



**Cobalt**

Diagnosis • Research • Education

Registered Charity No: 1090790

# **Cobalt Health Concerns, Complaints & Feedback Policy**

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## POLICY DETAILS

Version	Revision	Date	Approved By
1.0	New policy for review	July 2010	PS
2.0	Amendments after review	March 2012	PS
3.0	Appendix 1 added to Policy	July 2014	PS
3.1	Reviewed with minor changes	April 2017	PS
4.0	Extensively updated following review	December 2017	PS
4.1	Link to ISCAS code of practice and 3 stage complaints handling process for private patients added	April 2019	PS

## 1. INTRODUCTION & PURPOSE

The purpose of this policy is to describe Cobalt's policy with regard to managing concerns and complaints in accordance with national guidance. The policy explains the means by which a patient or their representative can raise a concern or complaint and the responsibilities of staff to whom the complaint is addressed. It also outlines the action to be taken and offers guidance on good practice at each stage of the process.

This policy aims to ensure that:-

- All complaints are well managed as quickly as possible and in accordance with national assurance frameworks.
- Staff are empowered to deal with complaints as they arise in an open and non-defensive way.
- The learning from complaints is identified and used for improvement.
- The complaints procedure is accessible, well publicised, open and transparent.
- The complaints procedure is supportive for those who find it difficult to complain.
- Cobalt will ensure that all complaints are reviewed at the highest level of the organisation to identify learning opportunities for those services (e.g. MRI, PET/CT, CBCT) directly involved in the complaint and the organisation as a whole.
- Cobalt is committed to promoting equality and diversity. No patient, or any other person involved in the investigation and resolution of a concern or complaint will receive unfair treatment as a result of raising a complaint or on the grounds of age, race, colour, ethnic or national origin, religious or equivalent belief system, political beliefs, gender, marital or partnership status, sexual orientation, disability, gender reassignment, pregnancy/maternity status, or any other condition or requirement which cannot be justified and which causes disadvantage. Appropriate assistance including reasonable adjustments should be offered to any person who may be at a disadvantage for any of these reasons.

Cobalt's Board of Trustees (via the Chief Executive Officer) will ensure that there are clear policies and procedures for the handling of concerns and complaints and that appropriate expertise and resources are available to enable its responsibilities to be effectively discharged.

Where the complaint is from a non-NHS patient then this policy should be read in conjunction with the ISCAS code-of-practice, which can be found on the shared computer drive or via the following link;

[S:\3\) ALL STAFF - Cobalt Policies, Procedures & QMS\1c\) Acts, Guidance & Legislation\Best Practice Guidelines\ISCAS Code Of Practice](#)

## 2. DEFINITIONS & SCOPE

**A complaint** is a communication that requires an investigation and is 'an expression of dissatisfaction made to an organisation, either written or spoken, and whether justified or not, which requires a response. There is no difference between a 'formal' complaint and an 'informal' complaint. Both are expressions of dissatisfaction - The Patient's Association, 2013.

**A concern** is a problem raised that can be resolved / responded to straight away by the Charity (by the end of the next working day or earlier). Although concerns that are resolved in this way do not need to be recorded as complaints, if it is not possible to resolve the concern within this period, the issue will need to be recorded as a formal complaint and managed according to the complaints policy.

This Concerns and Complaints Policy applies to all directly and indirectly employed staff within Cobalt and other persons working within the organisation, such as volunteers.

### 3. RESPONSIBILITIES

**All staff** has a responsibility to read this policy and understand its impact on their area of work. Staff should be able to respond appropriately to a complainant and endeavour to achieve immediate resolution. If this is not possible, all staff have the responsibility to escalate the concern/complaint in accordance with this policy.

Clinical staff are reminded that professional regulators (e.g. HCPC & GMC) require regulated healthcare professionals to assist with reviews and investigations when requested.

Responsibility for ensuring compliance with this policy rests with the **Chief Executive Officer**.

### 4. OPENNESS, TRANSPARENCY & CANDOUR

Following the Francis Report (2013) it is a CQC requirement for Clinicians and Service Provider Organisations to be candid with patients about avoidable harm and for safety concerns to be reported openly and truthfully.

