PRACTICE COMPLAINTS PROCEDURE

**1. Introduction**

On 1 April 2009 the Care Quality Commission came into force, bringing together the responsibilities of the Commission for Social Care Inspection, the Mental Health Act Commission and the Healthcare Commission. At the same time the role of the Healthcare Commission in independently reviewing complaints will be taken on by the Parliamentary Commissioner for Health (the Ombudsman). This means that there will be only two stages to resolving complaints: local resolution at practice/PCT level or referral to the Ombudsman.

It is important to note that this new complaints process[[1]](#footnote-1) involves not only general practice and primary care but reaches beyond to acute trusts and social services. To reflect this new Regulations come into force relating to complaints handling.

# 2. Procedure

2.1 General provisions

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

* publicise complaints procedures
* acknowledge receipt of a complaint and offer to discuss the matter within three working days
* deal efficiently with complaints and investigate them properly and appropriately
* write to the complainant on completion of a complaint investigation explaining how it has been resolved, what appropriate action has been taken, and reminding them of their right to take the matter to the Health Services Ombudsman if they are still unhappy
* assist the complainant in following the complaints procedure, or provide advice on where they may obtain such assistance
* ensure there is a designated manager for complaints
* have someone senior who is responsible for both the complaints policy and learning from complaints
* produce an annual report about complaints that have been received, the issues they raise, and any matters where action has been taken or is to be taken to improve services as a result of those complaints.

The Practice will take reasonable steps to ensure that the complaints procedure is accessible to all patients

2.2 Receiving of complaints

If a complaint is made orally and is resolved to the complainant’s satisfaction within 24 hours, it need not be responded to formally

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. The complainant:

* Can choose to complain to a commissioner instead of the service provider, ie, NHS England rather than the practice.
* 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; or
* 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.
* If the complaint involves two or more organisations, the complainant should be sent a single, co-ordinated response. The organisation which has the most serious complaint or large number of issues about it would normally take the lead.

# 3. Period within which complaints can be made

People wishing to make a complaint must do so within 12 months of an incident happening or of becoming aware of the matter complained about.

# 4. Complaints handling

The practice will designate:

* the Practice Manager is responsible for ensuring compliance with the NHS complaints procedure (responsible person) and in particular ensuring that action is taken if necessary in the light of the outcome of a complaint; and

* to be the practice’s complaints manager, responsible for managing the procedures for handling and considering complaints.
* The Practice Manager is responsible for the effective management of the complaints procedure and for ensuring that action is taken in the light of the outcome of any investigation

5. Action upon receipt of a complaint

Complaints may be received either verbally or in writing and must be forwarded to the Complaints Officer (or his/her stand-in if the Complaints Officer is unavailable), who must:

* Acknowledge the complaint within 3 working days verbally or in writing and at the same time,
	+ offer to discuss, at a time to be agreed with the complainant
	+ the manner in which the complaint is to be handled,
	+ the period within which the investigation of the complaint is likely to be completed and the response is likely to be sent to the complainant.
* From the discussion, a complaint action plan, agreeing the timescale, should be created – it is important to:
* Ensure you understand what the issues are
* Find out what they want to happen as a result
* Maintain regular communication

If the complainant does not accept the offer of a discussion, the practice must determine the response period and notify the complainant in writing of that period. Guidance is given in the Department of Health’s ‘a guide to better customer care’.

**6. Assessing seriousness of a complaint**

It is useful to categorise a complaint when first received, and then review that category based on the results of any investigation. It is also important to remember that a complaint can have a very different effect on an organisation compared with an individual. This is especially important if someone is vulnerable for any reason, such as poor health, communication difficulties or recent bereavement.

The following process will be used to assess the seriousness of an issue and take the relevant action.

