

# Staines Road Surgery

## Complaints Policy and Procedure

### Purpose

- All complaints received should be treated with respect and prompt acknowledgement to the person making the complaint and resolved as quickly and efficiently as possible. This may be used as a learning experience for the future and help improve services within the practice/organization.
- In the first instance, the patient must be made aware of the procedure if they wish to raise a complaint and that their complaint will be acknowledged and acted on promptly. The patient needs to understand that they will not be discriminated against in so doing and the complaint will be dealt with without prejudice.
- This policy is relevant to and must be adhered to by all staff including all visitors to the premises.
- It is crucial to have a procedure for handling complaints in place to reduce the anxiety and apprehension for both patients and staff. To ensure the policy remains effective and relevant, a review should take place annually or as and when new legislation has been passed.

### Policy and Procedure

- The policy must be displayed within a public area (website) and accessible to both staff and patients.
- It is the responsibility of the Complaints Manager to receive, respond to and investigate all complaints and these records are to be kept and maintained on site. In addition, a 'responsible person' will need to supervise the complaints procedure and making sure that action is taken with regard to the outcome of any investigation.
- All recorded documentation should be made available to CQC should they be requested at any time.
- Complaints can be made by patients, former patients, individuals working at the practice, a representative of a patient who is incapable of making a complaint themselves and anyone who is affected or could be affected by the action.
- The complaint may be raised verbally or in writing. The Practice Manager/GP will arrange to either meet with the complainant face-to-face or reply to a written complaint in a prompt and timely manner. If the complainant is to meet with the manager they should be asked if they would like to be accompanied at the meeting. If a patient is unable to communicate themselves then arrangements will need to be put in place to facilitate a complaint being taken. Where possible, the complaint should be resolved at the time of that initial meeting.
- If the complaint cannot be resolved at the time the patient will be asked to make a written complaint and this can be done by the patient themselves and/or the Complaints Manager

will write down the complaint on their behalf verbatim. The written complaint will need to be recorded in the complaints register in the same way as it would have been recorded had the complaint been resolved at the meeting.

- On recording the complaint, a record must be kept of each complaint individually which will include the content of the complaint, the steps and decisions taken during the investigation, the outcome and the response times given to the complainant. In addition, complaints will need to be recorded in the Risk Register in order to fulfil any health and safety requirements.
- Should a complaint be raised by somebody on behalf of the patient, written consent would normally be required by the patient to enable their details to be shared with a third party. However, if the patient is deemed incapable, an independent person should be involved.
- If a complaint is made on behalf of a child there must be reasonable grounds being made on their behalf and the complaint must be made in the best interests of the child. If this is deemed not the case, written notification of a decision made not to investigate the complaint must be sent to the person representing the child.
- Complaints can be made up to twelve months after the incident that gave rise to the complaint or from when the complainant was made aware of the incident. It is at the discretion of the practice as to whether an investigation takes place outside of this timescale
- The initial acknowledgement to a written complaint should be raised within two to three working days and the complaints procedure should be enclosed with the letter. The patient should be made aware of the timescale expected to investigate and complete the complaint. This should be within ten working days but no later than twenty days.
- Patients are advised, throughout the complaints procedure, of each stage and notified of timescales appropriately.
- Within the policy, details must be displayed and made accessible to the patient of the Patient Advisory Liaison Service (PALS) and details of the PCT, should the patient wish to take their complaint further.
- .During the complaints procedure, should the patient's treatment be transferred to another provider, the patient must be made aware of the policy of the other provider as well as the current provider.
- The Complaints Manager will need to investigate the complaint and discuss with any implicated member of staff to establish their recollection of events. If the complaint is against the Complaints Manager then the complaint must be referred to the 'responsible person' to carry out the investigation.
- The full written response to the complainant should be signed by the 'responsible person' and include an explanation of how the complaint was considered, the investigation carried out and the conclusions reached in relation to the complaint and subsequently any action required to be taken.
- If it is not possible for the patient to receive the response in the agreed timeframe it will be necessary to write to the complainant to give an explanation as to why this was not possible and to inform the complainant of the revised timescale. All written

correspondence and other documentation will need to be retained.

- If the complainant is dissatisfied with the handling and/or the outcome of the investigation of the complaint, then they can be advised to contact the Health Service Ombudsman, the PCT, PALS, GMC or other such external bodies. The complainant should be given contact and address details appropriately.
- This procedure may need to be terminated if it is deemed that litigation has been initiated and the practice/organization will need to liaise with any outside involvement i.e. the PCT.
- Complaints received should be reviewed at staff meeting to ensure learning points are shared and a review of all complaints should be conducted annually by the Complaints Manager to identify any patterns and to be reported to the 'responsible person'.
- A report annually on complaints should be submitted to the PCT annually and at year ending and should specify the number of complaints received, any complaints referred on to the Health Service ombudsman and how many complaints were considered well founded. The subject matter of complaints should be summarized and any matters of importance arising out of those complaints or the way in which the complaints were handled. A summary of any matters where action has been taken to improve services as a consequence of those complaints will also need to be provided.

For Further information and advice patients can also contact:

NHS complaints

Email: [england.contactus@nhs.net](mailto:england.contactus@nhs.net) with  
"For the attention of the complaints team"  
in the subject line.

Phone: 0300 311 22 33

Health Service Ombudsman

<https://www.ombudsman.org.uk/>

Phone: 0345 015 4033