

Policy: Complaints Policy			
Review Date: June 24 Next Review: June 26			
Policy Manager	Nikki Paxman	Signature	Date
Partner:	Dr Esther Sterrenburg	Signature	Date

Introduction

This procedure sets out the Practice's approach to the handling of complaints and is intended both as an internal guide that should be made readily available to all staff, and as a summary setting out the approach to complaint handling that should be available to view on the practice website.

From 1st April 2009, a common approach to the handling of complaints was introduced across health and adult social care. In August 2015 the BMA published "The NHS complaints procedure: guidance for primary care". The LSMP complaints procedure has been influenced by this document and meets the mandatory requirements of our PMS contract.

Policy

The Practice will take reasonable steps to ensure that patients are aware of:

- The complaints procedure.
- The time limit for resolution.
- How it will be dealt with.
- Who will deal with it?
- Lead GP handling complaints.
- Their right of appeal
- Further action they can take if not satisfied.
- The fact that any issues will not affect any ongoing treatment from the surgery and they will continue to be treated.

Procedure

Receiving of complaints

The Practice may receive a complaint made by 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 authorized by a local authority to whose care the child has been committed under the provisions of the Children Act 1989.
- by a person duly authorized by a voluntary organization 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.

If the complainant is not the patient, written consent needs to be obtained from the patient before the complaint can be processed.

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.

Beyond this timescale it's at the practice's discretion to investigate the matter. Complaints should normally be resolved within 6 months. 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 the extended delay. For example, longer periods of complaint timescales may apply to specific clinical areas.

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 reasons for declining a time limit extension.

Action upon receipt of a complaint

- It is always better to try and deal with an oral complaint at the earliest opportunity, and if the concerns are resolved within 24 hours no written response is required.
- If it is not possible or the outcome is not satisfactory the patient should be asked to put their concerns in writing. This ensures that each side is aware of the issues for resolution. If the patient refuses or is unable to put in writing, the surgery will check that the patient is happy with the complaint's detail.
- All written complaints are shared with the Complaints Team which includes the Operations Manager and Dr Esther Sterrenburg, GP Partner and Complaints Lead.
- Complaints are handled by Dr Julianne Lyons in the absence of Dr Esther Sterrenburg or if a complaint is received about a member of the Complaints Team.
- Within three working days of receipt of a written complaint an acknowledgment will be sent to the complainant that includes the following:
 - Contact details for the complainant.

- Details of an advocacy service
 - Estimated time frame by which the complainant can expect to receive outcome of the investigation (this is usually within 4 weeks, and the complainant will be kept informed if there was any delay)
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- The investigation of a complaint will include the following elements where appropriate: a detailed review of the clinical records, interviewing relevant staff members to obtain their account of events, review of relevant policies and protocols.
 - Clinicians will be informed of the complaint in detail as soon as possible after the Practice receives the complaint; this will be via email on the morning of one of their working days.
 - All staff members named in a complaint are expected to provide a written reflection. This will form part of the complaints file and the complainant potentially may ask to see this.
 - If a GP is named in a complaint, they will be asked to write a response to the complainant, this provides added value and is usually appreciated by the complainant, helping to achieve reconciliation.
 - All clinical staff are encouraged to access support from their medical legal defense union and share all communications with the defense team.
 - It may be that outside sources will need to be contacted and if that is the case then a patient consent form will need to be signed to make such a request.
 - Where appropriate the complaint and associated learning/changes in practice will be discussed anonymously at an LSMP Complaints and Significant Events meeting.
 - Members of staff will be asked to discuss the complaint and their reflections and any learning, at their annual appraisal and PDR.

Unreasonable Complaints

Where a complainant becomes aggressive or, despite effective complaint handling, unreasonable in their promotion of the complaint, some or all of the following formal provisions will apply and will be communicated to the patient:

- The complaint will be managed by one named individual at senior level who will be the only contact for the patient
- Contact will be limited to one method only (e.g., in writing)
- Place a time limit on each contact.
- The number of contacts in a time period will be restricted.
- A witness will be present for all contacts.
- Repeated complaints about the same issue will be refused.
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behavior standards.
- Return irrelevant documentation.

- Keep detailed records.

Where a complaint is directed to LSMP, but relates to secondary care, or a third party, LSMP will inform the complainant of the most appropriate route to follow.

