



## **Patient Complaints Procedure**

### **1. Introduction**

Our aim is to resolve as many complaints as possible quickly and within the practice.

Anyone who complains to us should feel that:

- their concerns are being taken seriously
- the investigation is adequate and proportionate to the problem
- they will not be discriminated against in future because they made a complaint

While of course we want to keep complaints to a minimum, those we do receive should be treated as a learning experience.

This procedure sets out how we manage complaints, in the context of the National Health Service Complaints Regulations 2009.

### **2. National Health Service Complaints Regulations 2009**

The regulations were introduced because complaints within NHS organisations were taking too long to investigate and lessons were not being learnt. The basic requirements of the regulations are:

- GP practices count as Responsible Bodies within the NHS
- As such we are required to have a well-publicised complaints procedure with a named Responsible Person, who must be a partner, and a Complaints Manager
- Complaints may be made by the patient or by someone else on behalf of the patient, provided that they have authority to do so
- Complaints should normally be made within 12 months of the incident to which the complaint refers, although we have discretion to extend this period
- All complaints must be acknowledged within three working days, and the acknowledgement must include a timescale for full resolution
- There are two stages to the complaints procedure: firstly local resolution, ie within the practice or Clinical Commissioning Group, then referral to the Parliamentary & Health Services Ombudsman
- All complainants must be made aware of the existence of advocacy services, the Ombudsman, and the Care Quality Commission.

### **3. Practice procedure for complaints made to us**

- 3.1 Definition: a complaint is any expression of dissatisfaction with our service requiring a response. This means that the matter cannot be resolved immediately by the person to whom it is addressed, requiring either further investigation or escalation to someone more senior.
- 3.2 The Responsible Person for complaints is Dr Sandra Fenn, Senior Partner  
The Complaints Manager is Kate Davenport, Practice Manager
- 3.3 A complaint about the practice may be received in a number of ways: verbally in person or over the phone, by letter or by email, or on a complaint form. All are equally valid and will be treated the same. Any member of staff receiving a verbal complaint must write a note of the issue raised and the complainant's details as soon as possible afterwards.
- 3.4 The practice will not discriminate against complainants on any grounds when addressing a complaint, and will respect the human rights and diversity of complainants on all occasions. Equally, the fact of having complained will never adversely affect a patient's ongoing medical care at the practice.
- 3.5 If a patient is unable or lacks the confidence to make a complaint, then a relative, friend or advocate may make the complaint on their behalf, provided that one of the following applies:
- The patient has consented in writing to allow a third party to act for them
  - The representative has power of attorney to act for the patient
  - The patient is a child under the age of 16 who lacks the capacity to complain for themselves

Patient confidentiality is of the utmost importance and it must never be assumed that a third party has the authority to act for a patient.

- 3.6 Information about how to complain will be made available to the public through posters, leaflets and on the practice website. On request, the information will be provided in other formats or languages.
- 3.7 All complaints must initially be brought to the attention of the Practice Manager, who will involve the Senior Partner as necessary. Any complaint that includes a matter of clinical judgement will be referred immediately to the Senior Partner.
- 3.8 The Practice Manager will arrange for the complaint to be acknowledged within three working days. If possible a full response will be provided within ten working days. If this is not possible because of the need to investigate further or because of the absence of key individuals, then the acknowledgement will explain this and will offer a realistic timescale for a full response. In most cases the Practice Manager will endeavour to speak to the complainant in person or on the phone, to understand their circumstances, establish details of the issue and reassure them that their concerns are being taken seriously.

The acknowledgement will include details of the advocacy services available locally: NHS BANES Patient Advice and Liaison Service (PALS) and the Independent Complaints Advisory Service (ICAS) – details of both in section 6.

The full response will contain details of how to complain to the Parliamentary and Health Service Ombudsman or the Care Quality Commission if the complainant is not satisfied with our response – details in Section 6.

