

<b>Sponsoring Organisation:</b>	<b>Implementation Date:</b>	Immediate
<b>Department of Health</b>	<b>Subject:</b>  <b>Central Return: Hospital and Community Services Complaints and General Practice (including Dental) Complaints – KO41(a) and KO41(b)</b>	
<b>DATA SET CHANGE NOTICE</b>		
<p>This DSCN informs users of the approval of changes to an information requirement or information standard by the Information Standards Board for Health and Social Care (ISB HaSC).</p> <p>This was approved by ISB HaSC at its meeting on 23<sup>rd</sup> July 2008.</p> <p>The burden of collection has been agreed by the Review of Central Returns Steering Committee (ROCR) - ROCR No: ROCR/OR/0081/002 and ROCR No: ROCR/OR/0082/002.</p>		
<b>Summary:</b>		
<p>The NHS (Complaints) Regulations 2004 (SI 2004/1768), and more recently the NHS (Complaints) Amendment Regulations 2006 (SI 2006/2084), resulted in there being changes made to the mandatory annual data collection for NHS complaints. The changes in legislation included the role of the Healthcare Commission and the extension of the timescale for local resolution from 20 to 25 working days. In addition, further changes were made to the template for the 2007/08 collection.</p> <p>This DSCN updates the NHS Data Model and Dictionary in line with the changes that have already been made to the KO41 data collection template. The changes are already in effect in the service, as they were part of the data collection exercise for the 2007/08 financial year.</p> <p>During the ROCR approval process, Monitor confirmed on 24/01/2007 that the data on written complaints in the NHS (part a, Hospital and Community Health Services; part b General Practice including Dental Complaints) collection is not mandatory for Foundation Trusts.</p> <p>This DSCN is in two parts:</p> <p style="padding-left: 40px;">Part 1 provides detailed policy information needed to implement the change Part 2 provides the definitional, technical and modelling detail that will be included in the NHS Data Model and Dictionary</p>		
<b>Datasets / return affected:</b>		
<p>KO41(a) Hospital and Community Services Complaints KO41(b) General Practice (including Dental) Complaints</p>		
<b>Related DSCNs:</b>		
<p>DSCN 24/2001, DSCN 07/2002</p>		
<b>Impact of Change:</b>		
<b>Service:</b>	None	<b>System Suppliers:</b> None
<p>The Information Standards Board for Health and Social Care (ISB HaSC) is responsible for approving information standards. Submission documents and the ISB HaSC Board output relating to the approval of this standard can be found at: <a href="http://www.isb.nhs.uk/docs/nhscomplaints">www.isb.nhs.uk/docs/nhscomplaints</a></p>		

## DATA SET CHANGE NOTICE

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<b>Reference No:</b>	DSCN 16/2008 ROCR/OR/0081/002 ROCR/OR/0082/002
<b>Version No:</b>	1.0
<b>Subject:</b>	Hospital and Community Services Complaints and General Practice (including Dental) Complaints – KO41 (a) and KO41(b)
<b>Type of Change:</b>	Change to an approved information standard
<b>Implementation Date:</b>	Immediate
<b>Business Justification:</b>	The NHS (Complaints) Amendment Regulations 2006 (SI 2006/2084) resulted in there being changes made to local resolution. There has since been a further change made to the collection template that was implemented for the financial year 2007/08.

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### Introduction

Complaints reform is an essential and integral element of the Department of Health's programme for improving patients' overall experience of health care.

The complaints procedure for health services has undergone a series of changes in recent years, with the NHS (Complaints) Regulations 2004 (SI 2004/1768), and more recently the NHS (Complaints) Amendment Regulations 2006 (SI 2006/2084). It is important that the KO41 keeps pace with these policy changes and that data collected as regards complaints is accurate, consistent and timely. These changes are already implemented in the service as part of the 2006/2007 and 2007/2008 collections. This DSCN updates the central return in the NHS Data Model and Dictionary to incorporate these changes.

### Background

On 1 September 2006 the NHS (Complaints) Amendment Regulations 2006 (SI 2006/2084) came into force. One of the key elements covered by these Regulations had a significant impact on stage one of the complaints procedure and specifically affected complaints handling by front line NHS bodies. This effectively extended the time limit for responding to a complaint at the first (local) stage from 20 to 25 working days. This required an amendment to the KO41 template, to insert an additional worksheet. Subsequently, an approach was made to ROCR to amend the KO41 template in February 2007, which was approved.

During the approval process at the end of 2006/beginning of 2007, Monitor confirmed on 24/01/2007 that the data collection on written complaints in the NHS (part a, Hospital and Community Health Services; part b General Practice (including Dental) Complaints is not mandatory for Foundation Trusts.

The changes to the statutory response time at stage one of the current process came as a consequence of feedback to the Department of Health and the Healthcare Commission about there being insufficient time to take appropriate action at a local level to resolve a complaint.

The current template now reflects the 25 day limit for local resolution.

## Details of Change

As a result of the legislation changes, the revised central return has already been implemented in the service. Two of the key changes were:

1. The role of the Healthcare Commission in the Complaints process
2. A 25 working day timescale for local resolution

Part 2 of this DSCN provides the definitional, technical and modelling detail that is included in the NHS Data Model and Dictionary.

### *Timescales for Implementation / Change*

FRAMEWORK		Health and Social Care Personnel	Organisation <sup>1</sup>	IT Suppliers <sup>2</sup>
Effective Date <sup>3</sup> "may use"		Immediate – Changes already in place		
Implementation Date <sup>4</sup> "must use"	Collection Start Date <sup>5</sup>	Immediate – Changes already in place		
	First Submission Date <sup>6</sup>	N/A	Annual – July each year	N/A
	Reporting Period / Submission Cycle <sup>7</sup>	N/A	Financial Year April to March	N/A
Conformance Date <sup>8</sup> "must be used effectively and assessed for use"		Immediate – Changes already in place		

## Sponsor Details

Meredith Vivian, Head of Responsive and Accountable Services, Patient & Public Empowerment, Commissioning & System Management Directorate, Department of Health.

Room 503A Skipton House  
80 London Road  
London SE1 6LH

## Further Information and Support

Lesley Thurston, Responsive and Accountable Services, Patient & Public Empowerment, Commissioning & System Management Directorate, Department of Health.

Room 5E43 Quarry House  
Quarry Hill  
Leeds LS2 7UE - Tel 0113 2547387

Tamara Akroyd, Responsive and Accountable Services, Patient & Public Empowerment, Commissioning & System Management Directorate, Department of Health.

Room 5E43 Quarry House  
Quarry Hill  
Leeds LS2 7UE - Tel 0113 2546105

**Notes for timelines:**

1. Relevant organisations are those organisations as defined in the standard who must take direct action to implement the standard
2. IT Suppliers are all suppliers to the organisations listed at <sup>1</sup> who supply functionality pertinent to that standard
3. **Effective Date** is the date from which a new standard can be used but may not be mandatory. This might facilitate piloting, for example, or enable time for system functionality development. At this point, **you “may use” the standard.**
4. **Implementation Date** is the point from which the new standard becomes mandatory. Ideally, it inherently implies organisations use appropriate systems i.e. the date is the same for organisations and suppliers. However, there may be circumstances where interim workarounds are required i.e. the date is different for organisations and suppliers. At this date, **you “must use” the standard.** Where the standard demands data is submitted centrally, sub components of implementation date (and possibly ‘effective date’) are:
  5. **Collection Start Date** – this is the date collection of data must begin
  6. **First Submission Date** – this is the date of first submission of data centrally
  7. **Reporting Period / Submission Cycle** – If the standard calls for further collection and submission at defined intervals, this cell provides text of the reporting period (e.g. calendar month, financial year) and the submission cycle (e.g. submit data monthly on the 10<sup>th</sup> working day of the subsequent month).
8. **Conformance Date** is the date from which the service and IT system suppliers must use the standard as envisaged i.e. using appropriate IT solutions rather than interim workarounds and, if the standard requires it, an independent, authoritative body or legitimate internal audit would conduct a conformity assessment with the expectation of full conformance by all relevant parties. It is the **“must use standard effectively and assessed for use”** date
9. **Superseded Date** of the prior standard sets the date at which the prior standard is replaced by the new standard i.e. the prior standard must no longer be used. This date will apply only where there was a pre-existing standard made redundant by the new standard. It might be different from preceding dates in the framework if, for example, a new and old standard run in parallel for a period. It is the date from which you **“stop using the prior standard”**.

