

## **Budleigh Salterton & District Hospiscare**

### **Complaints Policy**

#### **Scope**

This policy applies to all aspects of BS&DH's activity but does not apply to complaints by or about Volunteers, which will be handled under BS&DH's Policy for Managing Volunteers.

It is designed to manage, respond to and resolve complaints effectively, leaving people with a sense of being heard, responded to and, where possible, resolving their concern as soon as possible in the process. Often this may also assist families in supporting them during the difficult time after the loss of a loved one.

#### **General Principles**

Complaints are recognised as opportunities to review and improve our services. We accept that there may be occasions when our services fall below expectations and people may wish to make a complaint or raise a concern.

A complaint is defined as an expression of dissatisfaction about an act, omission or decision of the Charity, either verbal or written, which requires a response.

Complaints, informal or formal, will be dealt with in a courteous and sympathetic manner and where possible resolved at the earliest opportunity as many of our patients and/or their families will often be distressed due to the nature of the situation which they may find themselves having to face.

Budleigh Salterton & District Hospiscare (BS&DH) will investigate all complaints within the timescales outlined in this Complaints Policy with courtesy, honesty, impartiality and confidentiality. Our aim will be to respond to complaints as soon as possible, as evidence indicates that a swift and courteous initial response helps people achieve resolution without the need to move into a formal complaint process. We will, however, make it clear to the complainant that they have the option of pursuing a formal complaint and they will be supported in engaging in that process if they choose to follow it.

#### **Responsibilities**

The Board of Trustees is responsible for ensuring the procedure is followed for complaints and for scrutinising, approving and monitoring this Complaints Policy.

The Board of Trustees is responsible for ensuring the Policy is implemented and reviewed periodically.

Staff, Trustees, Volunteers and other persons representing BS&DH are responsible for responding courteously to complaints and making service users aware of BS&DH's approach.

## **Equality Impact Statement**

This Policy has been screened to assess the likely impact on any of the protected characteristics in the Equality Act 2010, and no potential impacts were identified. This is further explained and defined in the BS&DH Safeguarding Policy.

## **Accountability**

Accountability for managing complaints lies with the Board of Trustees.

The Board delegates the oversight of complaints to the Fundraising and Support Manager or, if the complaint relates to the Fundraising and Support Manager, the Chairman. If the complaint relates to a clinical matter, it will be referred to Hospiscare Exeter, East and Mid Devon ('Hospiscare') who is responsible for all aspects of the delivery of clinical services and complaints relating to them.

## **Reviewing this Policy**

This policy and procedures will be reviewed following any major complaint and, in any event, every year; this will include checking telephone numbers, accuracy of personnel details, and any updates required by a change in the Chairman or local or national policy.

## **Complaint and Resolution Procedure**

### **1. Definition of a complaint**

A complaint is defined as an expression of dissatisfaction about an act, omission or decision of BS&DH, either verbal or written, which requires a response.

### **2. Aim and Scope of Procedure**

Where possible the complaint will be resolved at an early stage and as quickly as possible.

**Stage 1:** We will try to resolve the complaint informally.

**Stage 2:** If informal resolution is unsuccessful, or unacceptable to the complainant, a formal complaint will be registered and acknowledged within two working days.

**Stage 3:** The complaint will be investigated and the complainant will be informed of the outcome of the investigation within fourteen calendar days.

**Stage 4:** If the complainant remains unsatisfied they will be advised of appeal procedures.

At all times we will:

- ensure the complaints procedure is clear, easily understood and accessible
- respond in a personal way in the first instance to seek early resolution – preferably in person or if not possible by telephone
- respond within designated timescales
- be fair to both complainant and BS&DH personnel
- maintain the confidentiality of the complainant as far as possible
- co-operate fully with any appropriate regulatory body.
- in all cases, confirmation of the conversation should be recorded in writing

### **Informal Complaint Resolution - Stage 1**

**Clinical complaints:** A member of staff, Trustee, Volunteer or other person representing BS&DH receiving a complaint or expression of dissatisfaction about the treatment, care or experience of a clinical service should immediately refer the matter to the Director of Clinical Services at Hospiscare in Exeter and ensure that the complainant is notified that the matter is being referred to Hospiscare, as it is Hospiscare who is responsible for all aspects of the delivery of clinical services and complaints relating to them. If the matter is referred by phone or otherwise not in writing, an email confirmation of the conversation should be sent to the Director of Clinical Services by the person receiving the complaint.

If the issue arises outside of normal working hours and the person receiving the complaint requires further immediate support, then they should contact the Hospiscare representative on call at the hospice in Exeter.

