

Customer care and complaints Policy

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2	October 2018	Engagement and Patient Experience Lead	Policy reviewed. Circulated for comments to; <ul style="list-style-type: none">• PAG• Customer care team• Staff group• Governing Body lay members for PPI for comments• See circulation list
3	November 2018	Patient Voice Committee	Policy ratified

Circulation list

Prior to Approval, this Policy was circulated to the following for consultation

- Patient Advisory Group
- Customer Care and Patient Experience Officers – CCGs
- Deputy Accountable Officer and Director of Quality and Performance
- Quality & Performance Manager (Clinical)
- Corporate Business Manager - Governance & Risk - CCGs
- Head of Communication and Engagement – CCGs
- Equality and Diversity Lead - CCGs
- Lay Member for Patient and Public Involvement – NHS Chorley and South Ribble CCG
- Lay Member for Patient and Public Involvement – NHS Greater Preston CCG

Following approval, this policy document will be circulated to:

- All CCG Staff
- All CSU embedded staff
- Patient Advisory Group

Equality Impact Assessment

This document has been impact assessed by the author on first draft whereby no issues were identified in relation to Equality, Diversity and Inclusion. No changes have been made to this policy which would have an impact on Equality and Diversity.

1.0	Introduction	4
2.0	Purpose	4
3.0	Principles of handling complaints	5
4.0	Definitions	5
5.0	Scope	6
6.0	Exclusions	6
7.0	Responsibilities	7
8.0	Complaints procedure: stage one	8
9.0	Complaints procedure: stage two	10
10.0	Persistent, habitual and unreasonable complaints	10
11.0	Confidentiality	13
12.0	Consent	13
13.0	Advocacy	13
14.0	Freedom of Information Requests	13
15.0	Member of Parliament (MP) enquiries	13
16.0	General Practice concerns and enquiries	14
17.0	Complaints about GP practices, dentists, community pharmacists and opticians	14
18.0	Compliments	14
19.0	Record keeping	14
20.0	Reporting and quality assurance	15
21.0	Patient stories	15
22.0	Equality and diversity	15
23.0	Safeguarding and quality	16
24.0	Legal; Possible claims for negligence	16
25.0	Policy review	17
26.0	Contacting the CCG	17
	Appendix 1. Complaints flowchart	18
	Appendix 2. Associated legislation and policies	19
	Appendix 3. Patient consent form	20
	Appendix 4. Contacts and useful information	22

1.0 Introduction

- 1.1 NHS Chorley South Ribble Clinical Commissioning Group (referred to hereafter as NHS Chorley South Ribble CCG or the CCG) is committed to commissioning high quality care for the people of Chorley and South Ribble.
- 1.2 The CCG recognises that it is essential to provide an easy to understand and accessible system for patients, carers and members of the public to raise issues, concerns, complaints and compliments about the services commissioned by the CCG.
- 1.3 Complaints, concerns, comments and compliments are valuable sources of information that offer real-time feedback on the quality of services that we commission, and help us drive improvement throughout the organisation in respect of the services we buy.
- 1.4 The CCG has an in-house customer care service. The customer care and patient experience team is responsible for handling all elements of customer care, which includes:
 - Complaints
 - Concerns
 - Compliments
 - Member of Parliament (MP enquiries)
 - Freedom of Information (FOI) requests (see separate FOI policy)
 - Practice-based enquiries from GPs or practice staff

2.0 Purpose

- 2.1 The purpose of this policy is to set out the CCG's framework for handling complaints, concerns and compliments for all aspects of customer care in line with the NHS Complaints Regulations 2009.
- 2.2 The policy sets out how the CCG will discharge its roles and responsibilities in relation to the management, resolution and investigation for all aspects of customer care in line with the NHS Complaints Regulations 2009.
- 2.3 The policy aims to ensure that the CCG has effective arrangements in place to:
 - Provide easily accessible and easy to understand procedures for managing complaints, concerns and enquiries
 - Provide a consistent approach to the management and investigation of complaints, concerns and enquiries
 - Signpost complainants to the appropriate organisation to seek resolution
 - Investigate concerns and complaints (if appropriate) received by the CCG in relation to the services commissioned by the CCG, or the functions of the CCG
 - Assist patients, carers, members of the public, GP practices, Members of Parliament with their queries/ enquiries

- Work with partner organisations as required, including our providers in order to co-ordinate investigations
- Utilise patient experience data received via the customer care service to aid the monitoring of the quality and safety of services commissioned by the CCG
- Utilise information gained through the customer care service to inform the commissioning process and service re-design

3.0 Principles of handling complaints

3.1 The CCG is responsible for ensuring that complaints are considered in accordance with the law and this policy. Several publications give us helpful guidance in how to deal with complains and concerns.

