



Medipro Training Limited

## COMPLAINTS POLICY

Document Profile Box	
Document Reference:	MEDIP 01
Version:	0002
Ratified by:	Directors
Date ratified:	
Name of originator/author:	Brian English
Name of responsible committee/individual:	Complaints Officer
Date issued:	MAY 2011
Review date:	MAY 2012
Target audience:	
Document owner:	MEDIPRO TRAINING LTD
Authorised signatory:	

## Contents

<b>Paragraph</b>		<b>Page</b>
1	Introduction	3
2	What Is A Complaint?	4
3	Who Can Complain?	4
4	Why Complain?	4
5	Why Have A Complaints Policy?	4
6	Policy Objectives	5
7	Initial Response to Complaints	5
8	Verbal Complaints To Staff	5
8	Personal Visits	8
9	Anonymous Complaints	8
10	Telephone Complaints	8
11	Letters of Complaint	9
12	Registration of Complaint	9
13	Letter of Acknowledgement	15
14	The Investigation	18
15	A Substantive Reply	23
16	Complaints Questionnaire	23
17	Awarding Bodies	27
18	Confidentiality	27
20	Special Cases	27
21	Monitoring & Analysis	28
22	Procedure For Handling Habitual or Vexatious Complainants	28
22.1	Introduction	28
22.2	Purpose Of This Procedure	29
22.3	Definition Of A Habitual Or Vexatious Complainant	29
22.4	Option For Dealing With Habitual Or Vexatious Complainants	30
22.5	Withdrawing 'Habitual Or Vexatious' Status	31
23	Equality & Diversity Statement	31

## **INTRODUCTION**

Complaints are viewed by Medipro Training Limited as a significant opportunity for improvement and by listening to our users, students, coaches, GPs etc the company will ultimately be able to achieve its mission statement.

It is our objective to satisfy complainants that the company, and its staff, take their dissatisfaction seriously and to convince them that investigations will be thorough and objective, and where appropriate, action will be taken to prevent a reoccurrence and to improve service delivery.

This Policy has been developed to deal with complaints raised by patients and their representatives. It is not intended for use when dealing with complaints or grievances from staff. Staff are directed to use the Companies Grievance Procedure.

This policy will be reviewed annually on 1 May.

## **1. WHAT IS A COMPLAINT?**

- 1.1. A complaint is an expression of dissatisfaction that requires a response, however made, about services provided by Medipro Training Ltd.
- 1.2. Requests regarding services or for information are not complaints and are subject to the Companies Policy on Openness.

## **2. WHO CAN COMPLAIN?**

- 2.1. Anyone receiving or seeking a service from the Company and anyone acting for those unable to complain personally.
- 2.2. A complainant does not, therefore, have to be a user of the Company's services.

## **3. WHY COMPLAIN?**

- 3.1. Complaining is one of several ways in which students, their employers, make their views known to Medipro when their expectations have not been met. It is often hard for complainants to voice their concerns and they can feel frightened and vulnerable.
- 3.2. Some complainants want an apology, others an explanation, some want redoubled efforts or staff to be reprimanded. Some want a decision or procedure reversed or something to be done more quickly; the making good of loss through compensation; a waiver or reduction of a fee; an assurance that the cause of the grievance will not recur; answers to specific questions; an official investigation; a meeting with staff; restoration of possessions; remedial treatment; or someone punished.

## **4. WHY HAVE A COMPLAINTS POLICY?**

- 4.1. To ensure that the company responds in the most appropriate way to all complaints.
- 4.2. Commissioners of companys services, users and staff are entitled to bring to the attention of the companies aspects of services, about which they are unhappy. Suggestions, constructive criticism and complaints, can be valuable aids to management in maintaining and developing standards throughout the company.
- 4.3. It is important that no one (commissioners of company services, users or staff), should be inhibited from making valid complaints and that there is full confidence that all complaints, will be given full, proper and speedy consideration.
- 4.4. Many matters that cause concern and that may have the potential of escalating into a complaint, can be dealt with as they arise. All staff have

responsibilities regarding such matters and should deal with them in a way which reassures.

