

Cellular Pathology

Complaints, Concerns and Compliments

THIS IS A CONTROLLED DOCUMENT AND MUST NOT BE PHOTOCOPIED OR DISTRIBUTED WITHOUT AUTHORISATION

YOU ARE INSTRUCTED TO READ THE FOLLOWING PROCEDURE BEFORE PROCEEDING. UNDER NO CIRCUMSTANCES ARE THESE INSTRUCTIONS TO BE AMENDED OR ALTERED IN ANY WAY WITHOUT THE PERMISSION OF EITHER THE AUTHOR OR THE AUTHORISER.

Review Interval: Every 24 months

Risk Assessment

Provided that Departmental Safety Procedures, Protocols, Manufacturers' instructions, and good laboratory practice are followed throughout this procedure, the following risk assessment applies:-

Preparation	Low risk
Instrumental	Low risk
Chemical	Low risk. Refer to COSHH assessments for specific reagent hazard. No reagents/chemicals
Sample	Low risk. Infection risk. No samples

Risk Assessment Score:

2x3 = 6

Introduction

A working definition of a complaint/concern is “any expression of dissatisfaction that must be responded to”. Dissatisfaction can be with one or more aspects of the service provided.

The Cardiff and Vale UHB has a concerns and complaints management procedure for dealing with concerns and these guidelines should be read in conjunction with that procedure. [UHB guidance to Concerns/complaints](#). Concerns received in Cellular Pathology can be from hospital doctors, GPs or other hospital laboratories, patients or relatives. The UHB’s concerns and complaints management procedure was set up to deal with patient concerns, but the general principals can be applied to all concerns. When a person raises a concern, they will be sign posted to the ‘[Putting Things Right - Raising a concern about the NHS in Wales](#)’ information leaflet.

All concerns should be dealt with promptly. Concerns are important not only for the particular incident in question but also for the opportunity that they afford to review and improve the overall quality of service. Details of all concerns shall be recorded on the Q-Pulse document management system

Principle:

The service aims to provide the very best care and treatment. But sometimes things may not go as well as expected. Raising of concerns/complaints is a critical element of improving services. Investigations following concerns look at what may have gone wrong so that we can try to prevent a recurrence and improve the overall service for all our users.

Compliments may be received in a number of ways, verbally, in writing or electronically, the value of compliments of staff morale and productivity cannot be underestimated, compliments are recorded on the Q-Pulse document management system and shared throughout the department.

References:

EP-LAB-BS EN ISO 15189:2022 Medical laboratories — Requirements for quality and competence (ISO 15189:2022)

[Procedure for NHS Staff To Raise Concerns](#)

[Putting Things Right – Raising a concern about the NHS in Wales](#)

Related Documents:

[MF-CPY-AgendaQualMR] – Agenda for Quality Management Review

[MF-CPY-AgendaQualMeet] – Agenda Quality Group Meeting

Procedure:

1. Concerns/Complaints

These can be dealt with as and when they arise and should be handled in a tactful manner. A concern/complaint may arise from numerous sources and may be received verbally, written or by e-mail. The procedure to deal with these complaints is as follows:

(A) Verbal concern/complaint

These should be generally transferred to senior staff on the appropriate section who will be responsible for initial handling of the complaint.

Complaint to:

Directorate office
Operational laboratory
Cytology
Sensitive Services
Specialist Services
Mortuary

Complaint initially handled by:

Scott Gable/Tracey Elsam
Hussana Thomas/Tracey Elsam
Sian Norris
Lydia Llewellyn
Karen Maharg
Scott Gable

Should no-one be immediately available to take a complaint by telephone, the complainant's name and telephone number should be taken and arrangements made to phone back as soon as possible and in all cases within **24 hours** (Normal working days, excluding weekends and bank holidays).

Informal verbal concerns/complaints are recorded on the attached form and forwarded to the Service Manager.

After the initial handling of a concern/complaint, the most appropriate person to deal with this may be the head of each section, and he/she should be informed of the concern/complaint at the earliest opportunity.

(B) Written concern/complaint:

For an informal written concern/complaint, the service manager will co-ordinate a response from the appropriate senior member of staff from the relevant section. The response must be sent within 1 week from receipt.

By referring the concern/complaint to the appropriate senior member of the Department, it is envisaged that the majority of these can be dealt with informally. In cases where a complainant is satisfied with a response it may eliminate the need for further action.

If the complainant is not satisfied and wishes to take the concern/complaint further, then he/she should be advised that this should be escalated to the concerns team using one of the following methods; submission of the [concerns form](#); via email to concerns@wales.nhs.uk; telephone on 02921836318 or by writing to the UHB at, Chief Executive, Cardiff and Vale University Health Board, Maes y Coed Road, Cardiff CF14 4HH. They can also be given a copy of the leaflet "Your views are important to us" to explain how the complaint will be dealt with.

All concerns/complaints are logged into Q Pulse under the prefix "IC-YY-XXX-CPY" with "IC" denoting Informal Complaint, "YY" the year of complaint, "XXX" the specific complaint number and "CPY" Cellular Pathology. These are discussed in the bi-weekly Quality Management Review meeting between the Quality Team and the Service Manager [MF-CPY-AgendaQualMR] and more widely in the monthly Quality Meeting [MF-CPY-AgendaQualMeet] with a view to making improvements to the service by reviewing cause and outcome.

All concerns/complaints received by the Chief Executive will be managed by Patient Experience Team using their central database. These will then be forwarded to the Service Manager who has responsibility for investigating the complaint as outlined below.

