



# Complaints Policy

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Beth Collins

31<sup>st</sup> August 2009

## Document Control

<b>Document Title</b>	Complaints Policy
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<b>Version</b>	8
<b>Status</b>	Final
<b>Original Publication Date</b>	31/08/09
<b>Reviewed Dates</b>	12/06/13 23/04/15 23/04/15 14/03/16 19/04/17 09/04/18 18/12/18
<b>Approved By</b>	02/05/15
<b>Ratified by</b>	23/08/16

<b>Version</b>	<b>Date</b>	<b>Comments</b>	<b>Signed</b>
<b>1</b>	<b>31/08/09</b>	Approved by MGT Team	<b>MGT TEAM</b>
<b>2</b>	<b>12/06/13</b>	Checks made	<b>Brian Hann</b>
<b>3</b>	<b>23/04/15</b>	Checks made	<b>Cle</b>
<b>4</b>	<b>23/04/15</b>	Checks made	<b>Cle</b>
<b>5</b>	<b>14/03/16</b>	Revisions made	<b>Cle</b>
<b>6</b>	<b>19/04/17</b>	Reviewed and amended	<b>Cle</b>
<b>7</b>	<b>09/04/18</b>	Reviewed and added Medicare	<b>Cle</b>
<b>8</b>	<b>18/12/18</b>	Reviewed and added Croston	<b>Cle</b>

*The business is committed to an environment that promotes equality and embraces diversity in its performance as an employer and service provider. It will adhere to legal and performance requirements and will mainstream equality and diversity principles through its policies, procedures and processes. This policy should be implemented with due regard to this commitment.*

*To ensure that the implementation of this policy does not have an adverse impact in response to the requirements of the Equality Act 2010 this policy has been screened for relevance during the policy development process and a full impact assessment conducted where necessary prior to consultation. The business will take remedial action when necessary to Doctress any unexpected or unwarranted disparities and monitor practice to ensure that this policy is fairly implemented.*

*This policy and procedure can be made available in alternative formats on request including large print, Braille, moon, audio, and different languages on request.*

*The business will endeavour to make reasonable adjustments to accommodate any employee/patient with particular equality and diversity requirements in implementing this policy and procedure. This may include accessibility of meeting/appointment venues, providing translation, arranging an interpreter to attend appointments/meetings, extending policy timeframes to enable translation to be undertaken, or assistance with formulating any written statements.*

## **Introduction**

This procedure sets out the Practice's approach to the handling of complaints and is intended as an internal guide which should be made readily available to all staff. A leaflet for patient use is given at Appendix A.

From 1<sup>st</sup> April 2009 a common approach to the handling of complaints was introduced across health and adult social care. This procedure complies with this.

## **Policy**

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

- The complaints procedure.
- The role of other bodies, such as NHS England, in relation to complaints about services under the contract. This includes the ability of the patient to complain directly to NHS England and to escalate to the Ombudsman.
- Their right to assistance with any complaint from independent advocacy services.

The principal method of achieving this is the Complaints Patient Information Leaflet, the Practice Leaflet and website incorporation.

The Complaints Manager for the organisation is Craig Lee, Practice Manager.

The lead GP for complaints handling is Dr Nimal Muttu, Organisational Medical Director.

## **Procedure**

### **Receiving Of Complaints**

The Practice may receive a complaint made by, or (with his/her consent) on behalf of a patient, or former patient, 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, 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;
- 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.

All complaints, written and verbal will be recorded, and written complaints will be acknowledged in writing within 10 working days of receipt. Patients will be encouraged to complain using the pre-defined complaints form where possible. Where complaints are received verbally, but are of a complex nature, if appropriate, patients will be asked to provide a written complaint, for the purpose of clarity. Where e-mails are received via e-mail, social media or other unsuitable

communication channels, patients will be reminded of the complaints policy and asked to complete a written complaints form.

### **Period Within Which Complaints Can Be Made**

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. The practice standard will be 10 working 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.

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 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**

Complaints may be received either verbally or in writing. It is expected more serious complaints will be received in writing, normally on a complaints form. These will be forwarded to the Complaints Manager (or the lead GP if the Complaints Manager is unavailable), who must:

- Acknowledge in writing within the period of 10 working days beginning with the day on which the complaint was received, where that is not possible, as soon as reasonably practicable. Advise the patient of potential timescales and the next steps;
- Ensure the complaint is properly investigated. Where the complaint involves more than one organisation the Complaints Manager will liaise with his / her counterpart to agree responsibilities and ensure that one coordinated response is sent;
- Where the complaint has been sent to the incorrect organisation, advise the patient within 10 working days and ask them if they want it to be forwarded on. If it is sent on, advise the patient of the full contact details;
- Provide a written response to the patient as soon as reasonably practicable ensuring that the patient is kept up to date with progress as appropriate. This will include a full report, an explanation of what changes or actions have been taken following the complaint and a statement advising them of their right to take the matter to the Ombudsman if required.

