

## **PRACTICE COMPLAINTS PROCEDURE**

**Policy started: - April 2004**

**Reviewed: - July 2023**

**Reviewed by Mandy Dobson (Assistant Practice Manager)**

**Next review Date: July 2024**

The named complaints manager is Stuart Wright, Practice Manager. The responsible person for complaints is Dr Katharine Saxby, Senior GP Partner.

Complaints can be made to the practice within 12 months from the occurrence giving rise to the complaint, or 12 months from the time the complainant becomes aware of the matter. The complaints manager has the discretion to investigate complaints brought outside this timescale if there are good reasons for the delay and if it can still be investigated.

### **HOW TO COMPLAIN AND WHAT THE PRACTICE WILL DO**

Complainants should make their complaint in the first instance to the practice. Should this not resolve the issue, a complaint can be escalated to the GP Local Commissioning Body, the Salford Integrated Care Partnership (ICP) who will defer to the practice for investigation. Contact details for Salford ICP are as follows: Contact number is 0161 779 8800 and for the Salford Healthwatch telephone number: 0330 355 0300.

Complainants may wish to make a complaint verbally to a member of staff. The staff member will listen to the complaint, advise the complainant of the practice complaints procedure, and provide them with a copy of the practice complaints leaflet.

A complainant may however prefer to speak to a practice manager as an initial point of contact regarding their complaint.

If the complaint can be resolved verbally there and then, we will endeavour to do so. However, for more complicated issues this should be made either in writing or by email to: **[gmicb-sal.practicemanagement@nhs.net](mailto:gmicb-sal.practicemanagement@nhs.net)**

Complaints resolved to the complainant's satisfaction within 24 hours need not be taken further, however the practice must still document the complaint in order that it can be used as a learning tool to improve our performance as a practice team, and in order that it can be submitted to NHS England at the end of the year.

If we are unable to resolve the complaint within 24 hours, the complaint will be acknowledged within 3 working days either orally or in writing by the practice manager or Dr Saxby.

If a complaint is made orally, the practice will document the complaint and give a copy to the complainant. The acknowledgement will include the offer of a discussion, which can be made by telephone or face to face meeting, will agree a plan of how the complaint will be investigated and agree reasonable timescales for resolution.

All complaints will be treated confidentially and will not form part of the patient's medical record but will be stored in the complaints folder in the practice manager's office. Also, a complaint will not affect the way in which the complainant is treated following a complaint, unless in the instance of complete breakdown of patient/GP relationship, in which case the patient would be subject to the removals process.

The complainant will be kept informed of progress throughout the investigation of a complaint.

Once our investigation has been concluded, a letter (or with the complainant's consent, an email) will be sent to the complainant, including the following:

- ✓ How the complaint has been investigated
- ✓ The evidence considered
- ✓ The conclusion reached
- ✓ An apology if one is needed
- ✓ Details of any actions the practice has and will be taking as a result of the complaint
- ✓ Explanation of any clinical matters in accessible and understandable language
- ✓ Should confirm that if nothing more can be done at local level, that the complainant can take the complaint to the Ombudsman if they wish.

The letter will be signed by Dr Saxby as the 'responsible person' for upholding complaints or the practice manager in Dr Saxby's absence.

At the complaints review meeting/s, each complaint will have documented the subject, outcome and whether it was resolved within the agreed timescale.

The practice will supply NHS England with an annual report containing the following information: -

- ✓ The number of complaints received
- ✓ The number of complaints that were upheld
- ✓ The number of complaints that are known to have been referred to the health service ombudsman
- ✓ A summary of the reason for the complaint
- ✓ A narrative about significant issues relating to the practice's experience of complaints during the year, including lessons learned and actions taken.

The practice will ensure that details of how to make a complaint are visible at reception and in waiting areas by means of posters or electronic notice board.

## **COMPLAINING ON BEHALF OF SOMEONE ELSE**

If a person wishes to complain on behalf of someone else, they should be advised of patient confidentiality, i.e., that we will not be able to discuss medical history or diagnosis regarding the patient in question without their consent to do so. We ask that this is provided in writing and signed by the patient concerned, unless they are incapable of doing this, or is due to age, illness, death, under a power of attorney or is an MP acting on their behalf. The practice must be satisfied that there are reasonable documented grounds for third party representation, and that they are genuinely acting with the consent of and in the interest of the patient concerned. If the practice is not satisfied, it will write to the representative explaining why we cannot accept the complaint. Once the practice is satisfied, the procedure is the same as above.

## **SAFEGUARDING**

Safeguarding is an important part of complaints management, and consideration should be made to the presence of any of the following:

- Concerns to the person and their ability to manage their daily living
- The adequacy of their care and or support
- The behaviour of a professional to a patient or carer

Any issues identified in this way should be escalated in line with the local Safeguarding policy and procedures.

## **SAFETY OF COMPLAINTS STAFF**

Should a complainant wish to meet in person to discuss their issue, requesting a confidential place to do so, consideration should be made as to any possible risk, and request accompaniment by an appropriate colleague. A written record of any discussion should be made in these circumstances.

## **PERSISTENT AND /OR UNREASONABLE CONTACT**

In extreme circumstances the level and/or nature of complaints may necessitate a written communication to the effect that the complaint/s have been fully investigated and acted upon, together with further actions as required. The senior person responsible for practice complaints should be made aware of any such concerns.

Safeguarding policy may also be appropriate at this time.

Refer to NHS England Complaints policy.

## **COMPLAINING TO NHS ENGLAND**

We do encourage complainants to use our practice complaints procedure, as we, as a practice, believe this will give us the best chance of putting right whatever has gone wrong and provide an opportunity to improve our practice.

If the complaint cannot be dealt with locally, patients are advised that they can make a formal complaint to the Salford Integrated Care Partnership the details can be found at the top of this protocol under the heading "How to make a complaint and what the Practice will do".

If a complaint is made to NHS England, it is the duty of NHS England to inform the complainant that unless they give consent to share details of their identity with the practice, they are unable to take the complaint further. Similarly, if NHS England will not share the identity of a complainant, the practice cannot pursue the complaint.

**IF A COMPLAINT CANNOT BE RESOLVED LOCALLY**

The patient will be signposted to: -

The Parliamentary and Health Service Ombudsman  
Millbank Tower  
Millbank  
London  
SW1P 4QP

Tel: 0345 0154033 (*It is recommended complainants telephone before writing*)

Website: [www.ombudsman.org.uk](http://www.ombudsman.org.uk).