

## Document Control

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DOCUMENT CONTROL			
<b>Document Name</b>		Complaints Procedure	
<b>Document Author</b>		Becky Hulse with Clarity Informatics	
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## **Purpose and definitions**

Every NHS facility is required to have 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.

Inspire Healthcare 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

All patients regardless of age, gender, ethnic background, culture, cognitive function, or sexual orientation have the right to have their privacy and dignity respected.

## **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.

There is no difference between a "formal" and an "informal" complaint. Both are expressions of dissatisfaction.

## **Responsible Person and Complaints Manager**

The Senior Partner at each site is the 'Responsible Person' and therefore responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint.

The Practice Manager is the 'Complaints Manager' and therefore responsible for managing all complaints procedures and must be readily identifiable to service users.

If a complaint is made against the Responsible Person/Complaints Manager, responsibility for managing it will be passed to a suitable member of the management team.

## **Scope**

This policy applies to all employees of Inspire Healthcare, contractors, seconded staff, placements, and agency staff.

## **Roles, rights, and responsibilities**

### **All staff**

All staff have a responsibility to understand the practice complaints process and policy.

All staff should understand who is best placed to handle any complaint, likely to be the practice manager or member of the management team.

## Practice manager/designated person

To update the policy, ensure that it is aligned with national guidelines, distribute appropriately, and ensure that staff are trained at induction and at regular intervals so that they are aware of the principles of handling complaints and the content of the practice policy.

## Principles of this policy

### Complainant options

The complainant, or their representative, can complain about any aspect of care or treatment they received from Inspire Healthcare to:

- a. This practice via the Complaints Manager

### OR

- b. NHS England: Telephone 0300 311 2233, email [england.contactus@nhs.net](mailto: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 the Practice Manager.

## Response times

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager 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 complainant 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 the complainant must be advised<sup>1</sup>.

The Complaints Manager will explain 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 liability or breach of statutory regulations).

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<sup>1</sup> <http://www.themdu.com/guidance-and-advice/journals/inpractice-july-2014/timescales-for-acknowledging-investigating-and-responding-to-complaints>

## Route of a complaint

Patients will opt to complain either verbally or in writing. Where a person is unable to communicate a complaint by either means on their own then arrangements will be made to facilitate the giving of the complaint. No matter what the cause of the complaint, all staff must offer empathy when entering into discussions with the complainant. In accordance with Regulation 16<sup>2</sup>, all staff will fully understand the complaints process.

The complainant should be provided with a copy of the Practice Leaflet detailing the complaints process and they should be advised that the process is a TWO STAGE process as detailed below,



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

## Verbal complaints

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.

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.

<sup>2</sup> [Health & Social Care Act 2008 Regulation 16](#)

Staff are reminded that when internally escalating any complaint to the Complaints Manager, 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 'Response times'.

## NHS England

If a complaint is received via NHS England it will be dealt with within the timescales stipulated. Any additional requirements of NHS England will be met.

## 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. Additionally, the patient should be advised that Healthwatch Gloucestershire can help them to find independent NHS complaints advocacy services in your area.

Tel: 01452 504989 or 0800 6525193 (Freephone)

Email: [info@healthwatchgloucestershire.co.uk](mailto:info@healthwatchgloucestershire.co.uk)

Post: Freepost RUAL-BZLA-BKAS  
Healthwatch Gloucestershire  
13 Wheatstone Court  
Delta Way  
Waterwells Business Park  
Quedgeley  
Gloucester  
GL2 2AQ

Independent advocacy services include:

- PALS (Patient Advice & Liaison Service) – 0800 015 1548
- Age UK – may have advocates in your area. Visit their website or call 0800 055 6112

## Acknowledging receipt of a complaint

The practice must acknowledge a written complaint in writing within three working days. The letter will include:

- An understanding of what the complaint is
- Explaining what investigation there will be
- Stating the anticipated date by which the complainant can expect a full response
- Asking the complainant if they would like a meeting or to send in a further letter and
- Advising details of the NHS Complaints Advocacy Services.

## Investigation of complaints

The Practice Manager will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance. If the Practice Manager is not available through sickness or annual leave, this must be completed by another member of the management team.

Inspire Healthcare will adhere to the following standards when addressing complaints:

- 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.
- The complaint undergoes initial assessment and any necessary immediate action is taken. A lead investigator is identified.
- 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.
- The investigator reviews, organises and evaluates the investigative findings.
- The judgement reached by the decision maker is transparent, reasonable and based on the evidence available.
- 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.
- Both the complainant and those complained about are responded to adequately.
- The investigation of the complaint is complete, impartial and fair.

When a complaint involves additional health or social care providers, such as a pharmacy or hospital, they have a duty to communicate with one another, investigate together and provide a single final response.

### **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 PALS (Patient Advice and Liaison Service) or 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 the practice and if the complainant is not satisfied then they should contact the PHSO.

### **Persistent and unreasonable complaints**

The management of persistent and unreasonable complaints is achieved by following the guidance detailed at [Appendix 2](#) of the NHS England Complaints Policy.

## Complaints involving locum staff

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

## Record keeping

A record must be kept of:

- Date complaint received and confirmation sent to complainant;
- Area of complaint (e.g. reception, care received);
- Description of complaint;
- The steps and decisions taken;
- The outcome of each investigation;
- Date the Practice informed the complainant of the outcome;
- NHS Digital Area (e.g. medical, clinical, other)

All complaints records will be kept in line with the practice's Data Protection and Confidentiality Policies.

