

Policy/Protocol Control Sheet

Practice Name	Sherwood Medical Partnership
Policy Title	Complaints Policy
Author/Nominated Lead	Michelle Barksby
Purpose/ Aim of the Policy/Protocol	This procedure sets out the Practice's approach to the handling of complaints and is intended as an internal guide which should be made readily available to all staff.
Target audience	All staff, particularly those involved in managing complaints
Location of Policy/Protocol	GP Teamnet
How often will the policy be reviewed?	Yearly
Policy Approval Date	April 2021, reviewed October 2021, Reviewed Jan 2023, Reviewed July 2024, Reviewed March 2025
Policy Approved By	Michelle Barksby
Policy Review Date	March 2027

SHERWOOD MEDICAL PARTNERSHIP

COMPLAINTS PROCEDURE

INTRODUCTION

This procedure sets out the Practice's approach to the handling of complaints and is intended as an internal guide which should be made readily available to all staff.

From 1st April 2009 a common approach to the handling of complaints was introduced across health and adult social care. This procedure complies with this.

POLICY

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

- the complaints procedure
- the role of the ICB and other bodies in relation to complaints about services under the contract. This includes the ability of the patient to complain directly to ICB as an alternative to a complaint to the practice or to the Ombudsman where dissatisfied with the outcome.
- their right to assistance with any complaint from independent advocacy services

The principal method of achieving this is the Complaints Patient Information Leaflet which is available at reception and on the practice website.

The Complaints Lead for the Practice is the Assistant Manager – Operations supported by the Assistant Manager – Quality and the Practice Manager.

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. We shall attempt to contact you by telephone to discuss and acknowledge your complaint within 3 working days of receipt; this will be followed up by an acknowledgement letter and the practice will begin investigating your complaint as soon as possible. We will endeavour to respond as soon as we can but the time taken to properly investigate and respond to a complaint will vary depending on the nature of the complaint. We shall then be in a position to offer you an explanation and a meeting with the people involved where this is appropriate.

It can be preferable to receive more complex complaints in writing as it often assists with the process to have the situation described in the complainants own words. However, where patients are unable to put their complaint in writing or would prefer not to, the practice will take a record of the complaint either over the telephone or in person and will investigate and respond in the same way as it would to a written complaint. The reply to the patient should be made as soon as possible however there are no timelines specified within NHS complaints guidance. If a response is going to take a long period of time the patient will be provided with an update.

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. Patients should be given realistic timescales that take into account the complexity of the complaint and the availability of those involved.

The Complaints Lead 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 Lead 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

Informal complaints will be dealt with by the appropriate team lead where possible. Formal complaints may be received either verbally or in writing and must be forwarded to the appropriate team lead, Managerial Assistant or Practice Manager who must:

- Attempt to contact the all complainants via telephone to discuss the complaint in further detail whether verbal or written in nature.
- Where the complaint is made verbally, a written record will be taken and a copy may be provided to the complainant if required or a letter confirming the discussion and outcome may be offered.
- For written complaints, once a telephone encounter has been attempted or taken place, acknowledge the complaints in writing within the period of 3 working days. This timeline begins with the day on which the complaint was received by the practice or, where that is not possible, as soon as reasonably practicable.
- Include an offer to discuss the matter in person (if this has not already taken place as above) if appropriate. The discussion will include agreement with the patient as to how they wish the complaint to be handled and whether they believe the complaint to be clinical or administrative in nature.
- Advise the patient of potential timescales and the next steps.
- Ensure the complaint is properly investigated. This may involve reviewing medical records and audit trails, conducting interviews and conducting a multidisciplinary case review as needed.
- Where the complaint involves more than one organisation the practice will liaise with leads in other organisations agree responsibilities and ensure that one coordinated response is sent where appropriate;
- Where the complaint has been sent to the incorrect organisation, advise the patient within 3 working days and advise to where they may direct their complaint supporting with appropriate contact details.
- Provide a written response to the patient as soon as reasonably practicable ensuring that the patient is kept up to date with progress as appropriate. Where a response is delayed or further investigation is required, provide an update report to the patient through the process. The final reply will include a full response and information advising them of their right to take the matter to the Ombudsman if required.

- In some instances, it may be felt appropriate to offer the patient an opportunity to meet with one or more of the GP partners, members of the management team and anyone else deemed appropriate. This may be in addition to a final response if further explanation or discussion is needed. Minutes of the meeting should be kept and provided to the complainant along with a covering letter.

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 behaviour standards
- Return irrelevant documentation
- Keep detailed records

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 outcomes for the patient, including any remedial action or compensation if appropriate
- A clear statement that the response is the final one, or that further action or reports will be sent later, or the opportunity to meet to discuss the report
- An apology or explanation as appropriate
- A statement of the right to escalate the complaint, together with the relevant contact detail

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
- Methods of complaints management
- Any changes to procedure, policies or care which have resulted

Confidentiality

All complaints must be treated in the strictest confidence.

Where a third party is making a complaint on behalf of another patient, written consent must be obtained from the patient unless this is impossible.

