**Complaints Procedure**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Version:** | **Review date:** | **Edited by:** | **Approved by:** | **Comments:** |
| 2020A | 02.12.2019 | LR | ML |  |
|  2021 | 02/09/2021 | EO | ML |  |
| 2022 | 26/01/2022 | ML | ML | Review date due Jan 2023 |
|  |  |  |  |  |

**Table of contents**

[1 Introduction 3](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797369)

[1.1 Policy statement 3](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797370)

[1.2 Status 3](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797371)

[1.3 KLOE 3](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797372)

[1.4 Training and support 5](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797373)

[2 Scope 5](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797374)

[2.1 Who it applies to 5](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797375)

[2.2 Why and how it applies to them 6](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797376)

[3 Guidance 6](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797377)

[3.1 Legislation 6](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797378)

[3.2 Definition of a complaint 7](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797379)

[3.3 Complaints procedure promulgation 7](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797380)

[3.4 Responsible person 7](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797381)

[3.5 Complaints manager 7](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797382)

[3.6 Parliamentary and Health Service Ombudsman (PHSO) 7](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797383)

[3.7 Complainant options 8](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797384)

[3.8 Timescale 8](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797385)

[3.9 Responding to a concern 8](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797386)

[3.10 Responding to a complaint 9](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797387)

[3.11 Route of a complaint 9](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797388)

[3.12 Verbal complaints 10](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797389)

[3.13 Written complaints 11](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797390)

[3.14 Who can make a complaint? 11](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797391)

[3.15 Complaints advocates 12](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797392)

[3.16 Investigating complaints 12](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797393)

[3.17 Final formal response to a complaint 13](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797394)

[3.18 Confidentiality in relation to complaints 14](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797395)

[3.19 Persistent and unreasonable complaints 14](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797396)

[3.20 Complaints citing legal action 15](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797397)

[3.21 Complaints involving external staff 16](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797398)

[3.22 Multi-agency complaints 16](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797399)

[3.23 Complaints involving locum staff 16](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797400)

[3.24 Significant events 16](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797401)

[3.25 Fitness to practise 17](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797402)

[3.26 Logging and retaining complaints 17](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797404)

[3.27 CQC expectations 17](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797405)

[4 Summary 18](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797406)

[Annex A – Patient complaint form 19](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797407)

[Annex B – Third party patient complaint form 20](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797408)

[Annex C – Complaint handling desktop aide-memoire 21](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797409)

[Annex D – Complaint leaflet 22](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797410)

[Annex E – Acknowledgement of a complaint letter (example) 25](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797411)

[Annex F – Final response to a complaint letter (example) 26](file:///C%3A%5CUsers%5CEmma.orme%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CIE%5C0P7F57R5%5CComplaints%20procedure%20-%20England.docx#_Toc80797412)

# Introduction

## Policy statement

The purpose of this document is to ensure that all staff are aware of the complaints procedure within Hall Green Surgery, affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received at the practice.

## Status

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

## Training and support

The practice will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

# Scope

## Who it applies to

This document applies to all employees of the practice and other individuals performing functions in relation to the practice, such as agency workers, locums and contractors.

## Why and how it applies to them

All staff at Hall Green Surgery 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. Hall Green Surgery takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner. We will maintain communication with the complainant (or their representative) throughout, ensuring they know the complaint is being taken seriously.

The practice aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents). Consideration has been given to the impact this policy might have in regard to the individual protected characteristics of those to whom it applies.

# Guidance

## Legislation

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 practice adopts a patient-focused approach to complaint handling in accordance with the [National Health Service England Complaints Policy (2017)](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) whilst also conforming to guidance detailed in:

1. [Good Practice Standards for NHS Complaints Handling 2013](https://www.patients-association.org.uk/wp-content/uploads/2014/06/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf)
2. [Parliamentary & Health Service Ombudsman’s Principles of Good Complaints Handling 2009](https://www.ombudsman.org.uk/sites/default/files/page/0188-Principles-of-Good-Complaint-Handling-bookletweb.pdf)
3. [My Expectations 2014](https://www.ombudsman.org.uk/sites/default/files/Report_My_expectations_for_raising_concerns_and_complaints.pdf)
4. [The NHS Constitution](https://www.gov.uk/government/publications/the-nhs-constitution-for-england)
5. [Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16](https://www.cqc.org.uk/sites/default/files/20150510_hsca_2008_regulated_activities_regs_2104_current.pdf)

 6 [The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009](https://www.legislation.gov.uk/uksi/2009/309/contents/made?view=plain)

## Definitions of a complaint

A complaint or concern is an expression of dissatisfaction about an act, omission or decision of NHS England, either verbal or written, and whether justified or not, which requires a response[[1]](#footnote-1).

