



5. Procedure

5.1 Summary of the NHS Complaints Process

NHS England's complaints policy is currently being reviewed and updated to reflect both the transfer of the primary care complaints handling function to integrated care boards (ICBs) and the bringing together of NHS England, NHS Digital and Health Education England. From 1 July 2023 complaints to the commissioner are made directly to the local ICB rather than NHS England.

- When a complaint is received by a staff member, they will endeavour to resolve the issue immediately (or within 24 hours) to the satisfaction of the complainant if it is within their role and realm of responsibility, or involve another colleague or more senior staff member if it is not within their role and realm of responsibility
- Staff will explain the complaints process as described in the procedure steps, and give the complainant a copy of the Complaints Leaflet and Complaints Form at Gardenia Marsh Farm Practice, which are available in the Forms section of this policy
- Staff will report the complaint to Rubee Ahmed where it will be assessed for further action and logged
- If a complaint can be resolved to the complainant's satisfaction within 24 hours, it is not necessary to go through the formal complaints process
- If it cannot be resolved to the complainant's satisfaction within 24 hours, the complaint will be recorded as a formal complaint. If the complainant is not the Patient, consent to investigate and resolve the complaint must be obtained from the Patient
- Acknowledgement of the complaint will be made to the complainant in writing within three working days detailing the complaint and that an investigation will be undertaken
- Where possible and appropriate, a discussion will take place with the complainant to understand their expectations and preferred outcome(s) and aim to manage their concerns to their preferred outcome(s), dependent on the nature of the complaint. An action plan and timescale will be agreed along with the complainant's preferred method of communication
- The complaint will then be investigated after which the complainant will receive a reply and response as agreed in the plan and a meeting offered if necessary and appropriate
- Should the complainant be dissatisfied with the response, further discussion and efforts must be made to resolve the complaint, including local mediation and arbitration where appropriate, for example via the Patient Advice and Liaison Service (PALS). Where all attempts to resolve the complaint locally have been unsuccessful, details of the ICB complaints team and Parliamentary and Health Service Ombudsman (PHSO) will be shared with the complainant
- Patients can also contact their local integrated care board (ICB) for complaints about primary care services (GPs, dentists, opticians or pharmacists) and secondary care, such as hospital care, mental health services, out-of-hours services, NHS 111 and community services like district nursing. Every ICB will have its own complaints procedure, which is often displayed on its website
- For private practices/clinics: Where the complaints process has been followed, but despite this the Patient's issue has not been resolved, the Patient has the option to contact the GMC on 0845 357 0022 to discuss their complaint

5.2 Receiving a Complaint

A complaint can be received either verbally or in writing and can be made by:

- Patients
- Someone acting on behalf of a Patient with their written consent, for example a relative, advocate or Member of Parliament
- Someone acting on behalf of a Patient who is unable to represent his or her own interests provided this does not conflict with the Patient's right to confidentiality or a previously expressed wish of the Patient

Once a complaint is received, it must be managed using the formal process. Gardenia Marsh Farm Practice will acknowledge the complaint in writing within three working days of the complaint being received.

The acknowledgement is not required to address any of the issues relating to the detail of the complaint



itself but is to advise and reassure the complainant that the matter will be investigated.

Gardenia Marsh Farm Practice will establish a practical plan and direction for the investigation at an early stage as this will be beneficial for all involved in the long run.

5.3 Investigating Complaints

Before beginning an investigation, Gardenia Marsh Farm Practice will assess the seriousness of the complaint. If a complainant does not wish to pursue an issue, Gardenia Marsh Farm Practice will investigate the issue to identify what led to the complaint so that Gardenia Marsh Farm Practice can use complaints as part of the learning and improvement cycle to assist in service improvement.

The complainant may be invited to meet with Rubee Ahmed to discuss the complaint. This may be done face to face, online, or over the telephone if appropriate. It is important to establish, at the earliest opportunity, what outcome the complainant expects, and to let the complainant know whether this is a realistic and possible expectation.

Complaints can be made either by Patients or by someone who is affected or likely to be affected, by the action, omission or decision of the responsible body that is the subject of the complaint. This means that potential complainants can be almost anyone, which in turn can present the risk of a vexatious complaint. When a complaint is made on behalf of a child, Gardenia Marsh Farm Practice must be satisfied that there are reasonable grounds for the complaint being made by the complainant, rather than the child. Gardenia Marsh Farm Practice must also be satisfied that the complaint is being made in the best interests of the child. If Gardenia Marsh Farm Practice is not satisfied that this is the case, written notification of this decision must be sent to the complainant.