## **5. POLICY OBJECTIVES**

- 5.1. Accessibility – to ensure ease of access for all complaints.
- 5.2. Simplicity and Speed – to ensure that they are directed to the appropriate investigating officer as quickly as possible and to ensure complainants know to whom they should complain.
- 5.3. Impartiality – to maintain fairness for staff and complainants alike.
- 5.4. Quality Enhancement – to ensure action is taken to prevent a recurrence of identified problems wherever possible.
- 5.5. Responsiveness – to ensure complainants are kept fully informed about the progress of their complaint as well as the eventual outcome.
- 5.6. Cost Effectiveness – to promote greater customer awareness amongst staff and to ensure that the requisite training is given to all staff who receive and investigate complaints.
- 5.7. Accountability – to monitor and analyse complaints and use the data to form company policy, improve services and systems and develop in all staff increased levels of customer awareness.

## **6. INITIAL RESPONSE TO COMPLAINTS**

- 6.1. Whichever way the Company is contacted, it will handle all complaints quickly, politely, efficiently, fairly and in a straight forward, yet sensitive manner.
- 6.2. Complainants must always be advised of assistance to be obtained from Independent Complaints Advocacy Service with regard to their complaint.

## **7. VERBAL COMPLAINTS TO STAFF**

- 7.1. Wherever possible verbal complaints to staff will be resolved as they occur.
- 7.2. If the complaint cannot be resolved at the time, it is the staff member's responsibility to inform the complainant of the procedure for lodging a complaint, either by telephone or letter.
- 7.3. If the complaint is resolved immediately the member of staff must complete an Informal Complaint Report and forward it to the Complaints Officer.

**Medipro Training Limited****INFORMAL COMPLAINT**

Received by:		Date:	
--------------	--	-------	--

Name:	
Address:	
Telephone Number:	

Details of Concern:			
Teaching		Staff Attitude – Management	
		Staff Attitude – Instructor	
		Staff Attitude – Conference Centre	
Equipment			
		Reluctance to Help	
		Inappropriate Advice	
Lack of Care – Management			
Lack of Care – Instructor			
Lack of Care – Conference Centre		Poor Level of Service	

Resolution:

Officer:	
----------	--

## Informal Complaint - Control

<b>Name:</b>	
<b>Status:</b>	
<b>Location/Geographical Area: eg Name of Company</b>	
<b>Telephone Number:</b>	

**Details of Concern (Please tick):**

	Staff Attitude	Lack of Care	Refusal/Reluctance To Help	Late for Appointment	Poor Equipment	Other			
Management									
Instructor									
Conference Centre									
Other									

**Summary/Outline of Complaint**

**Action Taken:**

<b>Has this Action Resolved the Concern?</b>	Y	N
--	---	---

**If not, who should resolve the concern?**

<b>Action Closed out by:</b>	<b>Date:</b>	<b>Passed to Complaints Officer on (Date):</b>
------------------------------	--------------	--

## **8. PERSONAL VISITS**

- 8.1. Personal callers to Company Headquarters will be referred to the Complaints Officer, who will listen to the complaint and try to resolve it at the time of the visit.
- 8.2. If this is not possible, the Complaints Officer will explain that further investigation is required and will outline, to the complainant, the procedure that this will follow.

## **9. ANONYMOUS COMPLAINTS**

- 9.1. Complaints received anonymously either over the telephone or in writing must be referred to the Complaints Officer who will give careful consideration to determine if further investigation is required. Unless further action is required, it will not be registered as a formal complaint.

## **10. TELEPHONE COMPLAINTS**

- 10.1. During normal business hours telephone complaints will be referred to the Complaints Officer or nominated representative in their absence. If calls are made outside of business hours calls will be responded to as quickly as possible by the Director on call.
- 10.2. On receipt of the call, it is the receptionist's responsibility to put the complainant in contact with the Complaints Officer, who will deal with the problem.
- 10.3. In the event the Complaints Officer or nominated representative is unavailable, the receptionist/controller will record relevant details and arrange for the Complaints Officer to contact the complainant as soon as possible.
- 10.4. If the complaint is of a serious nature, the Complaints Officer may ask that the complaint be put in writing. Those complainants who may have difficulty will be referred to their Independent Complaints Advocacy Service for assistance, although the complaint will be registered and investigations will begin immediately.
- 10.5. All complaints will be registered, within the Companies complaints system, regardless of origin.
- 10.6. In the event the Complaints Officer is absent due to holiday/sickness, then the role of the Complaint Officer falls within the Quality Department and the appropriate actions will be taken in line with the complaints procedures.

