**Complaints Procedure**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Version:** | **Review date:** | **Edited by:** | **Approved by:** | **Comments:** |
| 1a | Dec 2020 | Elaine Luxford |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Table of contents**

[1 Introduction 3](#_Toc57715480)

[1.1 Policy statement 3](#_Toc57715481)

[1.2 Status 3](#_Toc57715482)

[1.3 KLOE 3](#_Toc57715483)

[1.4 Training and support 5](#_Toc57715484)

[2 Scope 5](#_Toc57715485)

[2.1 Who it applies to 5](#_Toc57715486)

[2.2 Why and how it applies to them 5](#_Toc57715487)

[3 Guidance 5](#_Toc57715488)

[3.1 Legislation 5](#_Toc57715489)

[3.2 Definition of a complaint 6](#_Toc57715490)

[3.3 Complaints procedure promulgation 6](#_Toc57715491)

[3.4 Responsible person 6](#_Toc57715492)

[3.5 Complaints manager 6](#_Toc57715493)

[3.6 Complainant options 6](#_Toc57715494)

[3.7 Timescale 7](#_Toc57715495)

[3.8 Response times 7](#_Toc57715496)

[3.9 Route of a complaint 8](#_Toc57715497)

[3.10 Verbal complaints 8](#_Toc57715498)

[3.11 Written complaints 9](#_Toc57715499)

[3.12 Complaints advocates 9](#_Toc57715500)

[3.13 Investigating complaints 9](#_Toc57715501)

[3.14 Final formal response to a complaint 10](#_Toc57715502)

[3.15 Confidentiality in relation to complaints 11](#_Toc57715503)

[3.16 Persistent and unreasonable complaints 11](#_Toc57715504)

[3.17 Complaints citing legal action 11](#_Toc57715505)

[3.18 Complaints involving external staff 11](#_Toc57715506)

[3.19 Complaints involving locum staff 12](#_Toc57715507)

[3.20 Logging and retaining complaints 12](#_Toc57715508)

[3.21 Summary 12](#_Toc57715509)

[Annex A – Complaint handling desktop aide-memoire 13](#_Toc57715511)

[Talk to us 16](#_Toc57715514)

[Who to talk to 16](#_Toc57715515)

[Time frames for complaints 16](#_Toc57715516)

[Investigating complaints 16](#_Toc57715517)

[Confidentiality 16](#_Toc57715518)

[Third party complaints 16](#_Toc57715519)

[Final response 16](#_Toc57715520)

[Annex B – Acknowledgement of a complaint letter (example) 18](#_Toc57715521)

[Annex C – Final response to a complaint letter (example) 19](#_Toc57715522)

# Introduction

## Policy statement

The purpose of this document is to ensure that all staff are aware of the complaints procedure within Lime Tree Surgery, affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received by the organisation.

## Status

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

## KLOE

The Care Quality Commission would expect any primary care organisation to have a policy to support this process and this should be used as evidence of compliance against CQC Key Lines of Enquiry (KLOE).**1**

Specifically, Lime Tree Surgery will need to answer the CQC key questions on “Safe”, “Responsive” and “Well-Led”.

The following is the CQC definition of Safe:

*By safe, we mean people are protected from abuse\* and avoidable harm. \*Abuse can be physical, sexual, mental or psychological, financial, neglect, institutional or discriminatory abuse*.

|  |  |
| --- | --- |
| **CQC KLOE S6** | Are lessons learned and improvements made when things go wrong? |
| **S6.1** | Do staff understand their responsibilities to raise concerns, to record safety incidents, concerns and  near misses, and to report them internally and externally, where appropriate? |
| **S6.2** | What are the arrangements for reviewing and investigating safety and safeguarding incidents and events when things go wrong?  Are all relevant staff, services, partner organisations and people who use services involved in reviews and investigations? |
| **S6.3** | How are lessons learned and themes identified and is action taken as a result of investigations when things go wrong? |
| **S6.4** | How well is the learning from lessons shared to make sure that action is taken to improve safety?  Do staff participate in and learn from reviews and investigations by other services and organisations? |
| **S6.5** | How effective are the arrangements to respond to relevant external safety alerts, recalls, inquiries, investigations or reviews? |

