

Dr G Wilkinson & Partners
Glossop and Hadfield & Howard Street

Complaints Policy

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Effective Date: August 2019	Review Date: March 2027

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Document Version	Comments	Date
1.0	Written MF	August 2009
1.1	Revised MF	December 2010
1.2	Revised ALB	February 2012
1.3	Revised ALB	April 2013
1.4	Revised ALB & MM	November 2014
1.5	Revised ALB to include shared learning	June 2016
1.6	Updated ALB	January 2017
1.7	Updated ALB	January 2018
1.8	Updated ALB as per validation by NHSE on 13/11/2018	November 2018
1.9	Updated ALB	August 2019
2.0	Reviewed & updated VT	March 2025

Introduction

The purpose of the policy is to ensure that all patients (or their representatives) who have the cause to complain about their care or treatment can have freely available access to the process and can expect a truthful, full and complete response and an apology where appropriate. Complainants have the right not to be discriminated against as the result of making a complaint and to have the outcome fully explained to them. The process adopted in the practice is fully compliant with the relevant NHS Regulations (2009) and guidance available from defence organisations, doctors` representative bodies and the Care Quality Commission. Everyone in the practice is expected to be aware of the process and to remember that everything they do and say may present a poor impression of the practice and may prompt a complaint or even legal action.

The general principle of the practice in respect of all complaints will be to regard it first and foremost as a learning process, however in appropriate cases and after full and proper investigation the issue may form the basis of a separate disciplinary action. In the case of any complaint with implications for professional negligence or legal action, the appropriate defence organisation must be informed immediately.

Procedure

Availability of information

The practice will ensure that there are notices advising on the complaints process conspicuously displayed in all waiting areas and that leaflets containing sufficient details for anyone to make a complaint are available. The practice website and any other public material (Practice Leaflet etc.) will similarly provide this information.

Who can a formal complaint be made to?

ONLY TO - either the practice -OR - NHS England

In the event of anyone not wishing to complain to the practice they should be directed to make their complaint to NHSE at:

By telephone: 03003 11 22 33

By email: england.contactus@nhs.net

By post: NHS England, PO Box 16738, Redditch, B97 9PT

In those cases where the complaint is made to NHS England, the practice will comply with all appropriate requests for information and co-operate fully in assisting them to investigate and respond to the complaint.

Who can make a complaint?

A complaint can be made by or, with consent, on behalf of a patient (i.e. as a representative); a former patient, who is receiving or has received treatment at the Practice; or someone who may be affected by any decision, act or omission of the practice.

A Representative may also be

- 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 to whose care the child has been committed under the provisions of the Children Act 1989; or by a person duly authorised by a voluntary organisation by which the child is being accommodated
- someone acting on behalf of a patient/ former patient who lacks capacity under the Mental Capacity Act 2005 (i.e. who has Power of Attorney etc.) or physical capacity to make a complaint and they are acting in the interests of their welfare
- someone acting for the relatives of a deceased patient/former patient

In all cases where a representative makes a complaint in the absence of patient consent, the practice will consider whether they are acting in the best interests of the patient and, in the case of a child, whether there are reasonable grounds for the child not making the complaint on their own behalf. In the event a complaint from a representative is not accepted, the grounds upon which this decision was based must be advised to them in writing.

Who is responsible at the practice for dealing with complaints?

The practice "Responsible Persons" are Dr Veena Jha and Dr Susan Moore. They are charged with ensuring complaints are handled in accordance with the regulations, that lessons learned are fully implemented, and that no Complainant is discriminated against for making a complaint. The responsible person will be a partner or someone authorised to act on the responsible partner's behalf (BMA Guidance and Primary Care contracts).

The practice "Complaints Manager" is Victoria Townley, Practice Manager, and they have been delegated responsibility for managing complaints and ensuring adequate investigations are carried out.

In the absence of the Practice Manager, the Reception Manager will be responsible.

Time limits for making complaints

The period for making a complaint is normally:

(a) 12 months from the date on which the event which is the subject of the complaint occurred; or

(b) 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 6 months unless all parties agree to an extension. The practice standard will be 15-20 working days for a response. If a complaint reaches 6 months old without a response having been provided, the complainant must immediately be informed of their right to approach the Parliamentary and Health Service Ombudsman at that stage.

The practice has discretion to extend these limits if there is good reason to do so and it is still possible to carry out a proper investigation. The collection or recollection of evidence, clinical guidelines 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 reasons for declining a time limit extension, however that decision should be able to stand up to scrutiny.

Action upon receipt of a complaint

Verbal complaints:

- It is always better to try and deal with the complaint at the earliest opportunity and often it can be concluded at that point. A simple explanation and apology by staff at the time may be all that is required.
- A verbal complaint need not be responded to in writing for the purposes of the Regulations if it is dealt with to the satisfaction of the complainant by the end of the next working day, neither does it need to be included in the annual Complaints Return. The practice will however record them for the purposes of monitoring trends or for Clinical Governance and that record will be kept and monitored by Alison Bowler, Practice Manager. Verbal complaints not formally recorded will be discussed when trends or issues need to be addressed and at least annually, with minutes of those discussions kept.
- If resolution is not possible, the Complaints Manager will set down the details of the verbal complaint in writing and provide a copy to the complainant within three working days. This ensures that each side is well aware of the issues for resolution. The process followed will be the same as for written complaints.