3.2 The Parliamentary and Health Service Ombudsman (PHSO) 2009 guidance sets out the principles of good administration, principles of good complaints handling and principles for remedy and includes:

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

These documents also set out some specific rights for patients, which include;

- Having their complaint acknowledged and properly investigated
- Discussing how the complaints are handled and when they can expect a reply
- Being kept informed of progress and promptly told the outcome
- When applicable, having access to further investigation through the PHSO

3.3 The Patients Association publication; 'Good Practice Standards for NHS Complaints Handling' 2013 published a set of standards, which are summarised as;

- Openness and transparency
- A consistent approach
- A logical and rational approach
- Providing opportunities to give feedback on the complaints service
- Offering support and guidance throughout the complaints process

4.0 Definitions

Complaint - an expression of dissatisfaction communicated verbally, electronically, or in writing which requires a response.

Concerns and enquiries - issues communicated verbally, electronically or in

writing, which can be resolved/responded to immediately. Concerns and enquiries resolved within 48 hours will not usually be treated as a complaint unless the individual raising them expressly states that they wish for it to be recorded as one

Members of Parliament (MP) enquiries - concerns, complaints or queries about local health services or commissioning decisions/omissions submitted by an MP (usually on behalf of a constituent)

General Practice (GP) enquiries, concerns and feedback - issues raised by a GP practice in relation to the services commissioned by the CCG

5.0 Scope

- 5.1 This policy is an organisational-wide policy and must be followed by all CCG staff, Commissioning Support Unit (CSU) embedded staff, temporary staff, agency staff or contractors for service.
- 5.2 The policy covers complaints, concerns, enquiries and compliments received by the CCG relating to services commissioned by the CCG.
- 5.3 Complaints can be made;
- Verbally or in writing to any member of staff in the CCG
 - By a person entitled to make a complaint within the time periods specified within the NHS complaints regulations 2009 (12 months)
 - By any member of staff who wishes to make a complaint about matters of probity, malpractice or potential risks to the public, in line with the CCG's whistleblowing policy:
<https://www.chorleysouthribbleccg.nhs.uk/plans-publications-and-policies>
 - By an MP on behalf of their constituents
- 5.4 Complaints must be made within 12 months of the date on which the subject of the complaint occurred, or 12 months of the date on which the matter, which is the subject of the complaint, came to the notice of the complainant.
- 5.5 Where a complaint is made after the expiry of the period mentioned, the CCG will investigate if the complainant had good reasons for not making the complaint within the time period, and it is still possible to investigate the complaint effectively and efficiently.
- 5.6 If a complaint is received from a member of the public who resides outside of the CCG footprint, the customer care team will signpost them to the correct commissioning or provider organisation. In some circumstances, as lead commissioner for a service the CCG can investigate the complaint on behalf of the complainant. This will be agreed with the complainant and consent will be sought. In addition, the CCG will liaise with the appropriate CCG as necessary.

6.0 Exclusions

- 6.1 The following complaints are excluded from the scope of the NHS complaints

regulations 2009 and this policy:

- A complaint made by one NHS organisation about another NHS organisation.
- A complaint made by an employee of the CCG, Commissioning Support Unit (CSU) embedded staff, temporary staff, agency staff or contractors for service about matters relating to their employment.
- A complaint that has already been investigated by any organisation, such as the CCG, provider organisations and the PHSO.
- A complaint that has been made verbally and was resolved to the complainant's satisfaction within 48 hours. Such complaints cannot be re- investigated a second time.
- A complaint made by a primary care provider that relates to the exercise of its functions by an NHS body or to the contract arrangements under which it provides primary care services.
- A complaint arising out of alleged failure by the CCG to comply with a request under the Freedom of Information Act 2000. More information can be found on the Information Commissioner's Office website:<https://ico.org.uk/for-organisations/guide-to-freedom-of-information>.
- A complaint about a service not commissioned by the CCG.

