**Complaints Procedure**

**(England)**

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# 1 Introduction

## 1.1 Policy statement

The purpose of this document is to ensure that all staff are aware of the complaints procedure within the Practices of the Spinney Group affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received at the practice.

## 1.2 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This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time.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.

## 1.3 Training and support

The Spinney Group 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.

# 2 Scope

## 2.1 Who it applies to

This document applies to all employees of the practices of the Spinney Group and other individuals performing functions in relation to the practices, such as agency workers, locums and contractors.

## 2.2 Why and how it applies to them

All staff within the Spinney Group 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. The Spinney Group take 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 Spinney Group 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 in regard to the individual protected characteristics of those to whom it applies.

# 3 Guidance

## 3.1 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 Spinney Group 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:

* [Good Practice Standards for NHS Complaints Handling 2013](https://www.patients-association.org.uk/wp-content/uploads/2014/06/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf)
* [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)
* [My Expectations 2014](https://www.ombudsman.org.uk/sites/default/files/Report_My_expectations_for_raising_concerns_and_complaints.pdf)
* [The NHS Constitution](https://www.gov.uk/government/publications/the-nhs-constitution-for-england)
* [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)

## 3.2 Definitions 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[[1]](#footnote-1).

There is no difference between a “formal” and an “informal” complaint. Both are expressions of dissatisfaction[[2]](#footnote-2).

## 3.3 Complaints procedure promulgation

The practices of the Spinney Group have prominently displayed notices in reception waiting room detailing the complaints process. In addition, the process is included on the practice 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.

## 3.4 Responsible person

Dr Stephen Cox is the GP Partner lead for complaints for the Spiney Group. While he is ultimately responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint, these duties can be delegated when required.

All significant complaints must be reported to the responsible person. In their absence you must make other partner(s) aware.

## 3.5 Complaints manager

Within the practices of the Spinney Group, the Practice Manager is the Complaints Manger for that practice. 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).

## 3.6 Complainant options

The complainant, or their representative, can complain about any aspect of care or treatment they received at a practice to the practice’s complaints manager or NHS England via telephone, email or in writing:

NHS England

PO Box 16738

Redditch

B97 9PT

Telephone 03003 112233

Email [england.contactus@nhs.net](mailto:england.contactus@nhs.net)

British Sign Language (BSL) patients can talk to NHS England via a video call to a BSL interpreter

## 3.7 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 they become 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 Complaints Manager.

## 3.8 Response times

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager at the practice will provide an initial response to acknowledge **any** complaint within three working days after the complaint is received.

There is no end date by which the complaintant must receive their response to allow a full investigation including that of third parties to occur. However, regular updates from the practice to the complainant must occur throughout the investigation. In addition to regular updates, a response or decision should be made within six months, if it extends beyond this time then you must advise the complainant[[4]](#footnote-4).

The complaints manager will advise of the complaints procedure to the complainant or their representative. In many cases a prompt response and, if 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).

## 3.9 Route of a complaint

Patients will 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 within the Spiiney Group will fully understand the complaints process.

The complainant should be provided with a copy of the Spinney Group Complaints Process leaflet detailing the complaints process and advised that the process is a TWO STAGE process as detailed below:

**Stage 1**

The complainant may make a complaint to either the practice 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 do not get escalated to NHS E following the practice response. A complaint made to either/or the practice or NHS E will escalate to PHSO.**

## 3.10 Verbal complaint

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.

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 practice meetings.

If the matter demands immediate attention, contact the complaints manager who may 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 complaints manager then a full explanation of the events leading to the complaint is to be given to allow any appropriate response.

## 3.11 Written complaints

An alternative option is 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 [Article 3.8](#_Response_times).

## 3.12 Complaints advocates

Details of how patients can complain and also how to find independent NHS complaints advocates are to be detailed within the Spinney Group Complaints Process leaflet. Additionally, the patient should be advised that the local Healthwatch which is:-

St Helens Healthwatch

2nd Floor

Beacon Building

College St

St Helens

WA10 1TF

Telephone 0300 111 0007

These can help you to find independent NHS complaints advocacy services in your 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 and someone will get back to you.
3. Age UK – may have advocates in your area. Visit their website or call 0800 055 6112

## 3.13 Investigating complaints

The Spinney Group will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance.

The practices of the Spinney Group 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 is 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, 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.

## 3.14 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 information:

* An explanation of how the complaint was considered
* An apology if appropriate
* An explanation based on facts
* Whether the complaint in full or in part is upheld
* The conclusions reached in relation to the complaint, including any remedial action that the organisation considers to be appropriate
* Confirmation that the organisation is satisfied that any action has been or will be actioned
* Where possible, a response will be given to people about any lessons learnt
* Information and contact details of the Parliamentary and Health Service Ombudsman as the next stage of the NHS complaints process

The complaints manager will clearly stipulate that this response is the final response to be issued by the practice and if the complainant is not satisfied then they should contact the PHSO.

## 3.15 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.

## 3.16 Persistent and unreasonable complaints

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

## 3.17 Complaints involving locum staff

The Spinney Group will ensure that all locum staff, be it GPs, nurses or administrative staff, are aware of the complaints process and that they will be expected to partake in any subsequent investigation, even if they have left the practice (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 discrepancy between locum staff, salaried staff or partners.

# 4 Summary

The care and treatment delivered by the Spinney Group 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 practice is able to investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learnt and ultimately improving service delivery.

1. [NHS(E) Complaints Policy 2017](https://www.england.nhs.uk/wp-content/uploads/2016/07/nhse-complaints-policy-june-2017.pdf) [↑](#footnote-ref-1)
2. [Good Practice for Handling NHS Complaints 2013](https://www.patients-association.org.uk/wp-content/uploads/2014/06/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.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. <http://www.themdu.com/guidance-and-advice/journals/inpractice-july-2014/timescales-for-acknowledging-investigating-and-responding-to-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)