

PORTSDOWN GROUP PRACTICE PROCEDURE

Title: Complaints Procedure

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.

This procedure complies with the common approach to the handling of complaints across health and adult social care.

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.

Complaints are owned by the Practice and therefore should not form part of the patient record; all correspondence should be emailed directly to J82155.complaints@nhs.net. Tasks should not be used to advise Operations of a complaint or potential complaint.

Policy

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

- The complaints procedure
- The role of NHS England and other bodies in relation to complaints about services under the contract. This includes the ability of the patient to complain directly to NHS England as an alternative to a complaint to the practice, and to escalate to the Ombudsman where dissatisfied with the outcome. Note: There is no right of escalation to NHS England where a patient is dissatisfied with the practice response and all escalations are to the Ombudsman only.
- Their right to assistance with any complaint from independent advocacy services

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

The Complaints Lead for the Practice is Maria Martin (Operations Lead).

The lead GP Partner for complaints handling is Dr Philip Monnery.

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:

- 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;

PORTSDOWN GROUP PRACTICE
PROCEDURE

- 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 relative or other adult who has an interest in his / her welfare.
- Someone acting for the relatives of a deceased patient / former patient

All complaints, written and verbal will be recorded, and written complaints will be acknowledged verbally or in writing within 3 working days of receipt by Operations. Patients will be encouraged to complain in writing where possible. The practice will reply to the patient within 40 days dependent upon investigations required, if investigations are taking longer than expected the patient should be provided with an update and an estimated timescale, e.g. due to third parties being contacted about the complaint.

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 6 months.

The Operations Lead 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 Operations Lead 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

Verbal Complaints:

Where possible any informal verbal complaints from patients or visitors should be dealt with in surgeries by the Surgery Team Leader. The patient's record should not be annotated; complaints are owned by the Practice and not the patient and should not be contained on the record. Should the complaint not be resolved at this stage then the complainant should be referred to the Operations for further discussion.

Patients / Visitors who complain verbally but then wish to make the complaint formal will need to be given the Practice complaints form or signposted to J82155.complaints@nhs.net or 02392 627765 to enable the completion of the process as described below.

Written Complaints (criticisms):

Where possible any informal written complaints from patients or visitors should be dealt with in surgeries by The Surgery Team Leader. Any form or letter received should be scanned and sent to Operations with information on how resolved. It is important that all issues have been addressed and that the patient has confirmed that no further action is required.

Written Formal Complaints

Once these have been read and determined as requiring investigation they must be scanned and emailed to J82155.complaints@nhs.net where Operations, must:

- Acknowledge via telephone or in writing within the period of 3 working days beginning with the day on which the complaint was made or, where that is not possible, as soon as reasonably practicable.

**PORTSDOWN GROUP PRACTICE
PROCEDURE**

Include an offer to discuss the matter in person. The discussion will include agreement with the patient as to how they wish the complaint to be handled.

- Advise the patient of the next steps and that a response will be provided within 40 days (where a complaint cannot be investigated within this timescale, the patient will be kept informed).
- Ensure the complaint is properly investigated. Where the complaint involves more than one organisation the Operations Lead will liaise with 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 3 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 (e.g. if there are any delays in sending the response and for what reason(s)). The final reply will include a full report 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 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
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behaviour standards
- Return irrelevant documentation
- Keep detailed records

Final Response

This will be provided to the complainant in writing and 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 sent 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 annual complaints report, incorporating a review of complaints received, along with any learning issues or changes to procedures which have arisen. This report will be made available to any person who requests it.

PORTSDOWN GROUP PRACTICE PROCEDURE

This will include:

- Statistics on the number of complaints received
- 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 Operations Lead 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.

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 Operations Manager in writing:

- The complaint will be managed by the Operations Lead who will be the only contact for the patient
- Contact will be limited to one method only (e.g. in writing)
- A time limit will be placed on each contact
- The number of contacts in a time period will be restricted
- A witness will be present for all face-to-face contacts (where agreed)
- Repeated complaints about the same issue will be refused unless additional material is being brought forward
- Only acknowledgement will be sent regarding closed matters, not response
- Behaviour standards will be set
- Irrelevant documentation will be returned
- Detailed records will be kept of each encounter

Complaints involving Locums

It is important that all complaints made to the practice regarding or involving a locum (Doctor, Nurse or any other temporary staff) are dealt with by the practice and not passed off to a Locum Agency or the individual locum to investigate and respond. The responsibility for handling and investigating all complaints rests with the Practice.

Locum staff should however be involved at an early stage and be advised of the complaint in order that they can provide any explanations, preferably in writing. It would not be usually appropriate for any opinions to be expressed by the Practice on Locum staff. Providing their factual account along with any factual account from the practice is the best way to proceed.

The practice will ensure that on engaging any Locum, the Locum Agreement will include an assurance that they will participate in any complaint investigation where they are involved or can provide any material evidence. The practice will ensure that there is no discrepancy in the way it investigates or handles complaints between any Locum staff and either practice Partners, salaried staff, students or trainees or any other employees.

PORTSDOWN GROUP PRACTICE PROCEDURE

Advocacy Services

Individual local authorities have a statutory duty to commission independent advocacy services to provide support for people making, or thinking of making, a complaint about their NHS care or treatment. Arrangements will vary between local authority areas. Complainants will be advised to contact local authority or 'portsmouthadvocacy@helpandcare.org.uk' for information about how this service is provided in their area.

Resources

Complaints Form

Complaints Leaflet (Patient information)

Complaints Consent Form

References

- NHS Complaints Procedure (England only): Guidance for Primary Care, BMA October 2015
- Medico-legal guide to the NHS Complaints Procedure, M.D.U. 2012
- NHS Complaints in England - Regulations & Principles, M.P.S 2013
- NHS England Complaints policy

Complaints Process Flowchart:

PORTSDOWN GROUP PRACTICE
PROCEDURE