Step 1: decide how serious the issue is.

|  |  |
| --- | --- |
| **Seriousness** | **Description** |
| **Low** | Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care. |
|  | **OR** |
|  | Unsatisfactory service or experience related to care, usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of care or the service. No real risk of litigation. |
|  |  |
| **Medium** | Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Some potential for litigation. |
|  |  |
| **High** | Significant issues regarding standards, quality of care and safeguarding of or denial of rights. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation, and so require investigation. Possibility of litigation and adverse local publicity. |
|  | **OR** |
|  | Serious issues that may cause long-term damage, such as grossly substandard care, professional misconduct or death. Will require immediate and in-depth investigation. May involve serious safety issues. A high probability of litigation and strong possibility of adverse national publicity. |

Step 2: Decide how likely it will happen again

|  |  |
| --- | --- |
| **Likelihood** | **Description** |
| Rare  | Isolated or ‘one off’ – slight or vague connection to service provision.  |
| Unlikely  | Rare – unusual but may have happened before.  |
| Possible  | Happens from time to time – not frequently or regularly.  |
| Likely  | Will probably occur several times a year.  |
| Almost certain  | Recurring and frequent, predictable.  |

Step 3: Categorise the risk

|  |  |
| --- | --- |
| **Seriousness** | **Likelihood of recurrence** |
|  | **Rare** | **Unlikely** | **Possible** | **Likely** | **Almost Certain** |
| **Low** | Low |  |  |  |  |
|  |  | Moderate |  |  |  |
| **Medium** |  |  |  |  |  |
|  |  |  | High |  |  |
| **High** |  |  |  | Extreme |  |
|  |  |  |  |  |  |

Examples of Different Types of Incidents

|  |  |  |
| --- | --- | --- |
| **Low** | **(simple, non-complex issues)** | Delayed or cancelled appointments. |
| Event resulting in minor harm (eg cut, strain). |
| Loss of property.  |
| Lack of cleanliness.  |
| Transport problems.  |
| Single failure to meet care needs (eg missed call-back bell).  |
| Medical records missing.  |
|  |  |  |
| **Moderate** | **(several issues relating to a short period of care)**  | Event resulting in moderate harm (eg fracture).  |
| Delayed discharge.  |
| Failure to meet care needs.  |
| Miscommunication or misinformation.  |
| Medical errors.  |
| Incorrect treatment.  |
| Staff attitude or communication  |
|  |  |  |
| **High** | **(multiple issues relating** **to a longer period of care, often involving more than one organisation or** **individual)**  | See moderate list.  |
| Event resulting in serious harm (eg damage to internal organs).  |
|  |  |  |
| **Extreme** | **(multiple issues relating to serious failures, causing serious harm)**  | Events resulting in serious harm or death. Gross professional misconduct. Abuse or neglect.  |
| Criminal offence (eg assault).  |
| Events resulting in serious harm or death. Gross professional misconduct. Abuse or neglect.  |
| Criminal offence (eg assault).  |

**7. Complaints Action Plan**

If the practice can agree a clear plan and a realistic outcome with the person complaining from the start the issue is more likely to be resolved satisfactorily. Having a plan will help the practice respond appropriately. It also gives the person who is complaining more confidence that the practice is taking their concerns seriously.

Having a clear understanding of the complaints process is also crucial in helping managers decide on the best response.

If someone makes a complaint, the person making the complaint will want to know what is being done – and when. However, accurately gauging how long an issue may take to resolve can be difficult, especially if it is a complex matter involving more than one person or organisation. To help judge how long a complaint might take to resolve, it is important to:

* address the concerns raised as quickly as possible
* stay in regular contact with whoever has complained to update them on progress
* stick to any agreements the practice make – and, if for any reason the practice can’t, explain why.

It is good practice to review any case lasting more than six months, to ensure everything is being done to resolve it.

A copy of the practice complaints action plan is attached at Appendix E[[2]](#footnote-2).

**8. Investigation and Responses to Complaints**

During the investigation, the complainant will be kept informed of progress either verbally or in writing as agreed with the complainant. The response must be signed by the ‘responsible person’ and include:

* an explanation of how the complaint has been considered;
* the conclusions reached in relation to the complaint, including any remedial action to be taken
* details of the complainant’s right to take their complaint to the Health Service Ombudsman

**9. Review of complaints**

Complaints received by the practice will be reviewed to ensure that learning points are shared with the whole practice team:

* A full review of all complaints will be carried out annually to identify any trends or additional actions/learning points, and
* We are required to provide an annual report on complaints which should include the action taken and should be made available to any person on request.

10. 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 Officer 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.