There is no difference between a “formal” and an “informal” complaint. Both are expressions of dissatisfaction[[2]](#footnote-2).

## Complaints procedure promulgation

Hall Green Surgery has prominently displayed notices in the main corridor detailing the complaints process. In addition, the process is included on the practice website and a complaints leaflet is also available from reception.

The information provided is written in conjunction with this policy and refers to the legislation detailed in 3.1.

## Responsible person

At Hall Green Surgery, the responsible person is Dr S J Barnes They are responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint.

|  |
| --- |
|  |

## Complaints manager

At Hall Green Surgery, the complaints manager is Maria Lawton. They are responsible for managing all complaints procedures and must be readily identifiable to service users. The responsible person and complaints manager can be the same person[[3]](#footnote-3).

## Parliamentary and Health Service Ombudsman (PHSO)

The Ombudsman’s role is to make final decisions on complaints that have not been resolved locally by the NHS in England. The Ombudsman looks at complaints where someone believes there has been injustice or hardship because an organisation has not acted properly or has given a poor service and not put things right. The Ombudsman can recommend that organisations provide explanations, apologies and financial remedies to service users and that they take action to improve services.

## Complainant options

The complainant, or their representative, can complain about any aspect of care or treatment they received at this practice to:

1. This practice via the complaints manager
2. NHS England: Telephone 03003 112233, email england.contactus@nhs.net or in writing: NHS England, PO Box 16738, Redditch, B97 9PT. In British Sign Language (BSL) patients can talk to NHS England via a video call to a BSL interpreter

## Timescale

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 they become aware of the matter about which they wish to complain.

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.* Should any doubt arise, further guidance should be sought from NHS England by Maria Lawton.

## Response times

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager at Hall Green Surgery will provide an initial response to acknowledge **any** complaint within three working days after the complaint is received.

There is no end date by which the complaintant must receive their response to allow a full investigation including that of third parties to occur. However, regular updates from the practice to the complainant must occur throughout the investigation. In addition to regular updates, a response or decision should be made within six months, if it extends beyond this time then you must advise the complainant[[4]](#footnote-4).

The complaints manager will advise of the complaints procedure to the complainant or their representative. In many cases a prompt response and, if upheld, an explanation and an apology will suffice and will prevent the complaint from escalating (an apology does not constitute an admission of organisational weakness).

## Route of a complaint

Patients will opt to complain either verbally or in writing. No matter what the cause of the complaint, all staff are to offer empathy when entering into discussions with the complainant. In accordance with Regulation 16[[5]](#footnote-5), all staff at Hall Green Surgery will fully understand the complaints process.

The complainant should be provided with a copy of the Practice Leaflet detailing the complaints process at [Annex F](#_Annex_F_–) and they should be advised that the process is a TWO STAGE process as detailed below:

**Stage 1**

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

**Stage 2**

If not content with either response following a full investigation the complainant may then escalate this to the Parliamentary Health Service Ombudsman (PHSO).

**Important:**  **Complaints do not get escalated to NHS E following the practice response. A complaint made to either/or the practice or NHS E will escalate to PHSO.**

## Verbal complaint

If a patient wishes to complain verbally and if the patient is content for the person dealing with the complaint to deal with this matter and if appropriate to do so, then complaints should be managed at this level. After this conversation, the patient may suggest that no further action is needed. If this should be the case, then the matter can be deemed to be closed, although the complaints manager should still be informed as this needs to be added to the complaints log at [Annex G](#_Annex_G_–).

This local resolution is the quickest method of resolving a complaint and will negate the requirement for the complaint to proceed through the formal complaint process.

An acknowledgement of the verbal complaint will suffice and therefore the complaints manager does not need to subsequently respond in writing, although the verbal complaint must be recorded in the complaints log. This will enable any trends to be identified and improvements to services made if applicable.

The complaints manager should record notes of the discussion (for reference only) which may be used when discussing complaints at practice meetings.

If the matter demands immediate attention, contact the complaints manager who may offer the patient an appointment or may offer to see the complainant at this stage.