#### NHS Data Model and Dictionary Service

<b>Reference:</b>	Change Request 861
<b>Version No:</b>	1.0
<b>Subject:</b>	Central Return Forms KO41(a) and KO41(b)
<b>Type of Change:</b>	Changes to NHS Data Standards
<b>Effective Date:</b>	Immediate
<b>Reason for Change:</b>	Amendment to Data Standards for Written Complaints in the NHS.

#### Background:

The data collection and the Central Returns for written complaints in the NHS, KO41(a) (Hospital and Community Health) and KO41(b) (General Practice (including Dental)), have been reviewed. This is part of the overall program to reform the complaints procedure by 2009.

The data standards have been revised in order to reflect the change in the time period for complaint resolution to 25 days in the case of Hospital Services and to update the return and guidance in line with the current return.

The main changes are:

- Part 1 of KO41(a) reflects the percentage of complaints that were resolved at local resolution within the statutory timeframe of 25 days. The change to 25 days was introduced from 2006 under the NHS (Complaints) Amendment Regulations 2006. The return for 2006/07 reflects the change of timescale during the year by splitting Part 1 into Part 1a (April to August 2006 when the time limit was 20 days) and Part1b (September to March when the time limit has been extended to 25 days). The data standards have been modelled with a Part 1 time scale of 25 days as, in subsequent years, this split will be removed from the Central Return to reflect the new time scale only.
- The change of name of KO41(b) to 'General Practice (including Dental) Complaints'.
- KO41(b) Part 2 is not mandatory as this data collection is not currently covered by the GP regulations.
- The total number of staff complaints by ethnic category in KO41(a) part 4 and KO41(b)part 5 are now not restricted to the total number of complaints as there may be more than one staff member involved in the complaint.
- Consent may be given by the complainant for an extension of the 25 day time scale and a new attribute (COMPLAINT TIME EXTENSION CONSENT) has been introduced to allow the recording of this consent being given.

Independent review data is no longer collected by this return and so this has been removed.

This paper provides data standards to support the revised Central Returns.

Further guidance on the Compliants regulations can be found at <http://www.dh.gov.uk/en/Policyandguidance/Organisationpolicy/Complaintspolicy/NHScomplaintsprocedure/index.htm>

#### Summary of changes:

##### **Class Definitions**

[WRITTEN COMPLAINT](#)

Change to Description

[WRITTEN COMPLAINT](#)

Change to Attributes

##### **Attribute Definitions**

[COMPLAINT FHS RESOLUTION](#)

Deleted

<a href="#">COMPLAINT FHS SERVICE AREA</a>	Change to Name
<a href="#">COMPLAINT FHS SERVICE AREA</a> renamed <a href="#">COMPLAINT GP SERVICE AREA</a>	Change to Description
<a href="#">COMPLAINT FHS SUBJECT</a>	Change to Name
<a href="#">COMPLAINT FHS SUBJECT</a> renamed <a href="#">COMPLAINT GP SUBJECT</a>	Change to Aliases
<a href="#">COMPLAINT HCHS SERVICE AREA</a>	Change to Description
<a href="#">COMPLAINT HCHS STAFF CATEGORY</a>	Change to Description
<a href="#">COMPLAINT HCHS SUBJECT</a>	Change to Description
<a href="#">COMPLAINT LOCAL RESOLUTION DATE</a>	Change to Description
<a href="#">COMPLAINT TIME EXTENSION CONSENT</a>	New Attribute
<a href="#">INDEPENDENT REVIEW COMPLETION DATE</a>	Deleted
<a href="#">INDEPENDENT REVIEW PANEL REFERRAL</a>	Deleted
<a href="#">INDEPENDENT REVIEW REQUESTED DATE</a>	Deleted
<a href="#">WRITTEN COMPLAINT TYPE</a>	Change to Description

**Central Return Forms**

<a href="#">KO41(a) 1</a>	Change to Aliases
<a href="#">KO41(a) 1</a>	Attached file
<a href="#">KO41(a) 2</a>	Change to Guidance Text
<a href="#">KO41(a) 2</a>	Attached file
<a href="#">KO41(a) 3</a>	Change to Aliases
<a href="#">KO41(a) 3</a>	Attached file
<a href="#">KO41(a) 4</a>	Change to Aliases
<a href="#">KO41(a) 4</a>	Attached file
<a href="#">KO41(a) 5</a>	Change to Aliases
<a href="#">KO41(a) 5</a>	Attached file
<a href="#">KO41(a) 6</a>	New Central Return Form
<a href="#">KO41(b) 1</a>	Change to Guidance Text
<a href="#">KO41(b) 1</a>	Attached file
<a href="#">KO41(b) 2</a>	Change to Aliases
<a href="#">KO41(b) 2</a>	Attached file
<a href="#">KO41(b) 3</a>	Change to Aliases
<a href="#">KO41(b) 3</a>	Attached file
<a href="#">KO41(b) 4</a>	Change to Guidance Text
<a href="#">KO41(b) 4</a>	Attached file
<a href="#">KO41(b) 5</a>	New Central Return Form

**Date:** 7 August 2008

**Sponsor:** Meredith Vivian, Head of Responsive and Accountable Services Workstream, Commissioning Directorate

**Note:** New text is shown with a blue background. Deleted text is crossed out. Retired text is shown in grey. Within the Diagrams deleted classes and relationships are red, changed items are blue and new items are green.

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## KO41(a) 1

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Change to Central Return Form: Change to Aliases

## ~~KO41 (A): Hospital and Community Health Service Complaints~~

### KO41(a) 1

#### Contextual Overview

- ~~The Department of Health requires information to monitor the number of written Hospital and Community Health Service (HCHS) complaints received by the NHS each year. The information allows analysis of complaints by subject, and helps the Department of Health to monitor how well the NHS is meeting the performance targets of the complaints procedure.~~
- The Department of Health requires information to monitor the number of written Hospital and Community Health Service (HCHS) complaints received by the NHS each year. The information allows analysis of complaints by subject.
- ~~Information on the return is published in the booklet 'Written Complaints' and on [www.doh.gov.uk/nhscomplaints/](http://www.doh.gov.uk/nhscomplaints/).~~

#### ~~Completing Return KO41 (A): Hospital and Community Health Service Complaints~~

- ~~Information on the complaints procedure is published in the booklet 'Written Complaints' and on [Department of Health web site - NHS complaints](#).~~

#### Completing Return KO41(a) - Hospital and Community Health Services Complaints

- ~~KO41(A) is used for WRITTEN COMPLAINTS about Hospital and Community Health Services. For the purposes of this return a complaint that goes into writing at any stage, even if it is initiated orally, should be treated as a WRITTEN COMPLAINT. The return is subdivided into complaints by service areas, profession, subject of complaint and ethnic category of complainant (PATIENT) and staff about whom the complaint is made.~~
- KO41(a) is used for WRITTEN COMPLAINTS about Hospital and Community Health Services. Hospital and Community Health Services include any SERVICE provided by an NHS Trust (Acute Trust, Partnership Trust, Care Trust, Mental Health Trust or Ambulance Trust) or any commissioned SERVICE provided by a Primary Care Trust.
- For the purposes of this return, a WRITTEN COMPLAINT is one that is either made in writing to any member of Trust or PCT staff, or is originally made verbally and subsequently recorded in writing. Once it is so recorded, it should be treated as though it had been made in writing from the outset. Verbal complaints and comments/suggestions that do not require investigation should not be included. The return is subdivided into complaints by service areas, profession, subject of complaint, complainant (PATIENT) ETHNIC CATEGORY and the ETHNIC CATEGORY of the staff about whom the complaint is made.
- ~~A KO41(A) return is required from each NHS Health Care Provider and Strategic Health Authority for complaints relating to Hospital and Community Health Services for which they are responsible. A 'NIL' return should be submitted where applicable.~~
- One written communication may contain more than one WRITTEN COMPLAINT and each should be recorded separately. However, where a single complaint covers several aspects of care/treatment received, the WRITTEN COMPLAINT should be recorded only once, under the principal cause of complaint.
- ~~The return KO41(A) relates to WRITTEN COMPLAINTS received over a 12 month period, between 1 April of one year and 31 March of the following year. The return is made annually and should be submitted within the timescale required by the Department of Health as stated on the notes for completion.~~
- NHS Trusts and Primary Care Trusts should complete KO41(a) return. Primary Care Trusts are responsible for handling any WRITTEN COMPLAINT about hospital and community health services they provide as well as any WRITTEN COMPLAINT made

to them about commissioning issues. NHS Trusts will make their own return about WRITTEN COMPLAINTS investigated by them. A 'NIL' return should be submitted where applicable.