As there is a single complaints procedure for all health and social care services, it is usual for the organisation with the largest part in the complaint to be considered the lead responder and, therefore, to be responsible for co-ordinating the investigation and responses. Further information can be found on the Parliamentary and Health Service Ombudsman website <https://www.ombudsman.org.uk/>.

Gardenia Marsh Farm Practice will support all members of staff involved in the complaints process.

5.4 Anonymous Complaints

Anonymous complaints received online via the company website or social media will be investigated in the same way as named complaints. They will be logged and any corrective action necessary will be taken and recorded and, if appropriate, the response will be displayed anonymously in reply to the complaint. The complainant may be asked to make contact with Gardenia Marsh Farm Practice in order to fully investigate and resolve the complaint.

5.5 Vexatious Complaints

Occasionally, Gardenia Marsh Farm Practice may receive complaints that are vexatious in that they cause considerable disruption to the work at Gardenia Marsh Farm Practice, disproportionate cost and time to handle and impact the wellbeing of staff (because of the way the complaint is made or because of its repetitive nature).

Gardenia Marsh Farm Practice will ensure that it meets the requirements of the Equality Act 2010 to make 'reasonable adjustments' for disabled customers. In some circumstances, customers may have a disability that makes it difficult for them to either express themselves or communicate clearly and/or appropriately.

Where there is an indication that this may be the case, Gardenia Marsh Farm Practice will consider the needs and circumstances of the Patient or complainant in the first instance and use this information to inform any decisions that are made.

Where appropriate, Gardenia Marsh Farm Practice will consider complaints to be vexatious but would not label an individual complainant as vexatious. Even if Gardenia Marsh Farm Practice decides that an individual's complaint about the service is vexatious, that does not preclude that person from making a formal complaint. Gardenia Marsh Farm Practice would still consider any such complaints in line with the usual procedures.

To help decide whether a complaint is vexatious, Gardenia Marsh Farm Practice will consider the full history and context of interactions with the individual making the complaint and will look at both the nature of the complaint and the manner in which it is made. The particular issues that will inform a decision will include whether:

- The primary purpose and/or effect of the complaint is to disturb, disrupt and/or pressurise Gardenia Marsh Farm Practice, its staff or an individual member of staff
- The primary purpose and/or effect of the manner in which the complaint is made is to disturb, disrupt and/or pressurise Gardenia Marsh Farm Practice, its staff or an individual member of staff
- The complaint is otherwise clearly unreasonable

If at any point in the handling of a complaint, a member of staff believes it meets the criteria to be deemed



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vexatious it must be referred to Dr Z Ahmad with a summary of why it is thought to be vexatious. Dr Z Ahmad will consider the complaint, seek external advice if appropriate, and will either declare the complaint as being vexatious, or not. Where a complaint is not deemed to be vexatious it will be returned to the appropriate point in the complaints handling process.

If a complaint is deemed to be vexatious, Dr Z Ahmad will respond directly to the complainant explaining why it is thought to be so and explain that the complaint will be closed with no further action. Dr Z Ahmad will also consider if the making of a vexatious complaint also requires the application of a restriction on communication following unreasonable behaviour.

The decision to declare a complaint as vexatious will be recorded in the complaints register for future reference.

Any declaration that refers to the specific complaint being vexatious and any further complaints from the same individual will still be considered.

If any individual wishes to challenge a decision made in relation to this policy, and all attempts to resolve the complaint locally have been unsuccessful, details of the ICB's complaints team and Parliamentary and Health Service Ombudsman (PHSO) will be shared with the complainant.

5.6 The Complaints Register

This will contain all correspondence from each complaint received including the following:

- Details of the complaint including subject matter, date of receipt and method of receipt
- Date and method of acknowledgement
- Notes from any meetings with the complainant wherever possible agreed with the complainant by countersignature
- Details of any reason for delay where investigations took longer than any agreed response period and evidence of keeping the complainant informed of any delay
- The date the response letter was sent to the complainant
- Dates when the complaint was discussed in Gardenia Marsh Farm Practice internal meetings
- Changes or developments made in response to the complaint as a result of the complaints investigation, including how and when these were shared
- Learning from the complaint to improve quality of care
- Dates of formal complaints reviews

Where complaints are raised by telephone, the log will include the date and time of the call and the content of the conversation.

Complaints to be shared for learning purposes will be anonymised by removing all identifiable Patient information or details and information pointing to the identity of the complainant.

A complaints register, which will also assist the completion of the KO41b Primary Care (GP and Dental) Complaints Collection, is available in QCS resources.