Definitions of Openness, Transparency and Candour are as follow:-

- **Openness** - enabling concerns and complaints to be raised freely without fear, with questions asked being answered;
- **Transparency** - accurate information about performance and outcomes to be shared with staff, patients, the public and regulators;
- **Candour** - any patient harmed by a healthcare service is informed of the fact and an appropriate remedy offered, regardless of whether a complaint has been made.

**For further information please read Cobalt's 'Duty of Candour Policy', which can be located on the shared, computer drive.**

Cobalt will also encompass the following key objectives:-

- To provide easy access to complainants wishing to raise concerns ensuring that issues raised are managed in a consistent, fair and just manner for both complainant and complained against.
- To provide a simple procedure with common features for concerns/complaints about Cobalt's services;
- To provide separation of concerns/complaints from disciplinary procedures;
- To empower all staff to resolve concerns/complaints at a local level and provide training and support to facilitate this proactive approach;
- To provide a rapid and open process ensuring concerns/complaints are used as a mechanism for identifying where improvements in service provision are required.

### 5. MATTERS EXCLUDED FROM THIS POLICY

Cobalt will not be required to deal with the following complaints under this policy:-

- Any complaint by an employee of the Charity about any matter relating to that employment;
- Any complaint, the subject matter of which is the same as that of a complaint that has previously been made and resolved in accordance with this policy.

### 6. NATIONAL GUIDANCE

The National Guidance underpinning this policy includes the following:-

- A review into the quality of NHS complaints investigations where serious or avoidable harm has been alleged, Parliamentary and Health Service Ombudsman, 2015

- Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (2013)
- NHS England's Accessible Information Standards 2015
- Principles of Good Complaint Handling, Parliamentary and Health Service Ombudsman (2009)

## 7. PRINCIPLES OF GOOD PRACTICE FOR RESOLVING CONCERNS & COMPLAINTS

Cobalt follows the Parliamentary and Health Service Ombudsman's (PHSO) Principles of Good Complaints Handling as set out below:-

- Getting it right - quickly acknowledging and putting right cases of maladministration or poor service that led to injustice or hardship. Considering all the factors when deciding the remedy with fairness for the complainant and, where appropriate, others who also suffered.
- Being customer focused - apologising and explaining, managing expectations, dealing with people professionally and sensitively and seeking remedies that take into account individual circumstances.
- Being open and accountable - Being clear about how to complain, giving reasons for decisions, and keeping accurate records.
- Acting fairly and proportionately - seeking fair and proportionate remedies, without bias or discrimination.
- Putting things right - Considering all forms of remedy such as apology, explanation, remedial action or financial offer.
- Seeking continuous improvement - Using lessons learned to avoid repeating poor service and recording outcomes to improve services.

The above principles apply to public bodies and Cobalt is not a public body, however the public and service users would expect the principles outlined above and therefore they apply to Cobalt.

The principles above have been further developed by the Independent Healthcare Sector Complaints Adjudication Service (ISCAS) in the ISCAS seven steps to good complaints handling and **Cobalt is committed to following the seven steps as outlined below:-**

- |                     |   |
|---------------------|---|
| Step 1: EMPATHISE   | This means approaching the situation from the complainant's perspective. It might involve reassuring the complainant that their ongoing treatment will not be affected by their complaint, or acknowledging the impact on them of the events they have complained about, or expressing sympathy with the trouble or suffering the complainant reports having experienced.   |
| Step 2: LISTEN      | This means developing an under-standing of their experience from the complainant's perspective. One of the most helpful things is to offer to meet with complainants. Meetings can have several benefits, from showing that the complaint has been taken seriously and demonstrating that the organisation is in listening mode, to clarifying the key matters of complaint, providing an opportunity to resolve concerns early on, and building rapport and trust. |
| Step 3: INVESTIGATE | Where complaints investigations are done well, the investigation gets underway swiftly, it has a clear structure and defined scope, and there is a sense of momentum and a defined end. All relevant parties should be asked to input into the investigation, particularly clinicians. Another marker of a good investigation is that conflicts of evidence are reconciled, and   |

complainants are helped to understand the relevance of clinical opinion. There should be a robust documentary record of the investigation.

