropriate.
- 7.5 Staff should have already used careful judgement and discretion in recommending or confirming unreasonably persistent status and similar judgement/discretion will be necessary when recommending that such status should be withdrawn. Where this appears to be the case, discussions will be held with the BCCG Chair and Chief Operating Officer (or their delegated deputies/representatives) and, subject to their approval, normal contact and procedures will be resumed.

8. MONITORING COMPLIANCE

- 8.1 The Chief Nurse will ensure that applications are reported through the Quality and Patient Safety Committee and the CCG will undertake regular monitoring of the application of this procedure on a half-yearly basis.

9. REFERENCES

- 9.1 NHS Barnsley CCG Complaints Policy and Procedure.
- 9.2 Freedom of Information Act 2000.

10. REVIEW

- 10.1 This Policy will be reviewed two years after the date of approval.

11. APPENDICES

- 11.1 Appendix 1 – Operational guidance for handling habitual or unreasonably persistent complainants.

Information on How to Make a Complaint about NHS Services in Barnsley

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Barnsley

Clinical Commissioning Group

Putting Barnsley People First

If you need this leaflet in a different language, audio, large print or Braille please email us on barnccg.comms@nhs.net or call 01226 433721.

إذا كنت تريد الحصول على هذه النشرة بلغة مختلفة، أو على شكل تسجيل صوتي، أو بحروف أكبر أو بحروف بريل فارجاء مراسلتنا بالبريد الإلكتروني على barnccg.comms@nhs.net أو اتصل بنا على الرقم 01226 433721.

اگر می‌خواهید این کتابچه را به زبان‌های دیگر یا به صورت صوتی، نسخه چاپی بزرگ یا با خط بریل داشته باشید، لطفاً به نشانی barnccg.comms@nhs.net ایمیل بفرستید یا با شماره 01226 433721 تماس بگیرید.

نمگر دفتان همون نام کتیبه به زمانه‌کاتی تر یا به شیوه‌ی دهنگی، بهرگی چاپی گهورنتر یا به شیوه‌ی خمتی بریل، همتان بیت، تکایه به ناویشانی نینتور نیی barnccg.comms@nhs.net نیمیلی بکمن یا به ژماره تلهفونوی 01226 433721 پیویندی بگرن.

如需此单张的其他语言版本、语音文件、大字版本或盲文版本，请发电子邮件至barnccg.comms@nhs.net 或致电 01226 433721.

W celu otrzymania niniejszej ulotki w innym języku, w wersji audio, w wersji napisanej dużą czcionką bądź w wersji napisanej pismem brajla prosimy przesłać stosowną prośbę pocztą elektroniczną na adres barnccg.comms@nhs.net lub zatelefonować pod numer 01226 433721.

اگر آپ کو یہ معلومات نامہ کسی دوسری زبان، آڈیو، بڑے حروف یا نابینا لوگوں کے لیے بناتی گئی لکھائی میں چاہیے تو براہ مہربانی ہمیں barnccg.comms@nhs.net پر ای میل کریں یا ہم سے فون نمبر 01226 433721 پر رابطہ کریں۔

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Comments, Compliments and Complaints

1. INTRODUCTION

This leaflet explains what to do if you wish to make a comment, compliment or complaint about any aspect of NHS services in Barnsley.

The structure of the NHS is complex and it is not always easy to know where to go if you have a concern. This leaflet will help you to understand the different organisations which provide NHS care in Barnsley and point you in the right direction of who to contact.

NHS Barnsley Clinical Commissioning Group (CCG) commissions (buys) health services for the people of Barnsley from the following organisations:

- Local hospital services from Barnsley Hospital NHS Foundation Trust (BHNFT)
- Community health services e.g. district nursing from South West Yorkshire Partnership Foundation Trust (SWYPFT)
- Mental health services from SWYPFT
- A small number of other organisations (or 'providers')

In general, any comments, compliments or complaints should be sent directly to the organisation providing the service you have accessed. However, Healthwatch can also help you and

if your complaint does go to the wrong organisation, it will be re-directed to ensure it still gets investigated.

There is also the option to use their Text facility. Text the words 'call back' with your name and mobile number to 07624 813 005 and the PHSO will call you back.

10. PARLIAMENTARY AND HEALTH SERVICE OMBUDSMAN (PHSO)

The PHSO is an independent organisation which helps to resolve complaints about the NHS and the service is free. They will only usually only investigate a complaint after the NHS has had the chance to resolve the concerns first.

The PHSO's aim is to provide an independent, high quality complaint handling service that rights individual wrongs, drives improvements in public services and informs public policy.

The PHSO usually require individuals to contact them within a year of first becoming aware of the problem. If it was more than a year ago the PHSO may still be able to help you providing there were good reasons for the delay.

The contact details for the PHSO are:

Post: Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP

Telephone: 0345 015 4033

Website: www.ombudsman.org.uk

We are committed to ensuring that any concerns or complaints about NHS services are responded to effectively and in a timely way to ensure high quality care is the priority for the people of Barnsley.

All concerns or complaints about any services provided by the organisations above should be sent directly to them (details of how to do this can be found in this leaflet). The CCG monitors the number and type of complaints received by the above organisations to ensure that any persistent issues are effectively addressed.

