LISTENING TO SERVICE USERS COMPLAINTS

Cygnet Health Care is committed to providing an accessible, fair and effective means of communicating any complaints they may have regarding Cygnet’s services. For Cygnet it provides a valuable tool for improving our services.

- It is the personal responsibility of every individual referring to this policy to ensure that they are viewing the latest version; this will always be published on Cygnet’s SharePoint.

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1. INTRODUCTION
This policy aims to ensure any verbal or written complaints about Cygnet services are managed according to best practice. Cygnet aims to provide responsive high quality services by actively seeking the views of those using services. Cygnet will ensure that services are service user focused; that they act to put things right where there are any complaints and that service users and relatives are encouraged to speak openly, freely and with confidence that their treatment or care will not be prejudiced.

Cygnet recognises that there may be occasions when those receiving services or those related to such a person may be unhappy with what they have received. Therefore, Cygnet will ensure all complaints or expressions of dissatisfaction are pursued with lessons being learned, changes made and an apology offered if necessary.

1.1 Cygnet’s aims
This policy is designed to be flexible and to involve a negotiated approach designed to ensure each verbal or written complaint is managed in a way that meets the needs both of the individual and the circumstances they are discussing. The following key principles underpin the approach to:

- Ensure all service users understand their rights with regard to making complaints.
- Ensure that the process of making a complaint or providing feedback is prominently displayed within the service environment, and made accessible to all service users, their carers and representatives, and to the public.
- Ensure all service users and persons acting on their behalf are supported in raising a complaint or concern.
- Ensure all verbal and written complaints are resolved as quickly and directly as possible.
- Ensure all verbal and written complaints are logged on to the Complaints Log on ePRIME/DATIX as soon as possible after the complaint is received.
- Ensure suggestions for improvement are cascaded to staff and discussed during governance meetings.
- Enable staff to respond to the above in a flexible, customer-focused and proportionate manner.
- Ensure complaints are investigated as far as reasonably practicable and resolved to the satisfaction of the service user.
- Minimise risks, inform organisational learning and continuous improvement.
- Maximise service user/carers/relative satisfaction.

1.2 Unit complaint file
The Unit Manager will arrange for completion of the complaints detail record form (Appendix 1) and maintain a file in response to complaints received and related investigations.

1.3 ePRIME/DATIX Complaints Log
Cygnet records all complaints on the ePRIME system using the ‘add complaint’ screen (Appendix 2). Information from Appendix 1 will need to be transcribed onto
ePRIME (this must be completed by the 2nd of the following month) noting the key issues of the complaint. Within Bury, Sheffield and Woking, complaints will be recorded onto the complaints module by signing into DATIX and using the ‘add a new complaint’ screen (Appendix 2). Once populated onto DATIX there is the function to merge templates. This function can be used for the creation of letters and responses to the complainant. The letters will include information that was entered onto DATIX and mirror that of Appendix 3.

Local units are responsible for reviewing their own complaints regularly through Integrated Governance in order to identify any trends and opportunities to improve service users’ experience. The result of local audits and learning outcomes from complaints, will be presented at the unit’s Local Board Meetings. The Corporate Risk Manager (CRM) reviews all complaints across the group on a quarterly basis through the quality and safety report.

1.4 Other forms of feedback – community meetings etc.
All services will hold regular meetings for their service users; the minutes of these meetings will reflect the nature of discussions and issues raised at such meetings. Suggestion boxes will also be an avenue for service users to raise initial concerns or make suggestions. These routes form an integral part of feedback gathering and will be used to inform services.

1.5 Advocacy
Service users should be encouraged to involve advocacy services if they feel unable to articulate a complaint/concern for submission. Verbal complaints will be managed the same as written ones but if advocacy services are involved the complaint should be presented in writing and advocacy services will be available to assist with this.

2. COMPLIMENTS AND CONCERNS
Cygnet welcomes thanks and complimentary remarks from patients, relatives, the general public and other professionals. Compliments can be given to all staff members, verbally, face to face, in writing or email or via the telephone. Unit Managers should ensure that written compliments are captured on ePRIME/DATIX. This can be achieved by selecting the category type as ‘compliment’ and recording the compliment within the detail section. Compliments reflect the positive work of all staff and positive feedback should be shared with staff at an appropriate setting and minuted. Compliments will be shared at Local Board rounds and also provides useful evidence for CQC.

2.1 Local and contemporaneous resolution by staff to address concerns
Cygnet staff are encouraged and expected to discuss concerns raised to facilitate immediate action and speedy resolution of issues, without the need to progress further through the complaints process.