**Step 4: REFLECT**

This means making sense of the evidence that has been amassed and the outcome of the investigation. Reflective questions include: has the investigation got to the bottom of what occurred? What further steps, if any, are necessary before a full response can be made? Which aspects of the complaint, if any, should be upheld? How can we learn from this? How can we prevent the same problems from happening again? How well have we managed this complaint? What might we do differently if a similar situation were to happen?

**Step 5: RESPOND**

Doing so, within the specified timeframes (or giving reasons why this is not possible and when a full response will be made), and being clear what the organisation has found. It means demonstrating candour regarding any failings, and being explicit about deficiencies and what should have happened, and any steps taken to prevent the same problems occurring again. Responding also means being clear whether the complaint is upheld, and what that means.

**Step 6: REMEDY**

Complainants seek a range of remedies, from financial redress to an apology and assurances that steps will be taken to avoid the same problems happening again. It is important to acknowledge the remedy that the complainant seeks and whether the organisation is prepared to grant it, and the reasons why. Wherever possible, the response should try to return the complainant to the position they would have been in if the events concerned had not happened. Any apology should be clear and unequivocal.

**Step 7: ACT**

This means ensuring that change happens and that the outcome is communicated to complainants. It is about describing what action has been taken to learn lessons and what has or will be done to prevent the same shortcomings from arising again.

## **8. CONCERNS PROCEDURE**

A concern is an expression of dissatisfaction that should be resolved quickly and efficiently to the satisfaction of the complainant, no later than the following working day after which it was raised.

- The method of resolution should be decided in discussion with the complainant where possible and should be proportionate to the complexity of the issues raised.
- Anonymous concerns (e.g. patient survey responses) should be logged on the relevant complaints spreadsheet to be investigated in the usual way.
- Where a concern raised involves another organisation, (e.g. an NHS site at which the Mobile MRI scanner is visiting) staff should ensure that input is received from the other organisation to help resolve the issue. Consideration must be given to patient confidentiality and consent however before contacting another organisation and consent sought where appropriate. Where the concern is to be handled by another organisation, then staff should request follow up to ensure the matter is resolved.
- If the enquirer is not satisfied with the outcome then it should be escalated to a formal complaint as set out in section 9.

## **9. COMPLAINTS PROCEDURE**

At Cobalt Health, we welcome your feedback. Questionnaires including room for comments are available for you to pick up and complete onsite or return with the attached freepost envelope. We are also happy to receive feedback and/or complaints verbally, via email, or other media where appropriate.

We endeavour to provide you with the highest quality service but understand we may not always get everything right to your satisfaction. We want to improve the way we deliver our services, so that you feel very satisfied with the care and attention you are given whilst using our Centre.

If you tell us where things did not work so well, it will help us learn lessons and do things differently. Also, letting us know where things have worked really well, will let us show all staff good ways of working, as another way of learning.

**We will:-**

- Acknowledge receipt of your complaint within 1-3 days and investigate the issues raised;
- Aim to provide you with a full written explanation and response to your complaint within twenty (20) working days;
- Reach agreement with you if more time is needed;
- Do everything possible to resolve your complaint to your satisfaction;
- Learn from the complaint you have made and make changes where appropriate;
- Provide assistance should you require help to make a complaint, for example, if English is not your first language;
- Ensure that the way we handle your complaint does not deter or disadvantage you or your relatives / carers from making complaints;
- Offer you a face to face meeting to talk through your concerns;
- Keep confidential all details relating to the complaint and its investigation.
- Follow a three stage complaints handling process for all non-NHS patients (please see Private Patients at the bottom of Appendix 1 [page 9] for details.