### **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 the Complaints Manager 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.
- Only acknowledge correspondence regarding a closed matter, not respond to it.
- 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 the 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 send later.
- An apology or explanation as appropriate.
- A statement of the right to escalate the complaint, together with the relevant contact detail.

## **Annual Review of Complaints**

The practice will establish an on-going complaints tracking and reporting system, incorporating details around the nature and type 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:

- The date the complaint was received.
- The method used to complaint.
- The type of complaint.
- The subject of the complaint.
- A summary of the complaint.
- The findings of the investigation.
- The resolution to the complaint.
- The status of the complaint.
- The date it was resolved.
- If the complaint was upheld or not.

## **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.

**RESOURCES:**

Appendix A Complaint Form



# Patient Complaints

As a surgery we always strive to ensure the best level of patient care, however we acknowledge we may not always get it right first time. Therefore we operate a complaint procedure as part of an NHS complaints system, which meets national criteria. We view complaints as an opportunity to reflect on patient care, where appropriate apologise and learn from incidents to improve patient care. If you have a complaint or concern about the service you have received from the doctors or any of the personnel working in this practice, please let us know.

## How To Complain

We hope that we can sort most problems out easily and quickly, often at the time they arise and with the person concerned. If you wish to make a formal complaint, please do so as soon as possible. This will enable us to establish what happened more easily. If doing that is not possible your complaint should be submitted within 12 months of the incident that caused the problem; or within 12 months of discovering that you have a problem. You should address your complaint in writing to the Practice Manager using the attached form, please do not e-mail the surgery as this may be overlooked. The Practice Manager will make sure that we deal with your concerns promptly and in the correct way. You should be as specific and concise as possible.

## Complaining On Behalf Of Someone Else

We keep strictly to the rules of medical confidentiality (a separate leaflet giving more detail on confidentiality is available on request). If you are not the patient, but are complaining on their behalf, you must have their permission to do so. An authority signed by the person concerned will be needed, unless they are incapable (because of illness or infirmity) of providing this. A Third Party Consent Form is provided below.

## What We Will Do

We will acknowledge your complaint within 10 working days and aim to have fully investigated within 30 working days of the date it was received. If we expect it to take longer we will explain the reason for the delay and tell you when we expect to finish. When we look into your complaint, we will investigate the circumstances; make it possible for you to discuss the problem with those concerned; make sure you receive an apology if this is appropriate, and take steps to make sure any problem does not arise again. You will receive a final letter setting out the result of any practice investigations

## **Taking It Further**

If you remain dissatisfied with the outcome you may refer the matter to:

The Parliamentary and Health Service Ombudsman  
Millbank Tower  
Millbank  
London  
SW1P 4QP

E-mail: [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk)

You may also approach the local Clinical Commissioning Group (CCG) who buys health services for the local area. The contact details are:

Customer Care Team - Chorley & South Ribble CCG  
Chorley House  
Lancashire Business Park  
Centurion Way  
Leyland  
PR26 6TT

Tel: 01772 214601

E-mail: [customercare@chorleysouthribbleccg.nhs.uk](mailto:customercare@chorleysouthribbleccg.nhs.uk)



# Complaints Form

Patient Full Name: .....

Date of Birth: \_\_ / \_\_ / \_\_\_\_

Address:

.....

.....

.....

.....

.....

Telephone: .....

Complaint details: (Include dates, times, and names of practice personnel, if known)

[illegible]

(Continue on a separate sheet if necessary)

Signed .....

Print Name.....

Date .....

**Please return completed forms to:** FAO Practice Manager, Buckshaw Village Surgery  
Buckshaw Village, Chorley, PR7 7HZ

## Patient Third-Party Consent

If you are complaining on behalf of a patient or your complaint or enquiry involves the medical care of a patient then the consent of the patient will be required. Please obtain the patient's signed consent below.

**Patient** Full Name: .....

Date of Birth: \_\_ / \_\_ / \_\_\_\_

Address:

.....  
.....  
.....  
.....  
.....

Telephone: .....

**Enquirer/Complainant** Full Name: .....

Date of Birth: \_\_ / \_\_ / \_\_\_\_

Address:

.....  
.....  
.....  
.....  
.....

Telephone: .....

I ..... fully consent to my Doctor releasing information to, and discussing my care and medical records with the person named above in relation to this complaint, and I wish this person to complain on my behalf.

This authority is for an indefinite period / for a limited period only (delete as appropriate.)

Where a limited period applies, this authority is valid until..... (insert date.)

Signed: ..... (Patient only)

Date: .....

