
Document name:	<i>Complete Ophthalmic Services CIC: Complaints Policy</i>
Date created:	<i>June 2015</i> <i>Review date: June 2017</i>
Author:	<i>The Directors, Complete Ophthalmic Services CIC</i>
Approved by:	

Complete Ophthalmic Services CIC: Complaints Policy

Complete Ophthalmic Services CIC ("the Company") has been established to specifically act as the lead for a network of local optical practices ("subcontractors") dedicated to delivering excellent eyecare in the local community.

The Company will endeavour to deliver a service whereby the likelihood of complaints being made is very low. However, if complaints do occur, the Company is well placed to address these and implement lessons learned (lessons learned meaning experience derived from service provision leading to an improvement in quality of our service provision) in the interests of patients. This review/analysis mechanism allows the Company to identify areas for improvement.

The Company will hold overall responsibility for complaints handling management and compliance. The Company adheres to the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and all local requirements on complaints management. The clinical governance and performance lead is responsible for the Company's compliance with the regulations, and is the designated complaints manager. The Company will identify a deputy to the clinical governance and performance lead, who will act as the deputy complaints manager in the event that the lead is unavailable for any reason.

Central to the Company's complaints policy is an emphasis on transparency for all parties.

For the purpose of this policy, a complaint is not a complaint, if it is made orally and is resolved to the complainant's satisfaction within 24 hours. A complaint may not refer to a failure to comply with the Freedom of Information Act (dealt with by a separate procedure). Nor may a complaint relate to a subject which has already been dealt with as a complaint and been resolved.

A complaint may be made orally, in writing or electronically. If it is made orally, a written record will be made of the complaint if 24 hours have elapsed since the complaint was made and if the complaint has not been resolved. A copy of the written record will be provided to the complainant.

The Company and its subcontractors will make information available to the general public about their arrangements for dealing with complaints about NHS services.

The complaints manager will ensure:

- Complaints are dealt with efficiently and are properly investigated.
- Complainants are treated courteously, fairly, expeditiously, appropriately and are informed of the outcome of the investigation of their complaint.
- Action is taken in the light of the outcome of the investigation if any is necessary.
- Complaints are reported to the Board quarterly, and to the commissioner as required by the contract.

A service improvement plan is produced and implemented where appropriate, in accordance with the Company's quality and continuous improvement policy. The Company requires subcontractor practices to:

- Report any complaints relating to the community services immediately to the complaints manager via OptoManager (or telephone in emergency).
- Provide information as the complaints manager deems appropriate to manage the complaint or to report to the board for learning points to be gained.
- Seek input from the complaint manager before responding to any complaint (except for attending to any urgent clinical care needs of the individual affected).

The Company's Procedure for Managing Complaints

1. All complaints will be acknowledged by the complaints manager within 3 working days.
2. When acknowledging receipt of a complaint, the complaints manager will offer to discuss with the complainant how and when he/she intends to investigate and resolve the complaint. If the complainant refuses this offer, the complaints manager will advise the complainant in writing how long it is likely to take him to respond concerning the substance of the complaint (the 'response period').
3. The complaints manager will endeavour to keep the complainant informed of the progress of the investigation. As soon as possible after completing the investigation, the complaints manager will advise the complainant in writing how he has considered the complaint and what he proposes to do to resolve the complaint and any consequent action. This will be done within 10 working days where possible. He will also inform the complainant of their right to pursue the complaint with the Health Service Commissioner (the 'health ombudsman').
4. The Company will endeavour to resolve the complaint within six months after receiving the complaint or, if it cannot be resolved, the complaints manager will tell the complainant why they have not managed to do so.
5. The Company and its subcontractors will make information available to the general public about their arrangements for dealing with complaints about NHS services.
6. The Company will keep a record of each complaint received, the subject matter and outcome of each complaint, each response period where applicable, and, in the cases of a response period being applicable, whether the complainant was informed of the outcome of the investigation.

The Company will report complaints to the commissioner as per the terms of the contract for this service. This information will also be used within annual reports from the board.

In situations where a complaint develops into a serious incident - particularly when a patient becomes harmed or otherwise deemed at risk - the Company's serious incident policy will be activated.

The Company's Complaints Policy will be reviewed annually.