**Non-clinical complaints:** The member of staff, Trustee, Volunteer, or other person representing BS&DH receiving a complaint, or expression of dissatisfaction on any matter other than one relating to clinical services should make every attempt to act on the feedback swiftly and resolve the complaint as soon as possible, within the bounds of their role and responsibility. It is recognised that prompt direct communication is the best way of dealing with many complaints and ensuring they do not escalate further. If they are unable to resolve the situation they should refer the matter to the Fundraising and Support Manager or, if the matter relates to the Fundraising and Support Manager or s/he is unavailable, the Chairman.

The complainant should be communicated with in a clear, timely and open way. The complainant should be assured that raising the concern will not compromise treatment and care in any way or, regarding non-clinical issues, their relationship with BS&DH.

Complainants will be encouraged to give as much information regarding their concern verbally or in writing, so that BS&DH can be certain that they have understood all elements and the nature of the complaint.

The Fundraising and Support Manager or, if it relates to the Fundraising and Support Manager, the Chairman should record the complaint in writing, how it was dealt with and any resolution. This record should be considered by the Board of Trustees at its next meeting.

At any time someone raising a concern can indicate their wish for this to be reviewed as a formal complaint and if this is the case, it will be treated as such under the procedure below.

### **Formal Complaints**

All complaints relating to clinical matters will continue to be dealt with by Hospiscare.

A formal complaint about any non-clinical matter, verbal or written, should be managed by the Fundraising and Support Manager or, if it relates to the Fundraising and Support Manager, the Chairman.

A complaint will only be considered as a formal complaint if it is made within 12 months of the occurrence of the incident, although discretion can be made in circumstances where there may be a valid reason for the delay and it is still possible to investigate the complaint.

## **Stage 2**

The concern or complaint will be recorded and acknowledged within two working days. The responsible person will offer to discuss the matter with the person raising the concern at an agreed time, offering a resolution meeting in person or by telephone.

If the complaint is resolved following this meeting/telephone call, a letter should be sent to the complainant outlining the agreed resolution and giving them the opportunity for it to be investigated further if they are not satisfied. This letter should include a copy of this complaints procedure.

## **Stage 3**

If a complaint is unresolved at Stage 2, or if the Fundraising and Support Manager, or if it relates to the Fundraising and Support Manager, the Chairman decides that the complaint should be further investigated they will arrange and oversee an investigation.

All findings will be fully documented. Any communication with the complainant will be recorded. A full response (where possible) or an assessment on progress will be sent to the complainant within 14 working days. This letter will confirm that their complaint has been fully understood and investigated. The letter will contain an apology (if appropriate) and details of any action to prevent re-occurrence of recognised deficiencies in practice or services. If a previous resolution meeting has been held and any actions taken a record of these will be reflected in any communications.

The letter may state that the investigation supports the action or activity undertaken by BS&DH. The complaint will be recorded for information.

## **Stage 4**

**Clinical complaints:** Complainants who are not satisfied with the response from Hospiscare may contact the Parliamentary and Health Service Ombudsman.

Parliamentary and Health Service Ombudsman  
Millbank Tower  
Millbank  
London  
SW1P 4QP

Email: [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk)

Customer Helpline: 0345 015 4033

**Non-clinical complaints:** Complainants who are not satisfied with the response can request that their complaint be reviewed by the Chairman or, if it has already been reviewed by the Chairman, the Board of Trustees at its next meeting, in which case a formal written response should be sent by the Chairman or Board of Trustees after proper consideration of the matter.

## **3. Recording Complaints**

A full written record of any concern or complaint must be made as soon as is practically possible after it has been made.

#### 4. Reporting Complaints

The Secretary is responsible for ensuring a register of formal complaints is kept. The record of all complaints not previously considered by the Board of Trustees will be reported to the Board of Trustees for consideration at their next meeting. Where appropriate, clinical complaints are reviewed by the Hospiscare Quality Assurance and Improvement Committee.

The appropriate regulatory body will be made aware of formal complaints and their outcomes as appropriate.

#### 5. Staff Support and Training

It may be difficult for staff to have a complaint made against them and they should receive support from their manager or another colleague via supervision. The staff member should be kept fully aware of the progress of any inquiry, receive feedback about their performance, address training or development requirements, be fully informed of the outcome and given the opportunity to ask questions.

The Fundraising and Support Manager will be provided with any training necessary to meet his/her responsibilities under this Policy.

#### Change Record

Date of Change:	Change d By:	Comments:
4 August 2020		Policy approved by the Trustees
7 December 2021		Policy reviewed and updated by Trustees
24 Jan 2023		Policy approved by the Trustees