Where the investigation of the complaint requires consideration of the patient's medical records, the team member leading on the complaint 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.

Non-Discrimination

The Practice will not tolerate any discrimination or perceived discrimination against, or harassment of, any visitor for reason of age, sex, gender, marital status, pregnancy, race, ethnicity, disability, sexual orientation, religion or belief. This applies to every area of the practice activity including responding to complaints.

If a patient makes a complaint, or someone complains on their behalf, they and their family will be treated and cared for in the same way as every other patient. They will not be discriminated against or treated adversely for making a complaint and their care will not be affected.

Control purposes

This information is held in the following places and should be updated in these places when reviewed:

- Practice website complaints page
- GP Teamnet (Practice Intranet)
- Practice complaints pack (Reception)
- Practice shared drive complaints folder

APPENDIX A (TEMPLATE ACKNOWLEDGEMENT LETTER)

Private and Confidential

NAME & ADDRESS

Date:

Our reference:

Dear.....

I am writing to acknowledge receipt of your complaint dated which I received today.....

(Either) I have attempted to contact you on occasions with a view to discussing your complaint further but I have been unable to do so. Should you wish to discuss your complaints further please do not hesitate to contact me at the surgery.

(Or) It was helpful to be able to speak with you via telephone today/yesterday to better understand your concerns, thank you for the opportunity to do so.

In summary, your complaint was regarding....

I have started to investigate your complaint and we will provide a response as soon as we can.

We will proceed with investigating your complaint. Due to the additional pressures placed on the NHS at this time regarding the management of Coronavirus this may take longer than usual; I apologise for any potential delay in advance and thank you for your patience.

If you would like further information about how our investigation is progressing, or if you would like to meet with me to discuss the details of your complaint, please don't hesitate to contact me

Yours sincerely,

(Team member leading on complaint name)

(Team member leading on complaints role)

Sherwood Medical Partnership

APPENDIX 2 (TEMPLATE OUTLINE FOR RESPONSE LETTER)

PRIVATE & CONFIDENTIAL

Date:

Our reference:

Dear,

Thank you for your written complaint with regards to your recent encounter with Crown Medical Centre. I was saddened to hear that you felt the need to complain, however the practice does value all feedback from patients.

In summary your complaint is

OurI have investigated your complaint and having taken an in depth look

We have.....

We are.....

Examples.....

If you do not find our response to be satisfactory you are also entitled to take your complaint to the ICB or the Ombudsman. The Ombudsman is independent of government and the NHS, the service is confidential and free. There are time limits for taking a complaint to the Ombudsman, although these may be waived if it is deemed there is a good reason to do so.

To contact the ICB:

- Telephone 0115 8839570
- Write to: **Patient experience team, Sir John Robinson House, Sir John Robinson Way, Arnold, Nottingham, NG5 6AD**
- Email : nnicb-nn.patientexperience@nhs.net

If you would like further information please follow the link to the ICB website: [Patient Experience and Complaints - NHS Nottingham and Nottinghamshire ICB](#)

To contact the Ombudsman:

- Telephone 0345 0154033
- Write to: The Parliamentary and Health Service Ombudsman, Millbank Tower, Millbank, London, SW1P 4QP
- Go to website: www.ombudsman.org.uk

Once again, we are sorry for the poor service you feel you've received. We hope this letter helps to address your concerns and we are very happy to discuss this in more detail if you wish to do so.

Yours sincerely,

(Team member leading on complaint name)

(Team member leading on complaints role)

Sherwood Medical Partnership

APPENDIX 3 (COMPLAINTS LOG – INTERNAL USE)

COMPLAINTS LOG & DATA PROCESS		
Name:		
Age: (Please circle appropriate age range)	0-19	20-59 60+ Unknown
Address:		
Who raised complaint: (Please circle appropriate age range)	Patient	Parent/Guardian Carer Other
Date Complaint Received:		
Type of complaint received: (Delete as appropriate and add a brief description of complaint)	Clinical Administrative Staff Prescriptions Communications	
Lead Person Investigating:		
Acknowledgement Phone call date/time:		
Successful?:		
Acknowledgment letter sent: (If a written complaint letter)	Yes / No	
Added to GP Teamnet:	Yes/ No	
Response date:		
Discussion Required at Management Meeting: (If yes, please send email to Harley Rogers requesting item be added to agenda and date of next meeting)	Yes / No	
	Email sent:	
	Date of Management meeting:	
TO BE COMPLETED AFTER MANAGEMENT MEETING (IF REQUIRED)		
Outcome of discussion and further action required:		
Draft reply letter written:		
Reviewed/ Approved by:		
Letter sent:	Email:	1 st Class:
	2 nd Class:	Docmail:
Complaint Closed:		
Closed by:		
Signature:		

APPENDIX 4 (COMPLAINTS LEAFLET)

COMMENTS, COMPLAINTS AND SUGGESTIONS

[Please circle which you feel is most appropriate]

Our aim is to provide the highest level of care for all our patients. We will always be willing to hear if there is any way that you think that we can improve the service we provide.

Making a complaint

If you have any complaints or concerns about the service that you have received from the doctors or staff working for this practice, please let us know.