5.7 PALS and Healthwatch

The Patient Advice and Liaison Service (PALS) is available to help and support Patients if they are unhappy about any health related matters but do not want to lodge a complaint. Patients can be put in touch with PALS or may contact PALS independently to ask for help.

The main aims of PALS is to:

- Help resolve problems when they arise by working with the staff concerned to negotiate a mutually agreed solution
- Provide information about local health services

Local Healthwatch was introduced by the Health and Social Care Act 2012 with the aim of building on the existing functions of LINKs (Local Involvement Networks), including the provision of information and advice to help people make choices about health and care services as well as the possibility of providing an advocacy service for people making a complaint using local complaints processes.

5.8 Parliamentary and Health Service Ombudsman (PHSO)

The PHSO is the final stage for unresolved complaints and usually expects complainants to complain to the organisation they are unhappy with first and is only likely to get involved if the initial approach proves unsuccessful. The PHSO does not investigate every complaint that it receives and is not required to do so, and it has legal criteria that must be satisfied before it can take any complaint forward.

If it does proceed, the PHSO will check whether the local complaints process has been completed. Public organisations are given the opportunity to put things right before the PHSO will consider the matter. If they



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have not had that opportunity, the investigation is usually declined at that point and the complainant asked to make full use of the complaints process at Gardenia Marsh Farm Practice. The PHSO will consider:

- If the complainant has been affected personally by what happened
- Whether the complainant contacted the PHSO (or an MP) within a year of knowing about the issue
- Whether the complainant has (or had) the option of taking legal action instead
- Whether Gardenia Marsh Farm Practice potentially got things wrong that have had a negative effect on the complainant that has not been put right

If these preliminary checks are satisfied a formal investigation will follow.

The PHSO may talk to Rubee Ahmed or Dr Z Ahmad to try and resolve the issue or it may carry out an investigation and look in detail at the event or occurrence that led to the complaint. The steps taken will vary depending on the nature of the complaint which may involve gathering additional evidence and information by speaking to the complainant and Gardenia Marsh Farm Practice, or they might obtain expert advice.

The following are the possible outcomes from the PHSO:

- Gardenia Marsh Farm Practice has acted correctly
- That there was a problem, but Gardenia Marsh Farm Practice has already done enough to put things right, or
- Gardenia Marsh Farm Practice has been found to have done something wrong that needs to be put right in which case the PHSO will work with Gardenia Marsh Farm Practice to achieve this. This may mean asking Gardenia Marsh Farm Practice to acknowledge the mistake, apologise, pay compensation and prevent any recurrence of the same error or omission

5.9 Time Limits for Submitting a Complaint

Complaints will normally be made within 12 months after the incident that gave rise to the complaint, or from the time the complainant was made aware thereof. It is possible to extend this timescale if there are good reasons for the complainant not to have raised the matter sooner, and a fair investigation can be carried out.

5.10 Complaints About Locums, Agency or Temporary Staff

Gardenia Marsh Farm Practice will obtain agreement from locum GPs, locum nurses and other temporary clinical staff members for them to participate in the complaints procedure if required, as it is possible that complaints will arise after the locum or temporary member of staff has moved on.

Gardenia Marsh Farm Practice will give locums and temporary members of staff involved in the complaints process every opportunity to respond to complaints with no discrepancy between the way the process treats locums, temporary staff, salaried GPs, GP partners or any other permanent staff members.

5.11 Complaints Files and Records

A separate file will be kept for complaints records and letters. These must never appear in a Patient's electronic or paper medical records or that of a complainant who is not the Patient who is a registered Patient of Gardenia Marsh Farm Practice.

Any complaint resolved by Gardenia Marsh Farm Practice via the formal complaints procedure will be kept on record for 10 years - the same length of time as for litigation cases.

Gardenia Marsh Farm Practice will comply with Data Protection legislation and UK General Data Protection Regulations in relation to complaint handling, recording, storing and archiving.

5.12 Suggestions

Suggestions can be made verbally or in writing using all the feedback and communication channels at Gardenia Marsh Farm Practice (Friends and Family Tests, Healthwatch, Patient participation or other engagement groups, direct to Gardenia Marsh Farm Practice). These are usually made by Patients or users seeking to improve Gardenia Marsh Farm Practice, meet needs or respond to changes and trends. Suggestions are not complaints. However, they will be recorded, reviewed and actioned to prevent any risk of a future complaint in relation to the suggestion made. Suggestions will be managed in the same way as other feedback and informal complaints and included in reports in meetings together with other feedback.