7.0 Responsibilities

- 7.1 The CCG's Chief Accountable Officer is the designated 'responsible person' for the purposes of ensuring that the CCG complies with the NHS Complaints Regulations 2009. They are responsible for ensuring that there is an effective system in place for the management, investigation and resolution of complaints, concerns and requests for advice within the organisation, and for ensuring that the CCG complies with any associated regulations such as the Equality and Diversity Act 2010 and the Freedom of Information Act 2000.
- 7.2 The customer care team is responsible for responding to any complaint, concern, issue or compliment that has been made to the CCG by any method.
- 7.3 The customer care team will:
- Try and resolve an issue before it escalates to a formal complaint
 - Record the nature of the contact, and subsequent contacts on a minute-sheet
 - Obtain consent where necessary
 - Log all details onto the CCG's secure data collection system
 - Undertake and co-ordinate any investigation required
 - Draft a response letter for approval and sign off by the Chief Officer
 - Signpost people to other organisations as appropriate and relevant

- 7.4 All CCG managers are responsible for ensuring that their teams are familiar with this policy. The policy is available on the CCG website, and the staff intranet together with the CCG's internal processes.
- 7.5 All employees should take responsibility to familiarise themselves with the policy and with the CCG's internal customer care processes.
- 7.6 All employees and subject matter experts will be required to gather information as part of an investigation of a complaint, concern or enquiry, and subsequently shared with the customer care team if requested to do so.

8.0 Complaints procedure: stage one

- 8.1 A complaint may be made verbally, in writing or electronically. Additional assistance will be provided to complainants for whom there are language or other barriers to making a complaint.
- 8.2 A complaint or concern may be made by a person acting on behalf of another person mentioned above, in any case where that person:
- Has died. In the case of a patient or person who has died, the representative must be a relative or other person who has sufficient interest in their welfare, and is a suitable person to act as a representative.
 - Is a child. In the case of a child aged under 13 years, the representative must be a parent, guardian or other adult person who has care of the child. Where a child is in the care of a local authority or a voluntary organisation, the representative must be a person authorised by the local authority or the voluntary organisation to act in the best interest of the child.
 - Has physical or mental incapacity. In the case of a person who is unable by reason of physical capacity, or lacks capacity within the meaning of the Mental Capacity Act 2005 to make the complaint themselves, the representative must be a relative or other person who has sufficient interest in their welfare and is a suitable person to act as a representative.
 - Has given consent to a third party acting on their behalf. In the case of a third party pursuing a complaint on behalf of the 'affected' person we will request the following information:
 - The name and address of the person making the complaint
 - The name and either date of birth or address of the affected person
 - Contact details of the affected person so that we can contact them for confirmation that they consent to the third party acting on their behalf

- Has delegated authority to do so. This could be Power of Attorney.
 - Is an MP acting on behalf and by instruction from a constituent?
- 8.3 If a complainant feels that they are not able to complain directly to the organisation the complaint is about, the CCG will help them raise concerns, or in certain circumstances investigate the complaint on their behalf. If it is not something the CCG can help with, the customer care team will direct complainants to the right place.
- 8.4 Complainants will be provided with information about the right to assistance from the Independent Complaints Advocacy Service as outlined in section 13.
- 8.5 The customer care team will acknowledge a complaint within three working days of receipt and will aim to respond to a complaint within 28 working days. However, the CCG recognises that some complaints may take longer to resolve, and will agree an alternative time frame with the complainant as necessary. This will be documented to the complainant via telephone, email or letter. Where there are delays, the CCG will keep complainants informed as far as reasonably practicable as to the progress of the complaint investigation.
- 8.6 Where a complainant does not wish the complaint to be shared with other organisations or service providers, the CCG will respond only to those parts of the complaint which relate to the CCG.
- 8.7 All complaint responses will be made in writing and letters will be approved and signed off by the Chief Accountable Officer or to whoever the complaint is addressed to, such as the CCG Chair, prior to issue.
- 8.8 Where the complainant has requested the information in a particular format the CCG will consider all of the circumstances including any costs incurred. Where the CCG is not able to comply with a preferred format the applicant will be notified and the information will be provided as deemed appropriate. The CCG will take into account other requirements such as those established under the Disability Discrimination Act 1995 and the Equality Act 2010 in this consideration.
- 8.9 If a complainant is dissatisfied after they have received the complaint response, or if there are outstanding issues, the complainant can contact the CCG's customer care team to discuss further. If necessary, a meeting will be arranged between the complainant and the CCG's customer care team to discuss the outstanding concerns in order to resolve them.
- 8.10 Joint NHS and local authority complaints
- 8.11 When a complaint relates to more than one CCG, NHS trust/NHS health care provider and/or local authority, the CCG will, with the consent of the complainant, and in line with the 'Lancashire joint complaints protocol' will send the complaint to relevant trust/CCG/local authority, and agree which organisation should take the lead in co-ordinating the complaint and dealing with the complainant.

9.0 Complaints procedure: stage two

9.1 If a complainant remains dissatisfied after further discussions with the CCG, the complainant is entitled to ask the Parliamentary and Health Services Ombudsman (PHSO) to consider the complaint for an independent review.

