

## **COMPLAINTS POLICY**

<b>Person responsible for review of this Policy:</b>	<b>Management Team</b>
<b>Date of last review:</b>	<b>February 2016</b>
<b>Date of next review:</b>	<b>February 2017</b>

### **Purpose**

The NHS has a complaints procedure which is designed to be as patient focused as possible and investigate complaints efficiently and effectively. It is a two stage process, the first of which is called Local Resolution.

This policy sets out the approach of Hall Green Health to the handling of complaints. Hall Green Health seeks to provide the best service possible, but on occasions there may be the necessity for a patient to make a complaint.

It is hoped most issues can be resolved through local resolution or without patients having to make a formal complaint by having an informal discussion with the Team Leader of relevant clinician. Most concerns can be resolved quickly by front line team Leaders or the Patient Services Manager, but if this is not possible this policy outlines Hall Green Health's formal complaints policy. Where local resolution fails to achieve a satisfactory outcome, the complainant has the right to raise a formal complaint with NHS England.

This protocol will be reviewed *annually* to ensure that it remains effective and relevant.

### **Importance of Having a Complaints Procedure**

In spite of the efforts of all staff it is likely that a complaint will be made by a patient at some point. To reduce the anxiety and apprehension for both patients and staff it is crucial to have a procedure for handling complaints.

### **How Complaints Can Be Made**

Complaints may be received in writing or orally to the practice or to NHS England who will liaise with the practice. Where a patient is unable to communicate a complaint by either means on their own, then arrangements will be made to facilitate the giving of the complaint.

If a complaint or concern is an allegation or suspicion of abuse, it will be investigated following appropriate safeguarding policies and procedures.

Any allegations of fraud or financial misconduct will be referred to the National Fraud Reporting Line.

### **Persons Who Can Complain**

Complaints can be made by patients, former patients, someone who is affected, or likely to be affected, by the action, omission or decision of individuals working at the practice, or by a representative of a patient who is incapable of making the complaint themselves.

When a complaint is made on behalf of a child, there must be reasonable grounds for the complaint being made by the representative rather than the child and the complaint must be being made in the best interests of the child. If this is not the case, then written notification of the decision not to investigate the complaint must be sent to the representative.

Carers can make complaints on behalf of the person they care for where the person is a child, has asked the carer to act on their behalf or is not capable of making the complaint themselves. However Hall Green has the discretion to decide whether the carer is suitable to act as a representative in the individual's best interest.

## Time for Making a Complaint

Hall Green Health hope that most problems can be sorted out easily and quickly at the time they arise. However if this is not possible, we would like to know as soon as possible; ideally within a matter of days or a few weeks, so that we can establish what happened in a timely way. However, complaints can be made up to 12 months after the incident that gave rise to the complaint, or from when the complainant was made aware of it. Beyond this timescale it is at the discretion of the practice as to whether to investigate the matter.

## Confidentiality

Complaints will be handled in the strictest confidence and will be kept separately from patient medical records. Care will be taken that information is only disclosed to those who have a demonstrable need to have access to it.

## Persons for Handling Complaints

**Responsible Person:** The Executive Partner is responsible for the supervision of the complaints procedure and for making sure that action is taken in light of the outcome of any investigation.

**Complaints Manager:** The Management Team are responsible for the handling and investigation of complaints. The Managers will deal directly with administrative complaints, whilst the Executive Partner will assist the investigation of clinical complaints. Where appropriate the Manager will delegate the resolution of some complaints to the PA to the Executive Team or the Team Leaders if it is felt the concerns can be most effectively and efficiently resolved in this way.

## Initial Handling of Complaints

1) When a patient wishes to make an oral complaint then the Complaints Manager will arrange to meet the complainant in private to make an assessment of the complaint. The complainant will be asked whether they would like to be accompanied at this meeting. If the Complaints Manager is not available at the time of the complaint, the Receptionist will take as many details as the patient is willing to provide and reassure the patient that the Complaints Manager will contact them as soon as possible

2) The complaint will be resolved at this meeting if possible. If the complaint is resolved then it should be recorded in the complaints register and the implicated staff member will be told about the details of the complaint.

3) If the complaint can not be resolved the patient is to be asked to make a written complaint. If necessary the Complaints Manager will write down the complaint on their behalf verbatim. A complaints form is available for patients to record details of their complaints if they wish to do so. The written complaint will be recorded in the complaints register.

4) The written complaint will be acknowledge in writing within 3 working days, stating a proposed action plan for how the complaint will be handled and the anticipated date by which the complainant can expect a full response.

## **Investigation of Complaint**

1) The Manager/Team Leader will discuss the complaint with the implicated member of staff to establish their recollection of events.

2) If the complaint is against the Manager/Team Leader, then the complaint will be referred to the Executive Partner for investigation.

3) The complainant will receive a written response and be invited to a meeting to discuss the complaint with the Manager/Team Leader if they wish to discuss the outcome of the complaint. If a meeting is convened, the complainant will be asked if they would like to be accompanied at this meeting. If appropriate and with prior consent from the complainant the staff member complained about can be present at that meeting. Minutes will be taken.

4) The timescale to respond (maximum of 6 months) is to be agreed with the complainant at that meeting and documented in the complaints register.

5) The full response to the complainant will be signed by the Executive Partner if it is a clinical complaint or the Complaints Manager if the complaint is of an administrative nature, and include:

- an explanation of how the complaint was considered
- the conclusions reached in relation to the complaint and any remedial action that will be needed;
- confirmation as to whether the practice is satisfied that any action has been taken or will be taken.

6) If it is not possible to send the complainant a response in the agreed period a letter will be written to the complainant explaining why. Then a response is to be sent to the complainant as soon as is reasonably practicable.

7) If the complainant is dissatisfied with the handling of the complaint then they will be advised about the national customer call centre, which has been established by NHS England for patients who wish to escalate a complaint if has not been resolved at the local level. The national customer call centre will triage calls to determine if they require further investigation. If they do, they will be followed up by a case manager; linking with local staff. The telephone number for the customer call centre is 0300 3112233. Alternatively, patients may wish to contact the Health Service Ombudsman about their complaint who can be contacting by contacting the Parliamentary & Health Service Ombudsman, Millbank Tower, Millbank, London SW1P 4 QP, Tel: 0345 015 4033 or e.mail: [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk).

## **Recording Complaints and Investigations**

A record must be kept of:

- each complaint received;
- the subject matter of the complaint;
- the steps and decisions taken during an investigation;
- the outcome of each investigation;
- when the practice informed the complainant of the response period and any amendment to that period;
- whether a report of the outcome of the investigation was sent to the complainant within the response period or any amended period.

## Review of Complaints

The management of complaints at Hall Green Health is used as a learning tool in the practice with individual complaints being discussed as significant events where necessary or appropriate. All complaints will be anonymised and analysed on an annual basis for discussion at a Partner's meeting.

The Complaints Manager will notify the Responsible Person of any concerns about a complaint leading to non-compliance. The Responsible Person will identify ways for the practice to return to compliance.

A report on complaints is to be submitted to the CCG (or replacement body) 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 which the practice has been informed 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.
- be available to any person on request.

## Publicity

The practice's arrangements for dealing with complaints and how further information about these arrangements may be obtained by patients will be publicised by the Complaints Manager. How to contact independent advocacy services and the right of patients to approach CCG with complaints will also to be publicised.

## Unreasonable

When faced by an unreasonable complainant staff will take action in accordance with page 34 of the DH's *Listening, responding, improving: a guide to better customer care* guidance.