

BRIDGE SURGERY

COMPLAINTS PROCEEDURE

Introduction

The purpose of the policy is to ensure that all patients and/or their representatives who have the cause to complain about their care or treatment can have freely available access to the process and can expect a truthful and complete response including an apology where appropriate.

Patients have the right not to be discriminated against as the result of making a complaint and to have the outcome fully explained to them.

The process adopted in the practice is fully compliant with the relevant NHS Regulations (2009) and guidance available from defence organisations, doctors` representative bodies and the Care Quality Commission.

The general principle of the practice in terms of all complaints will be to regard it first and foremost as a learning process, however in appropriate cases and after full and proper investigation the issue may form the basis of a separate disciplinary action. In the case of any complaint with implications for professional negligence or legal action, the appropriate defence organisation must be informed immediately.

Patient Information

The practice will ensure that there are notices advising on the complaints process conspicuously displayed in all reception/waiting areas and that leaflets containing sufficient details for anyone to make a complaint are available without the need to ask. The practice website and any other public material (Practice Leaflet etc.) will similarly provide this information and also signpost the complainant to the help available through the NHS Complaints Advisory Service.

All staff with in the practice are expected to be aware of the process and to remember that everything that they do and say may present a poor impression of the practice and may prompt a complaint or even legal action. All Reception Staff will have knowledge and understanding of the complaints procedure and be able to obtain a complaints form in order to freely advise patients on first point of contact if required.

Complaints

A complaint can be made by or, with consent, on behalf of a patient (i.e. as a representative); a former patient, who is receiving or has received treatment at the Practice; or someone who may be affected by any decision, act or omission of the practice.

A Representative may also be

- 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
- someone acting on behalf of a patient/ former patient who lacks capacity under the Mental Capacity Act 2005 (i.e. who has Power of Attorney etc.) or physical capacity to make a complaint and they are acting in the interests of their welfare
- someone acting for the relatives of a deceased patient/former patient

In the event of a representative intending to make a complaint in the absence of patient if the patient is over the age of 16, Patient consent must first be obtained (see the bridge surgery consent protocol).

The practice has a duty to consider whether the representative is acting in the best interests of the patient and, in the case of a child, whether there are reasonable grounds for the child not making the complaint on their own behalf. In the event a complaint from a representative is not accepted, the grounds upon which this decision was based must be advised to them in writing.

Responsibilities

- The Practice will take all reasonable steps to ensure that its staff are aware of and comply with this Procedure.
- The nominated Complaints Manager [Wendy Goodchild] Practice Manager, will be responsible for managing the way in which we handle, record and respond to complaints in accordance with the Procedure.
- The nominated responsible person [Dr. Ghanem Tayara] - GP Partner, will be responsible for ensuring compliance with the Procedure, and in particular ensuring that action is taken if necessary in the light of the outcome of a complaint.
- The Practice will take all reasonable steps to ensure that patients are aware of:
 1. The Compliments, Comments and Complaints Procedure
 2. The roles of the Practice, the CCG and the Health Service Ombudsman with regard to patient complaints.

This includes the alternative facility for the patient to complain directly to NHS England instead of making their complaint to the Practice, as well as their right to escalate their complaint to the Health Service Ombudsman when they are dissatisfied with the initial response.

Time Limitations

The period for making a complaint is normally:

- (a) 12 months from the date on which the event which is the subject of the complaint occurred;
- or
- (b) 12 months from the date on which the event which is the subject of the complaint comes to the complainant's notice.

The practice has discretion to extend these limits if there is good reason to do so and it is still possible to carry out a proper investigation.

The collection or recollection of evidence, clinical guidelines or other resources relating to the time when the complaint event arose may also be difficult to establish or obtain. These factors may be considered as suitable reasons for declining a time limit extension, however that decision should be able to stand up to scrutiny.

Procedure

Complaint initiated on Practice Premises

- In the event that a member of staff notices that a patient appears to be distressed / upset on the premises, they should immediately contact Wendy Goodchild – Practice Manager, who will attempt to identify and resolve the problem personally at that time.
- In the event of a member of staff being advised that a patient wishes to make a complaint after a discussion with the practice manager the patient should be passed a copy of the current Practice Comments and Complaints Patient Information Leaflet including the complaint form (See appendix 1/2)
- This should be recorded in the patient's notes via a quick note or consultation note and a task sent to the practice manager to advise of the complaint progress.
- The patient should be asked if they intend to complete the form in this leaflet immediately, or if they intend to complete it later.
 1. If they intend to complete it there and then, the member of staff must ask if they require assistance in completing it – if so, a member of the reception team should be contacted to provide such assistance.
 2. If they intend to complete it later, the patient should be provided with an envelope.
 3. Whichever option is chosen, the patient will be assured that their complaint will be acknowledged within 5 working days from receipt of the form.

