

An informal guide to: Writing complaint responses.

A Two-Way Process

As a service provider, when you receive a letter of complaint about your service, your first response may be resentment or irritation. It's only natural – nobody likes to be criticised, and having your labours faulted can feel like a personal attack. It's important to appreciate that all letters of complaint are feedback of **the patient's personal experience** of the service they have received.

They may be fully justified in complaining or sometimes their viewpoint may seem unreasonable – yet, irrespective of our initial feelings, all complaints give us an insight into what our patients are thinking and provide an opportunity to change the actual service if something is not working, or to provide appropriate information to change public perception, if that's the problem.

Under the NHS Complaints Regulations (2009), we should be providing a patient-focussed complaints service. We should be:

- **listening** to what the complainants are saying
- **responding** to the issues they raise and
- **improving** our services subsequent to the lessons learnt from our investigations into their concerns.

In the words of the Department of Health (DH), we should be '*Making Experiences Count*' and not just paying lip service to a regulatory procedure. The DH guidance entitled '*Listening, Responding, Improving: A guide to better Customer Care*' can be found on the Customer Services' page of Hampshire Community Health Care's (HCHC) intranet. It may provide you and your teams with some useful tips.

From receipt of the initial letter or phone call, one of the Customer Services team will contact the complainant to discuss their complaint. The aim is to ensure that we understand exactly what the issues are and what the complainant is seeking as an outcome, to negotiate a binding time-frame within which the investigation and response should be completed, and to ensure that resolving a complaint can be a two way process involving the patient, if that's what they want.

The Customer Services team act to facilitate the best possible outcome to a complaint in terms of patient satisfaction, and learning for the Trust. Customer Services will acknowledge each complaint, enter it on Datix, seek any required consent, affirm any verbal complaints they receive and guide staff through the investigation and response if needed. Ultimately, however, ownership of the complaint lies with the service which has given rise to it.

The Dos and Don'ts of Complaint Responses

All letters of response should be written as befitting the Chief Executive of an NHS organisation – as that's who they will be coming from and who has ultimate responsibility for all complaints.

Letters of response should:

- Advise who has investigated the issues, giving name and position.
- Confirm what the issues are and provide a clear, open and honest answer to each one in turn.
- Explain what happened and why, offer an apology, advise what lessons have been learnt and what we are going to do about it (and possibly, by when).
- Not use any medical jargon but if it is essential, then provide a layman's explanation of what it means.

- Not use any abbreviations or shortened words such as 'eg', 'it's' or 'admin'.
- Not use an acronym unless it is explained on the first occasion of its use. For example, Independent Complaints Advocacy Service (ICAS).
- Ideally, not use bullet points, numbered points or titles. The letter should be personal and not read like a report. The exception to this rule is if the complainant has used this style and it would be beneficial to respond likewise.
- Advise complainants that they can request an Independent Review of their concerns by the Health Service Ombudsman if they remain dissatisfied following further attempts at Local Resolution.
- Include contact details for the appropriate manager in case the complainant should want to discuss any issues raised in the letter with them, upon its receipt.

Useful guidance

The Health Service Ombudsman has provided advice on what should be expected in a complaint response and information about good customer care.

This can be accessed at www.ombudsman.org.uk>Publications>Leaflets and includes:

- Principles of Good Administration
- Principles for Remedy
- Principles for Good Complaints Handling

One of the Principles for Remedy advises that the Trust should be looking favourably at any request for reimbursement for a financial loss incurred due to an error by the Trust.

It is useful to have a working knowledge of the *NHS Constitution 2009*, which can be found on the DH website and HCHC's intranet, and of HCHC's Complaints Policy which is also on the Trust's internet site. Of course, the Customer Services team will always be willing to offer advice and assistance.

