Southern Ultrasound Ltd.



42 Ascension Road. Romford. Essex. RM5 3RT Telephone: 07949 053377

Complaints Policy

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Version Control:

v1: Aug 18 KR Policy Created

v2: Sep 18 KR Re-draft of the policy to provide clearer layout and Complaints process diagram

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Statement:

Southern Ultrasound recognises that complaints may be unavoidable. It is important to us that all complaints are dealt with, in as constructive a manner as possible to the satisfaction of all parties. We shall attempt to act impartially in the investigation of all complaints and shall attempt to ensure that lessons are learnt by each unfortunate occasion.

Southern Ultrasound Ltd shall make every effort to ensure that the number of complaints received from our stakeholders is kept to a minimum.

Purpose & Scope:

The following policy has been established to ensure that where a complaint does arise, it is dealt with in a professional, speedy and courteous manner. The policy has been written to comply with the requirements of the NHS England complaints system, as modified in 2009, and the CQC Regulation 16 (Receiving and acting on complaints).

It provides guidance on how complaints will be managed and learned from, in accordance with the NHS Complaints System and the underpinning legislation and guiding principles as set out below to drive high quality care, and promote compassionate care across the services we provide.

The policy has taken into account the Mid Staffordshire NHS Foundation Trust Public Enquiry, also known as the Francis Report, which was published in February 2013, along with the Government's response to this enquiry, 'Hard Truths; the journey to putting patients first'. It also takes account of the subsequent reports commissioned by the Government and published upto March 2015, including the Clywd/Hart review of the NHS Complaints System (October 2013), the Keogh Review of Quality and Treatment Report (2013) and the Berwick Report (August 2013). Along with the need for compliance with the NHS constitution, these reviews have highlighted the need for a more responsive, compassionate, open and transparent NHS and this equally applies to the management of complaints.

This policy applies to the handling of complaints or concerns relating to services provided by Southern Ultrasound. This would include primary care patients & the representatives, referring clients, staff, visitors and all other stake-holders.

Aim:

Southern Ultrasound are committed to high quality care for all as a core principal of our vision and purpose. We will ensure that patients and their representatives can seek advice, provide feedback or make a complaint about the services we provide or the policies we have developed and implemented.

When dealing with complaints we aim to follow the 'Good Practice Standards for NHS Complaints Handling' (Sept 2013) outlined by the Patients Association, and the Parliamentary and Health Service Ombudsman's 'Principles of Good Complaints Handling' (2009) & 'My Expectations' (2014):

- Openness and Transparency publicised, accessible information & processes, understood by all.
- Evidence based complainant led investigations and responses. This will include providing a consistent approach to the management and investigation of complaints.
- Logical and rational in our approach, while sympathetically responding to complaints and concerns in appropriate timeframes.
- Provide opportunities for people to offer feedback on the quality of service provided.
- Provide complainants with support and guidance throughout the complaints process.
- Provide a level of detail appropriate to the seriousness of the complaint.
- Identify the causes of complaints and to take action to prevent recurrences.
- Effective and implemented learning use 'lessons learnt' as a driver for change and improvement.
- Ensure that the care of complainants is not adversely affected as a result of making a complaint.
- Ensure that Southern Ultrasound meets its legal obligations.
- Act as a key tool in ensuring the good reputation of Southern Ultrasound

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Duty of Candour:

Southern ultrasound welcomes the government's introduction of the statutory duty of candour within the NHS which identified the need for organisations to be more open and transparent when things go wrong. This regulation requires staff at all levels within an organisation 'to operate within a culture of openness and transparency, understand their individual responsibilities in relation to the duty of candour' and that they are 'supported to be open and honest with patients and apologise when things go wrong'. Sir Robert Francis highlighted the need for organisations to have greater openness and transparency, enabling concerns and complaints to be raised freely without fear and questions asked to be answered. Complaints raised with Southern Ultrasound will be investigated in this manner alongside the complainant.

Southern Ultrasound will ensure that in responding to complaints and particularly when things go wrong, people are provided with reasonable support, truthful information and an apology in accordance with the Duty of Candour regulation.

Joint Complaints:

Where there is a complaint about the Company service and a third party; usually, the organisation with the largest part in the complaint would be considered the lead agency and would be responsible for coordinating the investigation. The Company will, however, take a subsidiary role if requested to do so by an NHS organisation involved in the complaint.

