

1. Policy statement

- 1.1 Clients using The London Centre for Eating Disorders and Body Image Ltd. (The Centre) independent healthcare service will have access to a complaints procedure in the event they are unhappy with any aspect of the service being provided.
- 1.2 Clients' complaints and comments will be listened to and acted upon.
- 1.3 This policy outlines the different stages of the complaints procedure and includes arrangements to identify, receive, record, handle, and respond to any complaint.
- 1.4 The Centre will take all reasonable steps to ensure that its staff are aware of and comply with this policy and procedure.

2. Making a complaint

- 2.1 The Centre is committed to providing a high quality eating disorder healthcare service. However, if any client, or a person acting on their behalf, is unhappy with any aspect of the service being provided, they will be invited to make a complaint.
- 2.2 Complaints can initially be made directly to the member of staff in charge, the treating therapist/practitioner, or the Complaints Lead (Operational Service Development Lead).
- 2.3 If a client complains verbally, their concerns will be documented by the person receiving the complaint. The client will then be invited to put their complaint in writing.
- 2.4 If a client wishes to make a complaint whilst they are using the service, then the Centre or the treating therapist/practitioner, will attempt to resolve the issue without undue delay.
- 2.5 No client, or person acting on their behalf, will be discriminated against for making a complaint.
- 2.6 No person's treatment at the Centre will be affected in any way if a complaint is made by them or on their behalf. All staff must ensure that they take time to listen to the concerns raised and reassure the person complaining that it will not have any adverse impact on their care, treatment and support.

3. Information given to clients about how to complain

3.1 Written information on the complaint's procedure will be available for clients within

the Centre premises and on its website.

3.2 Clients will be assured that they will not be discriminated against for making a complaint.

4. Receiving and recording a complaint

- 4.1 Complaints can be made by a client, a former client, or someone acting on a client's behalf.
- 4.2 If a complaint is made, it must be received within 6 months of the client's last treatment appointment.
- 4.3 If the person making the complaint is not a client, but is complaining on behalf of a client, it is important to check and verify that the client is aware of the complaint being made.

The complainant must be told that, in order not to be in breach of client confidentiality, any matters relating to the client's care and treatment at the Centre can only be answered with their consent. (See Appendix 1)

- 4.4 If the complaint is from a child i.e. someone under 18 years old, the complaint may be made by the child, either parent of the child, the legal guardian, or other adult who is legally responsible for the care of the child.
 - 4.5 Verbal complaints can be made to any member of staff. (See Appendix 2)
- 4.6 Any member of staff receiving a complaint in person should document the details and pass it on to the Complaints Lead without delay. Formal complaints must not be responded to directly by any member of staff (therapists/practitioners or non therapists).
- 4.7 All received complaints, whether written or verbal, will be documented. (See Appendix 3)
- 4.8 Documented details will include:
 - the date and time the complaint was received
 - the full name and contact details of the complainant
 - the name of the member of staff receiving the complaint
 - a description of the complaint
 - details of the investigation carried out
 - any actions taken, and
 - whether or not the complaint was upheld.
- 4.9 Where a complaint is received anonymously, the Centre will carry out an investigation, as far as it reasonably can, depending on the content of the complaint.

- 4.10 Where a complaint is made on behalf of a client who has died, it is important to check that the person making the complaint is the deceased client's next of kin. Where this is not the case, the consent of the next of kin will be sought in writing before the complaint can be considered.
- 4.11 The Centre will maintain a record of all complaints received (verbal and written) and copies of all related correspondence. These records will be kept separately from clients' healthcare records.

5. Handling a complaint

- 5.1 All complaints received will be treated in the strictest confidence.
- 5.2 All complaints will be investigated.
- 5.3 All complainants will receive a written acknowledgement of their complaint within 3 working days.

The written acknowledgement will include the name and contact details of the person investigating the complaint on behalf of the Centre.

- 5.4 The Complaints Lead will offer to contact the complainant in order to discuss the manner in which the complaint is to be handled and how the issue/s might be resolved. During this discussion (by telephone call or video call), the following information will be obtained and/or provided (as far as is reasonably possible):
 - How the complainant wishes to be addressed e.g. Miss, Ms, Mr, Mrs or their first name.
 - How the person wishes to be kept informed e.g. in writing by letter or email, by telephone, or through an agreed third-party representative or advocate.
 - Confirm with the person if they give their consent to accessing their healthcare records (where appropriate) for the purposes of investigating the complaint.
 - Confirm if the person has any disabilities that need to be taken into account during the investigation.
 - Advise the person that they can have a representative to support them through the complaints process.
 - Ask the person what they are seeking as an outcome to the complaint investigation e.g. an apology, new appointment, reimbursement for costs, or an explanation.
 - Agree a plan of action, including when and how the complainant will hear back from the Centre.
- 5.5 In the event that the complainant does not accept the offer of a discussion as set out at 5.4 above (by telephone call or video call), the Complaints Lead will determine the response period and notify the complainant in writing of that period.

- 5.6 The Complaints Lead will carry out an investigation of the nature of the complaint and provide a full written response to the complainant within 20 working days of the complaint being received.
- 5.7 If a full response cannot be given within 20 working days of receiving the complaint, the Complaints Lead will write to the complainant to explain the reason for the delay.
- 5.8 A full written response will be made within 5 working days of a conclusion and outcome being reached.
- 5.9 If a complainant is not satisfied after a complaint has been investigated and a response provided, the Centre will provide further information to the complainant in terms of potentially escalating the complaint to an independent complaints' resolution process. This will be done on an individual complaint specific basis depending on the nature of the complaint.

The Centre will co-operate with any independent review of a complaint that has been escalated.