Staff are reminded that when internally escalating any complaint to the complaints manager then a full explanation of the events leading to the complaint is to be given to allow any appropriate response.

## Written complaints

An alternative option is for any complaint to be forwarded by letter or email to the complaints manager. When a complaint is received then the response is to be as per [Article 3.8](#_Response_times).

## Complaints advocates

Details of how patients can complain and also how to find independent NHS complaints advocates are to be detailed within the practice leaflet at [Annex F](#_Annex_F_–). Additionally, the patient should be advised that the local Healthwatch can help you to find independent NHS complaints advocacy services in your area.

Independent advocacy services include:

1. POhWER – a charity that helps people to be involved in decisions being made about their care. POhWER’s support centre can be contacted via 0300 456 2370
2. SeAp Advocacy – gives advocacy support. Call 0330 440 9000 for advice or text SEAP to 80800 and someone will get back to you.
3. Age UK – may have advocates in your area. Visit their website or call 0800 055 6112

##  Investigating complaints

Hall Green Surgery will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance.

This practice will adhere to the following standards when addressing complaints:

1. The complainant has a single point of contact in the organisation and is placed at the centre of the process. The nature of their complaint and the outcome they are seeking is established at the outset.
2. The complaint undergoes initial assessment and any necessary immediate action is taken. A lead investigator is identified.
3. Investigations are thorough, where appropriate obtain independent evidence and opinion, and are carried out in accordance with local procedures, national guidance and within legal frameworks.
4. The investigator reviews, organises and evaluates the investigative findings.
5. The judgement reached by the decision maker is transparent, reasonable and based on the evidence available.
6. The complaint documentation is accurate and complete. The investigation is formally recorded, the level of detail appropriate to the nature and seriousness of the complaint.
7. Both the complainant and those complained about are responded to adequately.
8. The investigation of the complaint is complete, impartial and fair.

##  Final formal response to a complaint

Upon completion of the investigation, a formal written response will be sent to the complainant and will include the following information:

* An explanation of how the complaint was considered
* An apology if appropriate
* An explanation based on facts
* Whether the complaint in full or in part is upheld
* The conclusions reached in relation to the complaint, including any remedial action that the organisation considers to be appropriate
* Confirmation that the organisation is satisfied that any action has been or will be actioned
* Where possible, a response will be given to people about any lessons learnt
* Information and contact details of the Parliamentary and Health Service Ombudsman as the next stage of the NHS complaints process

The complaints manager will clearly stipulate that this response is the final response to be issued by Hall Green Surgery and if the complainant is not satisfied then they should contact the PHSO.

##  Confidentiality in relation to complaints

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

##  Persistent and unreasonable complaints

The management of persistent and unreasonable complaints at Hall Green Surgery is achieved by following the guidance detailed at [Appendix 2](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) of the NHS England Complaints Policy.

##  Complaints involving locum staff

Hall Green Surgery will ensure that all locum staff, be it GPs, nurses or administrative staff, are aware of the complaints process and that they will be expected to partake in any subsequent investigation, even if they have left the practice (keeping in mind the 12 month time frame to complain).

Locum staff must receive assurance that they will be treated equally and that there is no discrepancy between locum staff, salaried staff or partners.

## Fitness to practise

When a complaint is raised, consideration may need to be given to whether the complaint merits a fitness to practise referral. Advice may need to be sought from the relevant governing body such as the GMC, NMC, HCPC etc.

At Hall Green Surgery the practice maanger will be responsible for firstly discussing the complaint with the clinician involved and then seeking guidance from the relevant governing body where applicable.

##  Logging and retaining complaints

All organisations will need to log their complaints and retain as per the [Records Retention Schedule](https://practiceindex.co.uk/gp/forum/resources/record-retention-schedule.767/).

All evidence of complaints is compiled within the [KO14b Complaints Log Toolkit](https://practiceindex.co.uk/gp/forum/resources/ko14b-complaints-log-toolkit.1364/).

Evidence required includes:

1. Logging, updating and tracking for trends and considerations
2. Details of all dates of acknowledgement, holding and final response letters and the timely completion of all correspondence relating to the complaint
3. Compliance with the complaints in the categories that are required to complete the annual KO14b submission[[6]](#footnote-6)

This data is submitted by Maria Lawton to NHS E within the KO14b complaints report by 31 March annually.

