#TEXTBarbraMelrose -Complaints Manager- Friday

#CODENC

12 hours a week-'spare part' worker

mostly worked at Acute Hospital

1996 Started on complaints procedure

Works single handed

1998 worked with Lesley Humphries 050percent workload

#ENDCODE

#CODEJ1

Internal process of complaints

Discuss with key manager can be defused by immediate resolution with bereavement of relatives or who is going to be the investigation manager. i.e look at issue raised ( key manager). Look at complaints letter or ask relevant staff. If clinical decision, discussed with Medical Director

#ENDCODE

#CODEJ1

investigation sent to complaints department at the central trust office

#ENDCODE

#CODEG2

If discrepancy, both staff report and complaint sent to relatives. Staff may need to sign letter,. Sometimes additional matters e.g. apologises are addressed.

#ENDCODE

#CODEJ2

If discrepancy, both staff report and complaint sent to relatives. Staff may need to sign letter,. Sometimes additional matters e.g. apologises are addressed.

#ENDCODE

#CODEI1

Culture of the trust is open and honest. No particular problem with Doctors

#ENDCODE

#CODEJ3

Handling complaints - Has it changes? Could the McK complaint have been handled differently?

No specific changes, relies on 'gut feelings' about a case. Bereavement cases are the hardest. Barbara often writes suggestions for diffusion, widely accepts that things may be modified.

#ENDCODE

#CODEH3

Handling complaints - Has it changes? Could the McK complaint have been handled differently?

No specific changes, relies on 'gut feelings' about a case. Bereavement cases are the hardest. Barbara often writes suggestions for diffusion, widely accepts that things may be modified.

#ENDCODE

#CODEG1

Handling complaints - Has it changes? Could the McK complaint have been handled differently?

No specific changes, relies on 'gut feelings' about a case. Bereavement cases are the hardest. Barbara often writes suggestions for diffusion, widely accepts that things may be modified.

#ENDCODE

#CODEG2

Handling complaints - Has it changes? Could the McK complaint have been handled differently?

No specific changes, relies on 'gut feelings' about a case. Bereavement cases are the hardest. Barbara often writes suggestions for diffusion, widely accepts that things may be modified.

#ENDCODE

#CODEJ1

the cascade works downwards well. Culture there is a pattern of complaints, dealt with by manager. Confident that these are handled well. 'Max's door is always open'

#ENDCODE

#CODEB4

there have been disciplinary consequences for staff - need to look at patterns and Issues. #ENDCODE

#CODEJ2

If there is a 'difficult complaint' tactic 'Do our best not to get involved'- try to be as patient as possible-try to manage as effectively as we can.

#ENDCODE

#CODEG2

If there is a 'difficult complaint' tactic 'Do our best not to get involved'- try to be as patient as possible-try to manage as effectively as we can.

#ENDCODE

#CODEJ5

No specific training in complaints

#ENDCODE

#CODEH2

no rating of complaints. All complaints have equal rating. Consolidative services and Independent Clinical assessment has been used. Manager from outside patch. There are facilities that could be used in key complaints such as the v.good working relationship with CHC who have been able to use Consolidatory role. Max is excellent and defuses complaints.

#ENDCODE

#CODEA4

no rating of complaints. All complaints have equal rating. Consolidative services and Independent Clinical assessment has been used. Manager from outside patch. There are facilities that could be used in key complaints such as the v.good working relationship with CHC who have been able to use Consolidatory role. Max is excellent and defuses complaints.

#ENDCODE

#CODEA1

no rating of complaints. All complaints have equal rating. Consolidative services and Independent Clinical assessment has been used. Manager from outside patch. There are facilities that could be used in key complaints such as the v.good working relationship with CHC who have been able to use Consolidatory role. Max is excellent and defuses complaints.

#ENDCODE

#CODEJ1

no rating of complaints. All complaints have equal rating. Consolidative services and Independent Clinical assessment has been used. Manager from outside patch. There are facilities that could be used in key complaints such as the v.good working relationship with CHC who have been able to use Consolidatory role. Max is excellent and defuses complaints.

#ENDCODE

#CODEH2

bereavement Issues are carefully through about no outside help is used e.g. bereavement counselling, not actually sought. She recognises that some of the complaints about

deaths is due to the unrealistic prognosis of expectation of death.

#ENDCODE

#CODEH5

bereavement Issues are carefully through about no outside help is used e.g. bereavement counselling, not actually sought. She recognises that some of the complaints about deaths is due to the unrealistic prognosis of expectation of death

#ENDCODE

#CODEG2

Complaint letter should be positive and concerning about complaint and complaintant thanked.

#ENDCODE

#CODEJ2

Complaint letter should be positive and concerning about complaint and complaintant thanked.

#ENDCODE

Document1

Created on 31/10/00 18:21