7. If the WRITTEN COMPLAINT is transferred to another ORGANISATION, the WRITTEN COMPLAINT should be recorded by the ORGANISATION to which it is transferred.
8. Do not include investigations instigated by outside agencies, for example, the Police, Health Service Commissioner or Coroners' Court.
9. Data on the ETHNIC CATEGORY of both complainant (this should always be about the PATIENT and not the person complaining on the PATIENT's behalf) and staff complained about (where a complaint is about an individual as opposed to a service or administrative arrangements, etc) has been collected since April 2001. This information will help the Department of Health to begin developing a picture of the extent to which ethnicity affects the likelihood of complaining or of being complained about.
10. WRITTEN COMPLAINTS regarding GENERAL PRACTITIONER Out Of Hours Services should be recorded as follows:
  - a) Complaints received regarding GP Practices who provide an Out Of Hours service under the new General Medical Services (GMS) contract should NOT be recorded on the KO41(a) return. They should be submitted on the KO41(b) (General Practice Health Services) return.
  - b) Where Primary Care Trusts directly employ CARE PROFESSIONALS to provide an Out of Hours service, these WRITTEN COMPLAINTS should be recorded on the KO41(a) return under the COMPLAINT HCHS SERVICE AREA 'Other Community Health Services'.
  - c) Where a Primary Care Trust commissions the Out of Hours service from an independent provider, e. g. Primecare, then WRITTEN COMPLAINTS made to the Primary Care Trust should NOT be recorded on the KO41(a) return. They should be submitted on the KO41(b) (General Practice Health Services) return.
11. The return KO41(a) relates to WRITTEN COMPLAINTS received over a 12 month period, between 1 April of one year and 31 March of the following year. Complaints received during the previous year, but carried over to the current year should be excluded. The return is made annually and should be submitted within the timescale required by the Department of Health.
12. ~~Each WRITTEN COMPLAINT where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCHS)' should be recorded in parts 1, 2, 3 and 4 of the return according to COMPLAINT HCHS SERVICE AREA, COMPLAINT HCHS STAFF CATEGORY, COMPLAINT HCHS SUBJECT and ETHNIC CATEGORY of complainant (PATIENT) and staff about whom the complaint is made.~~
12. Each WRITTEN COMPLAINT where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCHS)' should be recorded in parts 1, 2, 3 and 4 of the return according to COMPLAINT HCHS SERVICE AREA, COMPLAINT HCHS STAFF CATEGORY, COMPLAINT HCHS SUBJECT and ETHNIC CATEGORY of complainant (PATIENT) and staff about whom the complaint is made.

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**KO41(a) 1**

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Change to Central Return Form: Attached file

FormID: KO41a	
Form Name: Hospital and Community Health Services Complaints	
<b>Section: Form Contacts</b>	
Year	20XX-XX
Trust code	
Trust name	
Please enter the details of the person responsible for filling in this return. It is expected that the person below will normally be available to answer validation queries. If another person wishes to be the contact then please email: <a href="mailto:surveyteam@ic.nhs.uk">surveyteam@ic.nhs.uk</a> with their contact details.	
Full Name	
Job title	
Telephone	
Fax	
Email	
The Data Quality of this return has been checked by:	
Full Name	
Job Title / Role	

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## KO41(a) 2

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Change to Central Return Form: Change to Guidance Text

### ~~KO41(A) – HCCHS Complaints~~

## KO41(a) - Hospital and Community Health Services Complaints

### Part 1: Total Written Complaints during the year ending 31 March by Service Area

#### ~~1a Total Written Complaints received during the year and Local Resolution~~

- ~~1. The number of WRITTEN COMPLAINTS on HCCHS split by COMPLAINT HCCHS SERVICE AREA and Local Resolution action.~~

### Total Written Complaints received during the year and Local Resolution action

- The number of WRITTEN COMPLAINTS with WRITTEN COMPLAINT TYPE of National Code 02 'Hospital and Community Health Services' split by COMPLAINT HCCHS SERVICE AREA and Local Resolution action.

A WRITTEN COMPLAINT on HCCHS is where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCCHS)'.  
~~A WRITTEN COMPLAINT on HCCHS is where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCCHS)'.  
A WRITTEN COMPLAINT on HCCHS is where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCCHS)'.~~

- Local Resolution is the first stage of the complaints procedure when front-line staff should aim to provide the fullest possible opportunity for investigation and resolution of the WRITTEN COMPLAINT, as quickly as is sensible in the circumstances.

#### Total Number of Written Complaints Received

- ~~The total number of WRITTEN COMPLAINTS on HCCHS received during the year for each COMPLAINT HCCHS SERVICE AREA.~~
- The total number of WRITTEN COMPLAINTS on Hospital and Community Health Services received during the year for each COMPLAINT HCCHS SERVICE AREA.

#### Local Resolution Action

- ~~The total number of WRITTEN COMPLAINTS on HCCHS received during the year for local resolution in each service area are split by those complaints concluded within 4 weeks, those concluded after more than 4 weeks and those still being pursued. The time is measured from the COMPLAINT RECEIVED DATE to the COMPLAINT LOCAL RESOLUTION DATE. Those still being pursued are identified as complaints with no COMPLAINT LOCAL RESOLUTION DATE and no INDEPENDENT REVIEW REQUESTED DATE.~~

#### ~~1b Written Complaints in Part 1a above involving Requests for Independent Review and Independent Review Panels~~

##### Number of Cases requesting "Independent Review"

##### Concluded within 25 working days

- The total number of WRITTEN COMPLAINTS on Hospital and Community Health Services received during the year for local resolution and concluded within 25 working days by each service area.
- ~~Enter the total number of WRITTEN COMPLAINTS on HCCHS with an INDEPENDENT REVIEW REQUESTED DATE in each service area.~~

##### Number of Cases still being considered

- The time is measured from the COMPLAINT RECEIVED DATE to the COMPLAINT LOCAL RESOLUTION DATE.

##### Concluded after more than 25 working days with consent

- The total number of WRITTEN COMPLAINTS on Hospital and Community Health Services received during the year for local resolution and concluded after more than 25 working days with consent by each service area.

- ~~For each service area enter the total number of WRITTEN COMPLAINTS on HCCHS with an INDEPENDENT REVIEW REQUESTED DATE that have an INDEPENDENT REVIEW PANEL REFERRAL classification of 'Not yet decided'.~~

##### Number of Cases referred to "Independent Review"

- The time is measured from the COMPLAINT RECEIVED DATE to the COMPLAINT LOCAL RESOLUTION DATE with COMPLAINT TIME EXTENSION CONSENT of 01 'Consent given'. Where consent has been obtained to extend the response deadline beyond 25 working days and the WRITTEN COMPLAINT was subsequently concluded but not within the agreed extension, the WRITTEN COMPLAINTS should still be recorded as *concluded after more than 25 working days with consent*.

**Concluded after more than 25 working days without consent**

- The total number of WRITTEN COMPLAINTS on Hospital and Community Health Services received during the year for local resolution and concluded after more than 25 working days without consent by each service area.
- ~~For each service enter the total number of WRITTEN COMPLAINTS on HCHS with an INDEPENDENT REVIEW REQUESTED DATE that have an INDEPENDENT REVIEW PANEL REFERRAL classification of 'Yes'.~~

**Independent Review Action**

- ~~For each Service Area enter the total number of WRITTEN COMPLAINTS on HCHS for Independent Review split by: complaints that have been concluded within performance target; those concluded outside performance target; and those still being pursued. A complaint is within the performance target if it is not more than 6 months between the INDEPENDENT REVIEW REQUESTED DATE and the INDEPENDENT REVIEW COMPLETION DATE. A complaint that is still being pursued is a complaint that has no INDEPENDENT REVIEW COMPLETION DATE recorded.~~
- The time is measured from the COMPLAINT RECEIVED DATE to the COMPLAINT LOCAL RESOLUTION DATE with COMPLAINT TIME EXTENSION CONSENT of 02 *Consent not given*.

**Still being pursued**

- The total number of WRITTEN COMPLAINTS on Hospital and Community Health Services received during the year for local resolution still being pursued by each service area. That is WRITTEN COMPLAINTS with no COMPLAINT LOCAL RESOLUTION DATE.