## **11. LETTERS OF COMPLAINT**

11.1. All letters of complaint should be directed to:

The Complaints Officer  
Medipro Training Limited  
Millennium Court  
Ellerbeck Way  
Stokesley  
TS9 5JZ

Tel 0845 8387322  
Fax 0845 8387344

11.2. All letters of complaint must be forwarded to the Complaints Officer, upon receipt, for registration.

## **12. REGISTRATION OF COMPLAINT**

12.1. The Complaints Officer is responsible for ensuring complaints are handled in accordance with this procedure.

12.2. Registration will be in a standard format that will include:

- i) complaint reference number, to be used as a reference number for all future communications;
- ii) date of receipt of complaint;
- iii) name, address and telephone number of complainant;
- iv) complainant's relationship to the Student;
- v) Student details;
- vi) details of the complainant;
- vii) details of the investigating officer(s).

12.3. If the complaint appears to be of a clinical nature, the Complaints Officer will liaise with the Director of Strategy & Clinical Standards or the Clinical Development Manager.

12.4. At this stage the Complaints Officer is responsible for ensuring that all details of the complaint are forwarded to the investigating officer.

12.5. A central Register of Complaints will be maintained by the Complaints Officer.

COMPLAINTS REGISTRATION FORM FOLLOWS.

SAMPLE OF COMPLAINTS REGISTER FOLLOWS.

**MEDIPRO TRAINING COMPLAINTS INVESTIGATING OFFICERS**

Management Complaints

Investigated by Directors

Instructors Complaints

Investigated by Training Manager  
Directors

Conference Complaints

Investigated by Instructors  
Training manager  
Directors

Executive Officer

Note In the event that any of the above are seconded to different roles then the individual acting up in the role will act as Investigating Officer.

**IN STRICT CONFIDENCE****MEDIPRO TRAINING LIMITED****COMPLAINT REGISTRATION FORM****Ref No: YY-YY/no****SECTION 1**

Complainant Details:		
Name:	Address:	
Telephone No:	Ethnicity:	Relationship to Student:

**SECTION 2 WRITTEN/VERBAL**

Date Received	Acknowledged	Date Returned	Date Reply Sent	Date Filed

**SECTION 3**

Details of Concern:		
Teaching		Staff Attitude – Management
		Staff Attitude – Instructor
		Staff Attitude – Conference Centre
Equipment		
		Reluctance to Help
		Inappropriate Advice
Lack of Care – Management		
Lack of Care – Instructor		
Lack of Care – Conference Centre		Poor Level of Service

**SECTION 6**

Summary of Complaint
1.
2.
3.
4.
5.
Additional Areas Identified by Complainant (Following Contact)
1.
2.

**SECTION 7**

Investigation Out:		
Referred To:	On:	Date Due Back:

**SECTION 8**

<b>SIGNATURE OF INVESTIGATING OFFICER:</b>	
--	--

<b>INVESTIGATION REPORT INCLUDES:</b>
---------------------------------------

- Title page
  - Introduction
  - Detail of Investigation
  - Conclusion (s)
  - Recommendation (s)
- |  |
|--|
|  |
|  |
|  |
|  |
|  |

**APPENDICES (To include where appropriate):**

- Complainant (s) statement (s)
  - Staff statement (s)
  - Student Statement
  - Student Feed Back Forms
  
  - Other (please indicate
- |  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |

<b>DATE INITIAL CONTACT MADE WITH COMPLAINANT:</b>	
--	--

<b>IF DELAY – DATE (S) CONTACT MADE WITH COMPLAINANT:</b>
1.
2.
3.

**SECTION 10:**

Blameworthiness/Action Required:							
Upheld	Not Upheld	Part Upheld	Management	Instructors	Support Services		Other
Action Required NO Signed:				Date:			
Action Required YES Signed:				Date:			
Action Completed Signed:				Date:			



# Medipro Training Limited

## COMPLAINTS REGISTER

MONTH:

Comp Ref No	Date Received	Nature of Complaint	Outcome of Investigation	Date Inv Completed	Date Reply Sent	NU	PU	U	Comments

### **13. LETTER OF ACKNOWLEDGEMENT**

13.1. All complaints will be acknowledged in writing, within 2 working days, by the Complaints Officer, and a copy of the Companies Complaints Procedure will be enclosed.

