



Policy on Responding to Raising Issues of Concern and Complaints

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Definitions:

1. The **JCCP** is the Joint Council for Cosmetic Practitioners.
2. A **Concern** is an issue raised by a patient or member of the public that has not been made in writing and can be resolved by the end of the next working day.
3. A Complaint is 'an expression of dissatisfaction requiring a response'. JCCP encourages an open culture where complaints are welcomed and learned from. It has made the shift to a listening and learning culture that encourages and embraces complaints and concerns as opportunities to improve the quality of care. The JCCP abides by the principles set out in the NHS England toolkit 'Assurance of Good Complaints Handling for Acute and Community Care' (<https://www.england.nhs.uk/wp-content/uploads/2015/11/ccp-toolkit-acute.pdf>)
4. **Cosmetic Redress Scheme** is an independent subscriber and confidential service provided to support people in expressing concerns or making complaints.
5. The **ISCAS Code of Practice** provides subscribing independent sector providers appropriate guidance for managing complaints in the independent sector.
6. **Care Quality Commission (CQC)** is the independent regulator for all health and social care services in England, whether they are provided by the NHS, local authorities, private companies or voluntary organisations.

1. Introduction

The JCCP has developed a process for dealing with complaints in a manner that embodies the core principles and practices operated by accountable public bodies and regulators even though it must be recognised as the manager of a Voluntary Register for Aesthetic practitioners. The policy provides the overarching framework to support the process and ensure that the principles described are met. All staff within the JCCP must take responsibility for resolving concerns and complaints when they arise. If this is not possible, complainants are to be advised of the JCCP's policy and procedure. It is recognised that early resolution of concerns and complaints, as close as possible to the point at which the concern or complaint has arisen, is most likely to lead to a satisfactory outcome for both the complainant and the JCCP. ***Complaints that relate to a Registrant's 'Fitness to Practise' will be considered at the discretion of the Chairperson/Chief Executive in accordance with the Council's Fitness to Practise Procedures and associated Rules.***

Appendix 1 sets out the JCCP process for Handling Concerns and Complaints.

2. Purpose and Principles

2.1 The JCCP recognises the need to learn from complaints and concerns. They are an important source for improving patient safety within the non-surgical sector. This policy describes the procedures the JCCP is using for the investigation and resolution of complaints and concerns, proportionate to their complexity. These procedures look beyond the individuals concerned and seek to understand the underlying causes, to support effective change and service improvement.

The principles underlying the policy are the commitment of the JCCP to ensure that JCCP staff and Trustees have the information and guidance necessary to resolve concerns or complaints in a manner and timescale that meets complainants' needs. The JCCP uses the principles of the Parliamentary and Health Service Ombudsman namely:

- Getting it right
- Being customer focused
- Being open and accountable

- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement

2.2 The policy seeks to ensure that JCCP staff have the necessary advice and information to be able to advise patients and members of the public on how to raise concerns and complaints in a manner and timescale that meets their needs and seeks also to ensure that the complaints process does not result in members of the public being treated differently if they raise a concern or make a complaint.

The JCCP endeavours to ensure that all complaints and concerns are dealt with in the following manner: -

- In accordance with the principles set out within the JCCP's Code of Practice/Conduct for registrants.
- In an open, honest and constructive manner in line with the JCCP's Core Values.
- As speedily as possible and in a manner which is appropriate for the complainant.
- Where a full written response is required, to respond normally within 20 working days. If this is not possible send an update to the complainant every 20 days. The complaint should be dealt within six months unless there are special circumstances which the complainant needs to declare.
- Ensure that the JCCP values and regards complaints and concerns as a means of identifying unsatisfactory service delivery and as an opportunity for learning and improving, and has in place the processes and mechanisms with which to do so.