## KO41(a) 2

Change to Central Return Form: Attached file

FormID: KO41a

Form Name: Hospital and Community Health Services Complaints

**Section: Part 1: Written complaints received 1 September 20XX to 31 March 20XX by service area and local resolution action where the time limit was 25 days**

Year	20XX-XX					
Trust code						
Trust name						
Service area	Line no.	Total number of written complaints received	Local Resolution Action			
			Concluded within 25 working days	Concluded after more than 25 working days with consent	Concluded after more than 25 working days without consent	Still being pursued
Hospital acute services: Inpatient	01	0	0	0	0	0
Hospital acute services: Outpatient	02	0	0	0	0	0
Hospital acute services: A&E	03	0	0	0	0	0
Elderly (geriatric) services	04	0	0	0	0	0
Mental health services	05	0	0	0	0	0
Maternity services	06	0	0	0	0	0
Ambulance services	07	0	0	0	0	0
Community hospital services	08	0	0	0	0	0
NHS Direct	09	0	0	0	0	0
Walk in centres	10	0	0	0	0	0
Other community health services	11	0	0	0	0	0
PCT commissioning	12	0	0	0	0	0
Other	13	0	0	0	0	0
<b>Total</b>	<b>99</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Data quality</b>	Total line should equal sum of lines 01 to 13.					
	Total column should equal sum of the four local resolution columns.					

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## KO41(a) 3

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Change to Central Return Form: Change to Aliases

### ~~KO41(A) - HCCHS Complaints~~

## KO41(a) - Hospital and Community Health Services Complaints

### Part 2: Total Written Complaints during the year ending 31 March by Profession Number of Complaints

- ~~The total number of WRITTEN COMPLAINTS on HCCHS received during the year for each COMPLAINT HCCHS STAFF CATEGORY.~~
- The total number of WRITTEN COMPLAINTS with WRITTEN COMPLAINT TYPE of National Code 02 'Hospital and Community Health Services' received during the year for each COMPLAINT HCCHS STAFF CATEGORY.

~~A WRITTEN COMPLAINT on HCCHS is where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCCHS)'. Where a WRITTEN COMPLAINT is regarding a team such as a mental health team, the COMPLAINT HCCHS STAFF CATEGORY should be recorded as National Code 10 'Other'.~~

**KO41(a) 3**

Change to Central Return Form: Attached file

FormID: KO41a  
Form Name: Hospital and Community Health Services Complaints  
Section: Part 2: Written complaints received 1 April 20XX to 31 March 20XX, by profession

Year	20XX-XX
Trust code	
Trust name	

Profession	Line no.	Total number of written complaints received
Medical (including surgical)	01	0
Dental (including surgical)	02	0
Professions supplementary to medicine	03	0
Nursing, Midwifery and Health Visiting	04	0
Scientific, Technical and Professional	05	0
Ambulance crews (including paramedics)	06	0
Maintenance and Ancillary staff	07	0
PCT Administrative staff / members (exc GP admin)	08	0
Trust Administrative staff / members	09	0
Other	10	0
Total	99	0

<b>Data quality</b>	Total line (99) should equal sum of lines 01 to 10.
	Total number of written complaints received in line 99 should equal total number of written complaints received in line 99 in Part 4.

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**KO41(a) 4**

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Change to Central Return Form: Change to Aliases

**~~KO41(A) - HCCHS Complaints~~****KO41(a) - Hospital and Community Health Services Complaints****Part 3: Total Written Complaints during the year ending 31 March by Subject of Complaint  
Number of Complaints**

- ~~1. The total number of WRITTEN COMPLAINTS on HCCHS received during the year for each COMPLAINT HCCHS SUBJECT.~~

~~A WRITTEN COMPLAINT on HCCHS is where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCCHS)'~~.

- The total number of WRITTEN COMPLAINTS where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services' received during the year for each COMPLAINT HCCHS SUBJECT.
- The total number of WRITTEN COMPLAINTS by subject of complaint may be more than the total number of WRITTEN COMPLAINTS in part 1.

**KO41(a) 4**

Change to Central Return Form: Attached file

FormID: KO41a

Form Name: Hospital and Community Health Services Complaints

Section: Part 3: Written complaints received 1 April 20XX to 31 March 20XX, by subject of complaint

Year	20XX-XX
Trust code	
Trust name	

Subject of complaint	Line no.	Total number of written complaints received
Admissions, discharge and transfer arrangements	01	0
Aids and appliances, equipment, premises (including access)	02	0
Appointments, delay / cancellation (outpatient)	03	0
Appointments, delay / cancellation (inpatient)	04	0
Length of time waiting for a response, or to be seen: NHS Direct	05	0
Length of time waiting for a response, or to be seen: Walk in centres	06	0
Attitude of staff	07	0
All aspects of clinical treatment	08	0
Communication / information to patients (written and oral)	09	0
Consent to treatment	10	0
Complaints handling	11	0
Patients privacy and dignity	12	0
Patients property and expenses	13	0
PCT commissioning (including waiting lists)	14	0
Independent sector services commissioned by PCTs	15	0
Independent sector services commissioned by trusts	16	0
Personal records (including medical and / or complaints)	17	0
Failure to follow agreed procedures	18	0
Patient's status, discrimination (e.g. racial, gender, age)	19	0
Mortuary and post mortem arrangements	20	0
Transport (ambulances and other)	21	0
Policy and commercial decisions of trusts	22	0
Code of openness - complaints	23	0
Hotel services (including food)	24	0
Other	25	0
Total	99	0

<b>Data quality</b>	Total line (99) should equal sum of lines 01 to 25.
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## KO41(a) 5

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Change to Central Return Form: Change to Aliases

### ~~KO41(A) - HCCHS Complaints~~

### KO41(a) - Hospital and Community Health Services Complaints

~~Part 4: Total Written Complaints received during the year ending 31 March by ethnicity of complainant and staff complained about  
Ethnicity of Complainants and Staff~~

#### Part 4: Total Written Complaints received during the year ending 31 March by ethnic category of patient Ethnic Category of Patients

- ~~1. The number of WRITTEN COMPLAINTS on HCCHS split by ethnicity of complainant (PATIENT) and staff (employee).~~

~~A WRITTEN COMPLAINT on HCCHS is where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services (HCCHS)'.  
Ethnicity of Complainants and Staff~~

#### Total Number of Written Complaints Received By Ethnic Category of Complainant

- The number of WRITTEN COMPLAINTS where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services' by ETHNIC CATEGORY of PATIENT.

#### Total Number of Written Complaints Received By Ethnic Category of Patient

- ~~3. Enter the total number of WRITTEN COMPLAINTS on HCCHS received from complainants in each ETHNIC CATEGORY. This should always be the ETHNIC CATEGORY of the PATIENT and not the PERSON complaining on the PATIENTS behalf.~~
4. Enter the total number of WRITTEN COMPLAINTS on Hospital and Community Health Services received from complainants in each ETHNIC CATEGORY. This should always be the ETHNIC CATEGORY of the PATIENT and not the PERSON complaining on the PATIENTS behalf unless there is no PATIENT involved.

#### Total Number of Written Complaints Received By Ethnic Category of staff involved

- ~~5. Enter the total number of WRITTEN COMPLAINTS on HCCHS received, which were made against the employee in each ETHNIC CATEGORY. This is only for complaints made against an individual as opposed to a service or administrative arrangements.~~

If the complainant has not stated their ETHNIC CATEGORY i.e. they were asked and they declined (code 'Z') or it is not known i.e. where the complainant was not asked or the complainant was not in a condition to be asked (code '99'), these should both be recorded as 'Z' on the return. (See DSCN 21/2004 and DSCN 11/2008 for more information).

# KO41(a) 5

Change to Central Return Form: Attached file

FormID: KO41a

Form Name: Hospital and Community Health Services Complaints

Section: Part 4: Written complaints received 1 April 20XX to 31 March 20XX, by ethnic category of patient

Year	2006-07
Trust code	
Trust name	

Ethnic category of patient	Ethnic category code	Line no.	Total number of written complaints received
White : British	A	01	0
: Irish	B	02	0
: Other white	C	03	0
Mixed : White & Black Caribbean	D	04	0
: White & Black African	E	05	0
: White & Asian	F	06	0
: Other mixed	G	07	0
Asian or Asian British : Indian	H	08	0
: Pakistani	J	09	0
: Bangladeshi	K	10	0
: Other Asian	L	11	0
Black or Black British : Black Caribbean	M	12	0
: Black African	N	13	0
: Other Black	P	14	0
Other ethnic : Chinese	R	15	0
: Other ethnic category	S	16	0
Not stated	Z	17	0
Total		99	0

<b>Data quality</b>	The total line (99) should equal sum of lines 1 to 17.
	If complainant has not stated their ethnic category, use 'not stated' line 17 to record this.