*If you would rather write directly, any feedback or complaint may be sent to:-*

Mr Peter Sharpe, Chief Executive  
Cobalt Imaging Centre  
Thirlestaine Road  
Cheltenham  
Gloucestershire  
GL53 7AS

or email: [peter.sharpe@cobalthhealth.co.uk](mailto:peter.sharpe@cobalthhealth.co.uk)

If you wish, complaints or service feedback may be anonymous, but it greatly helps us if we understand the area of service and staff involved in your care, and can investigate what went wrong. You should not be embarrassed to let us know if we did not meet your expectations and it will help us and our staff learn and improve.

Our website provides a contact us area which may be completed and submitted with no identifying information.

*Anonymous information about your complaint maybe used for other purposes such as staff training.*

## 10. EQUALITY IMPACT ASSESSMENT SUMMARY

Cobalt is committed to promoting equality, diversity and fair treatment to all staff, patients and visitors regardless of race, nationality, ethnic origin, gender, marital status, mental or physical disability, religion or belief, sexual orientation, age or social exclusion.

We do this by making sure that all of our processes, policies and procedures undergo an impact assessment to make sure that they do not disadvantage any groups from our community.

**EIA undertaken by:** Nigel Benatar Karen Hackling-Searle

**Title and Department:** Head of Governance & Research MRI Department Manager

**Outcome:**

Policy promotes equality, equal opportunities and improved relations and will be reviewed in 3 years' time	✓	Full Equality Impact Assessment to be carried out	
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**Signed:** 



**Date:** April 2019

## 11. APPENDIX 1 – POSTER FOR RECEPTION

### Do you have a complaint?

We endeavour to provide the highest quality service but understand we may not always get everything right. We want to improve the way we deliver our services, so that users feel very satisfied with the care and attention given. If we are informed where things did not work so well, it will help us learn lessons and do things differently. Also, letting us know where things have worked really well, will let us show all staff good ways of working, as another way of learning.

Complaints can be made verbally or in writing. Complaints or service feedback can also be anonymous, but it greatly helps us if we understand the area of service and staff involved in the care we can then investigate what went wrong.

#### *Complaints should be sent to:-*

Mr Peter Sharpe, Chief Executive & Registered Manager,  
Cobalt Imaging Centre, Thirlestaine Road, Cheltenham, Gloucestershire GL53 7AS  
or by email to: [peter.sharpe@cobalthhealth.co.uk](mailto:peter.sharpe@cobalthhealth.co.uk). Telephone 01242 535901

More information about our complaints policy can be found on our website or please ask any member of staff.

#### **Care Quality Commission**

The Care Quality Commission is not able to investigate individual complaints but would like to hear about patient's experiences.

You can contact the Care Quality Commission on 03000 616161 or

Write to them at Care Quality Commission, Citygate, Gallowgate, Newcastle upon Tyne NE1 4PA or

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

#### **NHS Patients**

Patients referred to Cobalt by the NHS, can also complain using the NHS complaints process. Patients should contact the hospital or healthcare provider who referred them to Cobalt.

Patients referred to Cobalt by the NHS can also ask the Parliamentary and Health Service Ombudsman (PHSO) to look into their complaint by completing the NHS complaints procedure, which can be found at [www.nhs.uk/NHSEngland/Complaints-and-feedback/pages/nhs-complaints.aspx](http://www.nhs.uk/NHSEngland/Complaints-and-feedback/pages/nhs-complaints.aspx).

Patients should contact the PHSO for any required assistance in completing this procedure on their helpline: 0345 015 4033.

#### **Private (Self-funded or Insured) Patients**

Cobalt will seek to rectify and remedy any concerns or complaints that it receives from patients. Cobalt follows a three-stage process for complaints handling, with stage one being your complaint to us followed by our investigation and response back to you. If dissatisfied with the response to the complaint, you will be offered stage two, which is an internal independent review of the complaints handling process by a named senior officer of the organisation, whom has not been involved with the original complaint.

If dissatisfied with the response from stage two, privately funded patients can request independent external adjudication from the Independent Healthcare Sector Complaints Adjudication Service (ISCAS) within 6 months of receiving Cobalt's local resolution decision. ISCAS can be contacted on 020 7536 6091 or write to them at: ISCAS, 70 Fleet Street, London EC4Y 1EU