9.2 The PHSO can be contacted:

- By post: Millbank Tower
Millbank
London
SW1P 4QP
- By telephone: 0345 015 4033

10.0 Persistent, habitual and unreasonable complaints

10.1 The CCG is committed to resolving concerns and complaints that are raised by patients, carers and members of the public. It is recognised, however, that on rare occasions, the customer care team and sometimes other employees of the CCG may have contact with people whose complaints are considered to be persistent, habitual or unreasonable.

10.2 There is no one single feature of persistent, habitual or unreasonable behaviour. Examples of these behaviours may include those who:

- Persist in pursuing a complaint when the procedures have been fully and properly implemented and exhausted.
- Do not clearly identify the precise issues that they wish to be investigated, despite reasonable efforts by staff, and where appropriate, when the relevant independent advocacy services could assist to help them specify their complaint.
- Continually make unreasonable or excessive demands in terms of process and fail to accept that these may be unreasonable, for example they insist on responses to complaints being provided more urgently than is reasonable or is recognised practice.
- Continue to focus on a 'trivial' matter to an extent that it is out of proportion to its significance. It is recognised that defining 'trivial' is subjective and careful judgment must be applied and recorded.
- Change the substance of a complaint or seek to prolong contact by continually raising further issues in relation to the original complaint. Care must be taken not to discard new issues that are significantly different from the original issue. Each issue of concern may need to be addressed separately.
- Consume a disproportionate amount of time and resources.

- Threaten to or use actual physical violence towards staff.
- Have harassed or been personally abusive or verbally aggressive on more than one occasion (this may include written abuse such as emails).
- Repeatedly focus on conspiracy theories and/or will not accept documented evidence as being factual.
- Make excessive telephone calls or send excessive numbers of emails or letters to staff.

10.3 If a complaint is considered to be persistent, habitual or unreasonable, it is important to remain focused on the specific details of the complaint. Members of staff must also recognise that complainants may sometimes act out of character at times of stress, anxiety or distress, and, they should make reasonable allowances for this.

10.4 Consideration should be given as to whether any further action can be taken prior to designating the complainant persistent, habitual or unreasonable. This might include:

- Considering whether the assistance of an advocate may be helpful.
- Raising the issue with a CCG manager who has had no previous involvement, in order to give an independent view.
- Escalating the issues to a CCG head of service, director or the Chief Accountable Officer.
- If a meeting between the complainant and the customer care team has not been held, consider offering this at a local level as a means to dispel misunderstandings (only appropriate where risks have been assessed).
- Where multiple departments within the CCG are being contacted by the complainant, consider a strategy to agree a cross-departmental approach.

10.5 The CCG will consider the use of ground rules for continuing contact with a person who is deemed to be a persistent, habitual or unreasonable complainant. This might include:

- Time limits on telephone conversations and contacts.
- Restricting the number of calls that will be taken or agreeing a timetable for contacting the service.
- Requiring contact to be made with a named member of staff and agreeing when this should be via a third party such as an advocate.

- Limiting the complainant to one mode of contact.
- Informing the complainant of a reasonable timescale to respond to correspondence.
- Informing the complainant that future correspondence will be read and placed on file, but not acknowledged.
- Advising that the organisation does not deal with calls or correspondence that is abusive, threatening or contains allegations that lack substantial evidence. Request that the complainant provides an acceptable version of the correspondence or make contact with a third party through which to continue communication with the organisation.
- Asking the complainant to enter into an agreement about their conduct.
- Advising that irrelevant documentation will be returned in the first instance and (in extreme cases) in future may be destroyed.
- Adopting a 'zero tolerance' policy. The NHS has taken a 'zero tolerance' attitude since 1999. NHS staff should be able to come to work without fear of violence, abuse or harassment from patients or their relatives.

10.6 Where a complainant has been identified as being persistent, habitual or unreasonable, the decision to declare them as such will be made by the relevant CCG head of service, director or the Chief Accountable Officer.

10.7 The process to respond to a persistent, habitual or unreasonable complainant will be dealt with in one or more of the following ways;

- Notifying complainants in writing that the customer care team has responded fully to the points raised and has tried to resolve the complaint, and that there is nothing more to add, stating that continuing contact on the matter will serve no useful purpose. This will be signed off by the Chief Officer.
- Notifying complainants that correspondence is at an end and that further communications will be acknowledged but not answered.
- Informing complainants that in extreme circumstances, the CCG reserves the right to refer members of the public whose complaint is considered persistent, habitual or unreasonable to solicitors and, if appropriate, the police.