Definition:

The Patients Association defines a complaint as:

"An expression of dissatisfaction made to an organisation, either written or spoken, and whether justified or not, which requires a response. There is no difference between a "formal" and an "informal complaint". Both are expressions of dissatisfaction.

(The Patient Association Good Practice Standards, 2013)

Complaints are managed to enable patients, services users (or their representatives) to provide feedback on the services they have received in as easy a way as possible. Equally important is that Southern Ultrasound is able to learn from complaints to improve existing services and to inform commissioning decisions.

Responsible Person:

Definition: The 'Responsible Person' is tasked with ensuring that the Complaints policy and Procedure is in compliance with the complaint regulations, Standards and Best Practice.

Southern Ultrasound has nominated a Company Director, Mr Kevin Rendell, as their Responsible Person. Our Responsible Person is appointed as Complaints Manager.

The responsible Person will have day to day responsibility for management of complaints and will;

- Be readily accessible to the public and members of staff, providing advice on any aspect of complaints resolution
- Co-ordinate the complaints investigation
- Provide training and advice to staff on complaints handling
- Ensure all complaints are recorded and an electronic complaints file is established and held securely
- Ensure records management is in line with the Data Protection Act 1998
- Ensure appropriate operating procedures are in place to deliver the Complaints Policy
- Ensure where necessary, a complaints action plan is put in place to ensure actions are implemented and ensure that complaints action plans are reviewed to provide assurance that actions have been completed.

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Policy Details:

Who Can Make a Complaint?

A complaint may be made by;

- A patient or service user.
- Any person who is affected by or likely to be affected by the action, omission or decision of Southern Ultrasound has the right to complaint, including family carers. In this latter case it will be important to be clear whether a carer is complaining in their own right or on behalf of a consenting adult with capacity.
- A representative of either of the above in a case where that person:
 - Has died.
 - o Is a child (under 16)?
 - o Is unable by reason of physical or mental capacity to make the complaint themselves.
 - Has requested a representative to act on their behalf (a representative may include a parent, guardian, relative, civil partner, friend or MP), and, in these cases consent will be required.

In the case of a person lacking capacity under the Mental Capacity Act (2005):-

The complaints regulations permit the responsible person for the complaint to take a view on whether the person is acting in the patient's best interests, and if it is felt that this is not the case, the responsible body can refuse to handle a complaint by that person.

- If a person lacks the mental capacity to make a complaint Southern Ultrasound would seek assurance from the person's representative that they are acting in the person's best interests and request confirmation that the person lacks mental capacity to make this decision. The representative would need to have a Lasting Power of Attorney recorded with the Office of the Public Guardian or be a relative who can evidence that they are involved in the person's on-going care and provide evidence of a Mental Capacity Act Assessment in regard to this decision.
- If Southern Ultrasound is not sufficiently assured from the representative that they are acting in the person's best interest and that the person lacks mental capacity then they will notify the representative in writing setting out the reasons why they are not assured.

In the case of a child or young person aged under 16:

The representative must be a parent, guardian or other adult person who has care of the child. Where the child is under the care of a Local Authority or a voluntary organisation, the representative must be authorised by that Local Authority or voluntary organisation.

In the case of anyone who may require support and assistance:

All members of the public who wish to raise a formal complaint will be given the details of POhWER. This includes people with disabilities, as the advocacy service provide support and assistance throughout the process and can provide information in different languages, braille, large print, easy read and audio format and advocates that can sign.

In the case of anonymous complaints:

These will be accepted (e.g. telephone call, letter), but if possible the person should be encouraged to provide their name and other relevant details. If the person is unwilling to provide contact details, we will record the complaints and investigate if possible.

Timescales for making a complaint

A complaint must be made no later than 12 months after the date on which the matter occurred or no longer than 12 months after the incident came to the notice of the complainant. There is discretion to waive the time limit if the complainant can demonstrate exceptional circumstances about why the

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complaint was not raised sooner. The Complaints Manager will follow process to be assured that it is still possible and practical to investigate the complaint.

• If the complaint cannot be investigated, the complainant will be informed in writing of the reasons why and their right to approach the PHSO to consider this decision.

