



Complaints Policy

This should be read in conjunction with:

Significant, critical event policy

Accessibility policy

Introduction

EPIC Solutions is committed to ensuring that those who use its services are readily able to access information about how to make a complaint and that the issues raised are dealt with promptly and fairly.

EPIC Solutions aim to provide a complaints service that meets the needs and objectives of the complainant, whilst at the same time complying with the requirements set out within this policy.

EPIC Solutions recognize that the information derived from complaints provides an important source of data to help make improvements in our services. Complaints can act as an early warning of failings in systems and processes which need to be addressed.

EPIC Solutions make sure that the care of people who make complaints about our services will not be adversely affected because they have complained. Complaints correspondence is stored and recorded separately from healthcare records.

EPIC Solutions are committed to providing a complaints service to all regardless of their racial or cultural background, gender or sexual orientation, religion or disability.

EPIC Solutions are committed to providing a complaints service to anyone with additional needs. All options within the Accessibility Policy should be considered.

Scope



This policy relates to client-related complaints only. All formal client complaints, however received, should be managed as set out in this policy. Complaints from staff are dealt with under the Human Resources Policy.

Definitions

Within this policy the term formal complaint refers to any written complaint received from a client or a representative of the client. Under the NHS Complaints Regulations on receipt of any written complaint from a client EPIC Solutions is required to follow the process set out in this document.

A verbal or email complaint may be treated as a formal complaint if on discussion with the complainant he/she wishes his/her concerns to be treated formally. In this case a detailed written record must be made by the recipient of the complaint. This record should then be checked with the complainant for accuracy before forwarding to the Directors/Managers.

Clients and carers wishing to raise informal complaints only can speak to anyone working in association with EPIC Solutions and will be directed to one of the Directors or Managers of EPIC Solutions. They will discuss your complaint with you. You will be asked if we can keep an anonymised record of your informal complaint so that we can still learn from them and improve our services.

Responsibilities

Dr Vicky Hill and Dr Karen Street, Directors of EPIC Solutions, and the Managers of EPIC Solutions are accountable for ensuring that handling of complaints against EPIC Solutions meets the statutory requirements set out in National Health Service (Complaints) Regulations 2009. All written responses to formal complaints must be signed by a Director. Directors and Managers are responsible for ensuring that emerging themes are investigated and acted upon, and that themes that are consistent with those raised elsewhere (e.g. serious incidents) are identified and acted upon.

The Directors or Managers will receive and manage all formal complaints in accordance with this policy and procedure and within timescales set out



in this policy. They will identify any actual or potential issues arising from complaints that could put EPIC Solutions or their clients, employees, associates at risk, including potential legal claims. The Directors/Managers will ensure that information about the complaints procedure is available to clients and anyone else who requests it. They will inform anyone working in association with EPIC Solutions about complaints received about them and will draft responses to complaints to ensure they meet the standards expected. The Directors are responsible for review of all complaints to ensure that lessons are learnt as appropriate.

Where the complaint is about one/both Directors or Managers, it may be decided that an independent consultation is required from a trusted external colleague to ensure that the complaint is addressed without bias.

Aim of Local resolution

The main objective of local resolution is to ensure that complaints are dealt with promptly and satisfactorily by ensuring that EPIC Solutions:

- Investigates each complaint thoroughly
- Identifies any lessons to be learnt
- Ensures that appropriate remedial actions are taken
- Communicates effectively with the complainant and resolves the matter to the satisfaction of the complainant.

Verbal Complaints

Wherever possible complaints and concerns should be dealt with at the time they arise by the associate clinician, director or manager.

Formal Complaints

Clients wishing to make formal complaints should be advised to put their concerns in writing and address them to the Directors/Managers of EPIC Solutions. If a formal complaint is made orally to a Director or person working in association with/for EPIC Solutions, a written record detailing the issues of concern should be prepared by the person who has spoken to the complainant. This should then be forwarded to the complainant asking



them to confirm that the issues of concern have been correctly understood and to sign the written record.

Time Limit for Making a Formal Complaint

A complaint should be made within twelve months of the time the event(s).

Who May Complain

A complaint may be made by a client, a person acting on behalf of a client, or anyone who has been affected by any action/omission/decision of EPIC Solutions. Where a complainant is acting on behalf of a client, written consent must be obtained from the client before a response can be sent. Where the client is a child without capacity, a complaint may be made by the parent or guardian. Where the client has died, the complaint may be made by the named next of kin or by a person nominated by the named next of kin. In other circumstances where the complainant may have difficulty complaining on their own behalf or have other requirements e.g. vulnerable children and adults, or people with mental health difficulties, the Directors will review each situation in light of current legal requirements and good practice guidance from the Department of Health and offer help and support to a complainant as appropriate.

Handling a Complaint

On receipt of a formal complaint the Director/Manager will acknowledge this within three working days and give a brief indication of the process and the anticipated time for response. They will send a letter or e mail to the complainant on behalf of EPIC Solutions with either an offer of a meeting or telephone conversation with the complainant and any relevant persons working in association with EPIC Solutions and/or confirmation that a formal investigation is underway, indicating anticipated time for response.