## KO41(a) 6

Change to Central Return Form: New Central Return Form

### KO41(a) 6

FormID: KO41a

Form Name: Hospital and Community Health Services Complaints

Section: Part 5: Written complaints received 1 April 20XX to 31 March 20XX, by ethnic category of staff involved

Year	20XX-XX
Trust code	
Trust name	

Ethnic category of staff involved	Ethnic category code	Line no.	Total number of written complaints received
White : British	A	01	0
: Irish	B	02	0
: Other white	C	03	0
Mixed : White & Black Caribbean	D	04	0
: White & Black African	E	05	0
: White & Asian	F	06	0
: Other mixed	G	07	0
Asian or Asian British : Indian	H	08	0
: Pakistani	J	09	0
: Bangladeshi	K	10	0
: Other Asian	L	11	0
Black or Black British : Black Caribbean	M	12	0
: Black African	N	13	0
: Other Black	P	14	0
Other ethnic : Chinese	R	15	0
: Other ethnic category	S	16	0
Not stated	Z	17	0
Total		99	0

<b>Data quality</b>	The total line (99) should equal sum of lines 1 to 17.
	If ethnic category of staff involved is not available, use 'not stated' line 17 to record this.
	Total number of written complaints received in line 99 will not necessarily equal total number of written complaints in line 99 in Parts 1a and 1b. If the a complaint is about a team, record the ethnicity of each member of the team.

## KO41(a) - Hospital and Community Health Services Complaints

### Part 5: Total Written Complaints received during the year ending 31 March by ethnic category of staff involved

#### Ethnic category of staff involved

- The number of WRITTEN COMPLAINTS where the WRITTEN COMPLAINT TYPE is National Code 02 'Hospital and Community Health Services' by ETHNIC CATEGORY of staff (EMPLOYEE) involved.

#### Total Number of Written Complaints Received By Ethnic Category of staff involved

2. Enter the total number of WRITTEN COMPLAINTS on HCHS received, which were made against EMPLOYEES in each of the ETHNIC CATEGORIES. This is only for complaints made against an individual as opposed to a service or administrative arrangements.

If the ETHNIC CATEGORY of staff involved is not stated i.e. they were asked but declined (code 'Z') or it is not known i.e. they were not asked or they were not in a condition to be asked (code '99'), these should both be recorded as 'Z' on the return. (See DSCN 21/2004 and DSCN 11/2008 for more information).

The total number of WRITTEN COMPLAINTS in part 5 will not necessarily equal the total number of WRITTEN COMPLAINTS in part 1. If the complaint is about a team, record the ETHNIC CATEGORY of each member of the team.

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## KO41(b) 1

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Change to Central Return Form: Change to Guidance Text

### ~~KO41 (B): Family Health Services Complaints~~

## KO41(b) - General Practice (including Dental) Complaints

### Contextual Overview

- ~~The Department of Health requires information to monitor the number of written Family Health Services (FHS) complaints received by the NHS each year. The information allows analysis of complaints by subject, and helps the Department of Health to monitor how well the NHS is meeting the performance targets of the complaints procedure.~~
- ~~Information on the return is published in the booklet 'Written Complaints' and on [Department of Health Website - NHS Complaints](#).~~

### ~~Completing Return KO41 (B): Family Health Services Complaints~~

- ~~The Department of Health requires information to monitor the number of written General Practice (including Dental) complaints received by the NHS each year. The information allows analysis of complaints by subject.~~
- ~~KO41 (B) is used for WRITTEN COMPLAINTS about Family Health Services. For the purposes of this return a complaint that goes into writing at any stage, even if it is initiated orally, should be treated as a WRITTEN COMPLAINT. The return is subdivided into complaints by service areas, complaint by subject of complaint, and ETHNIC CATEGORY of complainant (PATIENT) and staff about whom the complaint is made.~~
- ~~Information on the NHS complaints procedures can be obtained from [Department of Health Website - NHS Complaints](#).~~

### Completing Return KO41(b) - General Practice (including Dental) Complaints

- ~~A KO41 (B) return is required from each Health Authority for complaints relating to Family Health Services for which they are responsible. A 'NIL' return should be submitted where applicable.~~
- KO41(b) is used for WRITTEN COMPLAINTS about GP Practice (including dental) health services.
- For the purposes of this return, a WRITTEN COMPLAINT is one that is either made in writing to any member of GP Practice staff or Primary Care Trust staff, or is originally made verbally but is subsequently recorded in writing. Once it is so recorded, it should be treated as though it had been made in writing from the outset.
- Primary Care Trust and GP Practices should complete KO41(b) return for WRITTEN COMPLAINTS relating to GP Practice services for which they are responsible. A 'NIL' return should be submitted where applicable. WRITTEN COMPLAINTS made regarding Primary Care Trust services should be included in KO41(a) return.
- ~~The return KO41 (B) relates to written complaints received over a 12 month period, between 1 April of one year and 31 March of the following year. The return is made annually and should be submitted within the timescale required by the Department of Health as stated on the notes for completion.~~
- One written communication may contain more than one WRITTEN COMPLAINT and each should be recorded separately. However, where a single complaint covers several aspects of care/treatment received, the WRITTEN COMPLAINT should be recorded only once, under the principal cause of complaint.
- Do not include investigations instigated by outside agencies, for example the Police, Health Service Commissioner or Coroners' Court.
- WRITTEN COMPLAINTS received by the Primary Care Trust or by GP Practices regarding the provision of Out Of Hours services under the new General Medical Services (GMS) contract should be recorded on the KO41(b) return. In addition,

where a Primary Care Trust commissions the Out of Hours service from an independent provider, e.g. Primecare, then WRITTEN COMPLAINTS made to the Primary Care Trust should also be submitted on the KO41(b) return. Where the Primary Care Trust directly employs doctors (or others) to provide Out of Hours service, these WRITTEN COMPLAINTS should be recorded on the KO41(a) return.

9. Data on the ETHNIC CATEGORY of both complainant (this should always be about the PATIENT and not the person complaining on the PATIENT's behalf) and staff complained about (where a WRITTEN COMPLAINT is about an individual as opposed to a service or administrative arrangements, etc.) has been collected since April 2001. This information helps the Department of Health develop a picture of the extent to which ethnicity affects the likelihood of complaining or of being complained about.
10. The return KO41(b) relates to WRITTEN COMPLAINTS received over a 12 month period, between 1 April of one year and 31 March of the following year. The return is made annually and should be submitted within the timescale required by the Department of Health.
11. ~~Each WRITTEN COMPLAINT on Family Health Services should be recorded in parts 1, 2 and 3 of the return according to COMPLAINT FHS SERVICE AREA, COMPLAINT FHS SUBJECT and ETHNIC CATEGORY of complainant (PATIENT) and staff about whom the complaint is made.~~
11. Each WRITTEN COMPLAINT where the WRITTEN COMPLAINT TYPE is National Code 01 'General Practice (including Dental) (GP Practice) Services' should be recorded according to COMPLAINT GP SERVICE AREA, COMPLAINT GP SUBJECT and ETHNIC CATEGORY of the PATIENT and staff involved.

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**KO41(b) 1**

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Change to Central Return Form: Attached file

FormID: KO41b  
Form Name: General Practice (including Dental) Complaints  
Section: Form Contacts

Year	20XX-XX

Trust code	
Trust name	

<b>Please enter the details of the person responsible for filling in this return.</b> It is expected that the person below will normally be available to answer validation queries. If another person wishes to be the contact then please email: <a href="mailto:surveyteam@ic.nhs.uk">surveyteam@ic.nhs.uk</a> with their contact details	
Full Name	
Job title	
Telephone	
Fax	
Email	

<b>The Data Quality of this return has been checked by:</b>	
Full Name	
Job Title / Role	

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## KO41(b) 2

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Change to Central Return Form: Change to Aliases, Change to Guidance Text, Change to Guidance Text, Change to Guidance Text, Change to Guidance Text

### ~~KO41(B) - FHS Complaints~~

## KO41(b) - General Practice (including Dental) Complaints

### Part 1: Written Complaints during the year ending 31 March by Service Area Service Area

- ~~The number of WRITTEN COMPLAINTS on FHS received during the year split by COMPLAINT FHS SERVICE AREA.~~
- The number of WRITTEN COMPLAINTS on GP Practice services received during the year split by COMPLAINT GP SERVICE AREA.

