

## **Hull Clinical Commissioning Group**

Agenda Item: 6.1

Report to:	CCG Committee	
Date of Meeting:	22 March 2013	
Subject:	<b>.</b>	Count – Policy for the reporting and nt complaints and contacts to the PALS
Presented by:	Mike Napier, Head of	Corporate Governance
Author:	•	t Relations Administrator / Corporate Governance
STATUS OF THE R	EPORT:	
To approv	/e <b>X</b>	To endorse
To ratify		To discuss
To consid	ler	For information
PURPOSE OF REPORT:  To present updates to the above policy for approval. For ease of reference the small number of amendments to the previously approved policy are highlighted in red within the document.  RECOMMENDATIONS:		
To approve the amendments to the policy.		
REPORT EXEMPT FROM PUBLIC DISCLOSURE  No X Yes  If yes, grounds for exemption (FOIA or DPA section reference)		
CCG STRATEGY		ASSURANCE

Short summary as to how the report links to the CCG's strategic objectives	Short summary as to how the report adds assurance to the Assurance Framework
Supports delivery of both the NHS and CCG constitutions	-

IMPLICATIO	NS: (summary of key implications, including risks, associated with the paper),
Finance	No additional risks identified.
HR	No additional risks identified.
Quality	The successful operation of the policy will assist the monitoring of and remedial action to quality standards, where appropriate.
Safety	The successful operation of the policy will indirectly support the monitoring of safety standards.

**ENGAGEMENT:** (Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this)

The Patient Relations Team has daily contact with patients and other relevant parties as an integral part of their duties. The experiences from this engagement has informed the development of this policy.

Further insight work will be undertaken as part of the detailed performance reporting framework set out in Appendix 2 of the policy.

**LEGAL ISSUES:** (Summarise key legal issues / legislation relevant to the report)

The failure to implement an effective complaints / PALS policy could result in legal and / or regulatory challenge.

**EQUALITY AND DIVERSITY ISSUES:** (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Group if this is not appended to the report).

No adverse impacts identified from the Equality Impact Analysis – attached.

**THE NHS CONSTITUTION:** (How the report supports the NHS Constitution)

The proposals support delivery of Principle 3 of the NHS Constitution: The NHS aspires to the highest standards of excellence and professionalism, as well as accounting for the "Duty of Candour".

## **Definitions**

To approve - An item of business that requires the Committee to take a formal decision.

To endorse - An item of business that requires the Committee to endorse the actions taken by

the CCG.

- An item of business where the Committee is required to ratify the action(s) taken on the behalf of the Committee, for example, by a formal group established by the

Committee.

To discuss - An item of business that requires discussion by the Committee prior to agreement

of a formal resolution or a general policy steer to the executive officers.

To consider - A report containing a positional statement relating to the delivery of the CCG's

functions for which the Committee has a corporate responsibility but is not

explicitly required to make a decision.

To note - An item of business for which the Committee is required to give due regard to but

for which there is not expected to be discussion.

For information - An item of information that is of general interest but is not of significance to the

Committee's corporate or operational activities. These items will be included on a specific section on the agenda but will not be for discussion unless exceptionally Members have not been able to obtain assurance from the author outside of the meeting *and* the Chair has been notified of the request at least 1 hour in advance

of the start of the meeting.