SAMPLE ACKNOWLEDGEMENT LETTERS FOLLOW

Our Ref : example

Your Ref:

Dear

I am writing in response to your letter received today in which you express concern at the events that transpired Medipro Training Ltd responded a request ..... I have registered your concerns as a formal complaint and a full investigation will be carried out.

I enclose a leaflet that explains the Medipro Training Ltd Complaints Procedure. Medipro Training Limited welcomes the opportunity to learn from complaints and you can be assured that if our investigation determines that the company has failed to provide a satisfactory level of service then action will be taken in order to reduce the risk of there being any recurrence. I would also seek to assure you that every effort will be made to ensure that the investigation is conducted in a manner that is both fair and unbiased.

In the meantime please accept my apologies on behalf of Medipro Training Limited and should you have any further queries please do not hesitate to contact me.

Yours sincerely

Our Ref : example

Dear

I am writing in response to your telephone call yesterday during which you expressed concern at the ..... I have registered your concerns as a formal complaint and a senior officer will be appointed to carry out a fair and unbiased investigation, and he will contact you in the near future.

I enclose a leaflet that explains the Medipro Training Complaints Procedure.

Medipro Training Limited welcomes the opportunity to learn from complaints and you can be assured that if our investigation determines that the Trust has failed to provide a satisfactory level of service to any of our patients then action will be taken in order to reduce the risk of there being any recurrence.

In the meantime should you have any further queries please do not hesitate to contact me.

Yours sincerely

## 14. THE INVESTIGATION

- 14.1. On receipt of the complaint, the investigating officer, must identify those staff involved, and if there is a potential conflict of interest will advise the Complaints Officer immediately. He/she will decide what action is required. The action taken will be sufficient to determine:
- a. a full understanding of the problem and its cause;
  - b. a full understanding of what it is the complainant wants;
  - c. confirmation that recovery of the situation has been achieved or will be as soon as possible;
  - d. a remedy (in addition to recovery), to prevent a recurrence wherever possible;
  - e. a full and meaningful response to the Company Directors.
- 14.2. In all cases complainants must be contacted, either by telephone or personal visit, as soon as possible to clarify details of the complaint.
- 14.3. If the complaint is of a clinical nature, the investigating officer, must consult with the Company Medical Adviser.
- 14.4. If the investigation is unlikely to be completed within 10 working days, the investigating officer must notify the Complaints Officer as soon as possible, and also contact the complainant to advise them of the reason(s) for the delay.
- 14.5. Wherever possible a substantive reply should be forwarded to the complainant within 25 working days of receipt of the complaint unless the complainant agrees to a longer period , in which case the reply may be sent within that longer period:
- a. If the complaint is of a clinical nature the file will be passed to the Director of Strategy & Clinical Standards. If non-clinical the file will be passed directly to the Directors.
  - b. If clinical, the Director of Strategy & Clinical Standards will convene a meeting of the Professional Standards Panel to review the complaint.

*UNDER NO CIRCUMSTANCES ARE INVESTIGATING OFFICERS TO GIVE VERBAL RESPONSES TO COMPLAINTS, UNLESS THEY ARE READING FROM A WRITTEN RESPONSE THAT IS THEN GIVEN TO THE COMPLAINANT.*

*ALL STATEMENTS TAKEN DURING A COMPLAINT INVESTIGATION MUST BE SIGNED AND DATED AND COUNTERSIGNED BY THE INVESTIGATING OFFICER. THIS INCLUDES STATEMENTS TAKEN FROM COMPLAINANTS AND MEMBERS OF THE PUBLIC. ANY MEETINGS HELD WITH COMPLAINANTS OR OTHER PARTIES DURING THE INVESTIGATION MUST BE FULLY DOCUMENTED.*

*SAMPLE LETTERS/COMPLAINT FILE CONTENT FOLLOW.*

## **LIAISING WITH EXTERNAL AGENCIES**

During the investigation of a complaint it becomes apparent that external agencies need to become involved then full co-operation will be given at all times.

External bodies may include: The Police, Social Services and the Ombudsman.