Complaints that cannot be dealt with under this policy

In accordance with the NHS complaint regulations, Southern Ultrasound cannot investigate complaints which relate to:

- Frimley Health NHS Foundation Trust rather than specifically to do with the Services provided to that Trust by Southern Ultrasound
- An oral complaint which has been resolved to the patient's satisfaction by the end of the next working day after receipt.
- A complaint that has been previously investigated by Southern Ultrasound, or another commissioner, where no additional significant information is supplied.
- A complaint being investigated by the Parliamentary and Health Service Ombudsman (PHSO).
- A complaint regarding the failure to comply with a Freedom of Information request these will be dealt with under the Freedom of Information Policy and Procedure.
- A dispute being raised by one organisation about another.
- Where Southern Ultrasound receives a complaint relating to the above, the Complaints Manager will write to the complainant explaining the reasons why the complaint cannot be investigated advising them which organisation will be able to assist and provide their contact details.

The Complaints Procedure

Southern Ultrasound will follow the procedure modelled on the NHS Complaints procedure when dealing with complaints and will work to the nationally recognised timescales for acknowledging complaints involving their services.

- Many concerns can be resolved quickly and all staff should make every effort to enable this
 happens by communicating with the complainant, listening to their concerns and attempting to
 resolve. The Complaints Manager will respond to enquiries by listening and providing relevant
 information and support to patients, public and carers to help resolve concerns quickly and
 efficiently.
- When a complaint is made, the Complaints Manager will obtain consent from the patient for their medical and personal information to be shared for the purposes of the investigation. (see Appendix 6)
- The Complaints Manager will liaise with staff and managers and where appropriate with other
 complaints and patient and advisory liaison services to facilitate enquiries being dealt with
 appropriately. Enquiries or concerns received should be handled in a similar fashion to complaints,
 ensuring that they are handled with sensitivity, and within a timely manner.
- Patient confidentiality will be maintained at all times when handling a complaint. All related records will be kept in a confidential and secure manner in accordance with The Data Protection Act 1998 & 2018. If required, consent will be obtained from the patient, so that the complaint can be handled by the most appropriate organisation to affect the best outcome. There may be very rare occasions, when for the sake of patient safety, it is necessary to disclose confidential information to a relevant third party. This action would only be taken if the complainant, the patient or any other person is at risk of harm, to ensure patient safety. Any such action will be taken with advice from the appropriate senior member of staff.
- To help evaluate the seriousness of a complaint, the company has adopted the risk matrix published by the Department of Health documents "listening, Responding, Improving: A guide to Better Customer Care. 2009. **See Appendix 1**

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Local Resolution - investigation and response.

See flowchart - Appendix 2

There are no statutory timescales for responding to a complaint within the NHS procedures framework, however, Southern Ultrasound will endeavour to respond within 25 working days or within the timescale agreed with the complainant.

(a) An acknowledgment within three working days

This will be sent to the complainant in writing, by letter or email. The acknowledgement will identify the process that the complaint will undergo, with expected timescales for response and provide advice to the complainant on how they can access independent support for example through the Independent Complaint Advocacy Service.

(b) Agreement of how the complaint will be handled

The Complaints Manager will take reasonable steps, such as contacting the complainant via email or letter to agree the most appropriate way to resolve their complaint. The Complainant is provided with a timeframe for the response and will be kept fully informed of any delays if the timeframe cannot be met.

(c) Risk assessment of the complaint

The Complaints Manager will assess the complaint to determine if there are any patient safety concerns, such as safeguarding concerns or issues of clinical need, which require escalation or action to be taken. The Complaints Manager will escalate any such concerns as necessary, to the appropriate lead within Southern Ultrasound and our Client NHS Trust. Where any risks are identified, these will be escalated as necessary in line with our Risk Management Strategy.

(d) Gaining appropriate consent

Consent will be obtained if the complainant is not the person to whom the complaint pertains, or if consent is required to pass the information to the relevant provider for investigation and feedback to Southern Ultrasound for the final response.

(e) Completion of investigation

The Complaints Manager will investigate the circumstances of the complaint within the set time scale, providing a written response with analysis of what happened, identifying where learning can be applied and providing an action plan to implement the learning in the form of a letter.

(f) Agreement of extended investigation period

If it becomes apparent during the investigation that further time is required and therefore the initially agreed timescales will not be met, the Complaints Manager will contact the complainant by telephone and agree a revised timescale. This will be followed up in writing to the complainant.

(g) Providing a final response within the agreed timescale.

The final response will be reviewed and signed off by the Company Director.

The final response will include:

- Who has investigated the complaint
- Appropriate apologies
- Analysis and outcome of the investigation
- Identified learning and actions
- Process to undertake should the complainant be dissatisfied with the final response

(h) Quality assurance of final response:

Responses will be subject to our quality assurance process to ensure responses are produced in line with the Patient Association Good Practice Standards for NHS Complaints Handling Standard 2015, to ensure the investigation and outcome reached is transparent, reasonable and evidence-based.

