MPD890/4 – Management of Customer Complaints within the Hospital Customer Service Function

NHS Blood and Transplant

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Policy

National Health Service Blood and Transplant (NHSBT) is committed to investigating and responding to complaints to improve the service to users and to promote excellence in customer service. In accordance with NHSBT requirements for corporate and clinical governance, the Hospital Customer Service (HCS) function will maintain an effective complaints management system. We will

- Identify and record all complaints received.
- Take prompt action to mitigate any immediate risks identified.
- Act in line with the NHSBT Complaints Policy (POL96), to resolve the complaint effectively from the complainant's perspective.
- Promote a culture that seeks and uses customer's experiences to make services more effective, personal and safe.
- Review complaints at a national level and provide learning opportunities
- Ensure effective corrective and preventive action (CAPA) to improve the performance of the service.

Information for customers on how to submit complaints is available on our website at https://hospital.blood.co.uk/customer-service/complaints-and-compliments/

Objective

To learn, systematically and consistently, from customer complaints to continually improve the safety and quality of NHSBT components and services.

Changes in this version

'Incorporation of changes requests. Include changes associated with Continuous Improvement working group activities'

Roles

Head of Hospital Customer Service – Take overall responsibility for complaints management. Ensure this procedure is followed by HCS staff. Support complaints where customers remain dissatisfied and escalate complaints, where required. Ensure complaints information and trending data is available for review and appropriate action taken, where required.
Projects and Customer Insights Manager - Support complaints management, including where customers remain dissatisfied. Provide guidance and advice to those logging, investigating, managing and responding to complaints. Ensure accurate trending data records are kept and maintained and provide reports, insights and information on complaints.

Regional Customer Service Manager - Ensure CSM compliance to this process. Provide guidance and advice to those logging, investigating, managing and responding to complaints. Use complaint trending data and insights to resolve service issues locally and regionally.

Projects and Customer Insights Customer Service Manager – Keep and maintain accurate trending data and create reports, insights and information on complaints.

Customer Service Manager (CSM) – Identify, log and manage customer complaints in accordance with SOP330, including providing responses to customers.

Operational Groups - Ensure trends in complaints are reviewed and action is taken to reduce or remove the cause of complaints.

All Heads of Customer Facing Departments - Ensure highlighted trends are investigated and remove or reduce the cause of complaints.

Departmental Manager or Deputy – Investigate complaints and implement appropriate corrective and preventive action(s) in accordance with SOP330. Review complaints at a local level and identify any trends.

All Roles in Customer Facing Departments - receive customer complaints and inform the HCS team of these.

1. Initial complaint reporting

NHSBT actively encourages users of components and services to provide feedback on the service delivered as part of its commitment to continuous improvement. Opportunities for feedback are encouraged through routine contact between NHSBT staff and customers and through publication of this Management Process Description to customers.

Any user of NHSBT components and services can contact any staff member about the service they have received. Complaints can be received by email, FRM545 or verbally.

All customer facing and Hospital Customer Services staff must recognise and identify when a customer is complaining, and ensure complaints are sent to generic email inbox: nhsbtcustomerservice@nhsbt.nhs.uk

If trained to SOP330, the staff member receiving the complaint will report it to HCS using FRM545 or will refer it promptly to a senior staff member within their department. The department manager is responsible for investigating a complaint within their department and ensuring appropriate actions are taken.

2. Timescale for making a complaint

Complaints must be made to us within 12 months of the date the incident being complained about happened or the date the person raising the complaint found out about it.

If a complaint is made to us after that 12 month deadline, we will consider it if we believe there were good reasons for not making the complaint before the deadline and it is still possible to properly consider the complaint.

If we do not see a good reason for the delay or we think it is not possible to properly consider the complaint (or any part of it) we will write to the complainant to explain this.

3. Categorisation of complaints

The purpose of categorisation is to group complaints so that data can be trended, reviewed, reported and meaningful action taken, therefore complaint categorisation must be accurate. Categorisation is based on the department in which the perceived failure has occurred, the type of complaint, and the impact on the patient. Further categorisation is based on the severity grading assigned by Quality Assurance. The list of complaint type categories is available in DAT3697.

Where an incident may indicate a general failure of the supply of components and services to users, it must be escalated to the Critical Incident Manager.

4. Recording of complaints and response to the customer

HCS must be notified of all complaints within 1 working day. They must be logged on Ideagen Quality Management (IQM) within 1 working day of receipt, and an initial response sent to the customer within 3 working days.

Where a full response can be provided within 3 working days of receipt, no acknowledgement is required.