The Director/Manager will record the details of the complaint onto the EPIC Solutions complaints register and share any complaints that may have legal implications with all Directors. The nominated Director/Manager will



monitor the agreed time scale for response to a complaint. If the Director/Manager decides to resolve the complaint by way of a formal letter of response to the complainant this may be in the form of a letter or an investigation report together with a covering letter. This process should:

1. Include details of any action which is being taken to implement changes in practice and procedure identified as a result of the complaint.
2. Ensure final letters of response or investigation reports are sent to the appropriate associate of EPIC Solutions for approval of the content before being sent to the complainant.
3. Send approved final response to complainant within agreed set timescale. If the final response will be delayed inform complainant in writing.
4. Ensure copies of the response to the complaint are sent to the relevant associate of EPIC Solutions.
5. Maintain secure and accurate records of each complaint.
6. Monitor complaints which are reopened to identify whether the initial investigation and response was appropriate or whether new issues have been raised.

Action Plans

Where the investigation of a complaint identifies the need to make changes in practice and systems, it is important that all remedial measures are clearly documented, acted upon and monitored. When associates/employees are asked to provide accounts during an investigation they should be asked to provide details of any action or procedural change which may be made as a direct result of the complaint. The relevant director/manager will be responsible for agreeing any procedural changes and the development of action plans. Action plans should be developed after the completion of the investigation into the complaint.

Details of Complaints which Warrant Professional Disciplinary or Criminal Investigation



Complaints such as professional misconduct, poor performance, theft, assault, wilful negligence or abuse will be passed to the relevant professional body of the associate/employee and/or the police as appropriate. The associate/employee concerned will not continue work with EPIC Solutions until this process is complete and they are confirmed as fit to continue practice.

Complaints about Directors/Associates

Where complaints are expressed against a director or associate, the following process should be followed (except where professional, disciplinary or criminal investigation is warranted as above). When a complaint is received regarding a director or associate, information should be obtained from that person via interview or statement. Following review by the investigating director/manager, action such as counselling, supervision or training should be initiated as appropriate, or consideration will be made by the directors of EPIC Solutions re the continuing association/employment.

Where the complaint is about one/both Directors or Managers it may be decided that an independent consultation is required from a trusted external colleague to ensure that the complaint is addressed without bias.

Complaints received via the media

EPIC Solutions will not enter into correspondence with complainants via the media. People who get in touch with the local press to complain about the care they or their relatives have received should be advised to contact the Directors/Managers if they wish to pursue a formal complaint against EPIC Solutions. The Directors/Managers will prepare statements on specific issues where this is considered to be appropriate.

What cannot be investigated as a formal complaint

The formal complaints process will be suspended if the complainant expresses an intention to pursue a legal claim against EPIC Solutions or the complaint concerns a director, associate or employee who is, or may be,



subject to disciplinary proceedings relating to the issue raised in the complaint.

In either of the above circumstances, the complainant will be notified in writing that the complaints procedure has been suspended and that the matter is being dealt with in accordance with medico-legal or human resources policies and procedures. There will be ongoing liaison with the complainant where appropriate.

Performance standards

EPIC Solutions has set the following performance standards:

- Formal complaints must be acknowledged on the first working day after receipt of the complaint (usually within 3 days). If this is not achieved then an explanation for the delay should be included on the complaints file.
- EPIC Solutions target timescale for responding to formal complaints is twenty five working days.

EPIC Solutions recognizes that it is not always possible to achieve this particularly where a complaint is complex. However, it is the responsibility of the Directors/Managers of EPIC Solutions to ensure that timescales set out in 'this complaints policy' are adhered to wherever possible.

Handling of persistent complainants

Persistent or habitual complainants may cause significant problems for EPIC Solutions both in terms of Director/Manager time and emotional stress. Such complainants tend to make frequent complaints but each one is distinct. The amount of time taken to investigate each issue should be determined by the seriousness of the issue and not by the type of complainant. Therefore, in some instances, only a brief response may be required whilst in others a more detailed explanation will be needed.

At the same time EPIC Solutions has a duty to protect associates against outright abuse of their person or time and it is necessary to identify unreasonably persistent complainants and to have in place a procedure for dealing with this.