Responding to, and/or resolving issues on the spot swiftly and as close to the point of care delivery as possible is always preferable. This local action may enable complete resolution which can only result in a more positive experience for the service user.
3. PROCESSES FOR MANAGING FEEDBACK

Those wishing to express a complaint in the first instance will communicate this verbally or in writing to the Unit Manager. On receipt of such a complaint the Unit Manager will:

- Clarify the complaint to ensure shared understanding of the key issues to investigate and what the complainant wishes, which may sometimes be an apology, or may require some negotiation.
- Understand what the complainant wishes to achieve.
- Establish what needs doing to address the matters raised and the associated time scales for any actions.
- Implement a resolution plan dependent on the nature of the complaint; ensuring any response is proportionate to the issues raised.
- Within 48 hours provide the complainant with an acknowledgment letter confirming receipt of the complaint/actions taken etc. unless able to resolve immediately in which case a letter will be sent to confirm the resolution.
- Ensure if any complaint relates to a staff member then the individual concerned is informed.

3.1 Complaint responses

There are a wide range of responses to complaints which have either been: fully or partially upheld, not upheld or withdrawn. In deciding the most appropriate remedial action, consideration should be given to the nature of the complaint. Where appropriate, the complainant must be reassured that lessons have been learned and given reassurance that remedial measures have been established to prevent recurrence.

3.2 Complaints relating to other investigations, part of disciplinary processes, professional misconduct or criminal offences

If any complaint received by Cygnet indicates a need for referral to the following:

- Investigation under disciplinary procedure.
- A professional regulatory body.
- An independent inquiry into a serious incident.
- An investigation as to a criminal offence.
- An investigation where any fraud is an issue.
- A safeguarding authority.

This will be overseen by the Unit Manager.

3.3 Complaints relating to serious incidents and safeguarding concerns

In the case of a serious incident review investigation the complaints process will be held in abeyance until any investigation is completed. The complainant should be informed that this is the case and advised to await the outcome of the investigation.

Complaints that are received that raise issues in relation to safeguarding children or adults should also report this as an incident and inform local safeguarding.

3.4 Complaints – time limits

Complaints should be made within 12 months of the date within which the matter occurred. However, it is at Cygnet’s discretion to investigate beyond this period and
Cygnet may do so if there was a good reason why the complaint was received outside this time frame.

Timescale for making a complaint:
- At any time during a period of care.
- Following a period of care and up to 12 months after the incident occurred.
- Within 6 months of the complainant becoming aware of the incident providing the total time scale is within 12 months of the incident.

3.5 Internal reviews
Complaints are formally acknowledged in writing within 48 hours of receipt. This letter should advise that if an answer can be given within 5 working days this will be done in writing but if a more extensive investigation is required, either a response or extension of time will be given in writing within 20 working days.

Action is initiated immediately to:
- Meet with the complainant, discuss the nature of the complaint and confirm exact points to explore.
- Investigate the complaint.
- Agree a resolution.

The complainant is advised in writing of the action taken and the proposed resolution.

The complaint detail record form (Appendix 1) is completed in full and retained in an orderly manner in a filing system designed for the purpose.

The complaint handling procedure is divided into three stages:
Stage 1 - Local resolution up to Unit Manager level.
Stage 2 - Operations Director review.
Stage 3 - Chief Operating Officer review.

3.6 Operations Director review
Where the complainant believes the complaint has not been resolved to their satisfaction, he or she is invited by the Unit Manager to write to the Unit’s Operations Director.

In most cases it is possible to agree a resolution to the satisfaction of the complainant at Stages 1 or 2 and every effort is made to achieve this.

3.6.1 Timescales for resolution at stages 1 and 2
- If the complaint can be fully answered to our and the service user’s satisfaction within 5 days a letter confirming our findings should be sent.
- Wherever possible a documented full response is provided to the complainant within 20 working days.
- Where a resolution cannot be agreed and the investigation is still in progress a holding letter explaining the delay is sent to the complainant after the first 20 days and after each subsequent 20-day period.

Appendix 3 provides templates for acknowledgment, holding and response letters.
3.6.2 Stage 3
After exhausting the arrangements in place at stages 1 & 2 of the complaints handling procedure and where the complainant feels the matter has not been resolved to their satisfaction, the complainant may exercise their right to request a review by the Chief Operating Officer.

4. COMPLAINANT SATISFACTION AND LEARNING OUTCOMES
Upon resolution of a complaint, the complainant is encouraged to indicate their level of satisfaction. This can one of the following: ‘Satisfied with outcome’; ‘not satisfied with outcome’; ‘not satisfied with outcome and taking further action’ (please see points 5 to 7 for further information). The satisfaction level can be recorded within the complaint record on ePRIME and DATIX. Resolved complaints, their satisfaction level and learning outcomes will be discussed at local Integrated Governance meetings.

