

PRIORSLEGH MEDICAL CENTRE COMPLAINTS PROCEDURE

Introduction

The aims of this complaints procedure are:

- To allow the surgery to resolve any matters which arise at an early stage by an appropriate explanation.
- To ensure that all complaints are dealt with fairly, seriously and promptly.
- Assist in improving communication within the practice and between practice/GP and patients.
- Form part of a wider quality initiative.

The benefits to both doctor and patient are a speedy and amicable resolution of differences.

When a patient contacts the surgery wishing to make a complaint they will be informed of the complaints procedure i.e. what you need to do to make a complaint. If the complaint is not about our practice, the complainant will be asked to contact the service they are complaining about to access a copy of their complaints procedure and lodge a complaint.

Practice Guidelines

Complaints Manager

The Practice Manager will manage all complaints. All members of the practice staff are aware of who is responsible for complaints within the practice. The Practice Manager is responsible to ensure that there is compliance with the below arrangements.

Publicity

Details of how to make a complaint are available:

- On the practice leaflet
- Asking a member of the support team
- On our website

Documentation of Complaints

There is a system in place for electronically recording all matters relating to written complaints:

Patient Letters

- Where we keep record all correspondence sent to the patient (hard copy letters from patients are scanned onto the system)

Annual Complaint Review

- Where we annually audit our written complaints, considering nature of the complaint (clinical / organisational) and actions taken / lessons learnt etc.

- *N.B. Serious complaints during the year will be dealt with as part of our SEA process.*

The practice must then prepare an annual report on complaints received during the 12 month period ending on 31 March and send it on request to the CCG. The report must provide details of the following:

- Number of complaints received by the practice
- Numbers of complaints upheld
- Numbers of complaints which the practice has been informed have been referred to the Ombudsman
- A summary of the matter of the complaints received
- Any matters of general importance arising out of those complaints or the way in which the complaints were handled
- Any action that has or is to be taken to improve services as a result of complaints

Where a single complaint covers several aspects of care/treatment received, the complaint is recorded only once, under the principle cause of complaint.

Please note: All patient complaint records are kept separate from medical records.

Verbal Complaints

Verbal complaints received will, where possible, be dealt with at the time or within 1 working day. If the verbal complaint is going to take more than 1 working day to resolve then the verbal complaint must be treated the same as a written one and the below procedures apply.

Local resolution procedure

Acknowledgement and resolution of complaints

All complaints received will be acknowledged in writing/verbally within **two working days**. Complaints will be fully investigated within **ten working days**. If this cannot be achieved, the patient will be informed of an estimated date of response given regular information on progress and the reason for the delay.

In the interest of speedy resolution, if appropriate, the Practice Manager or GP Partner may seek to resolve any complaint verbally, without the need for a written letter of complaint.

Assessment

The Practice Manager will assess the nature of the complaint and quickly convene a meeting with appropriate staff members to discuss the complaint, hopefully enabling a speedy and accurate resolution to the matter.

Local Resolution Letter - conclusion

Upon conclusion of any investigation a letter will be sent to the complainant within 10 working days of receiving the complaint detailing the investigation outcome and action points (if any).

Letters should be checked by both GP partners (where possible) before sending to the complainant.

The letter concluding **local resolution** should normally include:

- a summary of the complaint
- an explanation of the Practice/GP's view of events/ outcome of any meeting
- an apology, where appropriate
- details of action taken to prevent a recurrence of the incident, where appropriate
- information on next steps, including if appropriate an offer of a face-to-face meeting with Practice Manager and/or Partner

All details will be recorded in a file on the system.

Face-to-face meeting

If the complainant is not satisfied with the resolution letter then they can arrange a meeting with Practice Manager and/or Partner to discuss the matter face-to-face. They are entitled to bring a representative or 'advocate' e.g. from ICAS

Independent Review

If no resolution has been reached at this point the complaint can be referred to the Health Service Ombudsman to assess and follow up, if deemed appropriate. There is a **12 month time limit** from the date of the initial concerns raised to the practice for the complainant to refer the matter to the Healthcare Commission

Audit & Review

All complaints and responses are recorded in the Electronic Complaint File and hard copies in the complaint folder (held by the Practice Manager). This allows the Practice to conduct an Annual Audit Review of complaints as part of our ongoing Clinical Governance policy.

Our Annual Audit & Review is conducted at the start of each financial year.

Confidentiality

Patient confidentiality will be maintained at all times. The duty of confidence applies equally to third parties who have given information or who are referred to in the patient's record.

The Practice Manager will inform the patient if the investigation of a complaint will involve disclosure of information contained in health records to a person other than the GP or employee of the practice. If the patient objects to this, then the effect on the investigation will need to be explained.

Where a complaint is made on behalf of a patient who has not authorized someone to act for him/her, care will be taken not to disclose personal health information to the complainant, unless the patient has expressly consented to its disclosure by writing.

A patient is also entitled to have a third person to act on behalf of the patient making the complaint. However, it is likely that confidential information about the patient maybe discussed with the 3rd person so therefore again the patient will need to send a letter of consent to this effect.

The duty of confidence applies equally to third parties who have given information or who are referred to in the patient's records. Particular care will be taken where the patient's records contain information provided in confidence, by or about; a third party who is not a health professional. Only that information which is relevant to the complaint will be considered for disclosure and then only to those within the NHS who have a demonstrable need to know it in connection with the complaint investigation. It will not be disclosed to the patient unless the person who provided the information has expressly consented to the disclosure.

Children and Young People

Young people aged 16 or 17 are regarded as adults for the purposes of consent to treatment and are therefore entitled to the same duty of confidence as adults.

Children under 16 who have the capacity and understanding to take decisions about their own treatment are entitled also to decide whether personal information may be passed on. In other instances, decisions to pass on personal information may be taken by a person with parental responsibility in consultation with the health professionals involved.

In child protection cases the overriding principle is to secure the best interests of the child. Therefore, if a health professional or other member of staff has knowledge of abuse or neglect, it may be necessary to share this with others on a strictly controlled basis, so that decisions relating to the child's welfare can be taken in the light of all relevant information.

If you have any questions regarding information contained within this procedure then please contact the surgery either by phone or in writing.