Receipt and acknowledgement of complaints

- All complaints, whether written or verbal will be recorded by Wendy Goodchild in the dedicated complaints record.
- All written complaints will be acknowledged in writing within 5 working days of receipt.
- If the Practice identifies that the complaint will involve an additional provider it will agree with that provider which organisation will take the lead in responding and communicating with the complainant.

Initial action upon receipt of a complaint

- All complaints, whether verbal or in writing must be forwarded immediately to the Practice Complaints Manager [Wendy Goodchild] - Practice Manager, or, in their absence to [Sharon Lakin] – reception manager.
- Where the complaint is made verbally, a written record will be made of the complaint and a copy of this will be provided to the complainant.
- A verbal or written acknowledgement of receipt of the complaint must be made not later than 5 working days after the day on which the Practice receives the complaint.
- This written acknowledgement will include:
 1. An offer to meet with the complainant, at a time and location convenient to them, to discuss the manner in which the complaint is to be handled and the response period within which the investigation of the complaint is likely to be completed and the full response is likely to be sent to the complainant.
 2. The name and contact details of the Practice member of staff who will be attending the meeting and investigating the complaint.

Initial Meeting

As much of the following information as possible will be obtained at this initial meeting, to enable their concerns of the complainant to be assessed correctly, resolved quickly if possible and build a good ongoing relationship with them:

- Ascertain how they would like to be addressed – as Mr, Mrs, Ms or by their first name.
- Ascertain how they wish to be kept informed about how their complaint is being dealt with – by phone, letter, email or through a third party such as an advocacy or support service.
 1. If it's by phone, ascertain the times when it is convenient to call and verify that they are happy for messages to be left on their answerphone.
 2. If it's by post, make sure that they are happy to receive correspondence at the address given.
- Check if consent is needed to access someone's personal records
- Check if they have any disabilities or circumstances that need to be taken account of.
- Ensure they are aware that they can request an advocate to support them throughout the complaints process, including at the first meeting.
- Systematically go through the reasons for the complaint so that there is a clear understanding why they are dissatisfied.
- Ascertain what they would like to happen as a result of the complaint (for example, an apology, new appointment, reimbursement for costs or loss of personal belongings or an explanation).
- Advise them at the outset if their expectations are not feasible or realistic.
- Formulate and agree a plan of action, including when and how the complainant will hear back from the Practice.

If it is considered that the matter can be resolved quickly without further investigation, the Practice will do so, providing the complainant agrees and there is no risk to other service users.

In the event the complainant does not accept the offer of a discussion, the Practice will itself determine the response period and notify the complainant in writing of that period.

Investigation and response

Complaints should be resolved within a “relevant period” i.e. 6 months from the day on which the complaint was received.

However, at any time during the “relevant period”, the Practice Complaints Manager or Responsible Person has the discretion to liaise with the complainant to extend this timeframe to a mutually agreeable date, provided it is still possible to carry out a full and proper investigation of the complaint effectively and fairly.

When an extension to the 6 months timeframe is being considered, it is essential that the Complaints Manager or Responsible Person takes into account that either party may not be able to remember accurately the essential details of the event / incident and also the feasibility of being able to obtain other essential evidence specific to the time of the event.

The Practice will investigate the complaint speedily and efficiently and as far as reasonably practicable, keep the complainant informed of the progress of the investigation.

After the investigation is completed, the Practice will compile a written report which incorporates:

- A summary of each element of the complaint
- Details of policies or guidelines followed
- A summary of the investigation
- Details of key issues or facts identified by an investigation
- Conclusions of the investigation: was there an error, omission or shortfall by your organisation? Did this disadvantage the complainant, and if so, how?
- What needs to be done to put things right
- An apology, if one is needed
- An explanation of what will happen next (e.g. what will be done, who will do it, and when)
- Information on what the person complaining should do if they are still unhappy and wish to escalate the complaint, including full contact information on the Health Service Ombudsman.

The Practice will send the complainant a response within the 6 months “relevant period”, signed by Wendy Goodchild – Practice Manager, the Practice Responsible Person. The response will incorporate:

- The written report
- Confirmation as to whether the Practice is satisfied that any necessary action has been taken or is proposed to be taken;
- A statement of the complainant’s right to take their complaint to the Parliamentary and Health Service Ombudsman.
- If the Practice does not send the complainant a response within the 6 month “relevant period”, it will
 1. Notify the complainant in writing accordingly and explain the reason why; and.
 2. Send the complainant in writing a response as soon as reasonably practicable after the 6 month “relevant period”.

In the event that the complaint has been incorrectly sent to the Practice, the Practice will advise the patient of this fact within 3 working days from its initial receipt and ask them if they want it to be forwarded to the correct organisation. If it is sent on, the Practice will advise the patient of the correct organisation’s full contact and address details.