Time-stamps of key points will be recorded on the Complaints Procedure log See Appendix 3

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Police Investigation

If the subject of the complaint is a matter being referred to the police, the complaints procedure will be suspended pending the outcome of that investigation and the complainant will be informed of the reasons for this delay. Once the police investigation has concluded, the complaint will be investigated after consultation with the complainant.

Litigation

The National Health Service Litigation Authority (NHSLA) handles all legal claims against the NHS, including Southern Ultrasound's Vascular ultrasound Service. Should complainants wish to file a litigious claim to they should be advised to contact the organisation they intend to file a claim against and then notify the NHSLA.

Staff who are the subject of complaints

Where a complaint is made about an individual member of staff, the individual will be given the opportunity to respond to the complaint and be kept informed of the progress and outcome of the complaint. Where a complaint is made against an individual because of their racial background, gender, marital status, disability, sexuality, religion or age or other protected characteristic under the Equality Act (2010), the Complaints Manager will discuss this with the NHS Trust's Equality and Diversity Lead to determine how the complaint should be investigated.

Harassment or abuse of staff will not be tolerated, and staff members who are the subject of such complaints will be offered support by Southern Ultrasound. If the decision is taken not to progress the matter through the complaints process, the complainant will be notified in writing that the complaint will not be progressed and informed that harassment against any member of staff will not be tolerated.

Where a complaint is investigated that is couched in discriminatory language the complainant will be advised that such language/behaviour will not be tolerated, however, any complaints couched in discriminatory language that raise legitimate issues about clinical practice, procedures and communications will be investigated using the complaints system, without prejudice to the outcome of the investigation.

Confidentiality:

Complaints will be handled in the strictest of confidence in accordance with the Southern Ultrasound' Confidentiality Policy, and will be kept separately from patient medical records. Care will be taken that information should only be disclosed to those who have a demonstrable need to have access to it.

Suitable arrangements are in place for the handling of patient identifiable data to meet the compliance of the Data Protection Act and other legal obligations such as the Human Rights Act 1998 and the common law duty of confidentiality. Our designated Caldicott Guardian is responsible for ensuring that confidentiality is maintained.

Confidentiality will be maintained in such a way that only managers and staff who are leading the investigation know the contents of the case. Anyone disclosing information to others who are not directly involved in this may be dealt with under the company's disciplinary procedures.

Complaints of a vexatious or persistent nature:

Where a complainant is considered to be acting in a vexatious or inappropriately persistent manner, Southern Ultrasound will consider following the vexatious/persistent process for handling such a situation. (see appendix 4).

References:

- NHS England Confidentiality Policy. June 2016
- Parliamentary & Health Service Ombudsman My expectations for raising concerns & complaints.
 2014
- Local Authority Social Services & NHS Complaints (England) Regulations 2009.

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- Department of Health document Listening, Responding, Improving: A Guide to Better Customer Care. 2009 (www.dh.gov.uk) (steps 1-3)
- GPC document, New complaints process FAQs, 2009

Equality Impact Assessment:

An Equality Impact Assessment has been performed on this policy. The EIA demonstrates the policy is robust; there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken. **See Appendix 5**

Training Requirements:

Dealing with Complaints is a standard aspect of the Company's Mandatory Induction training, as well as being a subject for annual review training.

All staff are required to have a full understanding of this policy and its implementation. Staff have access to the policy content 24 hours per day, 7 days per week.

Training needs resulting from complaints are assessed by the Director(s) and implemented accordingly.

Awareness Plan:

Promotion of patients' right to make a complaint is provided at all points of patient contact through their care. This includes written statements on contact letters and feedback forms, posters at clinical sites and downloadable complaint forms on Company websites.

Market

Southern Ultrasound also publicises the number of upheld complaints received on its corporate website.

Policy Review:

This policy will be reviewed annually

Effective From: (created) 20 / 08/ 18 Last Reviewed v2 26/09/18

Reviewed by: K Rendell. Director & IG Lead.

