



COMPLAINTS POLICY

Version History

Version	Date	Purpose/Change	Author
1.0	April 2020	Published	Louise Gregory

Equality Statement

The Practice aims to design and implement policies and procedures that meet the diverse needs of our service users and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the Equality Act 2010. This policy applies to all patients and staff of the Practice irrespective of:

- Age;
- Race;
- Colour;
- Religion;
- Disability;
- Nationality;
- Ethnic origin;
- Gender;
- Sexual orientation;
- Marital status;
- Social/employment status;
- HIV status;
- Gender reassignment;
- Political affiliation; or
- Trade union membership

Consideration has been given to the impact this policy might have in respect to the individual protected characteristics of those to whom it applies. A full Equality Impact Assessment is not considered to be necessary as this procedure will not have a detrimental impact on any particular group.

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1 Introduction

- 1.1 The care and treatment delivered by Maybush Medical centre is done so with due diligence and in accordance with current guidelines. However, it is acknowledged that sometimes things can go wrong. By having an effective complaints process in place, the Practice is able to investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learned and ultimately improving service delivery
- 1.2 The purpose of this policy is to ensure that all staff are aware of the complaints procedure, affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received by the Practice

2 Policy Status

- 2.1 All staff are to be fully conversant with this policy and are to understand that all patients have a right to have their complaint acknowledged and investigated properly. Maybush Medical Centre takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner
- 2.2 We will maintain communication with the complainant (or their representative) throughout, ensuring they know the complaint is being taken seriously

3 Legislation

- 3.1 Every NHS facility has a complaints procedure. This permits a patient (or their nominated representative) to submit a complaint either to the NHS organisation or the organisation that has been commissioned by the NHS to provide a service.

This organisation adopts a patient-focused approach to complaint handling in accordance with the [National Health Service England Complaints Policy \(2017\)](#) whilst also conforming to guidance detailed in:

- [Good Practice Standards for NHS Complaints Handling 2013](#)
- [Parliamentary & Health Service Ombudsman's Principles of Good Complaints Handling 2009](#)
- [My Expectations 2014](#)
- [The NHS Constitution](#)
- [Health and Social Care Act 2008 \(Regulated Activities\) Regulations 2014: Regulation 16](#)
- [The Local Authority Social Services and National Health Services Complaints \(England\) Regulations 2009](#)

4 Definition of a complaint

- 4.1 A complaint or concern is an expression of dissatisfaction about an act, omission or decision of the Practice, either verbal or written, and whether justified or not, which requires a response

- 4.2 There is no difference between a “formal” and an “informal” complaint. Both are expressions of dissatisfaction
- 4.3 The Practice Manager is responsible for managing all complaints and for ensuring that compliance against the complaint regulations are met.

5 Timescales

- 5.1 The time constraint on bringing a complaint is 12 months from the occurrence giving rise to the complaint or 12 months from the time that the complainant becomes aware of the matter about which they wish to complain.
- 5.2 If, however, there are good reasons for complaints not being made within the timescale detailed above, consideration may be afforded to investigating the complaint if it is still feasible to investigate the complaint *effectively* and *fairly*.

6 Who can make a complaint

- 6.1 A complaint may be made by the person who is affected by the action or it may be made by a person acting on behalf of a patient where that person:
- Is a child / individual who has not attained the age of 18
 - In the case of a child, the Practice must be satisfied that there are reasonable grounds for the complaint being made by a representative of the child and furthermore that the representative is making the complaint in the best interests of the child
 - Has died
 - In the case of a person who has died, the complainant must be the personal representative of the deceased. The Practice will require to be satisfied that the complainant is the personal representative. Where appropriate we may request evidence to substantiate the complainant’s claim to have a right to the information
 - Has physical or mental incapacity
 - In the case of a person who is unable by reason of physical capacity, or lacks capacity within the meaning of the Mental Capacity Act 2005, to make the complaint themselves, the Practice needs to be satisfied that the complaint is being made in the best interests of the person on whose behalf the complaint is made
 - Has given consent to a third party acting on their behalf
 - In the case of a third party pursuing a complaint on behalf of the person affected we will request the following information:
 - Name and address of the person making the complaint
 - Name and either date of birth or address of the affected person
 - Contact details of the affected person so that we can contact them for confirmation that they consent to the third party acting on their behalf