10.8 A review of the persistent status should take place annually.

10.9 If a persistent, habitual or unreasonable complainant raises a different, unrelated issue, stage one of the complaints procedure will be followed. Any complainant declared to be persistent, habitual or unreasonable can have this status withdrawn if the complainant or member of the public demonstrates a more reasonable approach.

11.0 Confidentiality

- 11.1 All contact with the CCG will be handled in the strictest of confidence. Care will be taken that information should only be disclosed to those who have a demonstrable need to access it. Suitable arrangements are in place for the handling of personal confidential data (PCD) to meet the compliance of the General Data Protection Regulation (GDPR) 2018 and any other legal obligations such as the National Health Services Act 2006, Human Rights Act 1998, the Crime and Disorder Act 1998 and the Mental Capacity Act 2005.

12.0 Consent

- 12.1 In line with GDPR, if a person makes a complaint about the services we commission it is accepted that they have given their explicit consent to investigate their complaint.
- 12.2 If the complaint requires the customer care team to obtain information from another organisation, or if the complaint is to be transferred to another organisation, explicit consent will be obtained either verbally or written.
- 12.3 Explicit consent will be obtained if we are asked to investigate an issue by a family member or advocate.
- 12.4 MPs are directly responsible for obtaining consent for any complaint that is sent to us by them on behalf of their constituent.

13.0 Advocacy

- 13.1 If a patient, carer or member of the public is struggling to make their views heard about any health or social care issue such as care or treatment received at a hospital, GP or community service and is thinking about making a complaint, free advocacy services may be able to support and help.
- 13.2 The Lancashire Advocacy Hub is the single point of contact for all advocacies in Lancashire. Contact details can be found in appendix 4 of this policy.

14.0 Freedom of Information requests

- 14.1 A separate policy is in place in respect of Freedom of Information requests. The policy is available on the CCG website;
<https://www.chorleysouthribbleccg.nhs.uk/how-to-make-a-freedom-of-information-request>

15.0 Member of Parliament (MP) enquiries

- 15.1 The customer care team will follow the process outlined within the complaints procedure. Consent will be sought as necessary.
- 15.2 Investigations will be completed within 28 working days. If there is expected to be a delay, the MP will be kept informed of progress and a new timescale will be agreed. The final response letter will be sent to the MP.

16.0 General practice concerns and enquiries

- 16.1 Practices are encouraged to submit their queries via a bespoke CCG web-based reporting system. Some of the information provided by practices will be in respect of quality monitoring, and some may require investigation by the customer care team.
- 16.2 Any enquiry or concern received will be acknowledged within three working days and will be logged on the CCG's secure customer care database. If an investigation is necessary, the time-frame for an investigation and response is 28 working days.
- 16.3 GP surgeries should not send any patient details, known as personal confidential data (PCD) to the CCG without the consent of the patient.
- 16.4 The customer care team will feed back trends and themes in relation to queries raised by practices to practices in a number of ways including via a customer care quarterly report, via a GP newsletter and practice manager forums.

17.0 Complaints about general practice, dentists, community pharmacists and opticians

- 17.1 As NHS England (NHSE) is the commissioner for GP services, dental, pharmaceutical and opticians, complaints received by the CCG will be referred to NHSE for resolution (should the complainant not want to contact the service or practice directly). The complainant can also submit their complaint directly to NHSE.

18.0 Compliments

- 18.1 Any compliments received by the CCG in respect of the services that they commission will be shared with the relevant commissioning team and provider organisation.

19.0 Record keeping

- 19.1 The CCG will maintain accurate and up to date electronic complaints files for each case processed.
- 19.2 Complaints records will be created and stored electronically on the CCG's 'Pentana' system and will be accessible to authorised users.
- 19.3 Hard copy files will be stored in a locked cabinet and only accessible to authorised users.
- 19.4 Complaints files will be kept for a minimum period of ten years (from the date of creation) as per NHS records management guidelines.

19.5 The GP web-based reporting system is only available to GP practices. The route path for GP correspondence received in this way is via a restricted customer care email system.

20.0 Reporting and quality assurance

20.1 Customer care activity is reported via a quarterly report to the CCG's Patient Voice Committee for assurance.

20.2 The customer care team monitors the effectiveness of complaints processes and how the information is being used to improve services and delivery of care.

20.3 Themes and trends of complaints are shared with the quality and performance team to support service improvement and help achieve better outcomes for patients.

21.0 Patient stories

21.1 The CCG is committed to listening to patients, carers and members of the public who access the services that the CCG commission in order to improve the quality of services delivered.