The opinions of those who use and access our services provides valuable insight and an opportunity to review practices as part of continual improvement. Any recommendations that have been highlighted as part of the investigation should be linked to the actions to prevent recurrence. If there are wider implications to the unit, then these recommendations should be considered as part of the units Overarching Local Action Plan to promote learning.

Complaint satisfaction rates, trends and learning outcomes will be explored within the quarterly quality and safety report, as well as unit quality dashboards for local board rounds in order to drive continual improvement and shared learning.

5. THE OMBUDSMAN
If all avenues for resolution have been exhausted then all Cygnet complainants in NHS funded services are entitled to refer their complaint to the Health or Local Government Ombudsman. Prior to acting the Ombudsman will consider several factors:
- What has gone wrong?
- What has resulted from this?
- What likelihood is there for achieving a worthwhile outcome?

If the Ombudsman believes there is a case to answer he will ask the organisation to correct things.

Health Service Ombudsman
Millbank Tower
Millbank
London
SW1 4QP   Telephone: 0345 015 4033

6. CARE QUALITY COMMISSION (CQC)
The Care Quality Commission advises that in the first instance complaints about service providers should be directed to the Cygnet unit where the service user is being cared for. The CQC do not have an active role in complaints management and cannot investigate a complaint regarding general treatment and care.
6.1 Care Quality Commission and complaints about the use of the Mental Health Act

The Care Quality Commission protect the rights and interests of people detained in hospital under the Mental Health Act. They will deal with complaints regarding the way staff use their powers under the Mental Health Act. They will not investigate complaints regarding more general care and treatment. Detained patients should be made aware of their entitlement at any stage to contact the Care Quality Commission (CQC) with complaints regarding the application of the MHA, and helped to do so if necessary. Complaints of this nature should be directed to the hospital where the service user is detained. Mental Health Act related complaints can be directed as follows:

CQC Mental Health Act
Citygate
Gallowgate
Newcastle
NE1 4PA
Telephone: 0300 061 6161

7. COMPLAINTS ABOUT AN INDEPENDENT SCHOOL

Ofsted cannot consider complaints about independent schools or places that provide education for people over the age of 16. In the first instance, complaints should be directed internally to:

Nicky McLeod, Proprietor
Cygnet Health Care
Graveley Road
Stevenage
SG1 4YS

If a complainant is not satisfied with the initial response to their complaint, they are entitled to request that it be heard by a panel. The panel will be appointed by the school proprietor and will consist of at least three people not directly involved in the matters to which the complaint relates, including one person who is independent of the management and running of the school. The panel will consider the complaint and make findings and recommendations which will be shared with the complainant, proprietor, head teacher and (where relevant) the person complained about.

The complainant is entitled to attend and be accompanied to the panel hearing if they wish.

The school will ensure that:

- It maintains a written record of all complaints that are made which shows:
  - Whether the complaints were resolved following a formal procedure, or proceed to a panel hearing.
  - What action was taken by the school as a result of those complaints (regardless of whether they are upheld).

Details of all complaints will be made available for inspection by the proprietor and head teacher.
Where a complaint is made about the school provision this must be kept confidential except where the Secretary of State or a body conducting an inspection under section 109 of the 2008 Act requests access to them.

Cygnet complainants are entitled to refer their complaint in writing to:

   Independent and Boarding Team  
   Department for Education  
   Mowden Hall  
   Staindrop Road  
   Darlington DL3 9BG

8. **CONFIDENTIALITY AND USE OF THE HEALTH RECORDS**

Access to the health record for the purposes of investigating a complaint does not require the service user’s consent. However, good practice indicates the need to inform the service user that an investigation may require an examination of their health records. Any personal information disclosed is confined to the nature of the complaint and will be shared only by those individuals with the demonstrable need to know for the purposes of investigating the complaint.

Disclosure of information given by a third party, or concerning a third party referred to in the health record, should only be considered so far as it is relevant to the investigation. In this case consent from the third party must be obtained before such information is disclosed.

**REFERENCES**

Care Quality Commission guidance on complaints handling for the independent provider
## APPENDIX 1