### Number of written complaints received in practice/surgery

- ~~The total number of WRITTEN COMPLAINTS on FHS against all the GENERAL MEDICAL PRACTITIONERS, GENERAL DENTAL PRACTITIONERS and Health Authority FHS Administrations with which the Health Authority has service agreements, for each service area.~~

### ~~Number of Cases requesting "Independent Review"~~

- The total number of WRITTEN COMPLAINTS on GP Practice services against GENERAL MEDICAL PRACTITIONERS, GENERAL DENTAL PRACTITIONERS and General Practice administration, for each service area.
- ~~Enter the total number of WRITTEN COMPLAINTS on FHS with an INDEPENDENT REVIEW REQUESTED DATE for each service area.~~

### ~~Number of Cases still being considered~~

- ~~For each service area enter the total number of WRITTEN COMPLAINTS on FHS with an INDEPENDENT REVIEW REQUESTED DATE that have an INDEPENDENT REVIEW PANEL REFERRAL of *Not yet decided*.~~

### ~~Number of Cases referred to "Independent Review"~~

- ~~For each service area enter the total number of WRITTEN COMPLAINTS on FHS with an INDEPENDENT REVIEW REQUESTED DATE that have an INDEPENDENT REVIEW PANEL REFERRAL of *Yes*.~~

### ~~Independent Review Action~~

- ~~For each service area enter the total number of WRITTEN COMPLAINTS on FHS for Independent Review split by: complaints that have been concluded within performance target; those concluded outside the performance target; and those still being pursued. A complaint is within the performance target if it is not more than 3 months between the INDEPENDENT REVIEW REQUESTED DATE and the INDEPENDENT REVIEW COMPLETION DATE. A complaint that is still being pursued is a complaint that has no INDEPENDENT REVIEW COMPLETION DATE recorded.~~
- The total number of WRITTEN COMPLAINTS against Pharmacists and Opticians are not required.

## KO41(b) 2

Change to Central Return Form: Attached file

FormID: KO41b  
Form Name: General Practice (including Dental) Complaints

### Section: Part 2: Written complaints received 1 April 20XX to 31 March 20XX, by subject of complaint.

Year	20XX-XX	
Trust code		
Trust name		

Subject of complaint	Line no.	Total number of written complaints received
Communications / attitude	01	0
Premises	02	0
Practice / surgery management	03	0
General Practice administration	04	0
Clinical	05	0
Other	06	0
Total	99	0

<b>Data quality</b>	Total line (99) should equal sum of lines 01 to 06.
	Please note that Part 2 is optional/voluntary

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**KO41(b) 3**

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Change to Central Return Form: Change to Aliases, Change to Guidance Text, Change to Guidance Text

**~~KO41(B) - FHS Complaints~~****KO41(b) - General Practice (including Dental) Complaints****Part 2: Written Complaints received during the year ending 31 March  
~~Requests for Independent Review by Subject of Complaint~~  
Subject of Complaint**

- ~~1. The total number of WRITTEN COMPLAINTS on FHS for each COMPLAINT FHS SUBJECT for WRITTEN COMPLAINTS with an INDEPENDENT REVIEW REQUESTED DATE whether or not an Independent Review Panel is set up.~~
- The total number of WRITTEN COMPLAINTS on GP Practice services for each COMPLAINT GP SUBJECT for WRITTEN COMPLAINTS.

Please note that Part 2 is an optional part of the return.

### KO41(b) 3

Change to Central Return Form: Attached file

FormID: KO41b  
Form Name: General Practice (including Dental) Complaints

**Section: Part 2: Written complaints received 1 April 20XX to 31 March 20XX, by subject of complaint.**

Year	20XX-XX	
Trust code		
Trust name		

Subject of complaint	Line no.	Total number of written complaints received
Communications / attitude	01	0
Premises	02	0
Practice / surgery management	03	0
General Practice administration	04	0
Clinical	05	0
Other	06	0
Total	99	0

<b>Data quality</b>	Total line (99) should equal sum of lines 01 to 06. Please note that Part 2 is optional/voluntary
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## KO41(b) 4

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Change to Central Return Form: Change to Guidance Text

### ~~KO41(B) - FHS Complaints~~

### KO41(b) - General Practice (including Dental) Complaints

~~Part 3: Total Written Complaints received during the year ending 31 March by ethnicity of complainant and staff complained about  
Ethnicity of Complainants and Staff~~

#### Part 3: Total Written Complaints received during the year ending 31 March by ethnic category of patient

##### Ethnic category of patient

- ~~The number of WRITTEN COMPLAINTS on FHS split by ethnicity of complainant (PATIENT) and staff (employee).~~

##### ~~Total Number of Written Complaints Received By Ethnic Category of Complainant~~

- The number of WRITTEN COMPLAINTS on GP Practice services by ETHNIC CATEGORY of the PATIENT.

##### Total Number of Written Complaints Received By Ethnic Category of Patient

- Enter the total number of WRITTEN COMPLAINTS on FHS received from complainants in each ETHNIC CATEGORY. This should always be the ETHNIC CATEGORY of the PATIENT and not the PERSON complaining on the PATIENTS behalf.

##### ~~Total Number of Written Complaints Received By Ethnic Category of staff involved~~

- ~~Enter the total number of WRITTEN COMPLAINTS on FHS received, which were made against the employee in each ETHNIC CATEGORY. This is only for complaints made against an individual as opposed to a service or administrative arrangements.~~
- Enter the total number of WRITTEN COMPLAINTS on GP Practice services received from complainants in each ETHNIC CATEGORY. This should always be the ETHNIC CATEGORY of the PATIENT and not the PERSON complaining on the PATIENTS behalf.

If the complainant has not stated their ETHNIC CATEGORY i.e. they were asked but declined (code 'Z') or it is not known i.e. they were not asked or they were not in a condition to be asked (code '99'), these should both be recorded as 'Z' on the return. (See DSCN 21/2004 and DSCN 11/2008 for more information).

The total number of WRITTEN COMPLAINTS in part 3 should equal the total number of WRITTEN COMPLAINTS in part 1.

**KO41(b) 4**

Change to Central Return Form: Attached file

FormID: KO41b  
Form Name: General Practice (including Dental) Complaints

**Section: Part 3: Written complaints received 1 April 20XX to 31 March 20XX, by ethnic category of patient**

Year	20XX-XX
Trust code	
Trust name	

Ethnic category of patient	Ethnic category code	Line no.	Total number of written complaints received
White : British	A	01	0
: Irish	B	02	0
: Other white	C	03	0
Mixed : White & Black Caribbean	D	04	0
: White & Black African	E	05	0
: White & Asian	F	06	0
: Other mixed	G	07	0
Asian or Asian British : Indian	H	08	0
: Pakistani	J	09	0
: Bangladeshi	K	10	0
: Other Asian	L	11	0
Black or Black British : Black Caribbean	M	12	0
: Black African	N	13	0
: Other Black	P	14	0
Other ethnic : Chinese	R	15	0
: Other ethnic category	S	16	0
Not stated	Z	17	0
<b>Total</b>		<b>99</b>	<b>0</b>

<b>Data quality</b>	The Total line (99) should equal sum of lines 01 to 17. If complainant has not stated their ethnic category, use 'not stated' line 17 to record this.
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**KO41(b) 5**

Change to Central Return Form: New Central Return Form

**KO41(b) 5**

FormID: KO41b  
 Form Name: General Practice (including Dental) Complaints

**Section: Part 4: Written complaints received 1 April 20XX to 31 March 20XX, by ethnic category of staff involved**

Year	20XX-XX		
Trust code			
Trust name			

Ethnic category of staff involved	Ethnic category code	Line no.	Total number of written complaints received
White : British	A	01	0
: Irish	B	02	0
: Other white	C	03	0
Mixed : White & Black Caribbean	D	04	0
: White & Black African	E	05	0
: White & Asian	F	06	0
: Other mixed	G	07	0
Asian or Asian British : Indian	H	08	0
: Pakistani	J	09	0
: Bangladeshi	K	10	0
: Other Asian	L	11	0
Black or Black British : Black Caribbean	M	12	0
: Black African	N	13	0
: Other Black	P	14	0
Other ethnic : Chinese	R	15	0
: Other ethnic category	S	16	0
Not stated	Z	17	0
Total		99	0

<b>Data quality</b>	<p>The Total line (99) should equal sum of lines 01 to 17.</p> <p>If ethnic category of staff involved is not available, use 'not stated' line 17 to record this.</p> <p>Total number of written complaints received in line 99 will not necessarily equal total number of written complaints in line 99 in Part 1. If a complaint is about a team, record the ethnicity of each member of the team.</p>
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**KO41(b) - General Practice (including Dental) Complaints**

**Part 3: Total Written Complaints received during the year ending 31 March by ethnic category of staff involved**

**Ethnicity of Complainants and Staff**

1. The number of WRITTEN COMPLAINTS on GP Practice services by ETHNIC CATEGORY of staff involved.

**Total Number of Written Complaints Received By Ethnic Category of staff involved**

2. Enter the total number of WRITTEN COMPLAINTS on GP Practice services received, which were made against the member of staff in each ETHNIC CATEGORY. This is only for complaints made against an individual as opposed to a service or administrative arrangements.