Each complaint is allocated to a CSM, who assigns actions to departmental managers.

The complaint should be assigned to the Centre Quality Assurance Manager or deputy to ensure oversight of complaints relating to that Centre.

A patient donor safety review is included in all complaints logged. If the complaint is assessed to be a patient donor safety incident, the clinical governance team are informed.

The allocated manager will investigate in accordance with SOP330. The responsible person will collate information and documentation, ensure a thorough investigation and complete root cause analysis in accordance with MPD387 where required.

Appropriate CAPA must be identified and implemented.

Records will include summaries of statements and discussions. Personal identifiable information of patients and staff must be redacted from IQM records, in accordance with SOP330. Confidentiality of patients and staff must be maintained.

Where further investigation is required, the CSM will assign additional actions to ensure a full and complete response can be issued.

Where interaction with the complainant or external organisations is required, the investigator must agree the approach with the CSM.

If the CSM believes that a complaint has not been resolved appropriately, they must liaise with appropriate departmental or quality managers and/or a member of the customer service leadership team to ensure a suitable outcome.

The CSM will respond to the customer within 18 working days of the receipt of the complaint by NHSBT. The response will include a summary of the investigation and the action taken to address the cause. Where it is not possible to complete all actions within 18 working days, a holding response will be sent with a final response provided once all actions are complete, in accordance with SOP330.

Further action if the customer remains dissatisfied

If the customer is dissatisfied with the complaint investigation or considers the corrective and preventative actions to be inappropriate or inadequate, the CSM will inform the Projects and Customer Insights Manager who will provide support and advice.

If further investigation and actions are required, these will be added to and managed through the original complaint record on IQM.

A further response will be sent to the customer to address the concerns raised. The content of the response depends on the specific circumstances of the complaint and should be agreed with the Projects and Customer Insights Manager and any other stakeholders, as appropriate.

If the customer remains dissatisfied, or the issue is highly complex, the Projects and Customer Insights Manager will inform the Head of Hospital Customer Service, who will provide further support and escalate the issue if required.

5. Review of complaints

The Projects and Customer Insights Customer Service Manager will keep and maintain accurate trending data and create reports, insights and information on complaints, and the Projects and Customer Insights Manager will ensure compliance to this.

The reports created will be distributed to stakeholders and teams for consideration and review by operational groups, who will ensure action is taken to reduce or remove the cause of complaints.

Heads of customer facing departments will also ensure highlighted trends are investigated and will work to remove or reduce the cause of complaints.

Local level departments will review complaints with the CSM to identify any trends or concerns which will be referred to the Regional Customer Service Manager by the CSM. The Regional Customer Service Manager will work with the CSM and other stakeholders to resolve any local and regional service issues.

HCS Leadership Team will review complaint trends through data, reports and insights provided by the Projects and Customer Insights team. Where trends exist the HCS Leadership Team will refer these to the appropriate Head of Function or to operational groups to agree actions for reducing or removing the cause of complaints.

Complaints and their impact upon patients must be reported to Clinical, Audit, Risk and Effectiveness Committee (CARE) by the Head of Hospital Customer Service, or the Projects and Customer Insights Manager.

An annual complaints report will be created by the Projects and Customer Insights team and distributed to groups and stakeholders for review.

6. Process adherence and development

The Head of Hospital Customer Service will take overall responsibility for complaints management and will ensure this procedure is followed by HCS staff.

The Projects and Customer Insights Manager will provide guidance and advice to those logging, investigating, managing and responding to complaints. They will review the process regularly and initiate any actions which may be necessary to ensure its continued effectiveness.

Regional Customer Service Managers will ensure CSM compliance to this process. They will provide guidance and advice to those logging, investigating, managing and responding to complaints.

CSMs will log and manage customer complaints in accordance with SOP330, including providing responses to customers.

Definitions

- **CARE**: Clinical, Audit, Risk and Effectiveness Committee
- **Complaint:** A customer contact reporting a problem or expressing dissatisfaction with NHSBT services.
- **CSM**: Customer Service Manager
- **HCS:** Hospital Customer Services
- **IQM** - Ideagen Quality Management
- **NHSBT:** NHS Blood and Transplant
- **CAPA:** Corrective and preventative action implemented to mitigate the risk or remove the cause of the complaint.

Related Documents / References

- **SOP330** – Managing customer complaints using Ideagen Quality Management
- **POL96** – NHSBT Complaints Policy
- **MPD387** – Root Cause Analysis of Events
- **FRM545** – Customer Complaint
- **DAT3697 –** Complaint Subcategories

Appendices

- N/A