## CQC expectations

When the CQC inspect an organisation, the inspection team will seek assurance that:[[7]](#footnote-7)

* People who use the service know how to make a complaint or raise concerns.
* People feel comfortable, confident and are encouraged to make a complaint and speak up.
* The complaints process is easy to use. People are given help and support where necessary.
* The complaints process involves all parties named or involved in the complaint and they have an opportunity to be involved in the response.
* The provider uses accessible information or support if they need to raise concerns
* The complaints are handled effectively including:
	+ Ensuring openness and transparency
	+ Confidentiality
	+ Regular updates for the complainant
	+ A timely response and explanation of the outcome
	+ A formal record
* Systems and processes protect people from discrimination, harassment or disadvantage
* Complaints are logged and monitored to assess trends and shared with the wider team. They are used to learn and drive continuous improvement. Trends are used to highlight where changes or improvements may be needed.

CQC will also expect all staff to fully understand the complaints process at Hall Green Surgery.

## Multi-agency complaints

Should a complaint be received that references other organisations, the complaint is to be investigated in collaboration with all the organisations that are involved. Complaints managers from each organisation will need to determine which the lead organisation will be and the lead organisation will then be responsible for coordinating the complaint.

##  Summary

The care and treatment delivered by Hall Green Surgery 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, this practice is able to investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learnt and ultimately improving service delivery.

## Annex A – Patient Complaint Form

**SECTION 1: PATIENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  |

|  |
| --- |
| Address |
|   |

 |  |
| Date of birth |  |
| Telephone No. |  | Postcode |  |

**SECTION 2: COMPLAINT DETAILS**

Please give full details of the complaint below, including dates, times, locations and names of any practice staff (if known). Continue on a separate page if required.

|  |
| --- |
|  |

**SECTION 3: OUTCOME**

|  |
| --- |
|  |

**SECTION 4: SIGNATURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname & initials |  | Title |  |
| Signature |  | Date |  |

**SECTION 5: ACTIONS**

|  |
| --- |
| Passed to management YES / NO |

## Annex B – Third Party Patient Complaint Form

**SECTION 1: PATIENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  |

|  |
| --- |
| Address |
|   |

 |  |
| Date of birth |  |
| Telephone No. |  | Postcode |  |

**SECTION 2: THIRD PARTY DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  |

|  |
| --- |
| Address |
|   |

 |  |
| Date of birth |  |
| Telephone No. |  | Postcode |  |

**SECTION 3: DECLARATION**

I hereby authorise the individual detailed in Section 2 to act on my behalf in making this complaint and to receive such information as may be considered relevant to the complaint. I understand that any information given about me is limited to that which is relevant to the subsequent investigation of the complaint and may only be disclosed to those people who have consented to act on my behalf.

This authority is for an indefinite period/for a limited period only\*.

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

(\*Delete as necessary)

**SECTION 4: SIGNATURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname & initials |  | Title |  |
| Signature |  | Date |  |

## Annex C – Complaint Handling Desktop Aide-Memoire

**\*** It may be necessary to liaise with external third parties such as hospitals in order to gather additional information or to formulate a joint response. Where this is the case the patient or their representative must be advised accordingly.

## Annex D – Annual Complaints Report

**Introduction**

The purpose of the Annual Complaints Report (ACR herein) is to detail the complaints received by Hall Green Surgery during the year The practice takes a proactive approach to the management of complaints, a process that is aimed at improving the quality of service and delivering a better patient experience.

**Purpose**

The purpose of the ACR is to:

* Specify the number of complaints received during the reporting period
* Specify the number of complaints that were warranted, unwarranted or partially warranted
* Specify the nature of the complaints (source, staff group, categorisation)
* Specify the number of referrals to the ombudsman
* Identify trends that can be analysed and audits undertaken
* Identify remedial actions and learning points
* Notify patients of any changes to policy as a result of complaints

In accordance with NHS(E) directives regarding the complaints process, the ACR for Hall Green Surgery will be available to the public upon request.

**Tabular representation**

For ease of reading, the ACR is presented in tabular form and illustrated overleaf.

