

## Policy Document Control Sheet

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# Riverside Surgery

## Practice Complaints Procedure

### Introduction

The purpose of the policy is to ensure that all patients (or their representatives) who have the cause to complain about their care or treatment can have freely available access to the process and can expect a truthful, full, and complete response and an apology where appropriate. Complainants have the right not to be discriminated against as the result of making a complaint and to have the outcome fully explained to them. The process adopted in the practice is fully compliant with the relevant NHS Regulations (2009) and guidance available from defence organisations, doctors' representative bodies and the Care Quality Commission. Everyone in the practice is expected to be aware of the process and to remember that everything they do and say may present a poor impression of the practice and may prompt a complaint or even legal action.

The general principle of the practice in respect of all complaints will be to regard it first and foremost as a learning process, however in appropriate cases and after full and proper investigation the issue may form the basis of a separate disciplinary action. In the case of any complaint with implications for professional negligence or legal action, the appropriate defence organisation must be informed immediately.

### Who can a formal complaint be made to?

TO - either the Practice, Local ICB, NHS England, PALS, Health Service Ombudsman

### Who can make a complaint?

A complaint can be made by or, with consent, on behalf of a patient (i.e. as a representative); a former patient, who is receiving or has received treatment at the Practice; or someone who may be affected by any decision, act or omission of the practice.

A Representative may also be:

- either parent or, in the absence of both parents, the guardian or other adult who has care of the child; a person duly authorised by a local authority to whose care the child has been committed under the provisions of the Children Act 1989; or a person duly authorised by a voluntary organisation by which the child is being accommodated.
- someone acting on behalf of a patient/ former patient who lacks capacity under the Mental Capacity Act 2005 (i.e. who has Power of Attorney etc.) or physical capacity to make a complaint and they are acting in the interests of their welfare
- someone acting for the relatives of a deceased patient/former patient
- The attached Consent must be completed before an investigation into a complaint can begin, unless they are incapable (because of illness) of providing this or are a child under the age of 12 and you are their parent or legal guardian.
- Please note that we keep strictly to the rule of medical confidentiality. **If you are complaining on behalf of someone else**, we must know that you have their permission to do so.

In all cases where a representative makes a complaint in the absence of patient consent, the practice will consider whether they are acting in the best interests of the patient and, in the case of a child, whether there are reasonable grounds for the child not making the complaint on their own behalf. In the event a complaint from a representative is not accepted, the grounds upon which this decision was based must be advised to them in writing.

### **Who is responsible at the practice for dealing with complaints?**

The practice "Responsible Person" is Kerrie Draco, Practice Business Manager & Partner. They are charged with ensuring complaints are handled in accordance with the regulations, that lessons learned are fully implemented, and that no Complainant is discriminated against for making a complaint.

We hope that most problems can be sorted out easily and quickly, often at the same time that they arise and with the person concerned, or by speaking to Office Manager Barbara Hall or Deputy Practice Manager, Mrs Emma Wiggins. If your problem cannot be rectified 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:

### **Time limits for making complaints.**

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.

The practice has discretion to extend these limits if there is good reason to do so and it is still possible to carry out a proper investigation. The collection or recollection 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 reasons for declining a time limit extension, however that decision should be able to stand up to scrutiny.

Complaints should be addressed to the Practice Business Manager, Mrs Kerrie Draco. You can do this by completing the attached complaint form, writing in or by making an appointment with her to express your concerns. It will be helpful if you are as specific as possible about your complaint.

### **Action upon receipt of a complaint**

Verbal Complaints: It is always better to try and deal with the complaint at the earliest opportunity and often it can be concluded at that point. A simple explanation and apology from staff at the time may be all that is required.

A verbal complaint need not be responded to in writing for the purposes of the Regulations if it is dealt with to the satisfaction of the complainant by the end of the next working day, neither does it need to be included in the annual Complaints Return. The practice will however record them for the purposes of monitoring trends or for Clinical Governance.

Verbal complaints not formally recorded will be discussed when trends or issues need to be addressed and at least annually, with minutes of those discussions kept.

If resolution is not possible, one of the Complaints Managers will set down the details of the verbal complaint in writing and provide a copy to the complainant within three working days. This ensures that each side is well aware of the issues for resolution. The process followed will be the same as for written complaints.

Written Complaints: All written complaints must be addressed to one of the Complaint Managers and posted to Riverside Surgery, 525 New Chester Road, Rock Ferry, Wirral, CH42 2AG or emailed to the Practice email address of [riversidesurgery.birkenhead@nhs.net](mailto:riversidesurgery.birkenhead@nhs.net).

Individual email addresses must not be used at any time to log a complaint as these accounts are only managed when the staff member is available. The Practice email address is monitored Monday – Friday 8am -6.30-pm.