3. Equity of Access

- 3.1 The aim of the JCCP is to provide open and easy access to all users of services provided by its registrants wishing to make a complaint or raise an issue of concern .
- 3.2 If interpreting services are needed, the JCCP will make every effort to ensure that these are available in a timely manner so that a complainant can voice their opinion.
- 3.3 The JCCP will try to provide information in whatever form the complainant requires, according to the complainant's needs.

4. Duties

4.1 **The JCCP Trustee Board** has a duty to:

- Ensure that the JCCP conducts complaint handling with reference to the structures and procedures set out in this document.
- Assure itself that the JCCP is meeting its obligations through the following:
 - Ensuring the full implementation of the JCCP Complaints Policy
 - Receiving appropriate reports to the Board on individual cases where necessary and overall trends and themes for analysis
 - The establishment and working of its 'Practitioner Register Committee' that is designated to deal with all final decisions on complaints relating to Registrant conduct, health and fitness to practise
 - The identification of the JCCP CEO as the 'Responsible Person' for complaints and recognition of the Chair of the Fitness to Practice and Register Sub Committee as a person with special interest in complaints on behalf of the Board of Trustees.

4.2 **The JCCP Trustee Board** has a duty to:

- Ratify the Policies on Responding to Concerns and Complaints
- Receive reports from the JCCP designated and Responsible Trustee with regard to complaints and concerns lodged with the JCCP
- Provide the Board with an Annual Report on all aspects of Complaints.

4.3 **The Practitioner Register Committee** will also monitor clinical risk issues emanating from the JCCP Complaints processes and will share relevant issues arising with the Cosmetic Practice Standards Authority (CPSA). In support of this policy, it is responsible for:

- Monitoring trends for complaints
- Communicating learning from complaints
- Informing the ongoing development, review and implementation of related policies
- Assuring the CPSA that clinical risk arising through complaints is being monitored and managed.

4.4 **The CPSA** is the practice standards setting body for the aesthetics sector in England and is responsible for:

- Setting standards for non-surgical treatments
- Overseeing the joint CPSA/JCCP Code of Practice
- Collecting and analysing data on adverse incidents and complications.

4.5 **Designated JCCP Trustees**

Two JCCP Trustees will be designated to review the complaint handling process and they will:

- Sample up to 10 complaint files each quarter

- Scrutinise compliance with the process followed from receipt of the complaint through to the final resolution
- Scrutinise the identification of lessons to be learned, their effective translation into an Action Plan, its implementation, and the identified improvement that is the intended outcome; any subsequent action plan will be reviewed by the CEO and presented to the Practitioner Register Committee for monitoring and assurance purposes.
- Report their findings to the JCCP CEO.

4.6 **The JCCP Chief Executive Officer**, on behalf of the Board, is the 'Responsible Person' identified by the Board to manage all complaints handling activity and allied issues.

4.7 **The Chair of the JCCP Practitioner Register Committee** holds the portfolio for Governance and is the responsible member of the Board to ensure that outcomes and learning from complaints and any subsequent organisational change, are reported to the Board. They are responsible for ensuring that a process is in place to respond effectively and in a timely manner to all forms of concern and complaint expressed by patients and members of the public.

4.8 **The JCCP Chief Executive Officer** is responsible for ensuring that:

- The JCCP maintains an up to date record of staff and contact details relating to complaints handling and a named/designated and responsible '**Complaints Officer**'
- A member of the JCCP staff is appointed as the sole contact for each incoming complaint, namely an '**Investigating Officer**'
- Each complaint is investigated fully within the required timescale and to the satisfaction of the **Chief Executive Officer**
- The investigation report and any supporting documents are supplied to the CEO within the required timescale and to approve and sign off the investigation report

