



King's College Hospital  NHS Foundation Trust	Patient and service complaints procedure
UKAS 8805	Liver Pathology

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<b>The amendment must be authorised by the Laboratory Director.</b>				
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# PATIENT AND SERVICE COMPLAINTS PROCEDURE

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## **Introduction**

### **Purpose and Scope**

This document has been compiled to meet the requirements of the ISO15189:2012 system. All procedures specified herein are mandatory within Liver Pathology. This document describes the process for handling complaints.

## **References**


**[ISO15189:2012                    4.8 Resolution of complaints]**

### **Related documents**

Related documents that form part of the controlled documentation of the department Quality Management System are indicated within the text in bold type face. Kings College Hospital NHS Trust procedures are indicated within the text by reference to the appropriate file within Kingsdocs (the Trust's document cloud storage).

## **KCH-LP-PY Reporting Adverse Incidents and Errors**

King's College Hospital NHS Trust Patient Complaints Policy

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## Responsibility

All Liver Pathology staff have a responsibility in the first instance to assist with any complaint. Service-managers and Consultant staff (if appropriate) are the first line staff to manage user complaints. The Quality Manager will keep the ongoing records and check that the complaint has been satisfactorily concluded. The Liver Laboratory Director will be informed of the complaint and the progress with the investigation.

## Principle

Liver Pathology Services seeks to provide an accurate and high quality service to its Users.

This policy describes how complaints will be dealt with and documented by Liver Pathology.

Complaints can be handled in one of two ways. Either by an informal 'in-house' approach or by the Trust's formal pathway involving the Complaints department.

For complaints from service users, which pathway to follow is at the discretion of the service managers. As a general guide the severity of the complaint will dictate which option is chosen. Any complaint that could have legal consequences, or cause adverse public reaction must be handled by the formal pathway. Patient complaints should always be handled by the formal pathway.

## Objectives


The Liver Pathology Complaints Procedure:

- Forms part of King's College Hospital NHS Foundation Trust's aim to become more responsive to the needs and expectations of its service Users.
- Makes it easier to learn deficiencies in quality and to implement plans to minimise such deficiencies from occurring again.

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- Provides a transparent and rapid process to resolving unsatisfactory laboratory processes.
- Provides a procedure for the management of complaints which aims to be simple and easy to use by pathology staff.

**Definition of a complaint**

A complaint will be defined as an expression of dissatisfaction with any aspect of the service provided by Liver Pathology. This may include issues with loss of samples, turnaround of results, responsiveness of the laboratory, accessibility of advice, and erroneous results.

**How complaints can be raised**


All complaints regarding any part of the service provided by Liver Pathology should be directed to the Quality Manager. This can be done either directly to the Quality Manager:

- Verbally tel. no. 02032994814
- By post to Quality Manager, Liver Pathology, Institute of Liver Studies, 3rd floor, Cheyne Wing, King's College Hospital, Denmark Hill, London SE5 9RS.
- By e-mail to the Quality Manager [kch-tr.KCHLiverLabs@nhs.net](mailto:kch-tr.KCHLiverLabs@nhs.net)

Or Via the Service Manager or any other laboratory staff to the Quality Manager

Alternatively complaints may be made to Patient Advice and Liaison Service (PALS) or to the Patient Complaints Department. Contact details are as follows:

- **Patient Advice and Liaison (PALS)**  
 020 3299 3625 or 020 3299 3601  
 minicom 020 3299 9009  
 PALS, King's College Hospital, Denmark Hill, London SE5 9RS  
 [pals@kch.nhs.uk](mailto:pals@kch.nhs.uk)
- **Patient complaints**  
 020 3299 3209/4501  
 [kch-tr.patientcomplaints@nhs.net](mailto:kch-tr.patientcomplaints@nhs.net)

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## Who can make complaints

Anyone who is the user of Liver Pathology services can make a complaint. If the complaint is being made on behalf of a patient, consent from the patient should be sought. If the patient is unable to consent for whatever reason, the Trust can at its discretion accept the complaint if the person is deemed to have 'sufficient interest'. An example of a person with sufficient interest would be the next of kin.

## Time limit for complaints

In line with the NHS complaints regulations, a complaint can be made to Liver Pathology up to 12 months after the event causing the complaint, or up to 12 months after the complainant became aware of the issue. If there are good reasons for the complaint not being made in this time frame, and assuming it is possible to effectively and fairly investigate the complaint, the Quality Manager can investigate any complaint registered after the 12 month time limit at their discretion.

## Recording the complaint


As noted above written complaints should be passed to the Quality manager without delay, who will make a record of the complaint. When complaints are received verbally, the recipient should attempt to gather as much information about the issue as possible, so as to minimise the need to gather further information from the complainant. Contact information for the complainant should also be obtained, in case further information is required and so they can be contacted in the first instance to acknowledge their complaint, and subsequently with regard to the outcome. The complainant should also be asked what kind of resolution they would like to see. At all times the complaint should be treated sensitively and with confidentiality. The service comment log should be used for this purpose.

## Procedure for managing a complaint

When a complaint is received, it is 'triaged' to identify what response would be most appropriate. As noted above, potentially serious complaints and those from patients should be handled by the Trust formal complaint procedure. All other complaints can be dealt with by the department's informal process.

## Informal process

1. Complaint is investigated by the service responsible

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2. If the complaint is found to have 'substance' (not impacting on patient care and not a recordable incident on Datix) appropriate remedial action is taken by the service manager, root cause analysis performed and corrective action taken.
3. The outcome of the 'informal' complaint is conveyed to the Quality Manager for record.
4. The complainant is informed of the outcome
5. After a timeframe set by the Quality manager the effectiveness of the corrective action is assessed.
6. If the complaint cannot be resolved at service level the complainant will be advised to contact the Liver Laboratory Director who, if required, will escalate the complaint to the Liver, Renal & Surgery Divisional Manager .

**Formal process**

1. If the complaint hasn't already been reported as an incident on Datix, then this must be done as described in **KCH-LP-PY Reporting Adverse Incidents and Errors**.
2. Details of the complaint should be passed to the patient complaints department for further assessment.

**Response time limits**

All complaints whether handled informally or formally should be dealt with in a timely manner. Rapid responses may help defuse a situation.

For written and patient complaints, an acknowledgement of receipt of the complaint will be sent to the complainant by the Quality Manager within 3 working days. If the complaint warrants an internal investigation the complainant must be informed of this and given an approximate timescale for responding back to them.

All communications will be logged by the person dealing with the complaint.

The first investigation response should be made within 25 working days of the complaint being received.