The following is the CQC definition of Responsive:

*By responsive, we mean that services meet people’s needs.*

|  |  |
| --- | --- |
| **CQC KLOE R4** | How are people’s concerns and complaints listened and responded to and used to improve the quality of care? |
| **R4.1** | How well do people who use the service know how to make a complaint or raise concerns and how comfortable do they feel doing so in their own way?  How are people encouraged to make a complaint, and how confident are they to speak up? |
| **R4.2** | How easy is it for people to use the complaints process or raise a concern?  Are people treated compassionately and given help and support, by using accessible information or protection measures, if they need to make a complaint? |
| **R4.3** | How effectively are complaints handled, including ensuring openness and transparency, confidentiality,  regular updates for the complainant, a timely response and explanation of the outcome, and a formal record? |
| **R4.4** | How are people who raise concerns or complaints protected from discrimination, harassment or disadvantage? |
| **R4.5** | To what extent are concerns and complaints used as an opportunity to learn and drive continuous improvement? |

The following is the CQC definition of Well-Led:

*By well-led, we mean that the leadership, management and governance of the organisation assures the delivery of high-quality and person-centred care, supports learning and innovation and promotes an open and fair culture.*

|  |  |
| --- | --- |
| **CQC KLOE W3** | Is there a culture of high-quality, sustainable care? |
| **E3.5** | Does the culture encourage openness and honesty at all levels within the organisation, including with people who use services, in response to incidents?  Do leaders and staff understand the importance of staff being able to raise concerns without fear of retribution and is appropriate learning and action taken as a result of concerns raised? |
| **CQC KLOE W7** | Are the people who use services, the public, staff and external partners engaged and involved  to support high-quality sustainable services? |
| **W7.1** | Are people’s views and experiences gathered and acted on to shape and improve the services and culture?  Does this include people in a range of equality groups? |
| **W7.5** | Is there transparency and openness with all stakeholders about performance? |

## Training and support

The organisation will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

# Scope

## Who it applies to

This document applies to all employees of the organisation and other individuals performing functions in relation to the organisation such as Additional Roles Reimbursement Scheme (ARRS) employees,[[1]](#footnote-1) agency workers, locums and contractors.

## Why and how it applies to them

All staff at Lime Tree Surgery are to be fully conversant with this policy and are to understand that all patients have a right to have their complaint acknowledged and investigated properly. Lime Tree Surgery takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner.

We will maintain communication with the complainant (or their representative) throughout, ensuring they know the complaint is being taken seriously.

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents). Consideration has been given to the impact this policy might have with regard to the individual protected characteristics of those to whom it applies.

# Guidance

## Legislation

Every NHS facility has 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.

This organisation adopts a patient-focused approach to complaint handling in accordance with the [National Health Service England Complaints Policy (2017)](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) whilst also conforming to guidance detailed in:

1. [Good Practice Standards for NHS Complaints Handling 2013](https://www.noeccn.org.uk/resources/Documents/Education%20Group/Resources/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf)
2. [Parliamentary & Health Service Ombudsman’s Principles of Good Complaints Handling 2009](https://www.ombudsman.org.uk/sites/default/files/page/0188-Principles-of-Good-Complaint-Handling-bookletweb.pdf)
3. [My Expectations 2014](https://www.ombudsman.org.uk/sites/default/files/Report_My_expectations_for_raising_concerns_and_complaints.pdf)
4. [The NHS Constitution](https://www.gov.uk/government/publications/the-nhs-constitution-for-england)
5. [Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16](https://www.cqc.org.uk/sites/default/files/20150510_hsca_2008_regulated_activities_regs_2104_current.pdf)

## Definition 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.[[2]](#footnote-2)

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

## Complaints procedure promulgation

Lime Tree Surgery has prominently displayed notices in waiting areas detailing the complaints process. In addition, the process is included on the organisation website 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 in 3.1.