If the investigating officer is unsure as to the way forward when dealing with external bodies then advice should be sought from the Complaints Officer.

### **THE COMPLAINT FILE CONTENT – *SHOULD INCLUDE***

- A brief INTRODUCTION
- A copy of the LETTER OF COMPLAINT (if applicable)
- A copy of the ACKNOWLEDGEMENT LETTER
- Copies of all relevant internal DOCUMENTS (booking forms, log sheets, patient reports etc)
- Any STATEMENTS taken as part of the investigation
- A SUMMARY of the investigation
- A CONCLUSION (is the complaint upheld, part upheld or not upheld)
- Any RECOMMENDATIONS AND/OR ACTION TAKEN
- An indication of whether the complaint is Upheld, Part Upheld or Not Upheld.

---

# MEMORANDUM

---

## PRIVATE AND CONFIDENTIAL

To:

Date:

Our Ref:  
**example**

Re:

**COMPLAINT INVESTIGATION**

Please find enclosed details relating to complaint: **YY-YY/ no**

I should be grateful if you would carry out a full investigation into the complaint, and submit your report to the Directors by no later than

**Section 1 of Medipro 03 identifies the main area(s) of the complaint from the initial contact/letter. You should also make direct contact with the complainant as soon as possible after receiving the file and check that there are no additional areas to be investigated. Where the investigation is likely to extend beyond the deadline you must notify the complainant and indicate this on the Form Medipro 05 form.**

I enclose copies of Medipro 06 and Medipro 07 form that must be completed and forwarded to me where necessary. You are reminded that the Companies Complaints Procedures lay down strict guidelines with regard to the time-scales for responses to complainants and every effort must be made to complete the investigation on time.

### **On completion of your investigation:**

- **the file must be returned to the Complaints Officer within 24 hours**
- **you must ensure that all appropriate sections of Form are completed, and that**
- **all relevant documentation is included (see check list)**
- **all staff involved in the complaint are clearly identified in your report**

If at any stage the complainant decides to withdraw the complaint you must notify me in writing as soon as possible, indicating what action if any have taken.

---

# MEMORANDUM

---

## PRIVATE AND CONFIDENTIAL

To:

Date:

Our Ref:  
**example**

Re:

**COMPLAINT INVESTIGATION**

Please find enclosed details relating to complaint: **YY-YY/ no**

I should be grateful if you would carry out a full investigation into the complaint, and submit your report to the Directors by no later than

**Section 3 identifies the main area(s) of the complaint from the initial contact/letter. You should also make direct contact with the complainant as soon as possible after receiving the file and check that there are no additional areas to be investigated. Where the investigation is likely to extend beyond the deadline you must notify the complainant and indicate this on the Form.**

I enclose copies that must be completed and forwarded to me where necessary. You are reminded that the Companies Complaints Procedures lay down strict guidelines with regard to the time-scales for responses to complainants and every effort must be made to complete the investigation on time.

### **On completion of your investigation:**

- **the file must be returned to the Complaints Officer within 24 hours**
- **you must ensure that all appropriate sections of Form are completed, and that**
- **all relevant documentation is included (see check list)**
- **all staff involved in the complaint are clearly identified in your report**

If at any stage the complainant decides to withdraw the complaint you must notify me in writing as soon as possible, indicating what action if any have taken.

**MEDIPRO TRAINING LIMITED**

---

**MEMORANDUM**

---

To:

Date:

Our Ref:

Re:

**COMPLAINT NO: YY-YY/ no**

---

With regard to the above, please be advised that the complaint has been passed onto the officer named below for investigation:-

Name: \_\_\_\_\_

Based at: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

## 15.A SUBSTANTIVE REPLY

- 15.1. Final responses to complaints, will always be issued by the Directors, and if clinical in nature he will be assisted by the Director of Strategy & Clinical Standards and/or the Companies Medical Adviser.
- 15.2. The minimum requirements for a meaningful responses are:
  - a. a statement of sympathetic understanding of the complaint;
  - b. an apology if the complaint is upheld or part upheld. If the complaint is not upheld, the Directors may wish to apologise on the companies behalf, for any failure of communication that led to the complaint;
  - c. an open and honest explanation of what went wrong, or of the relevant policy or legislation etc that may have given rise to the complaint;
  - d. The intended actions to provide a remedy or reasons why the companies believes no remedial action is necessary;
  - e. Details of the action the complainant may wish to take if they remain dissatisfied with the response.
- 15.3. The date of the substantive reply will be registered.
- 15.4. The appropriate Manager will hold a close-out meeting with those staff involved in the complaint as soon as possible after the final response has been issued in order that those staff are made aware of the outcome.

