

**CCG BOARD
PART I
MEETING ON 26th OCTOBER 2016**

Title of Report:	COMPLAINTS POLICY
Board Sponsor:	Mandy Ansell, (Acting) Interim Accountable Officer
Prepared by :	Nicola Meeks, Head of Corporate Governance
Committees previous consulted:	Integrated Governance Group, September – virtual Audit Committee, 27 th September 2016
Executive Summary:	<p>The policy of NHS Thurrock Clinical Commissioning Group (CCG) for handling complaints under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (“the regulations”), which took effect on 1st April 2009 and as clarified by the Department of Health in January 2010 has been updated.</p> <p>The revised policy better reflects the Regulations and good practice guidance as well as providing greater clarity over the processes in place for handling complaints. In addition, there is now specific reference to CHC processes which could lead to additional complaints now that the service has been brought in-house.</p> <p>Some key changes to note are:</p> <ul style="list-style-type: none"> ▪ Introducing ‘Local Resolution’, which may not be used very often by the CCG, but is good practice for quick resolution of dissatisfaction. ▪ Specific inclusion of CHC related complaints ▪ Consent processes (which were not previously defined and can be complex) ▪ Details of the Complaints Advocacy service and referrals to the PHSO ▪ Concluding to what extent complaints are justified ▪ Updating and expanding the complaints register ▪ Removal of the ‘grading’ of complaints and introducing a remit of ‘urgent’ complaints instead. ▪ Introducing better governance and monitoring (including the introduction of KPIs)
Financial / Resource Implications:	None

Fit with CCG strategy/objectives:	Well Led Organisation: Establish and operate appropriate integrated governance arrangements to enable not only compliance with legislation and regulation, but to facilitate all appropriate partnership arrangements to deliver the CCG vision of an integrated health and care system operating close to home.	
Risks identified / Outcome / Link to BAF:	Errors in the complaints management process result in unsatisfactory patient experience by either unauthorised disclosure of information or incomplete complaint resolution.	BAF Ref: GV03
Actions Required:	If approved, finalise, distribute to staff, present (by way of training) at CCG staff meeting and publish on CCG Intranet.	When By: November 2016
Recommendation to the Committee:	The CCG Board are asked to consider, comment on and approve the Complaints Policy.	