PE5 – The service implements and monitors systems to ensure that patients and others are able to feedback on their experience of the service.

NB See standard statement CL7 for feedback from professional users of the service.

a. Feedback from patients on their experience of the service, including complaints, can contribute to service improvement and development. Good practice guidance encourages obtaining feedback from patients and the public and involving them in the development of the service. Processes used to obtain and respond to patient feedback should be grounded in current best practice and reflect professional guidance and statutory requirements. The processes used by the service to obtain and use patient feedback should be clearly described.

b. The service should have clear systems for developing, agreeing and maintaining materials in various formats to encourage feedback from patients and their relatives and carers. Patients and carers should be involved in developing and agreeing materials.

c. Aspects of the patient experience about which feedback might be captured include whether:
   - the appointments systems offered patients choice;
   - patients were encouraged to become involved in making decisions about their own healthcare;
   - individual needs and concerns were addressed;
   - appropriate and comprehensible information, suited to the needs of individual patients, was available;
   - waiting environments were suitable;
   - communications to and from the service met the needs of the patient;
   - sufficient information was provided to enable the patient to give informed consent to the examination or procedure offered;
   - the privacy, dignity and security of the patient was maintained fully; and
   - they have complaints about any aspect of the service.

d. Patients should have the choice of giving feedback, whether positive or negative, in a variety of ways, in confidence. These might include feedback forms available on websites, comments slips and boxes available within the service or verbally. Regular surveys are a useful method of obtaining additional patient feedback. Formats should take account of varying patient needs, such as impaired vision or language requirements. All staff should be aware of these processes and, in particular, their role in responding to verbal complaints with a view to avoiding escalation of the complaint.

e. All patient feedback should be collated and analysed to better understand the patient’s experience of the service. Where possible, findings should be acted upon to improve and develop the service, and the findings and any changes or initiatives implemented as a result of patient feedback should be disseminated to staff.
f. Findings from analysis of patient feedback, and changes made as a result, should be communicated to patients. This may be done by publishing findings on a website or on posters displayed within the service area, or by individually contacting patients or others who have commented on a specific matter. Where it is not possible to make an appropriate change, the reason for this should be made known. This information should be recorded as it may be helpful in supporting future business cases or similar. The service might work with local patient groups and forums and Patient Advice and Liaison Services (PALS) to obtain further feedback on the perspective of patients.

g. Complaints indicate areas of possible development and improvement for the service, and information gleaned from them can be used to improve patient care and service delivery. Systems should be in place to ensure an effective and timely response to all complaints. Processes and protocols used to manage complaints should be grounded in current best practice, reflect professional guidance and statutory requirements, and be consistent with the parent organisation’s policies. Staff should be aware of the protocols, how to access them and be informed of any changes. In addition, there should be evidence of analysis of any trends in the complaints.

h. All complaints should be investigated as quickly as possible. There should be a published complaints policy which clearly explains the process and includes names and current contact details of those responsible for receiving complaints. Details of complaints procedures should be widely displayed in public areas of the service, and should be readily accessible in different formats. All staff should be aware of complaints policies and processes and be able to direct patients and others to them. Those who have professional contact with the service, such as hospital clinicians, GPs and other healthcare professionals should be aware of the complaints process and how to access it. See also CL7

i. Robust systems should be in place to ensure that all complaints are reported and investigated. Details of the complaint, investigation and findings should be recorded and analysed. Findings should be communicated to relevant parties, including the complainant and any staff involved. Information from complaints should be used to review service provision and details of remedial action, or changes undertaken following complaints, widely disseminated. There is a duty of candour to patients when responding to complaints.

j. All staff should be offered regular training and refresher courses in the complaints procedures and how to work effectively and sensitively with those wanting to make complaints.

k. Systems should be in place for managing and supporting staff who wish to raise concerns about the service. A ‘freedom to speak up’ policy should be in place to allow staff to raise concerns over any aspect of service delivery, clinical treatment or management, in confidence and without prejudicing their position. (See also LM1C10)

References


NHS Litigation Authority. *Standards.*  
http://www.nhsla.com/Safety/Standards/Pages/Home.aspx

NHS Choices. *LOCATE Patient advice and liaison services (PALS)*  

**Legislation**

*Local Government and Public Involvement in Health Act 2007.*  

*Patient Rights (Scotland) Act 2011.*  

*Health and Social Care Act 2012.*  
http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted


**Websites**

Healthwatch.  
http://www.healthwatch.co.uk/

NHS Choices. *Best Practice-responding to patient feedback.*  

NHS England *Sustainable Improvement Team*  
https://www.england.nhs.uk/sustainableimprovement/

NHS Choices website. Making a complaint.  
http://www.nhs.uk/choiceintheNHS/Rightsandpledges/complaints/Pages/AboutNHScomplaints.aspx
Medical Protection Society (MPS)

England:  [http://www.medicalprotection.org/uk/england-factsheets](http://www.medicalprotection.org/uk/england-factsheets)  
AND  [http://www.medicalprotection.org/uk/booklets/complaints-series](http://www.medicalprotection.org/uk/booklets/complaints-series)

Wales:  [http://www.medicalprotection.org/uk/wales-factsheets](http://www.medicalprotection.org/uk/wales-factsheets)

Scotland:  [http://www.medicalprotection.org/uk/scotland-factsheets](http://www.medicalprotection.org/uk/scotland-factsheets)

Northern Ireland:  [http://www.medicalprotection.org/uk/resources/factsheets/northern-ireland](http://www.medicalprotection.org/uk/resources/factsheets/northern-ireland)

Websites include complaints procedures under each country’s factsheet list; an example is provided under England:

Department of Health.  *Complaints procedure.*  

The Colleges will aim to update the reference list regularly to ensure that the information provided is as current as possible. Please note these links refer to external organisations and, as such, the Colleges are not responsible for the content or maintenance of these external sites.