## 16.COMPLAINTS QUESTIONNAIRE

- 16.1. Within 5 days of the Directors issuing his letter of response a response a questionnaire will be forwarded to the complainant by the Complaints Officer.
- 16.2. On receipt of the completed questionnaire, the Complaints Officer will record the results.

SAMPLE LETTER FOLLOWS

SAMPLE QUESTIONNAIRE FOLLOWS

Our Ref: **example**

Your Ref:

Dear

You recently found it necessary to submit a complaint with regard to the level of service provided by Medipro Training Limited that has been investigated and a formal response issued by our Directors. In order to enable the Companies to determine the effectiveness of its Complaints Procedure we seek to analyse every complaint received.

I would be grateful if you could spare a few minutes to complete the enclosed questionnaire and return it to me in the pre-paid envelope that is also enclosed.

Thank you in anticipation of your assistance.

Yours sincerely

## Medipro Training Limited COMPLAINANTS SATISFACTION SURVEY

Complaint Ref No:- .....

1. When you first felt the need to complain, did you know who to direct your complaint to?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

2. Were you able to discuss your complaint with a member of staff at the time?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

3. Did you need to speak to more than one person to register your complaint?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

4. Did you feel your complaint was taken seriously?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

5. Did you feel the Company responded quickly to your complaint?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

6. In our response to you, did you feel that all the points you raised in your complaint had been investigated?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

7. If you agreed to your complaint required action, did our letter give an indication of what we are going to do about it?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

8. If we failed to deliver a satisfactory service, did we explain why?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

9. If we made a mistake, were we honest and open about it?

	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>
--	-----	--------------------------	--	----	--------------------------

10. How satisfied are you with the way your complaint was dealt with?

- Very satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

We would be happy to hear of any suggestions you have which might help us improve the way we handled your complaint. If you can think of any comments, please place these below:

.....

.....

.....

.....

## 17. AWARDING BODIES

- 17.1. If the complainant remains unhappy with the outcome of a complaint, they can then refer the complaint direct to the awarding bodies for review. This must be done within 2 months of receiving the final formal response. The Complaints Officer must ensure that details of how to contact the relevant awarding bodies are included in the final response letter.
- 17.2. When contacted by the awarding body, the Complaints Officer will ensure that all information requested is sent and actions to be taken are completed within the timescales set by the awarding body.

## 18. CONFIDENTIALITY

- 18.1. All recorded information will be treated as confidential.
- 18.2. Information concerning any students will only be released to a third party. If the third party, has made representation to the Company on behalf of the Student, and where appropriate the Student has consented to the release of information. No confidential information will be divulged over the telephone, unless the caller can provide satisfactory means of identification (ie complaint registration number and student details)

## 20. SPECIAL CASES

The Companies Complaints Procedure is only applicable to complaints involving Students. Other complaints may be received and will be dealt with as follows:

- 20.1 If any complaint relates to the actions of a Senior Manager of the company, it will be referred to the appropriate Director for investigation and response.
- 20.2 If the complaint includes allegations of financial impropriety, it will be referred to the Director of Finance for investigation.
- 20.3 Complaints about alleged criminal activity will also be referred to the Directors and Director of Finance and subsequently, if appropriate, the Police would be involved.

Directors and Senior Managers are instructed not to make direct referrals to the Police without first contacting the Directors and/or Director of Finance. In such cases the requirements of the Companies Fraud Policy and Response Plan will be followed.

- 20.4 In cases of serious complaints against or involving staff, the relevant Director will be informed along with the Chief Executive Director and the matter dealt with in accordance with the companies Disciplinary Procedures.

