



Patient Complaints Policy and Procedure (How to Make a Complaint)

AUTHOR: Vanessa de Roeck, Non-Clinical Services Director

VERSION: 5

STATUS: Ratified

DATE APPROVED: December 2018

APPROVED BY: The Hospital Board

IMPLEMENTATION DATE: October 2018

REVIEW DATE: October 2021

1.0 INTRODUCTION

- 1.1 Riverdale is committed to ensuring that Complaints and Concerns received from people using its services are acknowledged and responded to and views such complaints as an opportunity to learn and improve for the future.
- 1.2 The purpose of this policy and procedure is to ensure that all users of the service are able to raise their concerns and complaints and have them thoroughly and effectively investigated.
- 1.3 The policy sets out the way in which complaints are made.

2.0 POLICY PRINCIPLES

- 2.1 This policy aims to ensure that the complaints process is flexible and responsive to the needs of the individual complainant and involves them in the decisions concerning the handling of their complaint and that:
 - 2.1.1 Individuals who complain are listened to and treated with courtesy and empathy.
 - 2.1.2 Service Users who make a complaint are not disadvantaged as a result of making a complaint.
 - 2.1.3 Complainants are kept informed of the progress and outcome of any investigations.
 - 2.1.4 Actions to rectify the cause of the complaint is identified and implemented.
 - 2.1.5 All complaint information will be handled sensitively and will comply with confidentiality and data protection policies.

3.0 DEFINITION/PURPOSE

3.1 Complaint

A Complaint is an expression of dissatisfaction, whether justified or not, about any aspect of Riverdale. Complaints may be made by any users of our service. A complaint can be received verbally, by phone, by email or in writing. This Policy does not cover complaints from staff who should use the Company's Discipline and Grievance Policy.

3.2 Concerns and enquiries (Incidents)

A concern or enquiry is a problem raised that can be resolved or responded to straight away or in a short timeframe. These are not reported as complaints and as such fall outside the complaints procedure.

4.0 PROCEDURE FOR MAKING A COMPLAINT

4.1 A complaint or concern can be discussed with any member of the staff team. However, we recognise that you may wish to raise your complaint directly with either the Ward Managers; Adult Services – Simone Howieson, Adolescent Services- Katie Scholey, the Adolescent Service Manager - Vikki Rodgers or Service Director - Leah Ousley, who will be happy to discuss any queries, concerns or complaints that you may have.

4.1.1 An appointment can be made with Simone Howieson, Katie Scholey, Vikki Rodgers or Leah Ousley in writing or by telephone using the following contact details:

Riverdale Hospital
93 Riverdale Road
Sheffield
S10 3FE

Telephone: 0114 2302140

4.1.2 Alternatively an appointment can be made with S Howieson, Katie Scholey, Vikki Rodgers or Leah Ousley through any member of staff. There is no requirement to inform staff of the reason for the appointment.

4.2 Should it not be deemed appropriate to make a complaint to the Manager or a member of staff, complaints may also be addressed to the Chairman of the Board, Paddy Campbell. His email contact address is ipcampbell@hotmail.com

4.3 Should you require any assistance in making a complaint we will provide you with details of a Mental Health Advocate or additionally, and if appropriate, you can seek the support of any member of staff.

4.4 Riverdale Hospital is a registered provider with the Care Quality Commission (CQC). Unresolved complaints or concerns of a more serious nature can be directed to the Care Quality Commission via the following contact details:

Care Quality Commission
National Correspondence
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4WH

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

4.5 You also have the right to take your complaint to the Parliamentary and Health Service Ombudsman, which is independent of the NHS. For more information call 0345 015 4033 or visit their website at www.ombudsman.org.uk.

5.0 PROCESS FOR MONITORING COMPLIANCE

Compliance will be monitored by the senior management team. Management of complaints will be monitored in line with the Complaints Tracker.

6.0 EQUALITY IMPACT ASSESSMENT

This policy has been assessed using the Equality Impact Assessment. The outcome of the Initial Screening Assessment was that the policy does not discriminate against individuals or groups on the basis of their ethnic origin, physical or mental abilities, gender, age, religious beliefs or sexual orientation.