

## **RECTORY MEADOW SURGERY Complaints Procedure Policy**

This Policy explains the in-house complaints procedure at Rectory Meadow Surgery.

### **Responsibility for dealing with Complaints**

The Senior Partner is designated the "Responsible Person" who ensures that complaints are handled in compliance with the Regulations and that lessons learnt from complaints are implemented.

The Practice Manager is the designated complaints manager.

### **Information to Patients**

Patients are advised of the in-house complaints procedure in the surgery Practice Booklet, displayed in reception and given to all new patients upon registration. The Complaints procedure is also posted on the Practice website.

### **Patients' Rights**

The NHS Constitution sets out the following rights for Patients:

- Patients have a right to have any complaint made about NHS services dealt with efficiently and to have it properly investigated;
- Patients have the right to know the outcome of any investigation;
- Patients have a right to have their complaint taken to the Independent Health Service Ombudsman if not satisfied with the way their complaint has been dealt with by the NHS.

## **PROCEDURE**

### **Receiving of complaints**

The Practice may receive a complaint made by, or (with his/her consent) on behalf of a patient, or former patient, who is receiving or has received treatment at the Practice, or:

(a) where the patient is a child:

- by either parent, or in the absence of both parents, the guardian or other adult who has care of the child;
- by a person duly authorised by a local authority to whose care the child has been committed under the provisions of the Children Act 1989;
- by a person duly authorised by a voluntary organisation by which the child is being accommodated

(b) where the patient is incapable of making a complaint, by a relative or other adult who has an interest in his/her welfare.

All complaints, written and verbal will be recorded, and written complaints will be acknowledged in writing within 3 working days of receipt. Patients will be encouraged to complain in writing where possible. The reply to the patient should be made within 10 working days, or the patient should be provided with an update and an estimate timescale.

## **Period within which complaints can be made**

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.

Complaints should normally be resolved within 6 months. The practice standard will be 14 days for a response.

The Complaints Manager or lead GP has the discretion to extend the time limits if the complainant has good reason for not making the complaint sooner, or where it is still possible to properly investigate the complaint despite extended delay.

When considering an extension to the time limit it is important that the Complaints Manager or the GP takes into consideration that the passage of time may prevent an accurate recollection of events by the clinician concerned or by the person bringing the complaint. The collection 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 reason for declining a time limit extension.

## **Action upon receipt of a complaint**

Complaints may be received either verbally or in writing and must be forwarded to the Complaints Manager (or the lead GP if the Complaints Manager is unavailable), who must:

- acknowledge in writing within the period of 3 working days beginning with the day on which the complaint was made or, where that is not possible, as soon as reasonably practicable. Include an offer to discuss the matter in person. The discussion will include agreement with the patient as to how they wish the complaint to be handled.
- Advise the complainant of potential timescales and the next steps.
- Where the complaint is made verbally a written record will be taken and (if requested by the complainant) a copy will be provided.
- ensure the complaint is properly investigated. Where the complaint involves more than one organisation, the Complaints Manager will liaise with his/her counterpart to agree responsibilities and ensure that one coordinated response is sent;
- Where the complaint has been sent to the incorrect organisation, advise the complainant within 3 working days and ask them if they want it to be forwarded on. If it is sent on, advise the complainant of the full contact details;
- provide a written response to the complainant as soon as reasonably practicable ensuring that the complainant is kept up to date with progress as appropriate. Where a response is not possible within 10 working days provide an update report to the patient with an estimate of the timescale. Written responses will not be made where requested by the complainant and where the complaint is resolved informally through one telephone call.

## **Final Response**

This will include:

- A clear statement of the issues, investigations and the findings, giving clear evidence-based reasons for decisions if appropriate
- Where errors have occurred, explain these fully and state what will be done to put these right, or prevent repetition
- A focus on fair and proportionate the outcomes for the patient, including any remedial action or compensation

- A clear statement that the response is the final one, or that further action or reports will be sent later
- An apology or explanation as appropriate
- A statement of the right to escalate the complaint, together with the relevant contact detail

### **Second-Stage Complaints**

Should the complainant remain dissatisfied then they should be referred to the Health Service Ombudsman.

### **Record-Keeping**

The Practice Manager will keep a separate file for complaints records and these should not be filed in the patient's records.

### **Annual Review of Complaints**

The practice will establish an annual complaints report, incorporating a review of complaints received, along with any learning issues or changes to procedures which have arisen.

This will include:

- Statistics on the number of complaints received
- Justified / unjustified analysis
- Known referrals to the Ombudsman
- Subject matter / categorisation / clinical care
- Learning points
- Any changes to procedure, policies or care which have resulted