## Responsible person

At Lime Tree Surgery, the responsible person is the Managing Partner. They are responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint.

|  |
| --- |
|  |

## Complaints manager

At Lime Tree Surgery, the complaints manager is Elaine Luxford, Complaints Manager. They are responsible for managing all complaints procedures and must be readily identifiable to service users. The responsible person and complaints manager can be the same person.[[3]](#footnote-3)

## Complainant options

The complainant, or their representative, can complain about any aspect of care or treatment they received at this organisation to:

1. This organisation via the complaints manager
2. NHS England: Telephone 03003 112233, email [england.contactus@nhs.net](mailto:england.contactus@nhs.net) or in writing: NHS England, PO Box 16738, Redditch, B97 9PT. Patients can talk to NHS England in British Sign Language (BSL) 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 the complainant becomes 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 HR/Complaints Manager.

## Response times

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager at Lime Tree Surgery will provide an initial response to acknowledge any complaint within three working days after the complaint is received. It should be noted that three working days is the maximum permitted under the NHS E Complaints Policy.

All complaints are to be added to the complaints log in accordance with [section 3.20](#_Logging_and_retaining).

The NHS E policy (2017) states that the complainant can expect that:

* They will be kept up to date with the progress of their complaint.
* If a case has passed the 40 working day target (or the timescale agreed with the complainant if different), thereafter they (and their advocate if relevant) should receive an update every 10 working days after the target date has been surpassed. This could be by telephone, email or letter but the format should be agreed with the complainant
* They can expect to receive a quality response with assurance that action has been taken to prevent a recurrence
* They will be informed of any learning

The MDU advises that, in addition to regular updates, a response or decision should be made within six months. If it extends beyond this time then the complainant must be advised.[[4]](#footnote-4)

The complaints manager will advise the complaints procedure to the complainant or their representative. In many cases, a prompt response and, if the complaint is upheld, an explanation and an apology will suffice and will prevent the complaint from escalating (an apology does not constitute an admission of organisational weakness).

## Route of a complaint

Patients can opt to complain either verbally or in writing. No matter what the cause of the complaint, all staff are to offer empathy when entering into discussions with the complainant. In accordance with Regulation 16[[5]](#footnote-5), all staff at Lime Tree Surgery must fully understand the complaints process.

The complainant should be provided with a copy of the organisation leaflet detailing the complaints process at [Annex D](#_Annex_E_–) and they should be advised that the process is a two-stage process as detailed below.

**Stage 1**

The complainant may make a complaint to either the organisation or to NHS England.

**Stage 2**

If not content with either response following a full investigation, the complainant may then escalate this to the Parliamentary Health Service Ombudsman (PHSO).

**Important:**  Complaints are not escalated to NHS E following the organisation’s response. A complaint made to either the organisation or NHS E will escalate to the 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 in accordance with [section 3.20](#_Logging_and_retaining).

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 meetings.

If the matter demands immediate attention, the complaints manager should be contacted who may then offer the patient an appointment or may offer to see the complainant at this stage.

Staff are reminded that when internally escalating any complaint to the complaint’s manager then a full explanation of the events leading to the complaint is to be given to allow any appropriate response.

## Written complaints

Whilst this is not the preferred option due to the timescales involved in compiling a letter of complaint and any subsequent response for both the patient and the complaints manager, an alternative option can be offered 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 [section 3.8](#_Response_times).

## Complaints advocates

Details of how patients can complain and also how to find independent NHS complaints advocates are to be detailed within the organisation leaflet at [Annex D](#_Annex_D_–).

Additionally, the patient should be advised that the local Healthwatch, [helpdesk@healthwatchwestsussex.co.uk](mailto:helpdesk@healthwatchwestsussex.co.uk) 0300 012 0122 can help to find an independent NHS complaints advocacy services in the area.

Independent advocacy services include:

1. POhWER – a charity that helps people to be involved in decisions being made about their care. POhWER’s support centre can be contacted via 0300 456 2370
2. SeAp Advocacy – gives advocacy support. Call 0330 440 9000 for advice or text SEAP to 80800
3. Age UK – may have advocates in the area. Visit their website or call 0800 055 6112
4. Local councils can offer support in helping the complainant to find an advocacy service. Visit <https://www.gov.uk/find-your-local-council>

## Investigating complaints

Lime TreeSurgery will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance.