## Complaints review

Complaints received by Inspire Healthcare are to be reviewed regularly at staff meetings to ensure that learning points are shared and embedded throughout the team.

A review of all complaints will be conducted annually by the complaints manager to identify any patterns and themes.

A report on complaints is to be submitted to the NHS annually (year ending 31st March). This report is to:

- Specify the number of complaints received;
- Specify the number of complaints which it was decided were well-founded;
- Specify the number of complaints that have been referred to the Health Service Ombudsman;
- Summarise the subject matter of complaints received;
- Summarise any matters of general importance arising out of those complaints, or the way in which the complaints were handled;
- Summarise any matters where action has been or is to be taken to improve services
- As a consequence of those complaints.

This report is to be available to any person upon request.

## Summary

The care and treatment delivered by the practice 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.

This policy adheres to local and national guidance and policy including the Parliamentary and Health Care Ombudsman principles of Good complaint handling and the NHS Complaints process.

A complaint can be made by:

- Any person who receives or has received services provided by the organisation or a person acting on their behalf, provided consent has been received.
- Any person who is affected or likely to be affected by the action, omission, or decision of the organisation that is the subject of the complaint.

If it is felt that the person making the complaint on behalf of another person is not doing so in the best interests of the other person, the complaint must not be considered under the regulations and written notification must be given to the representative stating the reason for the decision.

In handling the complaint, we expect that the person making the complaint is entitled to:

- Have their complaint acknowledged and properly investigated.
- Be kept informed of progress and informed when there is an outcome.
- Be treated fairly, politely, and with respect throughout the process.
- Have confidence that their care and treatment will not be affected as a result of making a complaint.
- Have the opportunity to discuss the complaint with a manager.
- Expect appropriate action to be taken following the complaint.

According to the Parliamentary and Health Care Ombudsman the principles of Good complaint handling are as follows:

- [Getting it right.](#)
- [Being customer focused.](#)
- [Being open and accountable.](#)
- [Acting fairly and proportionately.](#)
- [Putting things right.](#)
- [Seeking continuous improvement.](#)

## Confidentiality

All complaints will be treated in the strictest confidence.

## Duty of candour

As a group we understand our responsibilities relating to the statutory duty of candour.

As such the registered person will notify the relevant person as soon as reasonably practicable after becoming aware that a notifiable safety incident has occurred.

This will be done in person by one or more representatives of the registered person (usually a GP and a practice manager).

As part of this we will provide an account, which will be accurate and will contain all the facts the registered person knows about the incident as at the date of the notification.

We will also advise the relevant person what further enquiries into the incident we believe to be appropriate to fully comply with our responsibilities under the duty of candour.

This will include an apology and will be recorded in a written record that will be kept securely by the registered person.



## Distribution

Employees will be made aware of this policy via TeamNet.

Patients will be made aware of this policy using patient leaflets and on the practice website.

## **Complaints procedure promulgation**

Across all sites there are prominently displayed notices in public areas detailing the complaints process. In addition, the process is included across our websites 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 above.

## Training

All staff will be given training on communication standards at induction and at regular intervals thereafter.

Any training requirements will be identified within an individual's Personal Development Reviews.

Training is available in the Training module within TeamNet.

## Equality and diversity impact assessment

In developing this policy, an equalities impact assessment has been undertaken. An adverse impact is unlikely, and on the contrary the policy has the clear potential to have a positive impact by reducing and removing barriers and inequalities that currently exist.

If, at any time, this policy is considered to be discriminatory in any way, the author of the policy should be contacted immediately to discuss these concerns

## **Access to medical records**

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 their 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 will 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.

A consent form should be sent if the person making the complaint is not the patient and there is a need to disclose confidential information within the response.

## Monitoring and reporting

Monitoring and reporting in relation to this policy are the responsibility of the Practice Manager.

The following sources will be used to provide evidence of any issues raised

- PALS.
- Complaints.
- Significant and learning events.

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Any incidents relating to communication standards will be monitored via incident reporting.

## **Summary of NHS legal and mandatory documentation**

NHS England. Complaints policy <https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf>

Department of Health and Social Care. NHS complaints guidance  
<https://www.gov.uk/government/publications/the-nhs-constitution-for-england/how-do-i-give-feedback-or-make-a-complaint-about-an-nhs-service>

## **Bibliography**

Department of Health and Social Care. NHS complaints guidance  
<https://www.gov.uk/government/publications/the-nhs-constitution-for-england/how-do-i-give-feedback-or-make-a-complaint-about-an-nhs-service>

NHS Improvement. Asking for advice or raising concerns with us. NHS staff or NHS foundation trust governors  
<https://improvement.nhs.uk/contact-us/asking-advice-raising-complaints-and-concerns/#h2-nhs-staff-or-nhs-foundation-trust-governors>

NHS England. Complaints policy  
<https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf>

NHS England. How to complain about the NHS  
<https://www.nhs.uk/using-the-nhs/about-the-nhs/how-to-complain-to-the-nhs/>

NHS England. Assurance of good complaints handling for primary care: a toolkit for commissioners  
<https://www.england.nhs.uk/publication/assurance-of-good-complaints-handling-for-primary-care-a-toolkit-for-commissioners/>

NHS Digital. Data on written complaints in the NHS 2017-18  
<https://digital.nhs.uk/data-and-information/publications/statistical/data-on-written-complaints-in-the-nhs/2017-18>

Parliamentary and Health Service Ombudsman. Principles of good complaint handling  
<https://www.ombudsman.org.uk/about-us/our-principles/principles-good-complaint-handling>