



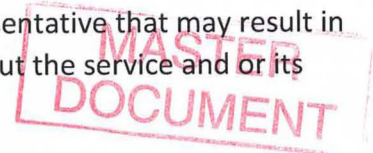
Document Title:	<b>DOT MEDICAL HUMAN RESOURCE POLICY Compliments, Suggestions, Concerns and Complaints</b>	Effective Date:		<b>01 Feb 2023</b>	
		Revision N <sup>o</sup> :		<b>1</b>	
Document Type:	<b>Policy</b>	Pages	<b>1 of 4</b>	Document N <sup>o</sup> :	<b>POL-007</b>

Dot Medical Limited supports the NHS with their products and services. The work we do is at all times underpinned by our mission statement which is:

*"Dot Medical is committed to providing exemplary Quality, Service and Leading Edge Technology in the field of Health Care with specialism in Cardiology"*

We welcome and encourage feedback as follows:

- **Compliment:** A comment, verbal or written, which describes a service which has been performed well.
- **Suggestions:** Ideas from people who use our service or their representative that may result in change or improvement to the service. This includes feedback about the service and or its activities.
- **Concerns:** An issue which makes someone anxious, worried, or unhappy. Whistle-blowing is a form of concern whereby a potential wrong-doing has been identified.
- **Complaint:** A formal statement from people who use our services or their representative that the service they received is unsatisfactory or unacceptable.



Feedback as described above is the best way for Dot Medical to learn and improve the quality and outcomes of the services we provide. We always aim to meet or exceed regulatory standards and the standards expected by clients and their families.

People often compliment us about our core values and the high quality of Dot Medical services. However, there are occasions when despite our best efforts we do not always get it right. When this happens, we try our very best to put things right as soon as we possibly can.

Feedback helps us to improve and develop the services that we provide. Compliments, Suggestions, Concerns and Complaints can highlight excellent practice, identify potential opportunities for development, encourage reflection and learning and avoid things going wrong again. In line with the company values, we are committed to doing everything possible to act positively and proactively on and at the earliest opportunity. We are also keen to recognise and reward success in the form of positive feedback and to carefully consider suggestions made.

We will regularly expect staff to report on complaints so that we can effectively manage them, assess the type and nature of feedback and use what we learn to inform decisions about future service delivery and improve the quality of current services.



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### **Who should be encouraged to give feedback on Dot Medical service?**

Anyone who receives or has received Dot Medical service, or who is directly involved may give feedback whether it is a compliment, suggestion, concern, or complaint.

Feedback may also be received from other Statutory or Voluntary Bodies, Service Commissioners and Regulators, local MPs, Councilors etc.

If a client is unable to give feedback, then someone else can do so on their behalf, for example: family members, or advocate. At any stage, a complainant may choose to have a personal representative, for example, a relative, friend, neighbour or an advocate to support them.

Some clients may require support to access advocacy services and Dot Medical will provide this.



### **Giving feedback to Dot Medical**

All concerns and complaints should be reported to the QA Manager who will ensure that the correct policy is followed and provide any assistance and advice that may be required in their management.

Compliments, Suggestions, and Concerns may be provided verbally, but should always be documented by the person receiving them.

### **Who is responsible for managing complaints?**

The day-to-day management of complaints is the responsibility of the QA Manager or their designated staff.

Dot Medical has a robust Policy (QSP-062) for managing complaints from all sources.

Serious complaints will be escalated to the Managing Director and Registered Manager who is responsible for keeping the CQC informed.

All complaints are logged in an electronic system which contains as a minimum

- Name and address of the complainant
- Contact numbers, emails of complainant
- The associated hospital
- Date of the complaint
- The product involved (model and serial number)
- The nature of the complaint
- Any injury related to a complaint and



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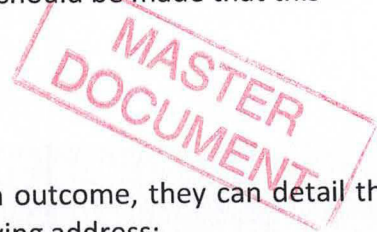
- Correspondence associated with the complaint.

If a complaint is related to a service provided by a hospital the hospital is informed with all the associated details so that they can perform their Duty of Candour with the patient and bring about a successful resolution to the complaint.

Dot Medical will assist the hospital with whatever reasonable information they require to resolve the complaint.

Whilst every effort should be made to obtain information it is acknowledged that some complainants may not wish to provide it. In such instances a record should be made that this information was requested.

### Appeals Process



If the complainant is not satisfied with the complaint investigation outcome, they can detail their ongoing concerns to the Managing Director, in writing, to the following address:

Dot Medical Ltd  
Silk Point  
Queens Avenue  
Macclesfield  
Cheshire  
SK10 2BB

The Managing Director's decision is final, however if the complainant continues to be unhappy with the complaint response outcomes, they are at liberty to contact:

Local Government Ombudsman  
Telephone: 0300 061 0614  
Website: [www.lgo.org.uk](http://www.lgo.org.uk)

And/or CQC  
National Customer Services Centre  
City Gate,  
Gallowgate, Newcastle upon  
Tyne NE1 4PA  
Telephone: 03000 616161  
Website: [www.cqc.org.uk](http://www.cqc.org.uk)



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**Document Review**

This policy will be reviewed every three years as detailed in QSP-051.

	Name	Position	Signature	Date
<b>Prepared by:</b>	Ian Rankin	Managing Director		2 FEB 2023
<b>Reviewed by:</b>	Denise Rankin	Company Secretary, Registered Manager		2 FEB 2023
<b>Approved by:</b>	Shirley A Foster	QA Manager		03 Feb 2023

Revision Number	Author	Description of changes	Document Change Request Note Number	Effective Date
0	I Rankin	New Document	2020-037	16-Oct-2020
1	I Rankin	To review policy and change the document review period to 3 years, to bring the policy in line with QMS documentation.	2023-02	01 Feb 2023

**MASTER DOCUMENT**