It sounds obvious, but **empathise** with the complainant and consider how you would feel if you received the proposed response letter. Is there anything in there that would cause further distress or aggravation? Can anything be misinterpreted? Is there anything left unanswered? Is the answer rather vague? Would you feel satisfied with this response and believe that the Trust had taken your complaint seriously? Would you feel comfortable about engaging in further resolution if necessary? If you feel that it has been fully answered in the appropriate tone, then it's time to send it on to Customer Services.

The final draft

Please do not be discouraged or annoyed if the Customer Services team makes some changes. They are seeing it with a fresh pair of eyes. Also, it is most likely that they have been in verbal contact with the complainant and have an understanding of what the patient will be expecting in a letter of response.

Occasionally, the team will return letters to the investigating officers advising that some elements have not been addressed. Please accept that this is a benefit of having someone outside the service to review the responses – the Patient Experience Officers will not know exactly what the service can/should offer so they will read the response with the limited knowledge that a complainant may have. Similarly, sometimes the responses may read as too defensive of the staff in question so the Customer Services team will suggest amendments to redress the balance.

The Legal & Customer Services Manager will undertake a final review of the response, with a particular focus on ensuring objectivity, before it goes to the Chief Executive for consideration and sign off.

Complaints: Reactions and Responses

- Complaints have traditionally been viewed in a negative light and their handling has been process driven. Whilst we are encouraging you to view them positively as important feedback which can lead to service improvement, it should not be forgotten that people are only human. Despite working within a no-blame culture where the emphasis is not on what has gone wrong but on what we have done to correct it, it is still important to remember that it can be distressing to receive a complaint and support should be offered to staff.
- Most complaints do not fundamentally relate to clinical care but to attitude (perceived or otherwise) and communication (lack of/incorrect). Staff lead busy lives and there have been many complaints where it is the throw-away comment made by the busy staff member that has remained with the patient/complainant. The excellent medical care received is forgotten or unnoticed as the attitude of the staff member supersedes all other memories. This can be particularly true in critical situations where patients are in unfamiliar, clinical surroundings or circumstances, or at times of bereavement. Undoubtedly, it is vital to empathise with complainants when writing the response; however, it should be noted that empathy (in terms of understanding the patient/family's needs) and good communication at the time of care delivery might have avoided a complaint. It is worth revisiting the principles of good customer care from time to time.
- For every complaint received, there may well be other people who have experienced the same situation but have chosen not to write in or telephone. A service may receive only few complaints but if the complaints are on a similar theme, then there is likely to be a significant problem that needs addressing.
- Occasionally we receive complaints from patients who have been encouraged by staff members to complain about a Trust service. Alternatively, complainants quote staff when they have been derogatory about some aspect of the service. It would be hoped that staff feel sufficiently confident and empowered to raise their own concerns about a service internally.
- The Healthcare Commission suggested that if an NHS organisation receives no complaints then it is most likely that they are not operating a patient focussed/friendly/accessible complaints process. It should be remembered that not everyone finds it easy to make a complaint. As a Trust, we welcome complaints and this should be evident in our complaints handling.

Complaints are only one type of customer feedback. We receive considerably more compliments from patients and families across our services. It has been shown that good quality complaint handling and responses can create a strong, positive attitude towards the organisation receiving the complaint. So those making the complaints today could be providing the compliments of tomorrow.

SOME TYPICAL LETTERS AND RESPONSES: *

Example 1

24th March 2010

Dear Sir or Madam,

I write to complain about the disgraceful service I received when I attended my outpatient clinic at 9:20 on Wednesday, 24th March, 2010 at xxxxxxxxxxxx. I arrived in good time but was met with ...

Eventually, I was ushered in to see the Consultant who proceeded to ...

Up to this point I have been fairly satisfied with the treatment I have received under the NHS. However, my experience on this occasion fell far short of acceptable and it is obvious that the management in question do not have any idea of how to deal with the situation.

I require an acknowledgement of this letter, by return, a written apology from the Managing Director and a full explanation of how you will rectify this situation.

Yours sincerely,

.....