21.2 The CCG wants to hear from patients, carers and members of the public who would like to share their experiences. The experience will be captured as a patient story. Patient stories can be in respect of positive or poor experiences of care. Consent will always be obtained from the person relaying their story. Examples of patient stories that have been presented to the Governing Body can be found on the CCG's website:

<https://www.chorleysouthribbleccg.nhs.uk/patient-stories>

21.3 Patients, carers or members of the public who want to share their experiences with the CCG via a patient story can contact the customer care team using the contact details outlined within section 26.1.

22.0 Equality and diversity

22.1 The CCG is firmly committed to the principles of equality and diversity in all areas of its work. We believe that we have much to learn from diverse cultures and perspectives, and that diversity will make our organisation more effective in meeting the needs of all our patients and stakeholders. We are committed to developing and maintaining an organisation in which differing ideas, abilities, backgrounds and needs are fostered and valued, and where people with diverse backgrounds and experiences are able to participate and contribute.

22.2 Patients and/or their nominated representatives will be treated with dignity and respect when their complaint, concern or query is being dealt with. The CCG will reassure complainants that raising concerns will not prejudice the treatment and care provided.

22.3 The CCG will not discriminate on the grounds of gender, marital status, race, ethnic origin, colour, nationality, national origin, disability, sexuality, religion or age. We will oppose all forms of unlawful and unfair discrimination.

23.0 Safeguarding and quality

23.1 The customer care team will deal with complaints in line with the CCG's safeguarding policy.

23.2 Any concern, enquiry or complaint that may be deemed to have a safeguarding issue will be shared with the CCG's safeguarding team for advice and information.

23.3 Any concern, enquiry or complaint that has an element of compromised patient safety will be shared with the CCGs quality team for advice and information.

23.4 Any concern, enquiry or complaint that contains anything that may affect the CCG's reputation will be reported to the CCG's communications team.

24.0 Legal: possible claims for negligence

24.1 Under the NHS Complaints Regulations 2009, the complaints procedure does not cease if a claim for negligence is received. The default position since 1 April 2009 is where a complainant expresses an intention to take legal proceedings, an NHS body should continue to try to resolve the complaint quickly unless there are compelling legal reasons not to do so.

24.2 The Department of Health issued a clarification note in January 2010 to remind NHS bodies of this revision. The CCG will take advice from NHS Resolution (formerly the NHS Litigation Authority) if a letter of claim is received relating to a complaint being investigated at the time of receipt of the claim.

24.3 Where the complainant is taking, or plans to take, legal proceedings, a complaint may only be put on hold where there are exceptional reasons to justify it (or the complainant has requested that investigation be delayed).

24.4 In the early part of the process, it may not be clear whether the complainant simply wants an explanation and apology, with assurances that any failures in service will be rectified for the future, or whether the complainant is in fact seeking information with formal litigation in mind.

24.5 An open and sympathetic approach and response may satisfy the complainant and in all cases, NHS bodies should make clear to people who are concerned it is taking an unreasonable amount of time to investigate and respond to their complaint that they can complain to the Parliamentary and Health Service Ombudsman about the delay.

25.0 Policy review

25.1 The CCG will review this policy every three years.

25.2 If there are any changes to complaints or related legislation, a review of the policy will take place immediately to reflect the changes.

