

Dr Gibson & Partners

Complaints Procedure

Document Control

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B. Document Details

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C. Document Revision and Approval History

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6	05/07/2022	Julie Gulliver	Julie Gulliver	

This Policy and Procedure complies with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, introduced on 1st April 2009 across health and social care.

Please direct all complaints to julie.gulliver@nhs.net , with the subject line as 'For the attention of the Complaints Manager'

Policy

- The Practice will take all reasonable steps to ensure that its staff are aware of and comply with this Procedure.
- The Practice has nominated Julie Gulliver (Practice Manager) as its Complaints Manager, to be responsible for managing the procedures for handling and considering complaints in accordance with the Policy and Procedure.
- The Practice has nominated the partners of the practice as its Responsible Persons, to be responsible for ensuring compliance with the Policy and Procedure, and in particular ensuring that action is taken if necessary in the light of the outcome of a complaint.
- The Practice will take all reasonable steps to ensure that patients are aware of:
 - The Complaints and Comments Procedure
 - The roles of the Practice, the Primary Care Trust (PCT) and the Health Service Ombudsman with regard to patient complaints.

This includes the alternative facility for the patient to complain directly to the PCT instead of making their complaint to the Practice, as well as their right to escalate their complaint to the Health Service Ombudsman when they are dissatisfied with the initial response.

N.B. ALL escalations must be directed to the Health Service Ombudsman (so when a patient is dissatisfied with the Practice response to their complaint, they must escalate their complaint to the Health Service Ombudsman, not the PCT).

 - Their right to assistance with any complaint from the Patient Advice and Liaison Service (PALS); The Independent Complaints Advocacy Service (ICAS); Citizens Advice Bureaux, NHS Direct and the Care Quality Commission
- The Practice Patient Information Leaflet Booklet and the Practice Website will be the prime information sources for implementing this Policy and will be kept up to date and be made freely available to all Patients.
- Patients will be encouraged to complain in writing where possible.
- All complaints will be treated in the strictest confidence.
- Patients who make a complaint will not be discriminated against or be subject to any negative effect on their care, treatment or support.
- Where a complaint investigation requires access to the patient's medical records and involves disclosure of this information to a person outside the Practice, Julie Gulliver (Practice Manager), the Complaints Manager, will inform the patient or person acting on their behalf.
- The Practice will maintain a complete record of all complaints and copies of all related correspondence. These records will be kept separately from patients' medical records.

Procedure

Complaint initiated on Practice Premises

- In the event that a Practice staff member notices that a patient appears to be distressed / upset on the Practice Premises, they should immediately contact Julie Gulliver, Laura Dilnot or one of the partners in their absence, who will attempt to identify and resolve the problem personally at that time.
- In the event of a Practice staff member being advised that a patient wishes to make a complaint, the patient should be passed a copy of the current Practice Complaints and Comments Patient Information Leaflet.
- The patient should be asked if they wish to make a complaint there and then, or do they intend to complete it later. If they intend to make it later in writing they should be given the Practice address details.
- The patient will be assured that their complaint will be acknowledged within 3 working days from receipt of the form.

Receipt and acknowledgement of complaints

The Practice may receive the following complaints:

- A complaint made directly by the patient or former patient, who is receiving or has received treatment at the Practice;
- A complaint made on behalf of a patient or former patient (with his/her consent), who is receiving or has received treatment at the Practice;
- Where the patient is a child:
 - By either parent, or in the absence of both parents, the guardian or other adult who has care of the child;
 - By a person duly authorised by a Local Authority into 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.
- Where the patient is incapable of making a complaint, by a representative who has an interest in his/her welfare.
- All written complaints will be acknowledged in writing within 3 working days of receipt.
- If the Practice identifies that the complaint will involve an additional provider it will agree with that provider which organisation will take the lead in responding and communicating with the complainant.

Periods of time within which complaints can be made

- The periods of time within which a complaint can be made is normally:
 - 12 months from the date on which the event / incident which is the subject of the complaint occurred; or
 - 12 months from the date on which the event / incident which is the subject of the complaint comes to the complainant's notice.

Initial action upon receipt of a complaint

- All complaints, whether verbal or in writing must be forwarded immediately to the Practice Manager Julie Gulliver, if unavailable to Laura Dilnot or one of the Partners of the practice, Who are the Practice Responsible Persons.
- Where the complaint is made verbally, a written record will be made of the complaint and a copy of this will be provided to the complainant.
- A verbal or written acknowledgement of receipt of the complaint must be made not later than 3 working days after the day on which the Practice receives the complaint.
- This written acknowledgement will include:
 - The name and contact details of the Practice member of staff who will be investigating the complaint
 - Confirmation of the details and specifics of the complaint
 - What the process will be in responding to the complaint.
 - Where necessary, an offer to meet with the complainant, at a time and location convenient to them, to discuss the manner in which the complaint is to be handled and the response period within which the investigation of the complaint is likely to be completed and the full response is likely to be sent to the complainant.
- As part of the complaints process, as much of the following information as possible will be completed and obtained:
 - How the patient would like to be addressed – as Mr, Mrs, Ms or by their first name. This can generally be taken from the initial complaint.
 - Check if consent is needed to access someone's personal records
 - Check if they have any disabilities or circumstances that need to be taken account of.
 - Systematically go through the reasons for the complaint so that there is a clear understanding why they are dissatisfied.
 - Ascertain what they would like to happen as a result of the complaint (for example, an apology, new appointment, reimbursement for costs or loss of personal belongings or an explanation).
 - Advise them at the outset if their expectations are not feasible or realistic.
 - Inform the complainant when they are likely to hear back from the Practice.
- If it is considered that the matter can be resolved quickly without further investigation, the Practice will do so, providing the complainant agrees and there is no risk to other service users.