## **21 MONITORING AND ANALYSIS**

- 21.1 Upon closure of the file, all details will be forwarded to the Complaints Officer, for monitoring and trend analysis, as directed by the Directors. (Closure of the file will only occur on receipt of written confirmation of action being completed by the officer responsible).
- 21.2 A bi-monthly report will be compiled by the Complaints Officer for presentation at Board Meetings.
- 21.3 Quarterly reports will be compiled by the Complaints Officer for presentation at meetings of the Complaints Committee. The Complaints Committee will convene on a quarterly basis to review complaints management. This information will be used to determine the need for any policy or procedural change or amendments, the need for any re-allocation of resources or any additional or specific staff training.
- 21.4 The minutes of the Complaints Committee will be presented to the Company Board.
- 21.5 The Company will publish annually a report on complaints handling.

## **22. PROCEDURE FOR HANDLING HABITUAL OR VEXATIOUS COMPLAIANTS**

### **22.1 INTRODUCTION**

Habitual and/or vexatious complainants are becoming an increasing problem for NHS staff. The difficulty in handling such complainants is placing a strain on time and resources and is causing undue stress for staff who may need support in difficult situations. Company staff are trained to respond with patience and sympathy to the needs of all complainants but there are times when there is nothing further which can reasonably be done to assist them or to rectify a real or perceived problem.

In determining arrangements for handling such complainants staff are presented with two key considerations. The first is to ensure that the complaints procedure has been correctly implemented so far as possible and that no material element of a complaint is overlooked or inadequately addressed and to appreciate that even habitual or vexatious complainants may have issues which contain some genuine substance. The need to ensure an equitable approach is crucial. The second is to be able to identify the stage at which a complainant has become habitual or vexatious. One approach to the situation is to develop an approved policy which is formally incorporated into the complaints procedure. Implementation of such a policy would only occur in exceptional circumstances. Information on the handling of habitual and vexatious complainants could also be made available to the public as part of the material on the complaints process as a whole.

## 22.2 PURPOSE OF THIS PROCEDURE

Complaints about services provided by the Company are processed in accordance with the Company Complaints Procedures. During this process staff inevitably have contact with a small number of complainants who absorb a disproportionate amount of company resources in dealing with their complaints. The aim of this procedure document is to identify situations where the complainant might be considered to be habitual or vexatious and to suggest ways of responding to these situations.

It is emphasised that this procedure should only be used as a last resort and after all reasonable measures have been taken to try to resolve complaints following the Company Complaints Procedures, for example through local resolution, conciliation, or involvement of the ICAS as appropriate. Judgement and discretion must be used in applying the criteria to identify potential habitual or vexatious complainants and in deciding action to be taken in specific cases. The procedure should only be implemented following careful consideration by, and with the authorisation of, the Director or their deputies in their absence. Where deputies are used, the reason for the non-availability of the Director should be recorded on the file.

## 22.3 DEFINITION OF A HABITUAL OR VEXATIOUS COMPLAINT

Complainants (and/or anyone acting on their behalf) may be deemed to be habitual or vexatious complainants where previous or current contact with them shows that they meet TWO OR MORE of the following criteria:

Where complainants –

- Persist in pursuing a complaint where the Company Complaints Procedure has been fully and properly implemented and exhausted (eg where investigation has been denied as “out of time”, where a Convenor has declined a request for Independent Review).
- Change the substance of a complaint or continually raise new issues or seek to prolong contact by continually raising further concerns or questions upon receipt of a response whilst the complainant is being addressed. (Care must be taken not to discard new issues which are significantly different from the original complaint. These might need to be addressed as separate complaints.)
- Are unwilling to accept documented evidence of treatment given as being factual, eg patient report forms, or deny receipt of an adequate response in spite of correspondence specifically answering their questions or do not accept that facts can sometimes be difficult to verify when a long period of time has elapsed.
- Do not clearly identify the precise issues which they wish to be investigated, despite reasonable efforts of staff and, where appropriate, the Independent Complaints Advocacy Service to help them specify their concerns, and/or where the concerns identified are not within the remit of the company to investigate.
- Focus on a trivial matter to an extent which is out of proportion to its significance and continue to focus on this point. (It is recognised that determining what is ‘trivial’ can be subjective and careful judgement must be used in applying this criteria.)
- Have threatened or used actual physical violence towards staff or associates at any time – this will in itself cause personal contact with the complainant and/or their representatives to be discontinued and the complaint will, thereafter, only be pursued through written communication. (All such incidents should be documented.)
- Have in the course of addressing a registered complaint, had an excessive number of contacts with the Trust placing unreasonable demands on staff. (A contact may be in person or by telephone, letter or fax. Discretion must be used in determining the

precise number of “excessive contacts” applicable under this section, using judgement based on the specific circumstances of each individual case.)