This organisation will adhere to the following standards when addressing complaints:

1. 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 are established at the outset.
2. The complaint undergoes initial assessment and any necessary immediate action is taken. A lead investigator is identified.
3. 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.
4. The investigator reviews, organises and evaluates the investigative findings.
5. The judgement reached by the decision maker is transparent, reasonable and based on the evidence available.
6. The complaint documentation is accurate and complete. The investigation is formally recorded with the level of detail appropriate to the nature and seriousness of the complaint.
7. Both the complainant and those complained about are responded to adequately.
8. The investigation of the complaint is complete, impartial and fair.
9. The complainant should receive a full response or decision within six months following the initial complaint being made. If the complaint is still being investigated, then this would be deemed to be a reasonable explanation for a delay.

## 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 as per NHS Resolution (see extract)[[6]](#footnote-6):

* Be professional, well thought out and sympathetic
* Deal fully with all the complainant’s complaints
* Include a factual chronology of events which sets out and describes every relevant consultation or telephone contact, referring to the clinical notes as required
* Set out what details are based on memory, contemporaneous notes or normal practice
* Explain any medical terminology in a way in which the complainant will understand
* Contain an apology, offer of treatment or other redress if something has gone wrong
* The response should also highlight what the organisation has done, or intends to do, to remedy the concerns identified to ensure that the problem does not happen again
* The response should inform the complainant that they may complain to the

Parliamentary and Health Service Ombudsman (PHSO) if they remain dissatisfied

Consideration must be given to the fact that the response is likely to be read by the complainant’s family and possibly legal advisers.

A full explanation and apology may assist in avoiding a claim. However, if a

patient subsequently brings a claim for compensation, the complaint file is likely to

be used in those proceedings so it is important that any response to a complaint is

clear and well explained and can be supported by evidence.

The full and final response should ordinarily be completed within six months, although should it be likely that this will go beyond this timescale, the complaints manager will contact the complainant to update and give a projected completion timescale.

A template example of the final response letter can be found at [Annex F](#_Annex_I_–).

## Confidentiality in relation to complaints

Any complaint is investigated with the utmost confidence and all associated documentation will be held separately from the complainant’s medical records. Complaint confidentiality will be maintained, ensuring only managers and staff who are involved in the investigation know the particulars of the complaint.

## Persistent and unreasonable complaints

The management of persistent and unreasonable complaints at Lime Tree Surgery is achieved by following the guidance detailed at [Appendix 2](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) of the NHS England Complaints Policy.

## Complaints citing legal action

Should any complaint be received and the content states that legal action has been sought then, prior to any response, consideration should be given to contacting the defence union for guidance.

## Complaints involving external staff

Should a complaint be received about a member of another organisation’s staff, then this is to be brought to the attention of the complaints manager at the earliest opportunity. The complaints manager will then liaise with the other organisation’s manager.

## Complaints involving locum staff

Lime Tree Surgery will ensure that all locum staff, be it GPs, nurses or administrative staff, are aware of both the complaints process and that they will be expected to partake in any subsequent investigation, even if they have left the organisation (keeping in mind the 12-month time frame to complain).

Locum staff must receive assurance that they will be treated equally and that there is no difference between locum staff, salaried staff or partners.

## Logging and retaining complaints

All organisations will need to log their complaints and retain as per the [Records Retention Schedule](https://practiceindex.co.uk/gp/forum/resources/record-retention-schedule.767/).

All evidence of complaints is compiled within the [KO14b Complaints Log Toolkit](https://practiceindex.co.uk/gp/forum/resources/ko14b-complaints-log-toolkit.1364/).

Evidence required includes:

1. Logging, updating and tracking for trends and considerations
2. Details of all dates of acknowledgement, holding and final response letters and the timely completion of all correspondence relating to the complaint
3. Complies with the complaints in the categories that are required to complete the annual KO14b submission[[7]](#footnote-7)

This data is submitted by Elaine Luxford, Complaints Manager to NHS E within the KO14b complaints report by 31 March annually.

## Summary

The care and treatment delivered by Lime Tree Surgery 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 organisation is able to investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learned and ultimately improving service delivery.