**Table 1** – Complaints received during reporting year [01 Apr 2018 – 31 Mar 19]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Month** | **Number of complaints received** | **Warranted** | **Unwarranted** | **Partially warranted** |
| April | 2 | 1 | 1 | 0 |
| May | 2 | 1 | 1 | 0 |
| June | 2 | 1 | 0 | 1 |
| July | 3 | 1 | 0 | 2 |
| August | 1 | 1 | 0 | 0 |
| September | 1 | 1 | 0 | 0 |
| October | 1 | 1 | 0 | 0 |
| November | 0 | 0 | 0 | 0 |
| December | 2 | 2 | 0 | 0 |
| January | 1 | 1 | 0 | 0 |
| February | 1 | 1 | 0 | 0 |
| March | 1 | 1 | 0 | 0 |

**Table 2** – Nature of complaints during the reporting year [01 April 2018 – 31 March 2019] – add columns as required.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Month** | **Number of complaints**  | **Treatment** | **Staff attitude** | **Access** | **Referral process** | **Facilities** | **Medication**  | **Waiting times** |
| April | 2 | 1 | 1 | 0 | 0 | 0 | 0 | 0 |
| May | 2 | 1 | 0 | 0 | 1 | 0 | 0 | 0 |
| June | 2 | 0 | 0 | 1 | 0 | 1 | 0 | 0 |
| July | 3 | 0 | 0 | 0 | 0 | 0 | 1 | 2 |
| Aug | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Sept | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| Oct | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 |
| Nov | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Dec | 2 | 0 | 1 | 1 | 0 | 0 | 0 | 0 |
| Jan | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Feb | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Mar | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |

**Table 3** – Referrals to the ombudsman during the reporting year [01 Apr 2018 – 31 Mar 2019]

|  |  |  |
| --- | --- | --- |
| **Month** | **Number of complaints received** | **Referrals to ombudsman** |
| April | 2 | 0 |
| May | 2 | 0 |
| June | 2 | 0 |
| July | 3 | 0 |
| August | 1 | 0 |
| September | 1 | 0 |
| October | 1 | 1 |
| November | 0 | 0 |
| December | 2 | 0 |
| January | 1 | 0 |
| February | 1 | 0 |
| March | 1 | 0 |

**Table 4 –** Categorisation of complaints by staff group during the reporting year [01 April 2018 – 31 March 2019]

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Month** | **Number of complaints**  | **GP** | **Nurse** | **HCA** | **Pharmacy** | **Reception** | **Admin** | **Locum** |
| April | 2 | 1 | 1 | 0 | 0 | 0 | 0 | 0 |
| May | 2 | 1 | 0 | 0 | 1 | 0 | 0 | 0 |
| June | 2 | 0 | 0 | 1 | 0 | 1 | 0 | 0 |
| July | 3 | 0 | 0 | 0 | 0 | 0 | 1 | 2 |
| Aug | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Sept | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| Oct | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 |
| Nov | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Dec | 2 | 0 | 1 | 1 | 0 | 0 | 0 | 0 |
| Jan | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Feb | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Mar | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |

**Table 5** – Complaint trends identified during the reporting year [01 April 2018 – 31 March 2019]

|  |  |  |  |
| --- | --- | --- | --- |
| **Month** | **Number of complaints received** | **Trends by category** | **Trends by staff group** |
| April | 2 | Treatment (ear-syringing) | Nursing |
| May | 2 |  |  |
| June | 2 |  |  |
| July | 3 |  |  |
| August | 1 |  |  |
| September | 1 |  |  |
| October | 1 |  |  |
| November | 0 |  |  |
| December | 2 | Attitude | Reception staff |
| January | 1 |  |  |
| February | 1 |  |  |
| March | 1 |  |  |

**Table 6** – Remedial actions/lessons identified

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Month** | **Number of complaints received** | **Remedial actions** | **Lessons identified** | **Comments** |
| April | 2 | Treatment plans reviewed for ear-syringing | Staff require regular refresher training | Annual training to be arranged by…. |
| May | 2 |  |  |  |
| June | 2 |  |  |  |
| July | 3 |  |  |  |
| August | 1 | Review GP rota to ensure sufficient coverage to maintain acceptable waiting times | GPs must ensure they discuss leave requirements in advance with PM – no later than June | Leave pro forma to be emailed to all staff following Easter for summer to enable management time to source cover |
| September | 1 |  |  |  |
| October | 1 |  |  |  |
| November | 0 |  |  |  |
| December | 2 | Staff survey conducted, identifying excessive workload at peak times during the year | Practice manager/lead receptionist to maintain an awareness during peak times, monitoring staff for fatigue, etc.  | Discuss the rotation of staff between administrative roles and reception to alleviate fatigue |
| January | 1 |  |  |  |
| February | 1 |  |  |  |
| March | 1 |  |  |  |

