

301 East Street Surgery Practice Complaints Policy

Version Control			
Date	Version	Author	Comment
19/04/2013	1.0	René Mehta (PM)	New Policy
23/05/2016	2.0	René Mehta (PM)	Review
09/06/2017	2.1	René Mehta (PM)	Review
03/06/2019	2.2	René Mehta (PM)	Review
Next Review Due – May 2021			

Introduction

A new NHS and Social care complaints policy was introduced in England on 1st April 2009. This applies to NHS bodies and providers of healthcare.

The practice is compliant with the new procedures.

General Statement

How the practice handles the complaints it receives is an important indicator of how responsive it is to patients and the public it serves. The way that staff deals with complaints when they arise is an important measure of how the practice is able to communicate with and listen to patients.

The complaints system is proactive in encouraging people to voice their concerns and should be seen as the part of the wider arrangements for involving patients in monitoring services.

Responsibility for handling complaints

The practice administrator is responsible for handling complaints received in the practice.

Responses to patients may be delegated to other members of the practice team. E.g. in the instance of a clinical complaint, this may be handled by a doctor, however, the process will be overseen and managed by the practice manager to ensure that the in-house procedure runs smoothly.

What is a complaint?

An expression of concern about a treatment or service the practice provides, whether verbal or written, which requires a response.

All complaints, whether clinical, administrative, written or verbal will be taken seriously.

Who can complain?

Complainants can be a patient or carer who has used the practice's services or facilities or a representative of that patient who has that patient's consent to act on their behalf.

Where the complaint is made on behalf of the patient, the patient is required to give written permission where the response would contain information concerning that patient. Where a patient has died or is unable to give written consent, the practice will proceed with the investigation. If the complainant is not the patient's next of kin, the patient's relatives will be consulted and their views respected.

Patients under the age of 16 who wish to make a complaint should be represented by a parent or guardian with legal responsibility

Some Basic Principles of the New NHS Complaints Procedure

- 1) The complaints procedure has two stages
 - Local resolution e.g. practice or CCG
 - Parliamentary & Health Service Ombudsman (if complainant dissatisfied with stage 1)
- 2) Complaints can be made direct to the provider or to the Commissioner

The practice will always encourage patients, if they have a problem, to use our practice complaints procedure. The practice strongly believes this will give them the best chance of putting right whatever has gone wrong and an opportunity to improve their practice. Patients can complete a Practice Complaints Form – see Appendix A

Patients who require support in making a complaint have 3 options - Southwark PALS (Patient Advice & Liaison Service), POHWER or NHS England:

a) Southwark PALS

Southwark CCG PALS

Tel: 0800 456 1517

Email: NELCSU.SEcomplaints@nhs.net

b) POWHER

POHWER who provide a free and independent service that can help you make an NHS complaint.

Visit the POHWER website here: <https://www.pohwer.net/Southwark>

Tel: 0300 456 2370

Text: send the word 'pohwer' with your name and number to 81025

Email: pohwer@pohwer.net

Skype: pohwer.advocacy

Fax: 0300 456 2365

Post: PO Box 14043, Birmingham, B6 9BL

Information Leaflet: See Appendix B

c) NHS England

Tel: 0300 311 22 33

Email address: England.contactus@nhs.net

3) Complaints Procedure Requirements

- complaints are dealt with efficiently
- complaints are properly investigated
- complainants are treated with respect and courtesy
- complainants receive as far as is practically possible
 - assistance to enable them to understand the Procedure in relation to complaints; or
 - advice on where they may obtain such assistance
- complainants receive a timely and appropriate response
- complainants are told of the outcome of the investigation of their complaint
- action is taken if necessary in the light of the outcome of the complaint

- 4) **Oral complaints that can be resolved satisfactorily within one working day do not count as an official complaint. The practice will encourage front line staff to do so.** If it is possible to resolve a complaint this way and the patient is happy with the response, the regulations do not require a formal written response, though we may confirm the discussion in writing if we choose to. Such complaints will be documented but will not form part of practices monitoring of complaints.