On receipt, an acknowledgement will be sent within three working days which offers the opportunity for a discussion (face-to-face or by telephone) on the matter. This is the opportunity to gain an indication of the outcome the complainant expects and also for the details of the complaint to be clarified. In the event that this is not practical or appropriate, the initial response should give some indication of the anticipated timescale for investigations to be concluded and an indication of when the outcome can be expected.

It may be that other bodies (e.g. secondary care/ Community Services) will need to be contacted to provide evidence. If that is the case, then a patient consent form will need to be obtained at the start of the process and a pro-forma consent form included with the initial acknowledgement for return.

If it is not possible to conclude any investigations within the advised timescale, then the complainant must be updated with progress and revised time scales on a regular basis. In most cases these should be completed within six months unless all parties agree to an extension.

## **The Investigation**

The practice will ensure that the complaint is investigated in a manner that is appropriate to resolve it speedily and effectively and proportionate to the degree of seriousness that is involved. We aim to investigate most cases within 10 working days, upon receipt of the complaint.

The investigations will be recorded in a complaints file created specifically for each incident and where appropriate should include evidence collected as individual explanations or accounts taken in writing.

## **Final Response**

This will be provided to the complainant in writing (or email by mutual consent) and the letter will be signed by the Responsible Person or Complaints manager under delegated authority. The letter will be on headed notepaper and include:

- An apology if appropriate (The Compensation Act 2006, Section 2 expressly allows an apology to be made without any admission of negligence or breach of a statutory duty)
- A clear statement of the issues, details of the investigations and the findings, and clear evidence-based reasons for decisions if appropriate
- Where errors have occurred, explain these fully and state what has been or will be done to put these right or prevent repetition. Clinical matters must be explained in accessible language.
- A clear statement that the response is the final one and the practice is satisfied it has done all it can to resolve the matter at local level.
- A statement of the right, if they are not satisfied with the response, to refer the complaint to the Parliamentary and Health Service Ombudsman, The Exchange, 3<sup>rd</sup> Floor, 3 New York Street, Manchester, M1 4HN or visit the 'Making a complaint page' at <http://www.ombudsman.org.uk/make-a-complaint> (to complain online or download a paper form). Alternatively, the complainant may call the PHSO Customer Helpline on 0345 015 4033 from 8:30am to 5:00pm.

**The final letter should not include:**

- Any discussion or offer of compensation without the express involvement and agreement of the relevant defense organisation(s)
- Detailed or complex discussions of medical issues with the patient's representative unless the patient has given informed consent for this to be done where appropriate.

**Confidentiality**

All complaints must be treated in the strictest confidence and the practice must ensure that the patient etc. is made aware of any confidential information to be disclosed to a third party (e.g. NHSE).

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 and no reference which might disclose the fact a complaint has been made should be included on the computerised clinical record system.

**Unreasonable or Vexatious Complaints**

Where a complainant becomes unreasonable or excessively rude or aggressive in their promotion of the complaint, some or all of the following formal provisions will apply and must be communicated to the patient by the Responsible Person in writing:

- 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 unless additional material is being brought forward.
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behaviour standards.
- Return irrelevant documentation.



should contact

Health Service Ombudsman

Tel 0345 015 4033

Website <http://www.ombudsman.org.uk/>

Email [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk)

You can also contact The Care Quality Commission

Tel 03000 616161

Email [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

# Riverside Surgery

## COMPLAINT FORM

To be completed by patient or patient's representative  
*(If completed by a representative then Page 5 also needs to be completed by the patient - if they are aged 12 or over - so that we know we have their agreement to us releasing information about them to their representative.)*

### **Details of the patient to whom the complaint relates**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Tel No \_\_\_\_\_

Date of Birth \_\_\_\_\_

### **Details of the person making the complaint (where different to above)**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Tel No \_\_\_\_\_

Relationship to the patient named above \_\_\_\_\_

I confirm that the information given below is a true and accurate account.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### **Details of the complaint**

Please be as specific as possible about events, dates, and people involved.  
Use continuation sheets as necessary, making sure to number each additional sheet.

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**Riverside Surgery**

**CONSENT FOR A RELATIVE/REPRESENTATIVE TO ACT AS  
COMPLAINANT ON BEHALF OF A PATIENT**

***PLEASE COMPLETE EITHER SECTION 1 OR SECTION 2***

**SECTION 1**

**To be completed by patient**

I consent to.....acting as the complainant on my behalf, and to them receiving confidential information concerning my medical treatment if it is necessary in order to reply to the complaint.

Signed.....

Print name.....

Date.....

**SECTION 2**

**To be completed by patient's relative/representative where the patient is unable to do so**

Name of representative.....

I confirm that..... is unable to consent to myself acting as the complainant because

.....

.....

and I am confident that the patient would give their consent if they were able to do so.

Signed.....

Print name.....

Date.....