

Improving the **Patient Experience**

CONCERN OR COMPLAINT

NHS Foundation Trust

Log into clinical records or informal log. No further action required



YES

Am I able to resolve the verbal concern/complaint by the next working day?



Is it a written concern? Identify level of investigation required (Complaints Risk Matrix)

MINOR Level 1 Investigation Individual/line manager or PALS/Complaints staff

No impact, minimal or relative minimal impact to the provision of healthcare or the Trust. No real risk of litigation.



Agree method and timescale for contact – verbal, written or meeting. Obtain facts – provide information.

Resolved – Sign off by nominated person – take action as required. Record in Informal Log for inclusion into Datix.

Consider advocacy.

Further investigation required – discuss with Line Manager. Reported in Performance Framework.



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MODERATE Level 2 Investigation Individual staff members with support line from Line Managers

Potential to impact on service provision/delivery. Legitimate consumer concern but not causing lasting detriment. Slight potential for litigation.



MAJOR Level 3 Investigation Senior members of staff

Significant issues of standards, quality of care, or denial of rights. Complaints with clear quality assurance or risk management implications or issues causing lasting detriment that require investigation. Possibility of litigation.



SERIOUS Level 4 Investigation 3 person Root Cause Analysis

Issues regarding serious adverse events, long term damage, grossly substandard care, professional misconduct or death that require investigation.

Serious patient safety issues. Probability of litigation high.



Suggested Tools Personal contact - face to face or telephone

Speak to staff members to establish the facts. Ask staff to provide a Clinical Overview or recollection of events. Meetings with relevant parties. Obtain consent if third party involved. Consider mediation. Consider advocacy.

Refer to Health Records to gather facts:-

- Medical records
- Nursing records
- Results/Investigations Incidents forms

Refer to other sources of information:-

- Ward/Team Diary
- Ward/Team Communication Book
- Carenotes

Refer to Policy, Procedure or Guidance.



Suggested Tools Personal contact Meeting/s with relevant parties

Involvement of other agencies if required. Obtain clinical advice, internal or independent. Obtain consent if third party involved. Interview staff to establish the facts. Obtain a clinical overview or statement from staff of their recollection of events. Identify and speak to witnesses, obtain statements. Mediation. Consider advocacy.

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Refer to other sources of information:-

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- Carenotes etc

Refer to Policy, Procedure or Guidance Review practice against standards.

Root Cause Analysis tools may be used:-Timeline Fish Bone

- Decision, Tree etc 5 Why's



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Mediation. Consider advocacy.

Incidents forms

Refer to other sources of information:-

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Refer to Policy, Procedure or Guidance Review practice against standards.

Root Cause Analysis tools must be used:-

Timeline Fish Bone **Decision Tree etc**

5 Why's



Resolution



Complainant updated by agreed method and within agreed timeframe. Sign off by nominated person. Recommendations made if required. Issues logged in Datix.



Resolution

Complaint report written, investigation concluded, recommendations made. Outcome provided by agreed method, within agreed timeframe. Action taken if required. Copy of complaint report sent if required. Chief Executive sign off.



Resolution



Complaint report written, investigation concluded, recommendations made. Outcome provided by agreed method, within agreed timeframe. Actions taken if required. Copy of complaint report sent if required. Chief Executive sign off.



Learning

Action plan agreed by General Manager. Implemented by Business Unit. Informal complaints log completed. Central database updated. Reported in Performance framework.



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