Receiving a complaint

Verbal Complaints

If a member of staff receives a verbal complaint from a patient they should try to deal with it at the time and bring it to resolution. If they are unable to do so, they should notify a GP partner at the time, or as soon as practically possible, by urgent message if there are unable to speak in person.

The practice aim would be to resolve the complaint at the time or within 24 hours of the complaint to the satisfaction of the patient to avoid the formal complaints process.

The practice administrator/ reception leader will document all verbal complaints and resolution of such for the records, although if it is deemed not to constitute a formal complaint, it will not form part of the complaints monitoring process. However, it may be used as feedback to effect change if appropriate.

(For Practice Only - Please see spread sheet in complaints folder)

Verbal complaints may also be formal and will follow the process as outlined below.

Formal Complaints (Written and Verbal)

Complaints may be made verbally or in writing but all should be directed to the Practice Manager at the earliest opportunity and to a member of the admin team for documenting.

Acknowledgement and Planning

The practice needs to acknowledge all formal complaints within 3 days of receipt in accordance with the NHS Complaints procedures.

The practice administrator must make a written record of the date it was received.

The acknowledgement letter will contain:-

- acknowledgement of receipt
- confirmation of date received
- written record of the complaint
- offer an opportunity to discuss an agreed approach to the complaint either by phone or in person
- information on how the complaint will be handled
- expected timescales
- anticipated delays
- information on support e.g. PALS, POwHER, NHS England

Investigation

The Practice Manager will investigate the complaint, noting details from the complainant and through interviewing relevant members of staff, audit trails on the computer system, seeking further information from the complainant and through any other means, to try and collect as much information and evidence as possible.

If necessary the practice will offer a meeting, either for gathering information and / or to try and resolve the issues. The outcome of any meeting will be fed into the final response to the complainant.

Response

Once an investigation is complete, the practice will respond to the complainant in writing.

In accordance with the NHS regulations the response will contain

- an explanation of how the complaint was investigated
- an apology where appropriate (although this will not constitute and admission of liability)
- details of the conclusions reached
- identify matters that may need remedial action
- explain whether remedial action is planned or has occurred
- an explanation of the complainant's right to take the matter to the Ombudsman within 12 months if dissatisfied with the response

The practice will aim to respond to the complainant within 20 working days, although this will depend on the complexity of the complaint and the availability of key players. If it is not possible to turn it around within 20 working days, the practice manager will write to the complainant to advise them of the situation and a revised timeline for final response.

The response to the complainant will be positive and constructive.

The Learning Organisation

This practice strives for continual improvement in the way it works and in the services it provides to patients. The majority of complaints are viewed as constructive criticism and are used to identify problems or weaknesses in the practice and an opportunity to make subsequent improvements to avoid similar errors in the future. Complaints against members of the team will be discussed with the individual concerned, at the time of the complaint. Continual complaints against a particular member of staff will be considered as part of performance review and may lead to disciplinary action if complaints are upheld.

Complaints will be reviewed annually at a management meeting, highlighting learning points and action points for the practice and these points will be discussed with team members at a practice meeting.

If a complaint highlights a matter which needs remedial action, it will be discussed either at clinical, managerial or practice meeting and remedial actions will be documented and effected.

The practice will report back annually to NHS England on the number and nature of formal complaints, in accordance with requirements. This data is anonymised.

Details will only be divulged to a third party in the case of clinical claims in which legal advice needs to be sought.

Sign Off

Once the complaint has been dealt with the Practice Manager and clinical governance lead will sign off the complaint. This will demonstrate accountability and responsibility for ensuring that the practice addresses and learns from any concerns identified in the complaint.

Appendix A

Practice Complaints Form – available via Reception or Practice Website (www.301eaststreetsurgery.nhs.uk)



Practice Complaints
Form - 301 East Street

Appendix B

POwHER Leaflet – available via POwHER website:
(<https://www.pohwer.net/Southwark>)

or Practice website (www.301eaststreetsurgery.nhs.uk)



POhWER-London-IH
CAS-Leaflet - Apr201