

COMPLAINTS PROCEDURE

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Introduction

This procedure sets out the Practice's approach to the handling of complaints and is intended both as an internal guide, that is readily available to all staff, and also as a summary setting out the approach to complaint handling that is available at reception and on the website for any patient requesting a copy.

Policy

The Practice will take reasonable steps to ensure that patients are aware of:

- The complaints procedure
- The fact that they may complain directly to the practice or to NHS England or to the Ombudsman
- The time limit for resolution
- How it will be dealt with
- Who will deal with it
- Further action they can take if not satisfied.
- The fact that any issues will not affect any ongoing treatment from the surgery and they will continue to be treated.

Procedure

Receiving of complaints

The Practice may receive a complaint made by a patient, a former patient or on behalf of a patient (with consent) who is receiving or has received treatment at the Practice, or:

(a) where the patient is a child:

- by either parent, or in the absence of both parents, a guardian or other adult who has care of the child;
- by a person duly authorised by a local authority to whose care the child has been committed under the provisions of the Children Act 1989;
- by a person duly authorised by a voluntary organisation by which the child is being accommodated

(b) where the patient is incapable of making a complaint, by a relative or other adult who has an interest in his/her welfare.

Period within which complaints can be made

The period for making a complaint is normally:

- 12 months from the date on which the event which is the subject of the complaint occurred; or
- 12 months from the date on which the event which is the subject of the complaint comes to the complainant's notice.

Complaints should normally be resolved within six months. The practice standard will be 10-40 days for a response.

The Complaints Manager or Lead GP has the discretion to extend the time limits if the complainant has good reason for not making the complaint sooner or where it is still possible to properly investigate the complaint despite extended delay. For example, longer periods of complaint timescales may apply to specific clinical areas.

When considering an extension to the time limit it is important that the Complaints Manager or the GP takes into consideration that the passage of time may prevent an accurate recollection of events by the clinician concerned or by the person bringing the complaint. The collection of evidence, clinical guidelines and/or other resources relating to the time when the complaint event arose may also be difficult to establish or obtain. These factors may be considered as suitable reason for declining a time limit extension.

Action upon receipt of a complaint

- On request to speak to the Practice Manager, the patient should receive a call back within 48 hours (two working days).
- On receipt of a written complaint (email or letter), an acknowledgement should be sent within three working days, confirming receipt and stating that a further response will be sent between 10-40 days following an investigation of the issues. A letter of complaint supersedes a phone call request and negates the necessity for a call back (if a call back request was made in the first instance).
- If it is not possible to conclude any investigations within 10-40 days then the patient should be updated with progress and possible time scales
- A full investigation should take place with written notes and a log of the progress being made
- It may be that outside sources/secondary care will need to be contacted and if that is the case then a patient consent form may need to be signed and a request made
- A response with the secondary care provider should be coordinated

Unreasonable Complaints

Where a complainant becomes aggressive or, despite effective complaint handling, unreasonable in their promotion of the complaint, some or all of the following formal provisions will apply and will be communicated to the patient:

- The complaint will be managed by one named individual at senior level who will be the only contact for the patient
- Contact will be limited to one method only (e.g. in writing)
- Place a time limit on each contact
- The number of contacts in a time period will be restricted
- A witness will be present for all contacts
- Repeated complaints about the same issue will be refused
- Set behaviour standards
- Return irrelevant documentation
- Keep detailed records

Final Response

This will include:

- A clear statement of the issues, investigations and the findings, giving clear evidence-based reasons for decisions if appropriate
- Where errors have occurred, explain these fully and state what will be done to put these right, or prevent repetition
- A focus on fair and proportionate outcomes for the patient, including any remedial action or compensation
- A clear statement that the response is the final one, or that further action or reports will be sent later
- An apology or explanation as appropriate
- A statement of the right to escalate the complaint, together with the relevant contact details
- Advice on the next step in the process if the complainant is still not satisfied. That would normally be an offer of a meeting with the Lead GP and Practice Manager to try further reconciliation.
- If at that point resolution is still not achieved then either side can refer the matter to the Ombudsman.

Annual Review of Complaints

The practice will establish an annual complaints report, incorporating a review of complaints received, along with any learning issues or changes to procedures which have arisen. This report is to be made available to any person who requests it, and may form part of the Freedom of Information Act Publication Scheme ^[*].

This will include:

- Statistics on the number of complaints received
- Justified / unjustified analysis
- Known referrals to the Ombudsman
- Subject matter / categorisation / clinical care
- Learning points
- Methods of complaints management
- Any changes to procedure, policies or care which have resulted

Confidentiality

All complaints must be treated in the strictest confidence.

Where the investigation of the complaint requires consideration of the patient's medical records, the Complaints Manager must inform the patient or person acting on his/her behalf if the investigation will involve disclosure of information contained in those records to a person other than the practice or an employee of the practice.

The practice must keep a record of all complaints and copies of all correspondence relating to complaints, but such records must be kept separate from patients' medical records.

Complaints to NHS England and Ombudsman

If a complainant has concerns relating to a directly commissioned service by NHS England, then the first step is, where appropriate, for complaints and concerns to be resolved on the spot with their local service provider.

If it is not appropriate to raise a concern informally or where informal resolution fails to achieve a satisfactory outcome, the complainant has the right to raise a formal complaint with either the service provider or the commissioner of the service NHS England. A complaint or concern can be received by mail, electronically or by telephone.

Telephone:0300 311 2233Email:england.gm-complaints@nhs.netPost:4th Floor, 3 Piccadilly Place, London Road, Manchester M1 3BN

All complaints to NHS England will be acknowledged no later than three working days after the complaint has been received by telephone, email or letter along with the following information:

- Complainant's expectations and desired outcomes
- Agreed timescales to respond to complaint
- Explain the complainants' rights as they are defined in the NHS Constitution
- Complaint Action Plan
- Whether an independent advocacy service is available in the complainant's area
- Consent for NHS England to handle the complaint if it requires input or investigation from organisations or parties that are not part of NHS England

The complainant will be kept up to date with the progress of their complaint by NHS England staff members by their preferred method of communication (e.g. by email, telephone or written letter). If the complainant is not satisfied with the outcome, then they will have the right to progress this further based on the complaints procedure that NHS England will provide to them during this process.

The complainant can also make a complaint via the Parliamentary and Health Service Ombudsman:

Website:https://www.ombudsman.org.uk/Customer Helpline:0345 015 4033

As part of the guidance on protecting data and personal information, if the complaint involves several organisations then the complainant will be asked for their permission to share or forward a complaint to another body, and further consent will be required to forward the complaint to any provider.