If the ETHNIC CATEGORY of staff involved is not stated i.e. they were asked but declined (code 'Z') or it is not known i.e. they were not asked or they were not in a condition to be asked (code '99'), these should both be recorded as 'Z' on the return. (See DSCN 21/2004 and DSCN 11/2008 for more information).

The total number of WRITTEN COMPLAINTS in part 4 will not necessarily equal the total number of WRITTEN COMPLAINTS in part 1. If the complaint is about a team, record the ETHNIC CATEGORY of each member of the team.

## WRITTEN COMPLAINT

Change to Class: Change to Description

A written expression of dissatisfaction to an ORGANISATION, requiring a response. Each WRITTEN COMPLAINT should be recorded only once, under the principal cause of complaint. ~~A complaint which goes into writing at any stage, even if it is initiated orally, should be treated as a WRITTEN COMPLAINT.~~ A complaint which goes into writing at any stage, even if it is initiated verbally, should be treated as a WRITTEN COMPLAINT.

Note:

~~One written communication may contain more than one WRITTEN COMPLAINT if the communication relates to more than one course of treatment.~~

If a written communication contains more than one WRITTEN COMPLAINT that requires separate investigation, each should be recorded separately.

**This class is also known by these names:**

Context	Alias
plural	WRITTEN COMPLAINTS

## WRITTEN COMPLAINT

Change to Class: Change to Attributes

Attributes of this Class are:

- K COMPLAINT NUMBER
- ~~COMPLAINT FHS RESOLUTION~~
- ~~COMPLAINT FHS SERVICE AREA~~
- ~~COMPLAINT FHS SUBJECT~~
- COMPLAINT GP SERVICE AREA
- COMPLAINT GP SUBJECT
- COMPLAINT HCHS SERVICE AREA
- COMPLAINT HCHS STAFF CATEGORY
- COMPLAINT HCHS SUBJECT
- COMPLAINT LOCAL RESOLUTION DATE
- COMPLAINT RECEIVED DATE
- ~~INDEPENDENT REVIEW COMPLETION DATE~~
- ~~INDEPENDENT REVIEW PANEL REFERRAL~~
- ~~INDEPENDENT REVIEW REQUESTED DATE~~
- COMPLAINT TIME EXTENSION CONSENT
- WRITTEN COMPLAINT TYPE

## COMPLAINT FHS RESOLUTION

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Change to Attribute: DeletedDeleted

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## COMPLAINT FHS SERVICE AREA

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Change to Attribute: Change to Name

~~COMPLAINT FHS SERVICE AREA~~ COMPLAINT GP SERVICE AREA

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## COMPLAINT FHS SERVICE AREA renamed COMPLAINT GP SERVICE AREA

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Change to Attribute: Change to Description

~~The service area of a WRITTEN COMPLAINT on FHS.~~ The service area of a WRITTEN COMPLAINT of WRITTEN COMPLAINT TYPE 'General Practice (including Dental) Services'.

~~Classification:~~ National Codes:

- ~~a.~~ Medical
- 01 Medical
- ~~b.~~ Dental
- 02 Dental
- ~~e.~~ HA FHS administration
- ~~d.~~ Pharmaceutical
- ~~e.~~ Ophthalmic
- 03 General Practice administration
- 06 Other

**This attribute is also known by these names:**

Context	Alias
<del>plural</del>	<del>COMPLAINT FHS SERVICE AREAS</del>
plural	COMPLAINT GP SERVICE AREAS
formerly	COMPLAINT FHS SERVICE AREA

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## COMPLAINT FHS SUBJECT

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Change to Attribute: Change to Name

~~COMPLAINT FHS SUBJECT~~ COMPLAINT GP SUBJECT

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## COMPLAINT FHS SUBJECT renamed COMPLAINT GP SUBJECT

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Change to Attribute: Change to Aliases

~~The subject of a WRITTEN COMPLAINT on FHS.~~ The subject of a WRITTEN COMPLAINT of WRITTEN COMPLAINT TYPE 'General Practice (including Dental) Services'.

~~Classification:~~

- a. ~~Communication/Attitude~~
- 01 Communication/Attitude - A contact made either face to face or by telephone, facsimile, email or website and issues relating to verbal/non-verbal characteristics, or content.
- b. ~~Premises~~
- 02 Premises - The physical environment and psychological effect of the site occupied by the GP Practice/service.
- e. ~~Practice/Surgery management~~
- 03 Practice/Surgery management - Decisions made by the practice manager about the operation of the GP Practice/service (eg. access to individual practitioners, appointments, opening hours, locum cover).
- d. ~~FHS administration~~
- 04 General Practice administration - Activities undertaken by the reception and administrative staff within the GP Practice.
- e. ~~Clinical~~
- 05 Clinical - Clinical decisions, advice and treatment provided by a CARE PROFESSIONAL within the GP Practice.
- f. ~~Other~~
- 06 Other

This attribute is also known by these names:

Context	Alias
<del>plural</del>	<del>COMPLAINT FHS SUBJECTS</del>
plural	COMPLAINT GP SUBJECTS
formerly	COMPLAINT FHS SUBJECT

## COMPLAINT HCHS SERVICE AREA

Change to Attribute: Change to Description

~~The service area of a WRITTEN COMPLAINT on HCHS.~~ The service area of a WRITTEN COMPLAINT of WRITTEN COMPLAINT TYPE 'Hospital and Community Health Services'.

~~Note that KO41 (A) HCHS Complaints - Central Return form for the data year 2001/02 refers to Health Authorities. The KO41 (A) form for the data year 2002/03 will be included within the NHS Data Dictionary Version 2 at a later date.~~

~~Classification:~~

~~For Primary Care Trusts and NHS Trusts only:~~ *National Codes:*

- a. ~~Hospital acute services: in-patient~~
- 01 Hospital acute services: in-patient (admitted specialist management/patient care)
- b. ~~Hospital acute services: out-patient~~
- 02 Hospital acute services: out-patient (attendance at an Out-Patient Clinic session)
- e. ~~Hospital acute services: A&E~~
- 03 Hospital acute services: A&E (Consultant-led activity with full resuscitation facilities and designated accommodation for the reception of accident and emergency PATIENT)
- d. ~~Ambulance~~
- 04 Elderly (Geriatric) services (care of older people (by a specialist CONSULTANT or her team))
- e. ~~NHS Direct~~
- 05 Mental Health services (care by mental health services (by a psychiatric specialist CONSULTANT or his team))
- f. ~~Walk-in centres~~
- 06 Maternity services (care of PATIENTS during pregnancy including provision of antenatal and postnatal services, as well as care following miscarriage)
- g. ~~Primary Care Trust commissioning~~

For all ORGANISATIONS:

- 07 Ambulance services (hospital provided transport services staffed by trained ambulance staff)
- ~~h. Elderly (Geriatric)~~
- 08 Community Hospital services (care provided in a community setting, which may not include accident and emergency facilities)
- ~~i. Mental Health~~
- 09 NHS Direct (telephone (and online) advice and information service with access to nursing staff)
- ~~j. Maternity~~
- 10 Walk in centres (provision of healthcare advice and treatment for minor illnesses/injuries at 'drop-in' centres)
- ~~k. Community Hospitals~~
- 11 Other Community Health Services (other community health services such as out of hours services)
- ~~h. Community Health Services other than in classification references for community hospitals, NHS Direct and Walk in centres~~
- 12 Primary Care Trust commissioning (purchasing of services on a contract for PATIENTS in an area covered by a particular Primary Care Trust)
- 13 Other

References:

KO41(a) HCHS Complaints

**This attribute is also known by these names:**

Context	Alias
plural	COMPLAINT HCHS SERVICE AREAS

## COMPLAINT HCHS STAFF CATEGORY

Change to Attribute: Change to Description

~~The category of profession of a WRITTEN COMPLAINT on HCHS.~~ The category of profession of a WRITTEN COMPLAINT of WRITTEN COMPLAINT TYPE 'Hospital and Community Health Services'.