A persistent or habitual complainant may meet one or more of the following criteria:

- Is in frequent contact with the Directors/Managers of EPIC Solutions
- Will contact EPIC Solutions by telephone or in person despite having been given a date for a meeting or advised of the timescale for a written response
- Is aggressive or abusive
- Is adamant their concerns have not been addressed despite having received detailed responses
- Having received a response contacts the Directors/Managers of EPIC Solutions immediately with a new set of questions or presents the original problem in a different way
- Changes the complaint or what they want to achieve part-way through the process
- Dictates who they will speak to and/or meet with
- Seeks an unrealistic outcome and expresses an intention to pursue the complaint until that is achieved

A complainant may meet some or all of the above criteria; the final decision about what action to take will rest with the Directors. In all cases where a complainant is classified as being 'unreasonably persistent' a letter will be sent to them explaining why it is believed that their behaviour falls into that category and what action EPIC Solutions is taking. The options are most likely to be:

- Requesting that they contact EPIC Solutions in a particular form (e.g. by letter only).
- Requesting that they make contact with one particular named person.
- Restricting their telephone calls to specific days and times and/or
- Asking them to enter into an agreement about their future behaviour

Where the complainant fails to comply with the above and continues to behave in a way which is unreasonable, the EPIC Solutions Directors/Managers may decide to terminate further contact with the complainant. The complainant will be advised of this in writing by the



Directors. Any further correspondence which is received will be read but not acknowledged unless there are new issues of concern.

New complaints received from people who have been dealt with under the Persistent Complainant's Policy will be assessed by the Directors and dealt with as considered to be appropriate.

Process for monitoring compliance with this Procedure

The Managers will provide a quarterly report for business meetings detailing the progress of management for any complaint received in the year (and any open complaints from the previous year). The report will show compliance with the complaints process by indicating the identification of the lead for preparing a response and timeliness of response. It will detail any lessons learned and any actions taken or planned in response to the complaint. Monitoring of changes agreed as a result of feedback from complaints will be monitored by the Directors.

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Appendix 1:

Process for handling formal complaints

Day 1

Receipt of complaint.

First working day of Director, after receipt of complaint

Director acknowledges receipt and advises complainant of process and timescale.

First working day of Director, after receipt of complaint

Director logs complaint and makes plans to investigate the complaint. Response required within two weeks. Response to clearly state whether elements of the complaint are upheld or not upheld. If a complaint is upheld, state what lessons will be learnt from the complaint, and what actions will be taken by the service.

By day 20

Complaints investigation completed.

Director formulates response. Proposed response checked for accuracy and approved by any associate involved and the second director of EPIC Solutions.

Day 22-24

Final revision of response. If there is an unavoidable delay so that the response cannot be completed within 25 days, the Director will contact the complainant to inform them of the expected timescale.

By day 25

Finally approved letter signed by Director and posted/e mailed to the complainant.



Appendix 2:

Guidelines for staff on preparing a report in response to a complaint, legal claim or other formal investigation

An associate of EPIC Solutions may be required to prepare a factual account of their involvement in the care of a client for a variety of purposes. These can be:

- As part of an internal investigation, following an incident
- In response to a letter of complaint
- In response to an indication that a client or relative is considering legal action against EPIC Solutions

In all cases there are some basic principles that should be followed:

- A report (or indeed a letter) once signed and 'on the record' is difficult to retract
- Such a report does not form part of the clinical records however, the client usually has the right to see a copy under the Data Protection Act 1998.
- The granting of 'legal professional privilege' (ie preventing the client from obtaining a copy of a report) is only possible once there is a clear indication that a client/relative is suing and the 'primary purpose of such a report is in support of a defence of a case.
- Following an adverse event or a serious complaint, there will be an expectation that a report will be prepared and therefore such reports are likely to be seen by the client on request.

Therefore, the following guidelines should be adopted whenever you are called to write a report:

1. Do not write in haste or from memory. Ensure that you have the available factual evidence to hand (i.e. clinical notes/other records relating to the client).
2. Start your report in the following way *I am Dr/Ms/Mr/Mrs.....(full name)*.



I hold the qualifications of I am currently in the post of, a post that I have been in since..... If you are not still in the post that you held at the time of the event provide details of that post and your role on the day in question. If you are a trainee/recently qualified briefly describe the relevant experience that you had had up to the event.

3. Consider carefully what you write, stick to the facts of which you are certain, and do not stray into areas of practice that are outside your area of expertise.
4. Account for your actions. Think of the report as relating your thought processes, -why you wrote what you did, how did you arrive at your diagnosis and treatment plan. Do not simply regurgitate the clinical record.
5. Do not be afraid to be over detailed. If it is fact then it can only help.
6. If, in the clinical record, you used any acronyms or diagrams explain them.
7. If you genuinely cannot remember the particular client/episode of care then it is acceptable to state this, e.g., "I only have a hazy recollection of this client/this event, and therefore I am making this record from the records that were made by me and colleagues at the time and my usual practice. Be clear in such situations to state whether you are interpreting the records without direct memory or just stating your usual practice.

Keep it factual

Concentrate on what was done, by whom. Do not stray into what might have happened.

Do not record opinions in such an account. Usually at the early stages of an investigatory process your opinions as to what went wrong are best



kept to yourself, or discussed verbally with the investigation when your factual account is complete.

If you are inexperienced at preparing such a report seek advice from one of the Directors of EPOC Solutions. Present the Directors with a draft and do not sign it until you have obtained advice. When the final version is complete, destroy drafts, or they may become part of the legal documentation. (Drafts, if not destroyed can be requested as disclosable documents).