**Table 7** – Changes to practice policy

|  |  |  |
| --- | --- | --- |
| **Month** | **Number of complaints received** | **Changes to policy** |
| April | 2 | Ear-syringing protocol changed to reflect annual refresher training requirement |
| May | 2 |  |
| June | 2 |  |
| July | 3 |  |
| August | 1 | HR policy regarding leave requests changed, stating new cut-off dates for summer break |
| September | 1 |  |
| October | 1 |  |
| November | 0 |  |
| December | 2 | HR policy update regarding monitoring of staff for fatigue |
| January | 1 |  |
| February | 1 |  |
| March | 1 |  |

**SUMMARY**

This ACR ensures transparency between Hall Green Surgery and its patients. The information is accurate and reflects the complaints received during the reporting year [01 April 2018 to 31 March 2019]. This information is available to the public upon request and will be displayed in [insert location] and also discussed at the PPG meeting.

*[Signed]*

[Insert name]

[Insert role/position]

[Insert date]

## Annex E – Complaint Review Form

**Introduction**

The purpose of the complaint review form is to enable Hall Green Surgery to conduct a detailed analysis of every complaint received with a view to making recommendations for improvements to services and enhancing patient experience within the practice.

Any key points will be used to populate the Annual Complaints Review, identifying trends and learning points for further development in the handling of complaints and routines within the practice.

**Usage**

This form can be used by the complaints manager and responsible officer and any other parties involved in the management of complaints at Hall Green Surgery. Where the complaint involves more than one NHS organisation, discussions will take place between the bodies concerned about the most appropriate body to take the lead in coordinating the complaint and communicating with the complainant[[8]](#footnote-8).

**Complaint review form** is shown overleaf.

## Annex E – Acknowledgement of a complaint letter (example)

[Organisation]

[Address]

[Complainant’s name]

[Complainant’s address]

[Date]

Reference [Enter]

Dear [name],

**Acknowledgment of complaint**

Thank you for your letter [dated] regarding your complaint. We are sorry that you have felt that the standard of service at [insert organisation name] warranted your complaint. Please be advised that, whilst complaints are infrequent, when received we will thoroughly investigate and will always manage these in line with the NHS contract. Our promise to you includes that we will:

* Keep you [or your advocate] up to date with the progress of your complaint
* Should your case pass the 40 working day target [or enter alternative timescale if agreed], you [or your advocate] will receive an update every 10 working days after the target date has been surpassed. This will be by telephone, email or letter following agreement with you
* You [or your advocate] can expect to receive a quality response
* Should there be any learning outcome, you [or your advocate] will be provided with what actions have been taken to prevent any future recurrence

We are aware that you would wish for a response as soon as possible and we will endeavour to conduct a full and thorough investigation in the shortest period possible.

Please find enclosed a copy of the Complaints Leaflet. This details what you should expect, a list of advocacy services should you need any support and what to do should you not be content with the findings of this complaint.

Yours sincerely,

[Signed]

[Name]

[Role]

Enc: Complaints Leaflet

**COMPLAINT REVIEW FORM HALL GREEN SURGERY.**

|  |  |  |
| --- | --- | --- |
| Complaint reference number | Patient identifying number | Date of review |
|  |  |  |

|  |
| --- |
| **Summary of complaint:** |

|  |
| --- |
| **Summary of learning points (explain how this will be communicated to the team):** |

|  |  |
| --- | --- |
| **Action points:**1.2.3.4.5.6.7.8. | **By whom:**1.2.3.4.5.6.7.8. |

|  |
| --- |
| **Complaint category (please delete as appropriate):*** Treatment
* Staff attitude
* Access
* Referral process
* Facilities
* Medication
* Waiting times
 |

|  |
| --- |
| **Complaint staff group (please delete as appropriate):*** GP
* Nurses
* HCA
* Pharmacy/Dispensary
* Receptionists
* Admin
* Locum staff
 |

|  |
| --- |
| **Date team meeting held to discuss complaint (detail those present):** |

|  |
| --- |
| **Review date (detail when the complaint was reviewed to ensure actions completed):** |

|  |  |
| --- | --- |
| **Complaints manager signature:** |  |
| **Complaints manager name:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Responsible officer signature:** |  |
| **Responsible officer name:** |  |
| **Date:** |  |