- Key information and outcomes are shared within the JCCP across the organisation and where appropriate with recognised PRSBs
- The complaint response is full and satisfactory
- All complaint responses are prepared in line with the JCCP's Core Values of 'being Open and transparent' in accordance with the Council's declared Duty of Candour
- **Any complaint that relates to a Registrant's conduct, competence or health is referred to the JCCP Fitness to Practise Committee for consideration and investigation in accordance with the Council's Fitness to Practise procedures and Rules**
- Reviewing the guidance and templates provided to **Investigating Officers**, and providing training to staff in handling complaints and writing reports
- Providing an analysis of complaints as requested by specific areas
- Monitoring progress of complaints against defined timescales, and taking action where required
- Ensuring that when complaints that include issues relating to more than one organisation have been identified, the JCCP's joint working protocols with other organisations are used and managed effectively
- Ensuring that response rates and requests for re-investigation are monitored, and notified to the organisation through the corporate governance structure
- Collating and analysing reports relating to complaints activity, including themes, causal factors and recommended actions
- Provision of analysis to Board of Trustees on a quarterly basis
- Following up with the Investigating Officer when an action plan is not received back with a complaint response

- Ensuring that all complainants are advised of the availability of the Cosmetic Redress Scheme (CRS) and ISCAS to ensure that complainants have support where needed
- Ensuring that complainants have been properly advised of their rights, if dissatisfied with the response they have received.

4.9 **The Investigating Officer** is responsible for:

- Conducting a full investigation into the complaint following the agreed process (see Appendix 1)
- Providing the JCCP CEO with a full report on the findings of the investigation within the appropriate timescale
- Ensuring that the JCCP CEO is provided with the details of all staff involved in the complaint and all statements used to compile the investigation report
- Providing a covering letter to the complainant to accompany the investigation report or to provide a full and explanatory letter to the complainant where it is not appropriate to produce an investigation report
- Identifying any actions required as a result of the complaint and producing and implementing an action plan to address relevant issues
- Ensuring that all persons involved in a complaint are included in the investigation process and made aware of the findings and outcomes.

4.10 **All JCCP Employees and Officers**

All members of JCCP staff have a responsibility to resolve any complaints and concerns as quickly and effectively as possible and to highlight any issues which could warrant further investigation. All staff must be fully open and cooperative with any process to investigate complaints and concerns. At all times, staff should be mindful of the JCCP/CPSA Code of Practice and Standards framework.

5. Support for Members of the Public/Patients/Complainants

It is recognised that raising a concern or making a complaint is stressful and that the JCCP should make an effort to support patients through the process.

A JCCP Patient Representative on the JCCP Board will be designated to provide an independent source of advice and support to complainants.

6. Support for and Liaison with Staff

6.1 The JCCP will ensure that all staff are fully aware of the policy and procedure for handling concerns and complaints by:

- Placing the policy on the JCCP intranet(s)
- Dissemination of the policy/procedure and any subsequent amendments
- Inclusion of complaints training in the online induction and mandatory training provided for all staff.

6.2 It is recognised that involvement in a complaint can be a stressful and upsetting experience for staff. The JCCP will ensure that all possible support is provided to staff throughout the process of a complaint.

6.3 JCCP registrants named in a complaint either personally or by role, must be informed of the complaint by the JCCP. Staff should be fully supported by their line manager and consulted during the investigation.

7. Who can make a complaint?

7.1 A complaint can be made by any person who is receiving or has received treatment or services from a JCCP registered practitioner. Any person can also complain if they are or may have been affected by an action or decision of the JCCP.

7.2 A complaint can also be made by a representative acting on behalf of a person who receives or who has received services from the above, who

- is unable to make the complaint themselves because of physical incapacity or lack of capacity within the meaning of the Mental Capacity Act 2005
- is deceased
- has requested the representative to act on their behalf.

7.3 If a complaint is made on behalf of an individual, then the JCCP will seek to obtain consent from the patient before carrying out a full investigation. If the individual is not able to provide consent for a person to make the complaint on their behalf (for example, they are incapable due to lack of physical or mental capacity) or other verified appropriate representative will be accepted to act on their behalf.