Investigation and response

- Complaints should be resolved within a “relevant period” i.e. 6 months from the day on which the complaint was received.
- However, at any time during the “relevant period”, the Practice Complaints Manager or Responsible Person has the discretion to liaise with the complainant to extend this timeframe to a mutually agreeable date, provided it is still possible to carry out a full and proper investigation of the complaint effectively and fairly.

When an extension to the 6 months timeframe is being considered, it is essential that the Complaints Manager or Responsible Person takes into account that either party may not be able to remember accurately the essential details of the event / incident and also the feasibility of being able to obtain other essential evidence specific to the time of the event.
- The Practice will investigate the complaint speedily and efficiently and as far as reasonably practicable, keep the complainant informed of the progress of the investigation.
- After the investigation is completed, the Practice will compile a response letter, which will incorporate:
 - A summary of each element of the complaint
 - Details of any policies or guidelines followed
 - A summary of the investigation
 - Details of key issues or facts identified by an investigation
 - Conclusions of the investigation: was there an error, omission or shortfall by your organisation? Did this disadvantage the complainant, and if so, how?
 - What needs to be done to put things right
 - An apology, if one is needed
 - An explanation of what will happen next and any corrective action (e.g. what will be done, who will do it, and when)
 - Information on what the person complaining should do if they are still unhappy and wish to escalate the complaint, including full contact information on the Health Service Ombudsman.
- The Practice will send the complainant a response within the 6 months from the Practice Manager, Assistant Practice Manager or one of the Practice Responsible Persons. The response will incorporate:
 - The written report
 - Confirmation as to whether the Practice is satisfied that any necessary action has been taken or is proposed to be taken;
 - A statement of the complainant’s right to take their complaint to the Parliamentary and Health Service Ombudsman.
- If the Practice does not send the complainant a response within the 6 month period, it will
 - Notify the complainant in writing accordingly and explain the reason why; and.
 - Send the complainant in writing a response as soon as reasonably practicable after the 6 month “relevant period”.
- In the event that the complaint has been incorrectly sent to the Practice, the Practice will advise the patient of this fact within 3 working days from its initial receipt and ask them if they want it to be forwarded to the correct organisation. If it is sent on, the Practice will advise the patient of the correct organisation’s full contact and address details.

Handling Unreasonable Complaints

- In situations where the person making the complaint can become aggressive or unreasonable, the Practice will instigate the appropriate actions from the list below and will advise the complainant accordingly:
 - Ensure contact is being overseen by an appropriate senior member of staff who will act as the single point of contact and make it clear to the complainant that other members of staff will be unable to help them.
 - Ask that they make contact in only one way, appropriate to their needs (e.g. in writing).
 - Place a time limit on any contact.
 - Restrict the number of calls or meetings during a specified period.
 - Ensure that a witness will be involved in each contact
 - Refuse to register repeated complaints about the same issue.
 - Do not respond to correspondence regarding a matter that has already been closed, only acknowledge it.
 - Explain that you do not respond to correspondence that is abusive.
 - Make contact through a third person such as a specialist advocate.
 - Ask the complainant to agree how they will behave when dealing with your service in the future.
 - Return any irrelevant documentation and remind them that it will not be returned again.
 - When using any of these approaches to manage contact with unreasonable or aggressive people, provide an explanation of what is occurring and why.
 - Maintain a detailed record of each contact during the ongoing relationship.

Complaints Register

To ensure the Practice monitors, handles and reviews complaints in a logical and timely manner, and to keep an audit trail of steps taken and decisions reached, the Practice records all complaints received in the complaints file and the complaints file in the Practice Managers C drive. A complaints audit is done annually and can be found in the QOF folder.

Annual Review of Complaints

- In line with National Guidance, the Practice will supply the following information to the PCT:
 - The number of complaints received;
 - The issues that these complaints raised;
 - Whether complaints have been upheld;
 - The number of cases referred to the Ombudsman

If a patient wishes to make a complaint about Primary Care services, who do they contact?

NHS England is the commissioners of primary care services. Patients and families wishing to complain about a primary care provider need to contact NHS England. They can be contacted at:

NHS Commissioning Board

PO Box 16738

Redditch

B97 9PT

nhscommissioningboard@hscic.gov.uk

Please write 'For the attention of the Complaints Manager' in the subject line.

0300 311 22 33 (Monday to Friday 8am to 6pm, excluding English Bank Holidays)