Appendix A – Patient Information Leaflet

Appendix B – Practice Notice

Appendix C – Complaints Form

Appendix D - Complaint Form Third Party Authorisation

Appendix E – Complaints Action Plan

Written: 2009

Last reviewed: December 2018

Due review: January 2019 – or as necessary

Reviewed by: P White

 Practice Manager

Practice Manager

The Medical Centre

2 Frances Street

Doncaster

DN1 1JS

Tel: 01302 349431

Email: donccg.frances-street@nhs.net

Central Contact Centre

NHS England

FREEPOST

PO Box 16738h

Redditch

B97 9PT

Tel: 0300 3112233

Email: England.contactus@nhs.net

The Parliamentary and Health Service Ombudsman

Millbank Tower

Millbank

London

SW1P 4QP

Tel: 0345 015 4033

Email: phso.enquiries@ombudsman.ord.uk

**The Medical Centre**

2 Frances Street

Doncaster DN1 1JS

PRACTICE COMPLAINTS PROCEDURE

# Patient Information Leaflet

The Medical Centre

We always try to give you the best service possible, but there may be times when you feel this has not been sufficient. This leaflet explains what to do if you have a complaint about the services you have received from the doctors or any of the staff working in this practice. This practice procedure does not deal with questions of legal liability or compensation.

**HOW TO COMPLAIN**

We hope that most problems can be sorted out easily and quickly, often at the time they arise and directly with the person concerned.

If your problem cannot be sorted out in this way and you wish to make a complaint we would like you to let us know as soon as possible – ideally within a matter of days or at most a few weeks- because this will enable us to establish what happened more easily.

If it is not possible to do that, please let us have the details of your complaint within 12 months of the incident that caused the problems discovering that you have a problem (provided this is within 12 months of the incident).

Complaints should be addressed to the Practice Manager. Alternatively you may ask for an appointment with the Practice Manager in order to discuss your concerns, they will explain the complaints procedure to you and make sure that your concerns are dealt with promptly.

**WHAT WE SHALL DO**

Acknowledge the complaint within 3 working days verbally or in writing and at the same time,

* offer to discuss, at a time to be agreed with you
* the manner in which the complaint is to be handled,
* the period within which the investigation of the complaint is likely to be completed and the response is likely to be sent to the complainant.
* From the discussion, we will agree an action plan as it is important to ensure we understand what the issues are, and what you expect to happen.

If you do not accept the offer of a discussion, the practice must determine the response period and we will notify you of that period.

**COMPLAINING ON BEHALF OF SOMEONE ELSE**

Please note that we keep strictly to the rules of medical confidentiality. If you are complaining on behalf of someone else, we have to know that you have his or her permission to do so. A note signed by the person concerned will be needed, unless they are incapable (because of illness) of providing this. We have a form for this use if required.

**IF YOU REMAIN UNHAPPY WITH OUR RESPONSE**

You can choose to complain to NHS England rather than the practice if you wish.

If you remain unhappy with the response from the practice you can ask for mediation by the PCT or alternatively, request the Health Service Ombudsman to review the matter. Details of the various contacts are over the page.

**The Medical Centre**

|  |
| --- |
| **2 Frances Street****Doncaster DN1 1JS** |
| Tel: 01302 349431  |

**COMPLAINTS PROCEDURE**

WE OPERATE A PRACTICE COMPLAINTS PROCEDURE AS PART OF THE NHS CONSTITUTION FOR DEALING WITH PATIENTS.

OUR SYSTEM MEETS NATIONAL CRITERIA:

IN THE FIRST INSTANCE PLEASE DISCUSS ANY CONCERNS WITH A MEMBER OF STAFF

**SHOULD YOU FEEL YOUR CONCERNS HAVE NOT BEEN SATISFACTORALY DEALT WITH THEN YOU SHOULD CONTACT**

**OUR PRACTICE MANAGER WHO WILL INVESTIGATE. THE PRACTICE COMPLAINTS LEAFLET GIVES DETAILS OF THE PROCEDURE AND IS AVAILABLE FROM RECEPTION AND FROM OUR WEBSITE**

[**https://www.medicalcentredoncaster.co.uk**](https://www.medicalcentredoncaster.co.uk)