We hope that most problems can be sorted out easily and quickly, often at the time they arise and with the person concerned. If your problem cannot be sorted out in this way and you wish to make a complaint, we would like you to let us know **as soon as possible** – ideally within a matter of days or at most a few weeks – because this will enable us to establish what happened more easily. If it is not possible to do that, please let us have details of your complaint:

- Within 12 months of the incident that caused the problem; or
- Within 12 months of discovering that you have a problem.

The Complaints Lead will be pleased to deal with any complaint. They will explain the procedure to you and make sure that your concerns are dealt with promptly. You can make your complaint:

- In person*** – ask to speak to the Shift Lead or Complaints Lead.
In writing – some complaints may be easier to explain in writing - please give as much information as can, then send your complaint to the practice for the attention of the Complaints Lead as soon as possible. A complaints form is provided with this information leaflet. This can also be sent via our practice website using the following link:

[Complaints - Sherwood Medical Partnership](https://www.sherwoodmedical.co.uk/policies/complaints/) –

<https://www.sherwoodmedical.co.uk/policies/complaints/>

What we will do

Our complaints procedure is designed to make sure that we settle any complaints as quickly as possible.

We shall attempt to contact you by telephone to discuss and acknowledge your complaint within 3 working days; this will be followed up by an acknowledgement letter and will start looking into your complaint as soon as possible. We will endeavour to

respond as soon as we can but the time taken to properly investigate and respond to a complaint will vary depending on the nature of the complaint. We shall then be in a position to offer you an explanation and a meeting with the people involved.

When we look into your complaint, we shall aim to:

- find out what happened and what went wrong
- make sure you receive an apology, where appropriate
- identify what we can do to make sure the problem doesn't happen again.

At the end of the investigation your complaint will be discussed with you in detail, either in person or in writing.

Please be assured that patients, carers and relatives will not be treated adversely as a result of having complained.

Complaining on behalf of someone else

Please note that we keep strictly to the rules of medical confidentiality. If you are complaining on behalf of someone else, we have to know that you have his or her permission to do so. A note signed by the person concerned will be needed, unless they are incapable (because of illness) of providing this. In the event that this is the case the necessary action to uphold patient confidentiality will be considered on a case by case basis.

What else you can do

We hope that, if you have a problem, you will use our practice complaints procedure. We believe that this will give us the best chance of putting right whatever has gone wrong and the opportunity to improve our practice.

You can also contact the Patient Experience Team, for confidential advice and support.

Email nnicb-nn.patientexperience@nhs.net

Telephone: 0115 8839570 or

By post: Patient Experience Team, Nottingham and Nottinghamshire Integrated Care Board, Sir John Robinson House, Sir John Robinson Way, Arnold, Nottingham, NG5 6AD

To make a complaint regarding secondary care contact PALS:

Telephone - King's Mill Hospital - 01623 672222 - office is open Monday to Friday 8.30am-6:00pm and Saturday 9.00am-1:00pm.

- **Newark Hospital** - 01636 685 692 - office is open Monday to Friday 8:00am-5:00pm.

Email: sfh-tr.pet@nhs.net

Address: Patient Experience Team, Sherwood Forest Hospitals NHS Foundation Trust, King's Mill Hospital, Mansfield Road, Sutton-in-Ashfield, Notts. NG17 4JL

POhWER provide a free, independent and confidential advocacy service to support people with their NHS complaint.

Visit [POhWER's website for more information](#). Here you will find [self help tools](#) and [leaflets in alternative languages](#).

[POhWER Homepage](https://www.pohwer.net) – <https://www.pohwer.net>

You can telephone POhWER at the local rate for Nottinghamshire on [0300 456 2370](tel:03004562370).

If you remain dissatisfied with the responses to your complaint, you have the right to ask the Health Service Ombudsman to review your case. The Ombudsman is independent of government and the NHS. Her service is confidential and free. There are time limits for taking a complaint to the Ombudsman, although she can waive them if she thinks there is a good reason to do so. To contact the Ombudsman:

- Telephone 0345 015 4033
- Write to: The Parliamentary and Health Service Ombudsman, Millbank Tower, Millbank, London, SW1P 4QP
- Go to website: www.ombudsman.org.uk

COMPLAINANTS DETAILS

Name _____

Contact number _____

Address _____

I am the patient / relative / friend / carer (please circle)

If you are making a complaint on behalf of another patient please ask the patient to complete this section wherever possible.

I, _____ hereby give my consent
for _____ to make a complaint
regarding the care and treatment received by Sherwood Medical Partnership and herewith
consent to the disclosure of confidential information to them for the purpose of providing
information in response to this complaint only.

Signed _____

Print Name _____

Date ____/____/____

If they are unable to complete this, please tell us

why _____

Help us get it right. We constantly try to improve the service we offer. Please let us know when you think we have done something well or if you have any suggestions as to how we can do something better.

Address: Crown Medical Centre, Crown Farm Way, Forest Town, Mansfield, NG19 0FW

Telephone: 01623 626132

www.Sherwoodmedical.co.uk