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Appendices:

Appendix 1. - Investigating complaints significance

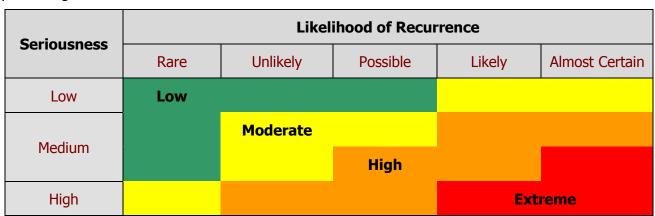
Step 1: Decide how serious the issue is

Seriousness	Description		
Low	Unsatisfactory service or experience related or not directly related to care. Usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of the service. No real risk of litigation.		
MEDIUM	Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Justifiable complaint. Some potential for litigation.		
HIGH	Significant issues regarding standards, quality of care, and safeguarding of, or denial of rights. Possible professional misconduct. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation High probability of litigation or adverse publicity.		

Step 2: Decide how likely the issue is to recur

Likelihood	Description	
Rare	Isolated or one-off – slight or vague connection to service provision	
Unlikely	Rare – unusual but may have happened before	
Possible Happens from time to time – not frequently or regularly. May occur a some time but only occasionally.		
Likely	Will probably occur several times a year	
Almost certain	Recurring and frequent, predictable	

Step 3: Categorise the risk



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Appendix 2. - Complaints Process Flowchart

Complaint Received, Day 1 Received by or passed to the Complaints Team (by phone, email, letter).

Acknowledgement Day 1-3

Complaint is acknowledged by the Complains Team within 3 working days. Complainant is contacted to agree response timescales. Complaint details are added to Southern Ultrasound's complaints database. Consent to undertake complaint investigation is requested if required.

Investigation Day 3-13

The Complaints Manager contacts investigates the Complaint, using whatever resources are required, to identify what happened, when, why, how and where, bearing in mind agreed response timescales. Prepare the response.

Collation Day 4-18

The Complaints Manager collates the responses and any other information relevant to the complaint for the complaints file and liaises with complainant if extended timescale required.

Response Day 4-25 The Complaints Manager reviews the response and forwards it to a Company Director (If a Director is not acting in the capacity of Complaints Manager). The Director ensures the response meets Quality Assurance requirements and signs off response before sharing it with the complainant.

Response Day 4-25

The Complaints Manager updates the database with the outcome and lessons learnt/actions..

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Appendix 3. - Complaints Procedure log.

This record is to be completed for each complaint received by the Company, to document the progress of the complaint investigation in a timely manner.

The Procedure should be read in conjunction with the Company Complaints Policy.

This form shall be retained with the Complaint investigation notes and formal responses, and retained for 10 years.

1.	Name & Position of Complainant.				
2.	Initial complaint received and recorded	by:			
3.	Date Complaint received.				
э.	-	Time of Complaint: :Hrs.			
4.	Attach complaint letter or transcript of tel	ephone complaint to this form.			
	Complaint Attached.	Yes / No			
5.	Pass complaint record log and details to a Complaints Manager.				
	Complaint passed on for attention.	Signed			
6.	Complaint received for attention				
	Date Received /	Time Received: Hrs.			
7.	Acknowledgement of complaint made to	complainant. With in 3 days of complaint			
	Date Acknowledged / /	Time Acknowledged: :Hrs.			
8.	Complaint investigated.				
	Initial response obtained	Time Received: Hrs.			
9.	Collation of investigation With in 18 days of complaint				
	Date Responded / /	Time Responded: :Hrs.			
10.	Attach transcript to this form .				
11.	Additional timescales agreed with Comp	plainant			
12.	Repeat Role 8 & 9 as required.				
	Date Responded / /	Time Responded:Hrs.			
	Date Responded / /	Time Responded: :Hrs.			

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13.	Written Respons	e to Complainant. Wit	n in 25 days of comp	laint
	Date Responde	d /	Time Responded	:Hrs.
14.	Attach Copy of le	etter to this form and Per	sonnel Management Sys	stem.
15.	Discussion with	staff members if approp	oriate	
	Date Responde	d /	Time Responded	:Hrs.
16.	Attach this form	to Complaint Record a	nd retain for 10 years.	
	-	essed by the Complaints er further action is require	<u>=</u>	determine risk factors,
	ideration of including interests	g general or specific detai	ls in team briefs, raise a	wareness with any third-
Com	plaint details and tre	nds are collated for inclus	sion in Directors Board M	1eeting
Any	Further Action Re	quired:		
•••••				
Com	pleted By		Date	
Proc	edure Log Review	7:		
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Appendix 4. - Vexatious/Persistent Complaints Process.