### Complaint detail record form

<table>
<thead>
<tr>
<th>Complaint detail record form</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Click here to select complaint category</strong></td>
<td><strong>Click here to select complaint type</strong></td>
</tr>
<tr>
<td><strong>Click here to select Unit</strong></td>
<td><strong>Select service</strong></td>
</tr>
<tr>
<td><strong>Select ward</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Service user ID</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Route of complaint</strong></td>
<td><strong>Please select</strong></td>
</tr>
<tr>
<td><strong>Complainant</strong></td>
<td><strong>Please select</strong></td>
</tr>
<tr>
<td><strong>Complaint details</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Date of complaint:</strong></td>
<td><strong>Click here to enter date</strong></td>
</tr>
<tr>
<td><strong>Details of complaint:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Date acknowledgement letter sent</strong></td>
<td><strong>Click here to enter date</strong></td>
</tr>
<tr>
<td><strong>Date 5 day reply sent</strong></td>
<td><strong>Click here to enter date</strong></td>
</tr>
<tr>
<td><strong>Date 20 day reply sent</strong></td>
<td><strong>Click here to enter date</strong></td>
</tr>
<tr>
<td><strong>Insurers informed</strong></td>
<td><strong>Details:</strong></td>
</tr>
<tr>
<td><strong>☐</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Solicitors informed</strong></td>
<td><strong>Details:</strong></td>
</tr>
<tr>
<td><strong>☐</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Details of actions to complaint:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Quality Improvement Plan:</strong></td>
<td></td>
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<tr>
<td><strong>Outcome</strong></td>
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</tr>
<tr>
<td><strong>Complaint upheld?</strong></td>
<td><strong>Please select</strong></td>
</tr>
<tr>
<td><strong>Complaint Handling Stage</strong></td>
<td><strong>Please select</strong></td>
</tr>
<tr>
<td><strong>Date resolved</strong></td>
<td><strong>Click here to enter date</strong></td>
</tr>
<tr>
<td><strong>Complainant satisfaction</strong></td>
<td><strong>Please select</strong></td>
</tr>
</tbody>
</table>
## APPENDIX 2

### ePRIME complaint log

**Add Complaint Record**

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Units</td>
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</tr>
<tr>
<td>Service User ID</td>
<td></td>
</tr>
<tr>
<td>Date of Complaints</td>
<td></td>
</tr>
<tr>
<td>Written or Verbal</td>
<td></td>
</tr>
<tr>
<td>Complainant</td>
<td></td>
</tr>
<tr>
<td>Complaint Details</td>
<td></td>
</tr>
<tr>
<td>Date holding letter sent</td>
<td>(Note: Must be within 48 hours)</td>
</tr>
<tr>
<td>Date 5 day reply sent</td>
<td></td>
</tr>
<tr>
<td>Date 20 day reply sent</td>
<td></td>
</tr>
<tr>
<td>Extension letter sent?</td>
<td></td>
</tr>
<tr>
<td>Insured informed?</td>
<td></td>
</tr>
<tr>
<td>Solicitors involved?</td>
<td></td>
</tr>
<tr>
<td>Action to complaint</td>
<td></td>
</tr>
<tr>
<td>Quality improvement plan</td>
<td></td>
</tr>
</tbody>
</table>

**Complaint Category:**

**Complaint Type:**

**Complaint upheld:**

**Data resolved:**

**Complainant satisfaction:**

[Form fields and buttons for Save and Cancel]
DATIX complaint log

DATIX link for sign in: http://datix/datix/live/index.php
APPENDIX 3

Complaint acknowledgment letter

A.B. Anybody
1 Any Town
Anywhere
AT12 3AW

Date:

Complaint ID: [enter complaint ID – from ePRIME/DATIX]
Complaint Received: [enter date complaint received]

PRIVATE AND CONFIDENTIAL

Dear [enter name],

Thank you for your letter in which you have made a formal complaint regarding [enter exact points to explore].

I am sorry to hear about your concerns and have asked [enter name, enter designation], to investigate your complaint further.

Where we can, we will endeavour to provide you with a written response within 5 working days. However, if a more extensive investigation is required then you will receive a full response within 20 working days. Any delays will be communicated to you.

Please do not hesitate to contact me if you have any queries in the meantime.

Yours sincerely

[Enter name]
Hospital Manager
A.B. Anybody
1 Any Town
Anywhere
AT12 3AW
Date:

Complaint ID: [enter complaint ID – from ePRIME/ DATIX]

PRIVATE AND CONFIDENTIAL

Dear [enter name],

I write further to my letter of [insert date of acknowledgment letter] to inform you that your complaint is still being investigated and I will be in touch with you as soon as a resolution is available.

Please do not hesitate to contact me if you have any queries in the meantime.

Yours sincerely

[Enter name]
Hospital Manager
Complaint response letter

A.B. Anybody
1 Any Town
Anywhere
AT12 3AW

Date:

Complaint ID: [enter complaint ID – from ePRIME / DATIX]

PRIVATE AND CONFIDENTIAL

Dear [enter name],

I write further to your letter of [insert date complaint received] in which you have made a formal complaint regarding [enter exact points to explore].

As you are aware, your complaint was investigated and I am now able to provide you with the following response.

[Insert response, outcome, and actions]

I hope that my letter has addressed your complaint. We take complaints very seriously and aim to investigate all complaints thoroughly and provide a full explanation of any issues raised in order to resolve concerns.

Yours sincerely

[Enter name]
Hospital Manager