## Annex A – Complaint handling desktop aide-memoire

|  |  | |
| --- | --- | --- |
|  | |

## Annex B – Acknowledgement of a complaint letter (example)

[Organisation]

[Address]

[Complainant’s name]

[Complainant’s address]

[Date]

Reference [Enter]

Dear [name],

**Acknowledgment of complaint**

Thank you for your letter [dated] with regard to your complaint. We are sorry that you have felt that the standard of service at [insert organisation name] warranted your complaint.

Please be advised that, whilst complaints are infrequent, when received we will thoroughly investigate and will always manage these in line with the NHS contract.

We are aware that you would wish for a response as soon as possible and we will endeavour to conduct a full and thorough investigation in the shortest period of time possible. However, please be advised that this may take some time and, whilst we do hope to respond more quickly, current NHS complaints guidance allows this to be upwards of six months. If, for whatever reason, the investigation is likely to exceed this timescale, we will contact you and update you with all progress to date.

Please find enclosed a copy of the Complaints Leaflet. This details what you should expect, a list of advocacy services should you need any support and also what to do should you not be content with the findings of this complaint.

Yours sincerely,

[Signed]

[Name]

[Role]

Enc: Complaints Leaflet

## Annex C – Final response to a complaint letter (example)

[Organisation]

[Address]

[Complainant’s name]

[Complainant’s address]

[Date]

Reference [Enter]

Dear [name],

**Final response to complaint**

Further to my letter dated [enter], please see below the findings following a full investigation into your complaint dated [insert].

[Detail, although the response is to include the following as per section 3.14]

1. Be professional, well thought out and sympathetic
2. Deal fully with all the complainant’s complaints
3. Include a factual chronology of events which sets out and describes every relevant consultation or telephone contact, referring to the clinical notes as required
4. Set out what details are based on memory, contemporaneous notes or normal practice
5. Explain any medical terminology in a way in which the complainant will understand
6. Contain an apology, offer of treatment or other redress if something has gone wrong. The response should also highlight what the organisation has done, or intends to do, to remedy the concerns identified to ensure that the problem does not happen again.

If you are not satisfied with this response, you have the right to take your complaint to NHS England who can tell you more about the NHS complaints procedure and may be able to help you resolve your complaint. Contact their helpline on 0300 311 2233 or email [England.contactus@nhs.net](mailto:England.contactus@nhs.net)

As a last resort if you are not happy with the response from either the practice or NHS England, you can refer your complaint to the Health Service Ombudsman. The Ombudsman is independent of the government and the NHS. You can contact their helpline on 0345 0154033. Email [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk) Fax 0300 0614000. Postal address Milbank Tower, LONDON, SW1P 4QP. Further information about the Ombudsman is available at [www.ombudsman.org.uk](http://www.ombudsman.org.uk)

Your local Healthwatch can help you find an independent NHS complaints advocacy in your area. Contact them [helpdesk@healthwatchwestsussex.co.uk](mailto:helpdesk@healthwatchwestsussex.co.uk) 0300 012 0122.

Yours sincerely,

1. [Network DES Contract specification 2020/21](https://www.england.nhs.uk/wp-content/uploads/2020/03/network-contract-des-specification-pcn-requirements-entitlements-2020-21.pdf) [↑](#footnote-ref-1)
2. [NHS(E) Complaints Policy 2017](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) [↑](#footnote-ref-2)
3. [A Guide to Effective Complaints Resolution England](https://www.medicalprotection.org/docs/default-source/pdfs/Booklet-PDFs/eng-med-complaints-booklet.pdf?sfvrsn=4) [↑](#footnote-ref-3)
4. [mdujournal.themdu.com](https://mdujournal.themdu.com/issue-archive/summer-2019/managing-patient-complaints) [↑](#footnote-ref-4)
5. [Heath & Social Care Act 2008 Regulation 16](http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints#guidance) [↑](#footnote-ref-5)
6. [https://resolution.nhs.uk](https://resolution.nhs.uk/wp-content/uploads/2019/03/CNSGP-Responding-to-complaints-1.pdf) [↑](#footnote-ref-6)
7. <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/primary-care-gp-and-dental-complaints-collection-ko41b> [↑](#footnote-ref-7)