There are exceptional circumstances when Southern ultrasound can reasonably do nothing to further rectify a real or perceived problem from a complainant. Prior to action being taken under this policy, Company Directors shall first consider:

- Has the complaints procedure been correctly implemented as far as possible and has any material element of a complaint been overlooked or inadequately addressed? Considering this question will entail appreciating that even persistent complainants may have aspects of a complaint which may contain some genuine substance.
- The stage at which a complainant has become or is developing into a persistent complainant where the complaint and responses have become repetitive, habitual or persistent (following a review of the available information). There should be evidence available to demonstrate the habitual and persistent nature of the complaint. The purpose of this procedure is to ensure that any restrictions placed on complainants should be the result of a fair and consistent process. The procedure will be applied only in the absolute circumstances outlined, not because the complainants are forceful and determined.

The Complaints Manager may decide to deal with the complaint in one or more of the following ways:

- Decline contact with the complainant either in person, by telephone, by fax, by letter, by email or any combination of these, provided that one form of accessible contact is maintained or alternatively to restrict contact to liaison through a third party.
- Notify the complainant in writing that the Complaints Manager 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 complainant should also be notified that
 the correspondence is at an end and that further letters received might be acknowledged but not
 responded to.
- Inform the complainant that in extreme circumstances Southern Ultrasound reserves the right to pass unreasonable or persistent complainants to be dealt with through the company's solicitors and where appropriate other agencies.
- Temporarily suspend all contact with the complainant or investigation of a complaint whilst seeking legal advice or guidance from the company's solicitors or any other relevant agencies.
- Consider whether there are any relevant equality considerations linked to the persistency of the
 complaints. It is the responsibility of the staff reviewing each individual case to recognise that
 some complainants (for example, individuals with speech/hearing impairment, learning disability
 or other permanent or temporary cognitive impairment or service users for whom English is not
 their first language) may need the company to implement relevant adjustments to the process for
 the handling of their complaint (s) to minimise communication issues and barriers.

In line with the NHS Complaints Procedure, the complainant has a right to refer their complaint to the PHSO if they are unhappy with our response.

In making a decision to determine an individual as a persistent complainant, the Complaints Manager will need to be satisfied that:

- In the Company's handling of an individual's complaint(s), all necessary and reasonable practical steps have been taken to minimise or overcome any barriers that complainants might experience as a result of relevant equality factors (for example, disability).
- Any planned actions do not constitute unlawful victimisation.

Withdrawing Persistent Complainant Status

Once a complainant has been determined as a 'persistent complainant' there needs to be a mechanism for withdrawing this status at a later date if, for example, the complainant subsequently demonstrates a more reasonable approach or if they submit a further complaint for which normal complaints procedures would appear appropriate.

The Complaints Manager used discretion in recommending 'persistent complainant' status and discretion should similarly be used in recommending withdrawing the status, resuming normal contact procedures.

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Appendix 5. - Equality Impact Assessment.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	Ethnic origins (inc. gypsies and travellers)	No	
	Nationality	No	
	- Gender	No	
	• Culture	No	
	Religion or belief	No	
	Sexual orientation including lesbian, gay and bisexual people	No	
	- Age	No	
	Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	NA	
4.	Is the impact of the policy/guidance likely to be negative?	NA	
5.	If so can the impact be avoided?	NA	
6.	What alternatives are there to achieving the policy/guidance without the impact?	NA	
7.	Can we reduce the impact by taking different action?	NA	

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Southern Ultrasound Ltd.

42 Ascension Road. Romford. Essex. RM5 3RT Telephone: 07949 053377

Appendix 6: - Consent Form

Comp	laint	Ref	No.
Comp	ianic	1761	INO.

PATIENT CONSENT FORM (please write in capitals)

Full Name of Patient		Date of Birth
Address		
I hereby authorise:	!	
Name of person i	making complaint	
Relationship to pa	atient	
Telephone Numb	er	
Email Address		
-	If and to receive any be relevant to my compl	relevant information, including personal and confidentia aint.
		d to act on my behalf in investigating my complaint in cedure, a copy of which I have received.
	•	ivulging of personal information, medical notes and records formation from any third party. I hereby consent to that
Please sign below a	as applicable	
If Patient is unable to	sign, please give reasor	s and then sign below
Signature of Patient		
Signature of complain	ant (if different)	
Date		

Please note that investigation of this complaint cannot begin until the signed consent form has been received.

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