2. DO I HAVE THE RIGHT TO MAKE A COMPLAINT?

Yes. If you are unhappy with the treatment or service you or a member of your family has received from the NHS you have the right to make a complaint, have it investigated and receive a response in a reasonable timeframe.

It is important to note that all NHS organisations will accept complaints in either written or verbal format.

3. WILL MY CARE OR MY RELATIVES' CARE BE AFFECTED?

No. If you make a complaint you will not be discriminated against in any way and the information you share will be treated in confidence and with sensitivity.

4. CAN I MAKE A COMPLAINT ON BEHALF OF SOMEONE ELSE?

Yes. If you are complaining on behalf of someone else, the organisation receiving the complaint will need to confirm that you have consent from the person involved to pursue the complaint on their behalf so that details of their care can be shared with you.

5. PRIMARY CARE SERVICES

'Primary Care' refers to the following services which are accessed in the community:

- GP Practice
- Dental Practice
- Pharmacy
- Optician

To make a comment, compliment or complaint, you are advised in the first instance to approach the relevant practice directly to see if they can resolve your concerns. You can ask the Practice Manager, receptionist or other member of staff within the practice who will be able to help you.

If you do not feel that you can approach the practice directly, or if you have already tried this but still have concerns, you will need to make your complaint to NHS England (who commissions these services) through their Customer Contact Centre.

Post: Healthwatch Barnsley
The Core
County Way
Barnsley
S70 2JW

Telephone: 01226 320100

Email: healthwatch@vabarnsley.org.uk

Website: www.healthwatchbarnsley.co.uk

DIAL

DIAL offer advocacy services to help people make a complaint and can also provide advocates to attend meetings with or on behalf of patients and service users.

The contact details for DIAL are as follows:

Post: NHS Complaints Advocacy
DIAL Barnsley
Suite 6-9
3rd Floor, McLintocks
Summer Lane
Barnsley
S70 2NZ

Telephone: 01226 240273

Email: info@dialbarnsley.org.uk

If you have a complaint about the CHC process then please contact the CCG's Quality team:

Post: NHS Barnsley Clinical Commissioning Group
Hillder House
49/51 Gawber Road
Barnsley
S75 2PY

Telephone: 01226 433772

Email: safehaven.riskmanagement@nhs.net

Website: <http://www.barnsleyccg.nhs.uk/>

9. OTHER AGENCIES WHO CAN HELP YOU DURING THE COMPLAINTS PROCESS

Healthwatch Barnsley

Healthwatch Barnsley is an independent consumer champion created to gather and represent the views of the public. Healthwatch will play a role at both national and local level and will make sure that the views of the public and people who use services are taken into account. Healthwatch Barnsley also works closely with the CCG to ensure that any trends arising from patient experience feedback are taken into account. The contact details for Healthwatch Barnsley are as follows:

The details of the Customer Contact Centre are as follows:

Post: NHS England
PO Box 16738
Redditch
B97 9PT

Telephone: 0300 311 22 33

Email: england.contactus@nhs.net

Website: www.england.nhs.uk

6. BARNSELY HOSPITAL NHS FOUNDATION TRUST

If you would like to make a comment, compliment or complaint regarding Barnsley Hospital NHS Foundation Trust we would in the first instance advise you to contact the Patient Advice and Liaison Service (PALS) and they can be contacted on:

Telephone: 01226 432330

Post: PALS
Barnsley Hospital NHS Foundation Trust
Gawber Road
Barnsley
S75 2EP

Email: barnsleypals@nhs.net

The PALS service offers confidential advice, support and information on health related matters. They provide a point of contact for patients, their families and their carers. Anyone can use the PALS service for any queries they may have.

If you would like to submit a formal complaint to the hospital you will need to contact the Complaints Team directly and their details are as follows:

Post: Barnsley Hospital NHS Foundation Trust
Gawber Road
Barnsley
S75 2EP

Telephone: 01226 432571

Email: bhnftcomplaints@nhs.net

Website: www.barnsleyhospital.nhs.uk

7. SOUTH WEST YORKSHIRE PARTNERSHIP NHS FOUNDATION TRUST

South West Yorkshire Partnership NHS Foundation Trust provides mental health services and general community services in Barnsley. Services are mostly provided in community settings with some hospital care.

If you would like to make a comment, compliment or complaint regarding any service that you or a relative has received from South West Yorkshire Partnership NHS Foundation Trust

please contact the Customer Services Team.

The Customer Services Team provides information, advice and support for people who use Trust services, their families, carers and the public and they can be contacted in any of the following ways:

Post: Customer Services
South West Yorkshire Partnership NHS
Foundation Trust
Block 10
Fieldhead
Ouchthorpe Lane
Wakefield
WF1 3SP

Freephone: 0800 587 2108

Email: customer.servicesSWYT@nhs.net

Website: www.southwestyorkshire.nhs.uk

8. CONTINUING HEALTH CARE FUNDING

NHS Continuing Healthcare (CHC) is a package of care that is arranged and funded solely by the CCG for individuals who are not in hospital but have complex ongoing healthcare needs