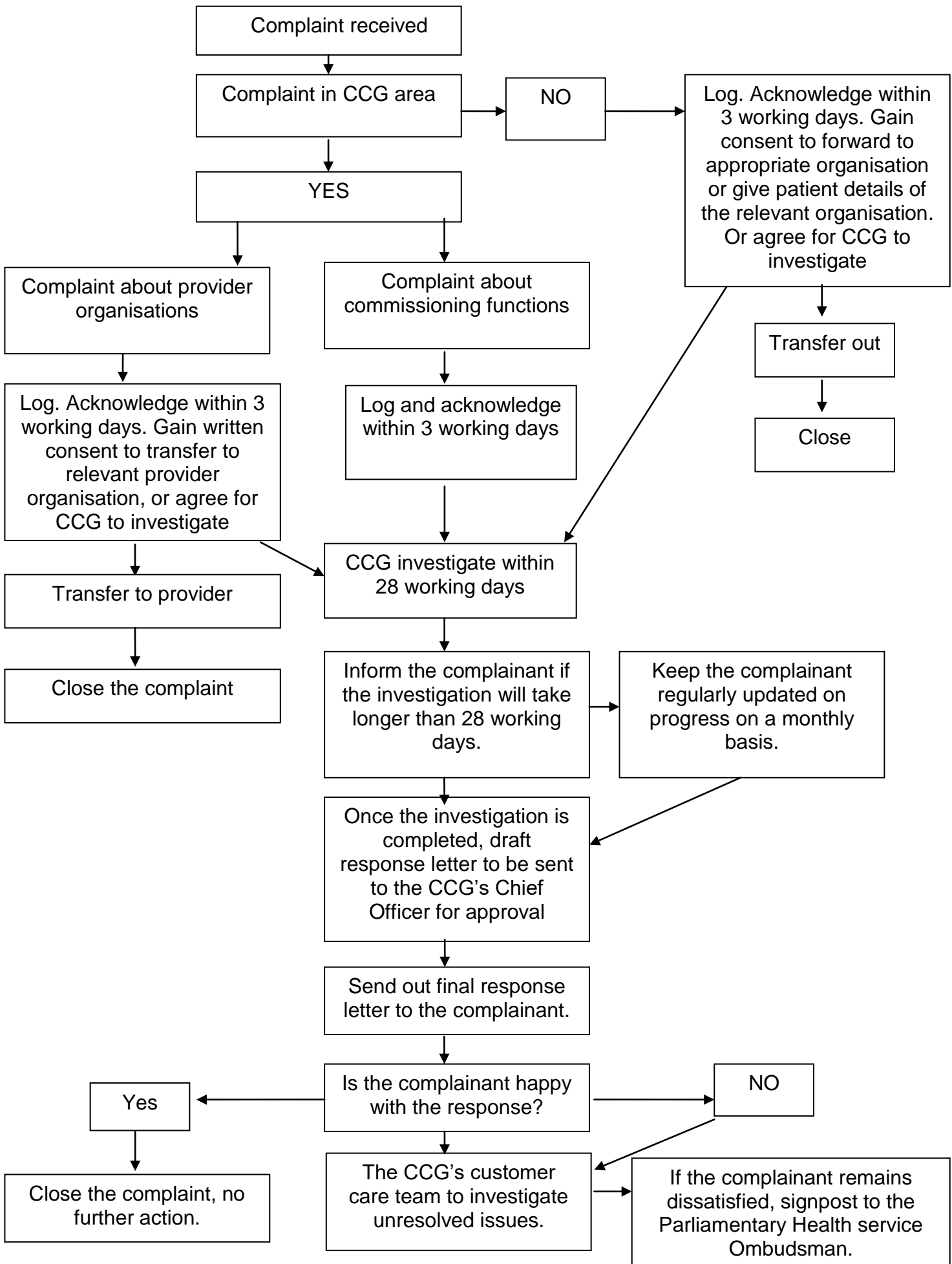
25.3 If there are any changes to relevant CCG policies or processes the policy will be reviewed as soon as practically possible to reflect those changes.

26.0 Contacting the CCG

26.1 The CCG can be contacted via the customer care team in the following ways:

- **By post:**
Customer Care Team
Chorley House
Lancashire Business Park
Centurion Way
Leyland
PR26 6TT
- **By email:**
csrccg.customercare@nhs.net
- **By telephone:** 01772 214601 or 01772 214602
**calls to these numbers will be recorded for training, quality and monitoring purposes*
- **Via the CCG website**
www.chorleysouthribbleccg.nhs.uk/contact-us

Appendix 1 Complaints flowchart



Appendix 2: Associated legislation and policies

Data Protection Act 2012

www.gov.uk/data-protection/the-data-protection-act

General Data Protection Regulation 2018

<https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr>

Equality Act 2010

www.gov.uk/guidance/equality-act-2010-guidance

Freedom of Information Act 2000

www.ico.org.uk/for-organisations/guide-to-freedom-of-information

NHS complaints regulation 2009

www.legislation.gov.uk/uksi/2009/309/pdfs/uksi_20090309_en.pdf

NHS Constitution 2012 - (updated 2015)

www.gov.uk/government/publications/the-nhs-constitution-for-england

Equality and Diversity strategy NHS Chorley South Ribble CCG

www.chorleysouthribbleccg.nhs.uk/equality-and-diversity

Freedom of Information policy NHS Chorley South Ribble CCG

www.chorleysouthribbleccg.nhs.uk/how-to-make-a-freedom-of-information-request

Information Governance policy NHS Chorley South Ribble CCG

www.chorleysouthribbleccg.nhs.uk/plans-publications-and-policies

Safeguarding Policy NHS Chorley South Ribble CCG

www.chorleysouthribbleccg.nhs.uk/keeping-children-and-adults-safe

Whistleblowing Policy

www.chorleysouthribbleccg.nhs.uk/plans-publications-and-policies

Appendix 3: Consent form

NHS Chorley and South Ribble CCG
Chorley House
Lancashire Business Park
Centurion Way
Leyland
Lancashire
PR26 6TT

Patient consent form

In line with the NHS complaints procedure, I authorise NHS Chorley and South Ribble Clinical Commissioning Group (CCG) to undertake an investigation into the complaint **I have raised/ which has been raised on my behalf** by.....
(delete as applicable), and to forward the details of the complaint to:

[Insert details of organisations involved]

I understand that the response will come directly to **me/my representative** as named below **(delete as applicable)**.

