

 <p><b>Policies and Procedures</b></p>	<p><b>RPP1.07</b></p> <p><b>Complaints Procedure</b></p>
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## 1. Purpose

The purpose of this procedure is to ensure that all complaints received are dealt with efficiently and sensitively and to act with appropriate speed to achieve a satisfactory outcome thereby improving the quality of service provided by the Robens Centre. Customers are advised that all complaints will be acknowledged in writing within 48 hours and again within 10 working days.

## 2. Introduction

The Robens Centre for Occupational Health and Safety (The Robens) take complaints regarding the quality of service provision very seriously. All complaints are investigated with the objectives of:

- Rectifying the situation as quickly as possible to the satisfaction of all parties
- Ensuring the situation does not arise again and
- Learning from the incident to improve future service quality.

## 3. Procedure

1. Customers are advised in the first instance to raise a complaint verbally with the individual practitioner providing the service, who in turn will bring any verbal complaint to the attention of the Clinical Director.
2. A client should be advised if they wish, to put their complaint in writing (paper copy not email), to the Clinical Director. Upon receipt of a written complaint an acknowledgement should be sent within 48 hours advising the Client that following an investigation a written response will be given within 10 working days.
3. Should a Client still be dissatisfied having followed the above procedure, the Client can then be invited to raise the matter in writing with the Director of The Robens. A written response will be given within 10 working days.
4. Changes to practice that arise from the complaint will be notified to relevant third parties, including other members of staff

It is our endeavour to resolve complaints to the satisfaction of all parties as quickly as possible. Where this is not possible having followed the above procedure, with the agreement of both parties, independent arbiters may be brought in (at the discretion of the Robens) to review the complaint. The independent arbiters decision will be final.

Where a Client lacks the confidence or capacity to make a complaint themselves staff at the Robens will endeavour to support the Client in expressing their complaint by whichever alternative means the Client finds most supportive. In these circumstances complaints made by the Clients representative will also be accepted.

If the complaint relates to a Robens activity regulated by the Care Quality Commission (i.e. travel health advice) in addition to the procedure above Clients may make direct contact with **the Care Quality Commission at Citygate, Gallowgate, Newcastle upon Tyne, NE1 4PA, 03000 616161** or [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) if they have concerns about the carrying on of the regulated activity.

#### **4. Timing**

To support the most useful result and most effective investigation of a complaint clients are encouraged to report the complaint as soon as possible after the event, ideally 2-3 days. In any event the Robens reserves the right to not pursue complaints raised longer than 28 days after the event.

#### **5. Duty to express concerns about poor practice**

Staff have a duty under the Public Interest Disclosures Act 1998, to report their concerns about poor practice in any aspect of work of the Robens Centre, and its dealings with clients including the work of colleagues. In the first instance staff should report their concerns to the Clinical Director. If the concern is about the Clinical Director this should be raised with the Director and if the concern is about the Director the member of staff should raise their concern with the Dean, The Faculty of Health and Medical Sciences. Where the internal complaints procedure appears to have failed to resolve an issue, and where there is a concern over standards of professional practice, staff have a duty to report their concerns to the Nursing and Midwifery Council (in the case of Nursing Staff) and to the General Medical Council (in the case of Medical Staff).

Cross references with Care Quality Commission, Essential Standards of Quality and Safety , March 2010	Outcome 17: Complaints
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