- 3.9 The Practice Manager will keep a record of all complaints received on the practice intranet, with links to related electronic files. An annual return listing complaints broken down by category (but no personally identifiable data) will be supplied to NHS BANES PALS on request. No paperwork relating to complaints must be kept on the patient's clinical record.

A complaint that is made verbally and is resolved within 24 hours does not need to be recorded under the regulations, but will be recorded anyway by the practice to ensure that as full a picture as possible is obtained of patient feedback.

- 3.10 The investigation process will vary according to the circumstances of the complaint. It may include some or all of the following:

- Identifying someone not directly involved in the issue to take a lead or review the complaint
- Interviewing staff and/or other witnesses to an incident
- Analysis of patient care record (for clinical complaints)
- Research into possible alternative approaches and financial implications (for policy complaints)

- 3.11 The Practice Manager is responsible for ensuring that the practice learns from complaints. This will be done through one or more of the following actions, as appropriate:

- If the complaint refers to an incident that is significant in terms of the wellbeing of patients or the running of the practice, then it will be raised at a monthly Significant Events meeting in the practice, and will be the subject of an improvement action plan and subsequent review.
- If the complaint concerns a practice policy, the issue will be raised at a practice meeting to review the policy. This is especially relevant where a number of complaints have been received about the same issue.
- If the complaint relates to one individual, whether clinical or administrative, the issue will be raised with the individual and any remedial training or coaching will be arranged, or disciplinary action taken if justified.

- 3.12 In the case of a persistent complainant, our response will not be biased by previous experience, and each complaint will be considered independently. However, in cases where someone complains repeatedly and unreasonably, the Practice Manager will discuss the matter with the complainant and follow up with an agreed way forward in writing to try and prevent unnecessary waste of practice time in future.

#### 4. Complaints about the practice

Complaints may be made to NHS England, the organisation responsible for commissioning our services. The complaint should be addressed to the Patient Advice & Liaison Service (see address below). In this case the complainant is likely to be asked for their consent to the complaint being shared with the practice, to enable the PALS to investigate appropriately.

In most cases it is preferable to encourage the complainant to inform the practice directly of their concerns, with a view to achieving a rapid local resolution.

#### 5. Complaints about secondary or shared care

- 5.1 A patient may complain to us about some aspect of their care in secondary or other specialist care to which they have been referred by us. Every case must be judged individually, to assess an appropriate level of involvement. If the patient needs support to find the best way to express their concern to a third party organisation, then we will provide as much help as we are able to.
- 5.2 If a complaint spans the care provided by us and another organisation, then we will liaise with the complaints manager at that organisation to ensure full co-operation and if possible a single response to the complaint.

#### 6. Contacts

##### **NHS Bath & North East Somerset Patient Advice & Liaison Service**

- *For support with complaints to us, or to make a complaint about us. Also support the practice with complaints management in general.*

Central Sothorn Commissioning Unit, St Martins Hospital, Clara Cross Lane, Bath  
BA2 5RP

Freephone 0800 389 7671 Mon – Fri 9am – 5pm

[feedback.banesccg@nhs.net](mailto:feedback.banesccg@nhs.net)

##### **Independent Complaints Advocacy Service**

- *For independent support to make a complaint about any NHS organisation*
- Contact PALS (see above) for more details

##### **Parliamentary & Health Service Ombudsman**

- *To make a complaint if local resolution has failed. The Ombudsman is an independent organisation and will investigate complaints where a decision has been wrongly taken.*

Millbank Tower, Millbank, London SW1P 4QP

0845 015 4033 Mon – Fri 8.30am – 5.30pm  
[phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk)

**Care Quality Commission (CQC)**

- *To make a complaint about the standard of care received from us. The practice is registered with CQC and is committed to deliver against their Essential Standards of Quality & Safety.*

CQC National Customer Service Centre, Citygate, Gallowgate, Newcastle upon Tyne  
NE1 4PA

03000 616161, Mon – Fri 8.30am – 5.30pm  
[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)