- Have harassed or been personally abusive or verbally aggressive on more than one occasion towards staff dealing with their complaint or their families or associates. (Staff must recognise that complainants may sometimes act out of character at times of stress, anxiety, or distress and should make reasonable allowances for this. They should document all incidents of harassment.)
- Are known to have recorded meetings or face-to-face/telephone conversations without the prior knowledge and consent of other parties involved.
- Display unreasonable demands or patient/complainant expectations and fail to accept that these may be unreasonable (eg insist on responses to complaints or enquiries being provided more urgently than is reasonable or normal recognised practice).

#### **22.4 OPTION FOR DEALING WITH HABITUAL OR VEXATIOUS COMPLAINANTS**

Where complainants have been identified as habitual or vexatious in accordance with the above criteria, the Directors (or appropriate deputies in their absence) will determine what action to take. The Director (or deputy) will implement such action and will notify complainants in writing of the reasons why they have been classified as habitual or vexatious complainants and the action to be taken. This notification may be copied for the information of others already involved in the complaint, eg practitioners, conciliator,. A record must be kept for future reference of the reasons why a complainant has been classified as habitual or vexatious.

The Director (or deputies) may decide to deal with complainants in one or more of the following ways:

- Try to resolve matters, before invoking this procedure, by drawing up a signed “agreement” with the complainant (and if appropriate involving the relevant practitioner in a two-way agreement) which sets out a code of behaviour for the parties involved if the Trust is to continue processing the complaint. If these terms are contravened consideration would then be given to implementing other action as indicated in this section.
- Once it is clear that complainants meet any one of the criteria above, it may be appropriate to inform them in writing that they may be classified as habitual or vexatious complainants, copy this procedure to them, and advise them to take account of the criteria in any further dealings with the Trust. In some cases it may be appropriate, at this point, to copy this notification to others involved in the complaint and to suggest that complainants seek advice in processing their complaint, eg through the ICAS.
- Decline contact with the complainants either in person, by telephone, by fax, by letter or any combination of these, provided that one form of contact is maintained or alternatively to restrict contact to liaison through a third party. (If staff are to withdraw from a telephone conversation with a complainant it may be helpful for them to have an agreed statement available to be used at such times.)

- Notify the complainants in writing that the Directors has responded fully to the points raised and has tried to resolve the complaint but there is nothing more to add and continuing contact on the matter will serve no useful purpose. The complainants should also be notified that the correspondence is at an end and that further letters received will be acknowledged but not answered.
- Inform the complainants that in extreme circumstances the Company reserves the right to pass unreasonable or vexatious complaints to the companies Solicitors.
- Temporarily suspend all contact with the complainants or investigation of a complaint whilst seeking legal advice or guidance from the Regional Office,

## **22.5 WITHDRAWING 'HABITUAL OR VEXATIOUS' STATUS**

Once complainants have been determined as 'habitual or vexatious' there needs to be a mechanism for withdrawing this status at a later date if, for example, complainants subsequently demonstrate a more reasonable approach or if they submit a further complaint for which normal complaints procedures would appear appropriate. Staff should previously have used discretion in recommending 'habitual or vexatious' status at the outset and discretion should similarly be used in recommending that this status be withdrawn when appropriate. Where this appears to be the case, discussions will be held with the Directors (or their deputies). Subject to their approval, normal contact with the complainants and application of Companies complaints procedures will then be resumed.

## **23. EQUALITY AND DIVERSITY STATEMENT**

“The Company is committed to providing equality of opportunity, not only in its employment practices but also in the services for which it is responsible. As such, this document has been screened, and if necessary an Equality Impact Assessment has been carried out on this document, to identify any potential discriminatory impact. If relevant, recommendations from the assessment have been incorporated into the document and have been considered by the approving committee. The Company also values and respects the diversity of its employees and the communities it serves. In applying this policy, the Company will have due regard for the need to:

- Eliminate unlawful discrimination
- Promote equality of opportunity
- Provide for good relations between people of diverse groups

For further information on this, please contact the Equality and Diversity Department.”