- Has delegated authority to act on their behalf, for example in the form of a registered Power of Attorney which must cover health affairs
- Is an MP, acting on behalf of and by instruction from a constituent

6.2 Should the Practice Manager be of the opinion that a representative does or did not have sufficient interest in the person's welfare, or is not acting in their best interests, they will discuss the matter with either the defence union or NHS England to confirm prior to notifying the complainant in writing of any decision

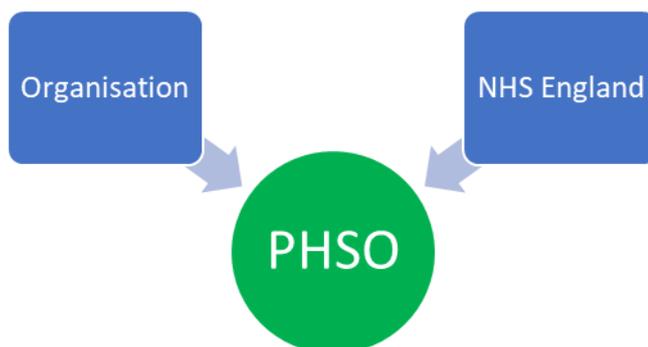
7 Route of a complaint

Stage 1

The complainant may make a complaint to either the Practice or to NHS England.

Stage 2

If the complainant is not content with the response following a full investigation by the Practice (or NHS England), then the complainant may escalate this to the Parliamentary Health Service Ombudsman (PHSO)



8 Complaints Advocates

8.1 Independent advocacy services include:

- [NHS Complaints Advocacy](#) on 0300 303 1660
- [POhWER](#) support centre on 0300 456 2370
- [Age UK](#) on 0800 055 6112

9 Investigating the complaint

9.1 The Practice will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance. The Practice will also adhere to the following standards when addressing complaints:

- The complainant is placed at the centre of the process. The nature of their complaint and the outcome they are seeking are established at the outset

- The complaint undergoes an initial assessment, and any necessary immediate action is taken
- Investigations are thorough, where appropriate independent evidence and opinion is obtained, and are carried out in accordance with local procedures, national guidance and within legal frameworks
- The Practice Manager reviews, organises and evaluates the investigative findings
- The judgement reached by the decision is transparent, reasonable and based on the evidence available
- The investigation is formally recorded with the level of detail appropriate to the nature and seriousness of the complaint
- The investigation of the complaint is complete, impartial and fair

10 Responding to the complaint

- 10.1 The complainant has a right to be regularly updated regarding the progress of their complaint. The Practice Manager will provide an initial response by way of acknowledgement after the complaint is received.
- 10.2 All complaints are to be added to the complaints log. The complainant can expect that:
- They will be kept up to date with the progress of their complaint
 - They can expect to receive a quality response with assurance that action has been taken to prevent a recurrence
 - They will be informed of any learning
- 10.3 The Practice Manager will, in many cases, provide a prompt response and, if the complaint is upheld, an explanation and an apology
- 10.4 Upon completion of the investigation, a formal written response will be sent to the complainant and will include the following:
- Be professional, well thought out and sympathetic
 - Deal fully with all the complainant's complaints
 - Include a factual chronology of events which sets out and describes every relevant consultation or telephone contact, referring to the clinical notes as required
 - Set out what details are based on memory, contemporaneous notes or normal practice
 - Explain any medical terminology in a way in which the complainant will understand
 - Contain an apology, and an offer of redress if something has gone wrong
 - The response should also highlight what the organisation has done, or intends to do, to remedy the concerns identified to ensure that the problem does not happen again
 - The response should inform the complainant that they may complain to the Parliamentary and Health Service Ombudsman (PHSO) if they remain dissatisfied

11 Confidentiality in relation to complaints

- 11.1 Any complaint is investigated with the utmost confidence and all associated documentation will be held separately from the complainant's medical records
- 11.2 Complaint confidentiality will be maintained, ensuring only managers and staff who are involved in the investigation know the particulars of the complaint