**OUR AIM IS TO GIVE YOU THE HIGHEST POSSIBLE STANDARD OF SERVICE AND WE TRY TO DEAL SWIFTLY WITH ANY PROBLEMS THAT MAY OCCUR.**

HELP US TO HELP YOU.

|  |  |  |
| --- | --- | --- |
| **The Medical Centre**

|  |
| --- |
| **The Medical Centre****2 Frances Street****Doncaster DN1 1JS** |
|  |

 |
| Tel: 01302 349431 Fax: 01302 247622 |
|  |

**Complaint Form**

This practice has a formal complaints procedure. In order to ensure that every complaint receives fair and prompt attention, please complete the form below.

|  |
| --- |
| **Complainant’s Details** |
| **Name** | **Date of Birth** |
| **Address** | **Tel. No.** |
| **Patient’s Details (where different from above)** |
| **Name** | **Date of Birth** |
| **Address** | **Tel. No.** |
| **Details of Complaint (including date(s) of events and persons involved)** |
| **Complainant’s signature** | **Date** |
| ***(If the complainant is not the patient)*** |
| **I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorise the complaint set out overleaf to be made on my behalf by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****And I agree that the practice may disclose information to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (only in so far as is necessary to answer the complaint) confidential information about me which I provided to them.** |
| **Patient’s signature** | **Date** |
| **The Medical Centre****2 Frances Street****Doncaster DN1 1JS** |
| Tel: 01302 349431Fax: 01302 247622 |

**COMPLAINT FORM THIRD PARTY AUTHORISATION**

**Where the complainant is not the patient:**

I …………………………………………. authorise the complaint noted overleaf to be made on my behalf by ………………………………………. , and I agree that the practice may disclose to the complainant confidential information sufficient only to answer the complaint.

Patient’s signature: ………………………………………………………………..

Date: ………………………………………………………………..

Name: ………………………………………………………………..

Address: ………………………………………………………………..

………………………………………………………………………………………….

………………………………………………………………………………………….

**COMPLAINT RESOLUTION PLAN - GMP**

**Date of receipt: / /**

**File Name**

**Case reference No.**

|  |  |
| --- | --- |
| **Patient details** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date of Birth****Date of Death (if app)****Next of Kin (if app)** | **Name:****Address:****Telephone number:****E-mail address:** |
| **Complainant’s details (if different)****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Relationship to patient**  | **Name:****Address:****Telephone number:****E-mail address:** |
| **Capacity/consent issue?** | **Date consent received:** |
| **Joint Agency ?** | **Agreed Lead:** |
| **Forwarding on of complaint to relevant agency** | **Date letter forwarded on:** |
| **Defence Union informed? Yes No** | **Date** |
| **Complaint Grading/Risk Assessment** | **High:****Medium:****Low:** |
| **Date of discussion/agreement on actions with complainant****Acknowledgement letter sent** | **Date:****Date:** |
| **Summary of complaint issues** |  |
| **Complainant’s Desired Outcome** |  |
| **Additional information - including special contact arrangements/non-availability etc** |  |
| **Additional support arrangements e.g. ICAS** |  |
| **Details on agreed investigation method/s eg:*****Deal directly (with minor issues)******Formal investigation/written response******Meetings with staff*** |  |
| **Details of agreed dates for progress updates** **(if requested)** |  |
| **Preferred feedback method, e.g.****Telephone****Letter****By email****Face to face****Through advocate etc****Third party e.g. relative, MP, Lawyer** | **Details for feedback e.g. telephone number if different from above** |
| **Agreed timescale/response date**  |  |
| **Response sent/made (main action themes to be fed back via telephone/face to face)****Confirmation of agreement by complainant****Complaint closed**  | **Date****Date:** |
| **Final response signed off by appropriate individual** | **Date:** |
| **Confirmation of final response including actions sent to complainant** | **Date:** |
| **Client satisfaction questionnaire**  | **Date Sent:****Date Received:** |

1. DH document: Listening, Responding, Improving – A guide to better customer care (292319 – Feb 09) [↑](#footnote-ref-1)
2. NHS Doncaster GP Complaint Resolution Plan [↑](#footnote-ref-2)