5.13 Compliments

Receiving compliments via any feedback or ad hoc voluntary method is an opportunity to celebrate and recognise success. Gardenia Marsh Farm Practice will ensure:

- All compliments are shared with members of the team at Gardenia Marsh Farm Practice formally or informally
- Compliments will be anonymised, or permission sought from the Patient or representative before being



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published, put on display or shared via internal communication channels

- Numbers of compliments received are logged as with complaints and other feedback via the register at Gardenia Marsh Farm Practice
- Verbal positive feedback from Patients and users will be recorded and shared. The Patient or representative can be asked if their compliments can be reproduced on a named basis with their consent, or anonymously
- Compliments, together with complaints, suggestions and other feedback, will be taken as a standing agenda item at relevant internal meetings

5.14 Friends and Family Test (FFT)

Since 1 December 2014, it has been a contractual requirement for every NHS GP Practice in England to offer Patients the Friends and Family Test (FFT). The FFT is a quick and simple feedback tool which enables Patients to indicate how likely they would be to recommend Gardenia Marsh Farm Practice to their friends and family if they required similar care or treatment. Patients can also provide a free text comment to explain the reason for their response. The FFT is not a replacement for the complaints procedure. The NHS website displays published provider FFT scores for General Practice and other providers using the FFT data collected and submitted.

There is flexibility in how the FFT can be offered to Patients (e.g. completion of a postcard, SMS text message, website, touchpads, tablets or kiosks, smartphone app or online) as different methods work better in different types of Practice and enable the FFT to fit in with existing Practice Patient engagement activities.

All Patients are provided with the opportunity to provide feedback via the FFT regardless of their needs. The NHS England published guidance contains resources to help Practices make the FFT accessible for Patients with different needs (e.g. dementia, hearing loss, children and young people), and the FFT is available in 20 of the most commonly spoken languages.

The FFT offers the facility for Patients and users to leave free-text comments which provide real-time feedback for Gardenia Marsh Farm Practice to analyse and act upon. FFT free-text can be used as an element of the overarching Practice feedback system to monitor positive and negative feedback, identify notable trends and inform Practice and service development.

Gardenia Marsh Farm Practice is required to submit the following data through the Calculating Quality Reporting Service (CQRS):

- The total number of responses in each response category
- The number of responses collected through each collection method

Gardenia Marsh Farm Practice will submit data as soon as possible after the month end and has until the twelfth working day (inclusive) to make the submission.

5.15 Audit and Evaluation

Gardenia Marsh Farm Practice will record, monitor, review and analyse all complaints and other feedback received about the service as part of the Practice continuous improvement cycle to identify and inform performance, effectiveness, quality, safety and trends. Gardenia Marsh Farm Practice will investigate or explore what has been received and act on the findings that emerge.

Gardenia Marsh Farm Practice will:

- Share themes and trends with the Practice Team and relevant external stakeholders, for example commissioners, secondary care, community and primary care providers as required by NHS England (where required) and as appropriate in the interests of the development and dissemination of best practice
- Carry out and submit complaints reviews to NHS England (where required), commissioning bodies and statutory bodies as required
- Review complaints, compliments and other feedback received, together with the outputs and outcomes from the management process, as a standing agenda item at Practice meetings
- Ensure that staff members are trained to deal with complaints, compliments, suggestion and feedback and understand the complaints procedure so that they can advise complainants with accuracy

5.16 Annual Complaints Return - NHS Practices

Gardenia Marsh Farm Practice will report all written complaints received via the KO41b Primary Care Data Collection. This information is made available through an annual publication on the NHS Digital website.

The data collection refers to written complaints received between 1 April and 31 March each year. It is a



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statutory requirement to declare complaints information as detailed in the 2009 Complaints Regulations. Gardenia Marsh Farm Practice will refer to NHS Digital Guidance Notes for GP collection. The guidance gives information about the data which must be reported including:

- Complaints brought forward (from the previous period)
- New complaints
- Total complaints resolved
- Number of complaints upheld
- Number of complaints partially upheld
- Number of complaints not upheld
- Total carried forward
- Age (the number of complainants in each age group)
- Complainant (the number of new complainants in each complainant type group e.g. Patient, parent, carer)
- Service area (e.g. GP Surgery)
- Subject area (e.g. appointment availability or length, clinical treatment errors, confidentiality breach, etc.)
- Staff Group (e.g. Admin staff, Locum Practitioner, Practice Nurse, etc.)

The template for recording this information, for the submission of the annual complaints return, is available in the User documents section of the KO41b Primary Care (GP and Dental) Complaints Collection webpage.