Written complaints:

- On receipt, an acknowledgement will be sent within 3 working days. The initial response should give some indication of the anticipated timescale for investigations to be concluded and an indication of when the outcome can be expected. Details of the local advocacy services should also be provided (ICA, Manchester Advocacy Hub, The Gaddum Centre, Gaddum House, 6 Great Jackson Street, Manchester, M15 4AX. Telephone: 0161 214 3904. E-mail: advocacy@gaddum.co.uk)
- It may be that other bodies (e.g. secondary care/ Community Services) will need to be contacted to provide evidence. If that is the case, then a patient consent form will need to be obtained at the start of the process and a pro-forma consent form included with the initial acknowledgement for return.
- If it is not possible to conclude any investigations within the advised timescale, then the complainant must be updated with progress and revised time scales on a regular basis.

Dealing with complaints

- The practice will endeavour to deal with complaints efficiently and properly investigate all complaints
 - The complainant will be treated with respect and courtesy
 - Complainants will be helped, if necessary to understand the complaints procedure
 - Replies to complaints will be delivered in a timely and appropriate manner
 - The complainant will be informed of the outcome of their complaint and its investigation and will be informed of any action taken if necessary.
- If a complaint to the practice is one that clearly relates exclusively to the care afforded by another provider and it is considered that the complaint should have been made to the organisation responsible, the practice will pass on this complaint appropriately and inform the patient.

The Investigation

The practice will ensure that the complaint is investigated in a manner that is appropriate to resolve it speedily and effectively and proportionate to the degree of seriousness that is involved.

The investigations will be recorded in a complaints file created specifically for each incident and where appropriate should include evidence collected as individual explanations or accounts taken in writing.

Unreasonable or Vexatious Complaints

Where a complainant becomes unreasonable or excessively rude or aggressive in their promotion of the complaint, some or all of the following formal provisions will apply and must be communicated to the patient by the Responsible Person in writing:

- 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 unless additional material is being brought forward
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behaviour standards
- Return irrelevant documentation
- Detailed records will be kept of each encounter

Final Response

This will be provided to the complainant in writing (or email by mutual consent) and the letter will be signed by the Responsible Person or Complaints manager under delegated authority. The letter will be on headed notepaper and include:

- An apology or explanation if/as appropriate (The Compensation Act 2006, Section 2 expressly allows an apology to be made without any admission of negligence or breach of a statutory duty)
- A clear statement of the issues, details of the investigation and the findings, and 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. Clinical matters must be explained in accessible language.
- A clear statement that the response is the final one and the practice is satisfied it has done all it can to resolve the matter at local level
- A statement of the right, if they are not satisfied with the response, to refer the complaint to:
**The Parliamentary and Health Service Ombudsman,
Citygate,
Mosley Street,
Manchester,
M2 3HQ**
- or visit the 'Making a complaint page' at <http://www.ombudsman.org.uk/make-a-complaint> (to complain online or download a paper form).
- Alternatively the complainant may call: the
PHSO Customer Helpline
Tel: 0345 015 4033 from 8:30am to 5:30pm, Monday to Friday or send a text to their 'call back' service: **07624 813 005**

The final letter should not include:

- Any discussion or offer of compensation without the express involvement and agreement of the relevant defence organisation(s)
- Detailed or complex discussions of medical issues with the patient's representative unless the patient has given informed consent for this to be done where appropriate.

Reporting/Recording of complaints

- If a complaint identifies an Adverse Event concerning patient care or safety then this will be reported if applicable to the National Patient Safety Agency's National Reporting and Learning Service www.npsa.nhs.uk or https://report.nrls.nhs.uk/GP_eForm
- The practice will record all complaints and classify these according to Severity (a traffic light system)
 - Minor incidents, significant and adverse incidents not associated with complaints will also be recorded
 - Complaints and incidents will be discussed at practice meetings

- Action will be taken where necessary within the context of clinical governance and service improvement
- Learning outcomes will be recorded
- Complaints and incidents will be revisited if necessary

Annual Review of Complaints

The practice will produce an annual complaints report to be sent to the local Commissioning Body (NHSE), incorporating a review of complaints received, along with any learning issues or changes to procedures which have arisen. The annual report will be made available to any person who requests it, and will form part of the Freedom of Information Act Publication Scheme.

The report will include:

- Statistics on the number of complaints received
- Known referrals to the Ombudsman
- The number considered to have been upheld
- A summary of the issues giving rise to the complaints
- Learning points that came out of the complaints and any changes to procedure, policies or care which have resulted

Care must be taken to ensure that the report does not inadvertently disclose any confidential data or lead to the identity of any person becoming known.

Shared Learning

Lessons are learnt from concerns, complaints and incidents.

Learning from all incidents and complaints are shared with all staff and clinicians on a monthly basis.

The Practice Manager conducts an analysis of complaints and incidents on an annual basis to identify any patterns or trends. The analysis is taken to PBM and shared with all staff and clinicians.

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. In some circumstances, the practice may need to provide information about the patient, and treatment they have received, to insurers or legal advisers.

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 and no reference which might disclose the fact a complaint has been made should be included on the computerised clinical record system.

NHS Website

The Practice Manager will acknowledge and respond to all complaints or positive/negative feedback received via NHS Website.

Facebook

The Practice Manager, Reception Manager, Finance & Data Manager or GP Lead will acknowledge and respond to all complaints or positive/negative feedback received via Facebook.

Complaints Leaflet

The practice complaints procedure is available on N:\P Drive\Admin & Reception Protocols & Tasks\Complaints.