6. Time limit for making a complaint

6.1 The timescale in which a complaint can be made is 6 months from the date on which the matter occurred, or the matter came to the notice of the complainant.

Beyond a period of 6 months, the Centre reserves the right to use discretion to investigate, especially if there are good reasons for a complaint not having been received within the 6 months and whether it is still possible to investigate the case effectively.

7. Receiving and handling unreasonable complaints

- 7.1 In situations where the person making the complaint can become unreasonable or aggressive, the Complaints Lead will take appropriate actions from the list below and will advise the complainant accordingly:
 - Ensure contact is being overseen by the named Complaints Lead who will act as the single point of contact and make it clear to the complainant that other members of staff will be unable to help them.
 - Ask that they make contact in only one way, appropriate to their needs e.g. in writing.
 - Place a time limit on any contact.
 - Restrict the number of calls or meetings during a specified period.
 - Ensure that a witness will be involved in each contact.
 - Refuse to register repeated complaints about the same issue.

- Do not respond to correspondence regarding a matter that has already been closed; only acknowledge it.
 - Explain that the Centre will not respond to correspondence that is abusive.
- Make contact through a third person such as an independent advocate (where appropriate).
- When using any of these approaches to manage contact with unreasonable or aggressive people, provide an explanation of what is occurring and why.
- Maintain a detailed dated and timed record of each contact with the complainant during the ongoing relationship.

8. Escalating and appealing against the outcome of a complaint

8.1 If a complainant is not satisfied after a complaint has been investigated and a response provided, the Centre will provide information to the complainant in terms of escalating the complaint to Health and Social Care Complaint Adjudication Management Partners (HSCAMP).

The contact details are:

HSCAMP Ltd. Website: https://hscamp.co.uk/

18 Hoffmanns Way

Chelmsford CM1 1GU Email: info@hscamp.co.uk

8.2 The Centre will co-operate with any independent review of a complaint that has been escalated.

9. Care Quality Commission (CQC)

- 9.1 The Centre will produce an annual summary of complaints received.
- 9.2 A complaints summary will be sent to the Care Quality Commission, on request, no later than 28 days from the date of receiving such a request.
- 9.3 Any complaints summary provided to the Care Quality Commission, will not contain any confidential personal information about complainants.

10. Learning from complaints

- 10.1 The Centre will review all complaints received with a view to continuous quality improvement within the eating disorder healthcare service.
- 10.2 All complaints received will be used as a learning exercise to consider improving aspects of the service provided to clients.
- 10.3 The Centre will support shared learning from complaints by reporting the outcome

of complaint investigations to staff involved (where relevant). (Such reports will not contain any client identifying details.)

10.4 Complaints will be used to enhance and inform the personal and professional development of staff and lessons learned from complaints may be, where relevant, included in staff appraisals and continuing professional development plans.

11. Annual review of complaints

- 11.1 The Centre will review all complaints on an annual basis in terms of:
- the number of complaints received
- the issues that these complaints raised in terms of any trends or areas of risk that might need to be addressed
- · whether complaints have been upheld, and
- improvements or changes to the healthcare service that were made.

12. Policy review

12.1 This policy will be reviewed at least annually.



Client third party consent

[To be completed by 'the Client'] Client's Full Name: **Client's Address:** Client's Telephone Number: Name of Complainant: Complainant's Address: Complainant's **Telephone Number:** If you are complaining on behalf of a client, the consent of the client will be required. Please obtain the client's signed consent using this third party consent form. 'I authorise the above named person to complain on my behalf. I authorise and consent to The London Centre for Eating Disorders and Body Image Ltd. releasing information about me and discussing my treatment, care and healthcare records with the person named above in relation to this complaint only'. Client's Signature: Date:

Once completed, this form should be sent to:

The Complaints Lead
The London Centre for Eating Disorders and Body Image Ltd.
Saki House
97 Mortimer Street
London W1W 7SU



Verbal Concerns/Complaints Form

This form is to be used by staff to record all verbal (informal) concerns and minor complaints that are made to the service. Please aim to politely obtain as much information from the complainant wherever possible.

Date:		Time received:		
Method of contact:	Telephone / Email / Other (Delete as applicable)			
Name of the person raising the verbal concern / complaint:				
Address:				
Postcode:				
Telephone:				
Email address:				
Name of the client (if not the person above raising the verbal concern / complaint):				
Address:				
Postcode:				
Telephone:				
Email address:				
Has the client signed a consent form authorising the				

concern /complaint?	
Description of concern/complaint:	
Action the complainant would like taken by The London Centre:	
Outcome: (provide details of how this verbal concern/complaint was resolved and any advice given or action taken to resolve the matter):	
Describe how The London Centre can learn from the issues raised and any improvements / changes planned as a result of this: (if applicable at this stage)	

person to raise the

Name and designation of the member of staff receiving the concern / complaint:	
Date sent to the Complaints Lead:	

16. Appendix 3



Complaint form

Please be assured that a complaint <u>will not</u> prejudice your present or future treatment and care at The London Centre for Eating Disorders and Body Image Ltd..

care at The Lo	ndon Centre for Eating Disorde	ers and Body Im	age Ltd	
Client's Details		Complainant's Details (if not the client)		
First Name		First Name		
Last Name		Last Name		
Date of Birth		Date of Birth		
Address:		Address:		
Telephone:		Telephone:		
Email address:		Email address:		
Complaint de	etails – Please describe what	you are unhap	py about:	

When and where did the incident take place?				
Which members	s of staff were present	at the time?		
Please state wh	at questions you woul	d like answered?	?	
What are you se	eeking from your comp	olaint?		
e.g. an apology; an explanation; action to put things right; reassurance that the same thing				
will not happen to	o someone else; a refun	d of treatment fees	s; or so	
Complainant Signature:			Date:	