Handling Unreasonable Complaints

In situations where the person making the complaint can become aggressive or unreasonable, the Practice will instigate the appropriate actions from the list below and will advise the complainant accordingly:

- Ensure contact is being overseen by an appropriate senior member of staff who will act as the single point of contact and make it clear to the complainant that other members of staff will be unable to help them.
- Ask that they make contact in only one way, appropriate to their needs (e.g. in writing).
- Place a time limit on any contact.
- Restrict the number of calls or meetings during a specified period.
- Ensure that a witness will be involved in each contact
- Refuse to register repeated complaints about the same issue.
- Do not respond to correspondence regarding a matter that has already been closed, only acknowledge it.
- Explain that you do not respond to correspondence that is abusive.
- Make contact through a third person such as a specialist advocate.
- Ask the complainant to agree how they will behave when dealing with your service in the future.
- Return any irrelevant documentation and remind them that it will not be returned again.
- When using any of these approaches to manage contact with unreasonable or aggressive people, provide an explanation of what is occurring and why.
- Maintain a detailed record of each contact during the ongoing relationship.

Escalation

In the event that a patient is dissatisfied with the Practice response to their complaint, they must escalate their complaint to the Health Service Ombudsman. The patient must be informed of:

- Their right to assistance with any complaint from the Patient Advice and Liaison Service (PALS); The Independent Complaints Advocacy Service (ICAS); Citizens Advice Bureaux and NHS Direct.
- The Practice Compliments, Comments and Complaints Patient Information Leaflet / Booklet and the Practice Website will be the prime information sources for implementing this Policy and will be kept up to date and be made freely available to all Patients.
- Patients will be encouraged to complain in writing where possible.
- All complaints will be treated in the strictest confidence in compliance with the bridge surgery confidentiality agreement and data security policy.
- Where a complaint investigation requires access to the patient's medical records and involves disclosure of this information to a person outside the Complaints Manager, will inform the patient or person acting on their behalf.
- The practice will maintain a complete record of all complaints and copies of all related correspondence. These records will be kept separately from patients' medical records

Annual Review of Complaints

In line with National Guidance, the Practice will supply the following information to the PCT:

- The number of complaints received;
- The issues that these complaints raised;
- Whether complaints have been upheld;
- The number of cases referred to the Ombudsman.

BRIDGE SURGERY
COMMENTS AND COMPLAINTS PROCEDURE

If you have a complaint or concern about the service you have received from the doctors or any of the personnel working in this practice, please let us know. We operate a practice complaint procedure as part of an NHS complaints system, which meets or exceeds national criteria.

How Can I Make A Complaint?

We hope that we can sort most problems out easily and quickly, often at the time they arise and with the person concerned. If you wish to make a formal complaint, please do so **AS SOON AS POSSIBLE** - ideally within a matter of a few days. This will enable us to establish what happened more easily. If doing that is not possible your complaint should be submitted within 12 months of the incident that caused the problem; or within 12 months of discovering that you have a problem. You should address your complaint in writing to the Practice Manager (you can use the attached form). He/She will make sure that we deal with your concerns promptly and in the correct way. You should be as specific and concise as possible.

How Can I Make A Complaint On Behalf Of Someone else ?

We keep strictly to the rules of medical confidentiality (a separate leaflet giving more detail on confidentiality is available on request). If you are not the patient, but are complaining on their behalf, you must have their permission to do so. An authority signed by the person concerned will be needed, unless they are incapable (because of illness or infirmity) of providing this. A Third Party Consent Form is provided below.

What Happens Next?

We will acknowledge your complaint within 3 working days and aim to have fully investigated within 10 working days of the date it was received. If we expect it to take longer we will explain the reason for the delay and tell you when we expect to finish. When we look into your complaint, we will investigate the circumstances; make it possible for you to discuss the problem with those concerned; make sure you receive an apology if this is appropriate, and take steps to make sure any problem does not arise again.

You will receive a final letter setting out the result of any practice investigations

What If I am Not Happy With The Way My Complaint Was Dealt With

If you remain dissatisfied with the outcome you may refer the matter to:

The Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP
Tel 0345 0154033
www.ombudsman.org.uk

The Complaint Form is on the next page >>>

BRIDGE SURGERY
THIRD-PARTY PATIENT CONSENT
(FOR PURPOSES OF COMPLAINTS ONLY)

IF YOU ARE COMPLAINING ON BEHALF OF A PATIENT OR YOUR COMPLAINT OR ENQUIRY INVOLVES THE MEDICAL CARE OF A PATIENT THEN THE CONSENT OF THE PATIENT WILL BE REQUIRED. PLEASE OBTAIN THE PATIENT'S SIGNED CONSENT BELOW.

Patient Full Name:	
Patient Date of Birth:	
Patient Address:	

Third Party (Enquirer/Complainant) Name:	
Address:	
Telephone Number: (please specify appropriate time to call)	
Relation to Patient	

I fully consent to my Doctor releasing information to, and discussing my care and medical records with the person named above in relation to this complaint only, and I wish this person to complain on my behalf.

Signed (Patient only)	
Date:	

This authority is for an indefinite period / for a limited period only (delete as appropriate)
 Where a limited period applies, this authority is valid until..... (insert date)