Patient's name (please print)	
Patient's address	
Patient's date of birth	
Patient's NHS Number (if known)	
Patient's telephone number	
Patient's GP surgery	
Representative's name	
Representative's address	
Representative's telephone number	

I hereby give consent for the CCG to access all information necessary to fully investigate and respond to the complaint raised, in line with the Local Authority Social Services and National Health Services (England) Regulations 2009 and the NHS Chorley and South Ribble CCG complaints policy.

I understand that I have the right to withdraw my consent at any stage in the investigation process and that if I do not give consent, or withdraw my consent, it may not be possible for the CCG to respond to my complaint.

Signed (patient).....

Date.....

Signed (patient representative).....

Date.....

Please note: If the patient is unable to provide consent, or is deceased, a copy of the appropriate documentation must be provided i.e. Power of Attorney or Grant of Probate.

Please return to the NHS Chorley and South Ribble CCG Customer Care Team at the address above, or by email to: csrccg.customercare@nhs.net

You can find out more information about how we deal with complaints on the CCG's website at: <https://www.chorleysouthribbleccg.nhs.uk/how-to-make-a-complaint> or by requesting a copy of the complaints policy directly from the customer care team.

Appendix 4: Contacts and useful information

Contacts		
Organisation	Method	Contact details
NHS Chorley South Ribble CCG	Post	Customer Care Team Chorley House Lancashire Business Park Centurion Way Leyland PR26 6TT
	Email	csrccg.customercare@nhs.net gpccg.customercare@nhs.net
	Tel	01772 214601 or 01772 214602 <i>*calls to these numbers will be recorded for training, quality and monitoring purposes</i>
	Web	https://www.chorleysouthribbleccg.nhs.uk/contact-us
Parliamentary Health Service Ombudsman (PHSO)	Post	Millbank Tower Millbank London SW1P 4QP
	Tel	0345 015 4033
Advocacy services: The Lancashire Advocacy Hub	Tel	03300 022200 http://ncompassnorthwest.co.uk/services/advocacy-service/lancashire-advocacy-hub
	Web	http://ncompassnorthwest.co.uk/services/advocacy-service/lancashire-advocacy-hub
Healthwatch Lancashire	Post	Leyland House Lancashire Business Park Leyland PR26 6TY
	Tel	01524 239100
	Mail	info@healthwatchlancashire.co.uk
	Web	http://healthwatchlancashire.co.uk
NHS England For complaints in respect of primacy care: GP/Dentists/Pharmacists/Opticians and some specialist commissioning.	Post	NHS England PO Box 16738 Redditch B97 9PT
	Tel	0300 311 22 33
	Email	england.contactus@nhs.net (please state: 'For the

Opening hours: Monday – Tuesday 8am to 6pm Wednesday 9.30 am to 6pm Thursday – Friday 8am to 6pm Closed at weekends and bank holidays	Web	attention of the complaints team' in the subject line) www.england.nhs.uk
Lancashire County Council Customer care and Complaints	Tel Email	0300 123 6701 complaintsandfeedback@lancashire.gov.uk
Lancashire Care Foundation Trust complaints department	Post Email Tel Web	Hearing Feedback Team Lancashire Care NHS Foundation Trust Sceptre Point Sceptre Way Walton Summit Bamber Bridge Preston PR5 6AW hearing.feedback@lancashirecare.nhs.uk 01772 695300 (switchboard) https://www.lancashirecare.nhs.uk/hearing-feedback-team
Lancashire Teaching Hospital Trust complaints department PALS	Post Tel Email Tel Email	Customer care Lancashire Teaching Hospitals NHS Foundation Trust Royal Preston Hospital Sharoe Green Lane, Fulwood Preston PR2 9HT 01772 522521 customer.care@lthtr.nhs.uk Preston 01772 522972 Chorley 01257 247280 pals-preston@lthtr.nhs.uk
Useful information		
Tips on how to make a complaint	Web	http://www.nhs.uk/NHSEngland/complaints-and-feedback/Pages/nhs-complaints.aspx
Information Commissioner	Web	www.ico.org.uk/for-the-public