8. Confidentiality

- 8.1 Complaints and concerns will be handled in the strictest confidence at all times. Care will be taken that information is only disclosed to those who have a right of access to any requested information. Information will not be disclosed to patients or complainants unless the person who has provided the information has given explicit consent to the disclosure of that information. If the JCCP require consent from an individual they will send a consent form which can be signed and returned to the JCCP.
- 8.2 Particular care must be taken where the complainant/patient's record contains information provided in confidence by or about a third party who is not a health professional.

9. Dissemination

The policy is available on the JCCP intranet(s) for all staff. The JCCP will ensure that all staff are fully aware of the policy and procedure for handling concerns and complaints.

10. Learning from Complaints

- 10.1 Lessons learned from complaints will be shared across the organisation.
- 10.2 The themes of current complaints and the identified actions from recently closed complaints will be reviewed on a monthly basis.

11. Duties to Outside Organisations

- 11.1 The JCCP has an obligation to work with a number of other organisations in order to comply with the complaint regulations and to provide an efficient and effective complaint-handling process. The JCCP has joint working protocols with a number of designated health-related Professional Statutory Regulatory Bodies (PSRBs) in order to ensure that inter-Council communication is managed effectively.
- 11.2 Since the complaint process is often difficult for complainants the Cosmetic Redress Scheme (CRS) and ISCAS are available to provide impartial support and advocacy for those complainants who require this type of support. The JCCP has a duty to advise all complainants of the availability of this service and to work with CRS and ISCAS to ensure that complainants have support where needed.

Appendix 1 – Process for Handling Concerns and Complaints

1. INITIAL CONTACT BY COMPLAINANT

There are various methods by which a complainant may contact the JCCP with a concern or complaint. These are:

1.1 Verbally

By talking to the JCCP identified Complaints Handling Officer – admin@jccp.org.uk or complaints@jccp.org.uk

1.2 In Writing

By email or letter to the JCCP identified Complaints Handling Officer – complaints@jccp.org.uk or admin@jccp.org.uk

2. ACKNOWLEDGEMENT

2.1 Timescale

Complaints to be acknowledged within 3 working days of receipt by the JCCP.

3 RESOLUTION AND RESPONSE

- All details of concerns and complaints to be recorded on JCCP contact forms. These forms to include all actions taken, outcomes and any further actions or learning as a result of the concern or complaint.
- The response letter, a copy of the investigation report and a copy of the action plan is sent to the complainant.
- If the complaint requires information from more than one organisation (if the JCCP is leading on the response) it is the responsibility of the complaints advisor to coordinate the response.
- The Investigating Officer will be the point of contact for the complainant during the complaints process unless it is clear that it is likely that the timescale will be exceeded. It will be the responsibility of the Investigating Officer to contact the complainant to discuss this extension and negotiate a new timescale.

3.1.1 Reopened complaints

It is recognised that on occasions the response sent to a complainant is not adequate in their view or they would like a further investigation as a result of the information provided. In these situations, it may be necessary to re-open a complaint that has been closed. A reasonable timescale should be set to respond that is acceptable to the complainant and is reasonable for further investigation to be completed.

4. Joint complaints with other organisations

- 4.1 Where the JCCP has agreed to lead on collating a response to a complaint that relates to more than one PRSB, then the PRSB timescales will apply. This will be made clear as part of discussions with the other PRSB's to determine which PRSB should lead based on the number and complexity of the issues relating to each PRSB within the complaint. If another PRSB is not in the position to provide the information required within the JCCP deadline then consideration may be made to extending the timescale. The JCCP Investigating Officer will negotiate with the complainant and agree this with a view to sending a separate response if that is more appropriate.
- 4.2 The overriding principle is that complaints affecting members of PRSB's who are also members of the JCCP will be handled initially by the PRSB. The JCCP will then follow due process once a decision has been made by the PRSB unless the complaint relates only to a specific JCCP matter, under which circumstances the JCCP will lead the complaints process.

JCCP

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