Note that the KO41 (A) HCHS Complaints Central Return form for the data year 2001/02 refers to Health Authorities. The KO41 (A) form for the data year 2002/03 will be included within the NHS Data Dictionary Version.2 at a later date. *National Codes:*

~~Classification:~~

~~For Primary Care Trusts and NHS Trusts only:~~

- ~~a. PCT Administrative staff/members (excluding FHS administrative)~~
- 01 Medical (including surgical) - medical specialties (including surgical sub-specialties)
- ~~b. NHS Trust administrative staff/members~~

For all organisations:

- 02 Dental (including surgical) - dental specialties (including surgical sub-specialties)
- ~~e. Medical (including surgical)~~
- 03 Professions supplementary to medicine - Allied Health Professionals (physiotherapists, occupational therapists, speech and language therapists, chiropodists/podiatrists, dietitians, prosthetists and orthotists, art, drama and music therapists (arts therapists), radiographers (diagnostic and therapeutic), orthoptists and paramedics)
- ~~d. Dental (including surgical)~~
- 04 Nursing, midwifery and health visiting - care provided by NURSES, MIDWIVES and Health Visitors
- ~~e. Professions supplementary to medicine~~
- 05 Scientific, technical and professional - services provided by scientists, technicians and professional advisors and support staff
- ~~f. Nursing, midwifery and health visiting~~

- 06 Ambulance crews (including paramedics) - services provided by ambulance crews (including trained paramedics)
- ~~g- Scientific, technical and professional~~
- 07 Maintenance and ancillary staff - workmen, cleaners, porters, catering staff
- ~~h- Ambulance crews (including paramedics)~~
- 08 PCT Administrative staff/members (excluding GP administrative) - Primary Care Trust employed staff (not general practice-based staff)
- ~~i- Maintenance and ancillary staff~~
- ~~j- Other~~
- 09 NHS Trust administrative staff/members - NHS Trust employed staff
- 10 Other

References:

KO41(a) HCHS Complaints

**This attribute is also known by these names:**

Context	Alias
plural	COMPLAINT HCHS STAFF CATEGORIES

## COMPLAINT HCHS SUBJECT

Change to Attribute: Change to Description

~~The subject of a WRITTEN COMPLAINT on HCHS.~~ The subject of a WRITTEN COMPLAINT of WRITTEN COMPLAINT TYPE 'Hospital and Community Health Services'.

*Classification:*

~~For NHS Trusts only:~~

- ~~a- Length of time waiting for a response, or to be seen: NHS Direct~~
- ~~b- Length of time waiting for a response, or to be seen: Walk in centres~~
- ~~c- Primary Care Trust commissioning (including waiting lists)~~
- ~~d- Independent sector services commissioned by NHS Trusts~~
- ~~e- Policy and commercial decisions of NHS Trusts~~

*National Codes:*

~~For all organisations:~~

- ~~f- Admission, discharge and transfer arrangements~~
- 01 Admission, discharge and transfer arrangements
- ~~g- Aids and appliances, equipment, premises (including access)~~
- 02 Aids and appliances, equipment, premises (including access)
- ~~h- Appointments, delay/cancellation (out-patients)~~
- 03 Appointments, delay/cancellation (out-patients)
- ~~i- Appointments, delay/cancellation (in-patients)~~
- 04 Appointments, delay/cancellation (in-patients)
- ~~j- Attitude of staff~~
- 05 Length of time waiting for a response, or to be seen: NHS Direct
- 06 Length of time waiting for a response, or to be seen: Walk in centres
- 07 Attitude of staff
- ~~k- All aspects of clinical treatment~~
- 08 All aspects of clinical treatment
- ~~l- Communication/information to patients (written and oral)~~
- 09 Communication/information to patients (written and verbal)
- ~~m- Consent to treatment~~

10	Consent to treatment
<del>n.</del>	<del>Complaints handling</del>
11	Complaints handling
<del>o.</del>	<del>patient's privacy and dignity</del>
12	patient's privacy and dignity
<del>p.</del>	<del>patient's property and expenses</del>
13	patient's property and expenses
<del>q.</del>	<del>Independent sector services commissioned by Primary Care Trusts</del>
14	Primary Care Trust commissioning (including waiting lists)
<del>r.</del>	<del>Personal records (including medical and/or complaints)</del>
15	Independent sector services commissioned by Primary Care Trusts
16	Independent sector services commissioned by NHS Trusts
17	Personal records (including medical and/or complaints)
<del>s.</del>	<del>Failure to follow agreed procedures</del>
18	Failure to follow agreed procedures
<del>t.</del>	<del>patient's status, discrimination (e.g. racial, gender, age)</del>
19	patient's status, discrimination (e.g. racial, gender, age)
<del>u.</del>	<del>Mortuary and post mortem arrangements</del>
20	Mortuary and post mortem arrangements
<del>v.</del>	<del>Transport (ambulances and other)</del>
21	Transport (ambulances and other)
<del>w.</del>	<del>Code of openness - complaints</del>
22	Policy and commercial decisions of NHS Trusts
<del>x.</del>	<del>Hotel services (including food)</del>
23	Code of openness - complaints
<del>y.</del>	<del>Other</del>
24	Hotel services (including food)
25	Other

References:

KO41(a) HCHS Complaints

**This attribute is also known by these names:**

Context	Alias
plural	COMPLAINT HCHS SUBJECTS

## COMPLAINT LOCAL RESOLUTION DATE

Change to Attribute: Change to Description

~~The date that Local Resolution action was completed and a full written explanation sent to the complainant though the complaint may be progressing to Independent Review.~~ The date that Local Resolution action was completed and a full written explanation sent to the complainant.

~~Local Resolution includes the local ORGANISATION complaints procedures and any action by the ORGANISATION to seek to resolve the complaint before it proceeds to an Independent Review.~~ Local Resolution includes the local ORGANISATION complaints procedures and any action by the ORGANISATION to seek to resolve the complaint.

**This attribute is also known by these names:**

Context	Alias
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plural

COMPLAINT LOCAL RESOLUTION DATES

## COMPLAINT TIME EXTENSION CONSENT

Change to Attribute: New Attribute

### COMPLAINT TIME EXTENSION CONSENT

An indicator that agreement has been obtained from the WRITTEN COMPLAINT complainant that the Local Resolution action time period of 25 days could be extended.

#### National Codes:

- 01 consent given
- 02 consent not given

#### References:

KO41(a) HCHS Complaints

#### This attribute is also known by these names:

Context	Alias
plural	COMPLAINT TIME EXTENSION CONSENTS

## INDEPENDENT REVIEW COMPLETION DATE

Change to Attribute: DeletedDeleted

## INDEPENDENT REVIEW PANEL REFERRAL

Change to Attribute: DeletedDeleted

## INDEPENDENT REVIEW REQUESTED DATE

Change to Attribute: DeletedDeleted

## WRITTEN COMPLAINT TYPE

Change to Attribute: Change to Description

A code to identify the type of WRITTEN COMPLAINT.

Hospital and Community Health Services include any SERVICE provided or commissioned by an NHS Trust (Acute Trust, Foundation Trust, Partnership Trust, Care Trust, Mental Health Trust or Ambulance Trust) and any directly managed SERVICE provided or commissioned by a Primary Care Trust.

General Practice (including Dental) Services are any SERVICES provided by the NHS within General Practice (Primary Care, General and Personal Medical Services, General Dental Services or Out of Hours provision in Primary Care).

#### National Codes:

- 01 ~~Family Health Services (FHS)~~
- 01 General Practice (including Dental) (GP Practice) Services
- 02 Hospital and Community Health Services (HCHS)

**This attribute is also known by these names:**

Context	Alias
plural	WRITTEN COMPLAINT TYPES

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For enquiries about this Data Set Change Notice, please email [datastandards@nhs.net](mailto:datastandards@nhs.net)