Dear Mr xxxxxx

Thank you for your letter of 24 March 2010, regarding your concerns arising from your visit to xxxxxxxxxxxx. I was sorry to learn of your experience and can appreciate your frustration. I can assure you that this is not the level of service we would wish for our patients. An investigation of your concerns has been undertaken by xxxxxxxxxxxx, Job Title, and the outcome has been shared with me.

The investigation has included review of your medical records of 24 March and interviewing of all staff involved in your care. I am advised that ...

(Factual, to the point, response.

Answering all issues raised - in turn.

Clear explanation of what action will be taken to ensure no repetition.)

Thank you for taking the time to bring your concerns to our attention. We welcome all patient feedback as this provides us with a valuable insight into our services from the patient's perspective and can inform service improvement, as it has done in this case.

STANDARD CLOSING PARAGRAPHS (to include contact details of the investigating officer and information about contacting the Health Service Ombudsman)

Example 2

12 June 2009

Dear Mrs Percy

I feel I have to write on behalf of myself and my family. My mother, Mrs xxxxxxxxx died on Monday, 21st May 2009, whilst at home with all the family present.

She had been in hospital until Thursday, 17th May but it was decided that she seemed to be holding her own and we were delighted when the doctor told us she could come home. If we had known the catalogue of problems that were before us, we would have pleaded for her to stay in hospital.

(Diary of events, clearly conveying the author's anguish and distress.)

I would be grateful if you could provide us with an explanation of why it all went so wrong. We feel as if we let Mum down by allowing her to go through all that trauma when she had such a short time left with us.

I wait to hear from you.

.....

Dear Mrs xxxxxxxxxxxx

Thank you for your letter of 12 June 2009. I was sorry to learn of your mother's passing and appreciate that this must be a difficult time for you and your family. Please accept my sincere condolences.

An investigation of your concerns regarding your mother's medical care has been undertaken by xxxxxxxxxx, Job Title. The outcome has been shared with me.

I understand that Mrs xxxxxxxxxxxx was ...

(Thorough explanation, going through the details with clarity, honesty and compassion eg Please be reassured that ...)

I hope that we have been able to fully address all your concerns. If you have any queries arising from the above then please do not hesitate to contact xxxxxxxxxx on xxxxxxxxxx. I understand that you have declined the initial offer of a meeting but if, having considered the response, you feel it would be helpful to meet with the manager of the service then please do not hesitate to contact xxxxxxxxxx. She will be able to arrange a mutually convenient time for you and your family to discuss any outstanding issues you may have.

STADARD CLOSING PARAGRAPHS

Example 3

16 May 2009

Dear Madam

I write to complain about my experience at the baby clinic in xxxxxxxx today. I am a first time mother to a 10-week-old baby boy and was appalled at the attitude of the staff there.

(Narrative of concerns re attitude).

As you would expect, I am reliant upon the health professionals to advise me about the care of my baby. I do not feel that they delivered the level of service that I would expect to a new mother and a small baby.

.....

Dear Mrs xxxxxxxx

Thank you for your letter of 16 May 2009, regarding your concerns arising from your attendance at the baby clinic on xxxxxxxxxx. I was sorry to learn of your experience. An investigation of your concerns has been undertaken by xxxxxxxxx and the outcome has been shared with me.

(Explanation of what happened and why

Apology for the attitude of staff, as she perceived it

Letters of response do not lay blame with staff – they provide answers and confirm that the situation has been fully discussed with the staff member and advise of any outcomes, such as the reaffirming of Trust procedures with staff and/or the need for staff training.)

If you have any concerns arising from the above and would like to discuss these in person with the Team Leader, then please contact xxxxxxxxxxxxxxxx who will happy to arrange a mutually convenient meeting for you.

Thank you for bringing your concerns to our attention. I was glad to learn that you have subsequently returned to the baby clinic and that baby Thomas is feeding well and developing normally.

STANDARD CLOSING PARAGRAPHS

* These letters are fictitious and do not relate specifically to any letters we have received about any of the services included within them.