**Annex F – Practice Leaflet**

A patient information leaflet regarding complaints is shown overleaf.

| Advocacy support* POhWER support centre can be contacted via 0300 456 2370
* SeAp Advocacy gives advocacy support on 0330 440 9000
* Age UK on 0800 055 6112

Further actionsIf you are dissatisfied with the outcome of your complaint from either NHS England or this practice, then you can escalate your complaint to:Parliamentary Health Service Ombudsman (PHSO)Milbank TowerMilbankLondonSW1P 4QPTel: 0345 015 4033www.ombudsman.org.uk  | Hall Green Surgery 164 Ormskirk Road, UphollandLancashire WN8 0AB01695 588848 |  | The Complaints ProcessHall Green Surgery  |
| --- | --- | --- | --- |
| Talk to usEvery patient has the right to make a complaint about the treatment or care they have received at Hall Green Surgery. We understand that we may not always get everything right and, by telling us about the problem you have encountered, we will be able to improve our services and patient experience. Who to talk toMost complaints can be resolved at a local level. Please speak to a member of staff if you have a complaint; our staff are trained to handle complaints. Alternatively, ask to speak to the complaints manager, Maria Lawton Practice Manager | If for any reason you do not want to speak to a member of our staff, then you can request that NHS England investigates your complaint. They will contact us on your behalf:NHS EnglandPO BOX 16738RedditchB97 9PT03003 112233england.contactus@nhs.netA complaint can be made verbally or in writing. A complaints form is available from reception. Additionally, you can complain via email to maria.lawton@nhs.net Time frames for complaintsThe time constraint on bringing a complaint is 12 months from the occurrence giving rise to the complaint, or 12 months from the time you become aware of the matter about which you wish to complain.The Complaints Manager will respond to all complaints within three business days. We will aim to investigate and provide you with the findings as soon as we can and will provide regular updates regarding the investigation of your complaint. | Investigating complaintsHall Green Surgery will investigate all complaints effectively and in conjunction with extant legislation and guidance. ConfidentialityHall Green Surgery will ensure that all complaints are investigated with the utmost confidentiality and that any documents are held separately from the patient’s healthcare record. Third party complaintsHall Green Surgery allows a third party to make a complaint on behalf of a patient. The patient must provide consent for them to do so. A third party patient complaint form is available from reception.Final responseHall Green Surgery will issue a final formal response to all complainants which will provide full details and the outcome of the complaint. Further information is detailed in our practice policy. |

## Annex G – Complaints Log (example)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No** | **Date Received** | **Format** | **Consent obtained** | **Complaint description** | **Ack’d date** | **Outcome** | **Upheld** | **Date closed** |
| 1/19 | 08 Jan 19 | In person | N/A | Fall in car park | N/A | Apologised, SEA raised, repairs to car park. Discussed at all meetings | Yes | 31 Jan 19 |
| 2/19 | 10 Feb 19 | Email | Yes | Wrong tablets prescribed on mother’s prescription  | 12 Feb 19 | Advised that the drug was the same, although different branding. Letter written to daughter following investigation | No | 19 Feb 19 |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

1. [NHS(E) Complaints Policy 2017](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) [↑](#footnote-ref-1)
2. [Good Practice for Handling NHS Complaints 2013](https://www.patients-association.org.uk/wp-content/uploads/2014/06/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf) [↑](#footnote-ref-2)
3. [A Guide to Effective Complaints Resolution England](https://www.medicalprotection.org/docs/default-source/pdfs/Booklet-PDFs/eng-med-complaints-booklet.pdf?sfvrsn=4) [↑](#footnote-ref-3)
4. <http://www.themdu.com/guidance-and-advice/journals/inpractice-july-2014/timescales-for-acknowledging-investigating-and-responding-to-complaints> [↑](#footnote-ref-4)
5. [Heath & Social Care Act 2008 Regulation 16](http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints#guidance) [↑](#footnote-ref-5)
6. [digital.nhs.uk](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/primary-care-gp-and-dental-complaints-collection-ko41b) [↑](#footnote-ref-6)
7. [CQC GP mythbuster 103: Complaints management](https://www.cqc.org.uk/guidance-providers/gps/gp-mythbuster-103-complaints-management) [↑](#footnote-ref-7)
8. [NHS England Complaints Policy](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) [↑](#footnote-ref-8)