Final Response Letter

The final response letter will include:

- An apology where appropriate or some acknowledgement of distress
- A summary of the main issues they have raised in their complaint
- The action that was taken to investigate the complaint and the outcome of the investigation
- A summary of the reflections provided by individual staff members named in the complaint
- A clear explanation in response to each of the issues raised
- What action the practice is taking as a result of the complaint to reduce the risk of a similar occurrence
- An invitation to meet or contact the practice again if the complainant has further questions
- If at that point resolution is still not achieved, then either side can refer the matter to the Parliamentary Health Service Ombudsman.

The final response letter is drafted by the GP who received the complaint, in collaboration with the complaints team. If the complaint relates to any other staff group, or refers to multiple GPs, the final response letter is written by the complaints team who will liaise with the staff concerned and any suggestions for the wording of the letter, will be considered.

The standard wording used in every final response letter will be:

If you are ultimately not happy with how we have dealt with your complaint, and would like to take the matter further, you can contact the Parliamentary and Health Service Ombudsman who make final decisions on unresolved complaints about the NHS in England. It is an independent service which is free for everyone to use. To take your complaint to the Ombudsman, visit <http://www.ombudsman.org.uk/make-a-complaint> or call 0345 015 4033.

Annual Review of Complaints

All complaints are discussed after anonymizing in quarterly practice-based complaint and significant event meetings, to encourage learning and review processes and protocols where required. The practice establishes an annual complaints report, incorporating a review of complaints received, along with any examples of learning and changes to procedures which have arisen. This report is made available to any person who requests it and may form part of the Freedom of Information Act Publication Scheme ^[1].

Confidentiality

All complaints must be treated in the strictest confidence.

Where the investigation of the complaint requires consideration of the patient's medical records, the Complaints Manager must inform the patient or person acting on his/her 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 must 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.

Complaints made directly to the NHS West Yorkshire Integrated Care Board

We hope that you will use our Practice Complaints Procedure if you are unhappy. We believe this will give us the best chance of putting right whatever has gone wrong and an opportunity to improve the services we provide. We hope that most problems can be sorted out easily and quickly when they arise.

However, if you feel uncomfortable raising your concerns or complaint directly with us or if you believe this is not appropriate, you can raise your complaint with the ICB who commission and pay for the NHS services you use at:

Email: at wycb.pals@nhs.net

Telephone: [01924 552150](tel:01924552150)

In writing: West Yorkshire Integrated Care Board Complaints Team, White Rose House
West Parade, Wakefield WF1 1LT

Please note: If you have raised your concerns or complaint with us already, the West Yorkshire ICB will not be able to reconsider the same concerns.

You can find more information on how to make a complaint to the ICB on their website:
<https://www.westyorkshire.icb.nhs.uk/contact/comments-concerns-compliments>.

The complainant will be kept up to date with the progress of their complaint by NHS West Yorkshire Integrated Care Board, in their preferred method of communication (e.g. by email, telephone or written letter). If the complainant is not satisfied with the outcome, then they will have the right to progress this further based on the complaints procedure that NHS England will provide for them during this process.

As part of the guidance on protecting data and personal information, if the complaint involves several organizations, then the complainant will be asked for their permission to share or forward a complaint to another body, and further consent will be required to forward the complaint to any provider.

Alternative Options

NHS Complaints Advocacy is a free and confidential service available to anyone who wants support to make a complaint to the NHS.

Their website is <https://nhscomplaintsadvocacy.org/>

If the complainant feels that a complaint has not been resolved they can contact the Health Service Ombudsman to request an independent review.

The Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
London SW1P 4QP
Telephone: 0345 015 4033
Email: phso.enquiries@ombudsman.org.uk
Web: www.ombudsman.org.uk to NHS England

Resources

Complaint Form ^[1]
Complaints Brochure (Patient information) ^[1]
Complaints Consent Form – third party ^[1]

The Parliamentary and Health Service Ombudsman – Principles of Good Complaint Handling (2008)

The Health Act – 2009

GMC, Openness and Honesty When Things Go Wrong: The Professional Duty of Candour

Medical Protection Society – A Guide to Effective Complaints Resolution

PMS Agreement 2015/2016

BMA guidance August 2015 - complaints in primary care
www.bma.org.uk/advice/employment/raising-concerns/complaints-in-primary-care

How to make a complaint about an NHS service;
<http://www.nhs.uk/chq/pages/1084.aspx?categoryid=68>

NHS England

How to Complain;
<https://www.england.nhs.uk/contact-us/complaint/>

NHS England Complaints policy;
<http://www.england.nhs.uk/wp-content/uploads/2015/01/nhse-complaints-policy.pdf>

NHS England Complaints Procedures;

<http://www.england.nhs.uk/wp-content/uploads/2015/01/nhs-complaints-procedures.pdf>