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SERVICE SATISFACTION AND COMPLAINT HANDLING

1. Purpose

The purpose of this Policy is to establish processes that assess satisfaction and monitor complaints, to ensure that the service provided by the Advance Histopathology Laboratory Ltd (AHLab) meets the needs and requirements of its users and that risk management activities are appropriate to evaluate the impact of work processes which may affect patient safety.

2. Principle

This document applies to all aspects of the service provided by AHLab. It is the responsibility of AHLab managers to establish and implement procedures to obtain and monitor data on user satisfaction and complaints. It is the responsibility of AHLab managers and pathologists to participate in the evaluation of clinical effectiveness, audit and risk management activities of AHLab and external bodies.

It is the responsibility of AHLab employees to draw to the attention of the AHLab managers any feedback, in particular complaints, received from users and to assist managers to provide continual service quality improvement. To inform AHLab Managers if they are aware of work processes and potential failures on examination results, which may affect patient safety.

5. Procedure

5.1. Obtaining and Monitoring Data on User Satisfaction.

A user satisfaction survey is routinely conducted annually, inviting comments from users on the services provided by the AHLab to all users. The specific responses are collated and reviewed at the next AMR. The information obtained should be treated as confidential and should not be disclosed to other users without prior consent.

An appropriate response date should be selected, to allow sufficient time for the data to be collated prior to a Management Review Meeting, ensuring any issues can be discussed, decisions taken and acted upon, as necessary (Management Review AHL – Lab 105).

The User Satisfaction Survey (AHL – Lab 15) should be short to maximise response rates, be issued to all users, either by mail, email or fax and should state:

- The date by which responses should be received by AHLab.
- An address to send the responses to.
- The survey should include, but not be limited to: whether performance targets have been met e.g. turnaround times, access to report.
- Assessing the clinical relevance of laboratory investigations performed and the reliability of interpretive reports.

The survey questions should be reviewed at Annual Management Review (AHL – Lab 46) by AHLab managers and distributed to the users by the Business Manager/Personal Assistant, at the request of the Clinical Director. The output should analyse the numerical responses to the general questions,

but focus on actions necessary to address comments and recommendations made by the users, to give value to the exercise.

The overall satisfaction of the users should be presented in a report format, which should be made available on the AHLab website.

The survey questions, responses and analytical data are filed in the user feedback folder located in the Laboratory manager's office.

Managers may issue the User Satisfaction Survey (AHL – Lab 46) to individual users at other times, if considered appropriate.

5.2. Comments and Complaints

In addition, the AHLab Service User Guide (Information for Users AHL – Lab 96 - P), invites comments and suggestions the user considers would improve the quality of service provided. The comment or complaint, be it praise, criticism or something between, should be made formally to the Clinical Director in writing, either by post or by email. The subject of the comment should be clearly stated, with any and all relevant information included.

Informal comments may not be acted upon thoroughly and the content in general may not be fully understood. If informal comments are given they should be circulated amongst the AHLab management team and a response given where needed. It is preferable for the Clinical Director or Laboratory Manager nominated prior to the AMR to contact the User and ask for a clarification statement.

Comments, be they positive, neutral observations or complaints, should be reviewed fully at the AMR (AHL – Lab 46). Complaints are agenda items within the Service Meeting (AHL – Lab 13). Upon receipt of a formal comment, the correspondence should be circulated amongst the AHLab management team for information and to be appropriately handled and reported to the remaining AHLab staff at the monthly meeting. If the comment is in effect a complaint, it should be logged on iPassport using the complaints tab of the Quality Management menu. An individual reference number and action plan is generated, and the actions assigned to individuals with a time scale for completion. The status of the actions can be assessed here also. At a minimum, any complaint should be responded to initially by the Clinical Director, regardless of whether a further response detailing actions taken is to follow.

Advance Histopathology Laboratory Ltd (AHLab) is an independent service provider and all doctors in private practice must display and have available a Patients Complains Policy (in our case User Satisfaction and Complaint Handling (AHL – Lab 23 – P). For this reason, AHLab is able to utilise the Independent Doctors Federation (IDF) three stage of the Independent Sector Complaints

Adjudication Service (ISCAS) complaints process. ISCAS is a voluntary, subscriber scheme for the vast majority of independent healthcare providers.

Source ISCAS 2017

Stage 1 and 2 are covered by this policy. For stage 1 complaints should contact the Laboratory manager and request a copy of the complaint policy. If the complaint is regarding a clinician or independent practitioner, it should be addressed to them and the Laboratory manager.

Formal complaint should be in writing (email or letter) and should be raised within six months of the incident or six months of discovering there was something to complain about. If the complainant is dissatisfied after Stage 1, the complainant has the right to request Stage 2 within six months. Stage 2 is dealt with by the Clinical Director or an individual of appropriate ranking (e.g. managing partner/non-executive director/trustees) who has not been involved at stage 1.

AHLab will cooperate with IDF and ISCAS to resolve any complaint. If the complaint, for whatever reason, cannot be resolved, the complainant has the right to escalate the matter to Stage 3 within six months, providing they have gone through Stage 1 and 2.

6. References

Medical Laboratories – Requirements for quality and competence (BS EN ISO 15189).

The Independent Doctors Federation (IDF) - https://www.idf.uk.net/complaints-compliments.aspx

The Independent Sector Complaints Adjudication Service (ISCAS) - http://www.iscas.org.uk/patients-complaints-process