The Service Manager is responsible for: -

- Notifying the CD&T Clinical Board Director of Quality, Safety and Patient experience as soon as the concern/complaint is received, if they have not been included in cascade distribution.
- Informing the responsible Consultant (if applicable) at the earliest possible stage regarding concerns/complaints about clinical care.
- Informing and providing support to all members of staff involved in the concern/complaint.
- Giving advice to staff about their right to seek help and advice of a professional association or trade union.
- Ensuring that all statements or reports of meetings held in relation to a concern/complaint are available to **all** personnel during the investigation. A written record must be made of each statement – Statement forms are held by the Service Manager/Concerns team
- Ensuring that final responses are written in the first person for the Chief Executive to sign.
- Ensuring that any clinicians involved in a concern/complaint have the opportunity to comment on the draft letter/report and also receive a copy of the final response.
- Ensuring that complaint responses are not sent to the complainant without the approval of the CD&T Clinical Board Director of Quality, Safety and Patient experience, the Concerns team and Chief Executive.

Note: Where a concern/complaint involves more than one Clinical Directorate, the Concerns team is responsible for co-ordinating the response.

The Service Manager in collaboration and coordination with the CD&T Clinical Board Director of Quality, Safety and Patient experience, will send a draft of the final letter to the concerns team as soon as reasonably practicable. The Welsh NHS standard is for a final formal response to be submitted to the concerned individual **within 30 working days**, where this is not possible an explanation shall be sent in respect of the investigation and the expected timeline. The final letter will be registered and checked for full compliance within the UHB standards.

COMPLIMENTS

Compliments may be received by the department in writing via letter, email or verbally, these are highlighted at staff meetings ensuring all staff become aware of the positive contributions that they have made to service delivery.

All compliments are collated and reviewed each month and scanned to Q-Pulse to formally record them as compliments. Compliments are logged into Q Pulse under the prefix “CO-YY-XXX-CPY” with “CO” denoting Compliment, “YY” the year the compliment was raised, “XXX” the specific compliment number and “CPY” Cellular Pathology. These are discussed in the bi-weekly Quality Management Review meeting between the Quality Team and the Service Manager [MF-CPY-AgendaQualMR].



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

Cardiff and Vale University Health Board Concerns Form

Section A: Your Details

Title:

Name:

DOB:

Address:

Contact Details
Telephone:
Mobile:
Email:

Are you the Patient?

Section B: a concern on behalf of someone else

Title:

Name:

DOB:

Address:

Section C: Details about the concern

If you are raising this concern on behalf of someone else, what is your relationship to the patient?:

Date event/incident occurred:

Have you already put your concern to the frontline staff responsible for delivering the service? If so, please give brief details of how and when you did so:

Summary of your concerns/key issues

In your opinion, what went wrong?:

Specific questions you would like answered:

Details of what you would like to happen as a result of your complaint.

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Section D: Please choose how you would like us to contact you

Contact Options: email , telephone, letter

To be completed where the person raising the concern is not the patient.

I hereby authorise

Name of person raising the concern:	
Address:	

to act on my behalf and to receive any and all information that may be relevant to the concern.

I hereby agree that the health records and any personal information can be used in the investigation of the concern. I understand that access to records and personal information will be limited only to those who need to see them in order to investigate the issues raised and, only those sections of the health records relevant to the investigation will be used.

Signature of patient:	
Date:	

Please return to:

Concerns Department
Woodland House
Maes-y-Coed Road
Cardiff
CF14 4HH



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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

Ffurflen Pryderon Bwrdd Iechyd Prifysgol Caerdydd a'r Fro

Teitl:

Enw:

DG:

Cyfeiriad:

Manylion Cyswllt:
Ffôn:
Symudol:
E-bost:

Ai chi yw'r Claf? Ie / Na

Adran B: pryder ar ran rhywun arall

Teitl:

Enw:

DG:

Cyfeiriad:

Adran C: Manylion am y pryder

Os ydych yn mynegi'r pryder hwn ar ran rhywun arall, beth yw eich perthynas â'r claf?

Dyddiad y digwyddiad:

A ydych chi eisoes wedi mynegi'ch pryder wrth y staff llinell flaen a oedd yn gyfrifol am ddarparu'r gwasanaeth? Os ydych, rhowch fanylion cryno o sut a phryd y gwnaethoch hynny:

Crynodeb o'ch pryderon/materion allweddol:

Yn eich barn chi, beth aeth o'i le?

Cwestiynau penodol yr hoffech gael ateb iddynt:

Manylion yr hyn hoffech ei weld yn digwydd o ganlyniad i'ch cwyn:

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Adran D: Dewiswch sut fyddai orau gennych i ni gysylltu â chi

Dewisiadau Cysylltu: e-bost, ffôn, llythyr

I'w lenwi pan nad y claf yw'r person sy'n mynegi'r pryder.

Yr wyf drwy hyn yn awdurdodi

Enw'r person sy'n mynegi'r pryder:	
Cyfeiriad:	

i weithredu ar fy rhan ac i dderbyn unrhyw a phob gwybodaeth a all fod yn berthnasol i'r pryder.

Drwy hyn yr wyf yn cytuno y gellir defnyddio cofnodion iechyd ac unrhyw wybodaeth bersonol wrth ymchwilio'r pryder. Yr wyf yn deall y caiff mynediad at gofnodion a gwybodaeth bersonol ei gyfyngu i'r rheini sydd angen eu gweld er mwyn ymchwilio'r materion a fynegwyd yn unig, a dim ond yr adrannau hynny o'r cofnodion iechyd sy'n berthnasol i'r ymchwiliad gaiff eu defnyddio.

Llofnod y claf:	
Dyddiad:	

Dychwelwch i:

Adran Pryderon
Ty Coedtir
Ffordd Maes-y-Coed
Caerdydd
CF14 7HH