ST LAWRENCE ROAD SURGERY

Complaints Procedure – General Practice

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June 2013
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Glossary of Terms

ICS Independent Contractor Services including GPs, General Dental Practitioners, Community Pharmacists and Optometrists

GPs General Practitioners

NHS Body includes a Strategic Health Authority, an NHS Trust, a Primary Care Trust and A Special Health Authority
1. Introduction

This document sets out the procedure for managing complaints within General Practice.

All practitioners are required to operate a complaints procedure in accordance with their Terms of Service.

The procedure follows The Local Authority Social Services and National Health Service Complaints (England) regulations 2009 no. 309.

2. Practice Complaints Administrator

The Responsible Person, ie Practice Manager & GP Partners, are responsible for managing the procedure for handling complaints and in particular they will:

- Be readily accessible to both the public and Practice staff
- Be overall responsible for receiving complaints, taking action to investigate and putting together a response
- The GP partners take ultimate responsibility for the complaints procedure

3. What Constitutes a Complaint

A complaint may be about any matter reasonably connected with the exercise of the practices' functions. It may be about the way the practice provides services, where they are provided, or what services are actually provided. It may vary in complexity from being a single issue to a combination of interlinked issues.

The NHS Complaints Procedure suggests that a complaint should be made as soon as possible after the action giving rise to it. The time limit for making a complaint is within 12 months of the event or within 12 months of the complainant becoming aware of the need to complain. Where complaints are made after the expiry period, the responsible person may decide to investigate it if the complainant had good reasons for not making the complaint within the time and if it is still possible to investigate the complaint effectively and efficiently.

Where the responsible person has decided not to investigate a complaint, a written explanation must be provided to the complainant and they should be advised that they can ask the Health Service Commissioner (Ombudsman) to consider it.

4. Matters Excluded from the Complaints Process

a) A complaint about the practice made by an NHS body or general practice practitioner
b) A complaint made by a practice employee about their contract of employment
c) A complaint which is made orally and is resolved to the complainant’s satisfaction by the end of the next working day
d) A complaint which is the same subject matter as that of a complaint that has previously been made and resolved in accordance with c

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e) A complaint, the subject matter of which, has previously been investigated under –
   • the 2004 Regulations in relation to a complaint made under those Regulations before 1st April 2009
   • the 2006 Regulations in relation to a complaint made under those Regulations before 1st April 2009
   • the relevant complaints procedure in relation to a complaint made under such a procedure before 1st April 2009
f) A complaint arising from the practice’s alleged failure to comply with a data subject request under the Data Protection Act 1998 or a request for information under the Freedom of Information (FOI) Act 2000
g) A complaint in which the complainant has stated in writing that they intend to take legal proceedings
h) A complaint in which the practice is taking or is proposing to take disciplinary proceedings in relation to the substance of the complaint against an employee

5. Who can make a Complaint

In the case of general practice, complainants should be existing or former patients of the practitioners concerned, or a person who has the consent to act on their behalf. The complaint must be related to services provided by the practice or a person providing services on their behalf.

Patients must be given the choice of either complaining to the practice or to the CCG. At this time it should also be explained to the complainant that if they remain unhappy with the outcome if investigated by the practice they cannot then ask the CCG to investigate. The next step in the complaints process would be to raise their complaint with the Health Service Commissioner (Ombudsman).

6. Patient Confidentiality

The requirement to maintain confidentiality is absolute during the complaints procedure. In the case of a patient who has died or who is incapable, the representative must be a relative or other person, who, in the opinion of the responsible person, has or had a sufficient interest in the patients' welfare. If it is decided that the representative does not have sufficient interest, then a written response to the complainant is required stating the reason.

In the case of a complaint regarding a child, the representative must be a parent, guardian or another adult who has care for that child.

When the complaint is made on behalf of the complainant where they are not deceased, incapable or a child, the responsible person will seek written consent from the individual concerned to release confidential information. If consent is refused, the complaint can still be investigated however; confidential information cannot be released to the third party.

7. How can Complaints be made

Complaints can be made in a number of ways within general practice:-
   • Verbally, in person, to any member of staff
   • Verbally, via the telephone, to any member of staff
   • In written form or email to any member of staff

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• Direct to the Complaints Team for Hardwick Clinical Commissioning Group at: Hardwick CCG Complaints Manager, c/o GEM CSU, 3rd Floor Cardinal Square, 10 Nottingham Road, DERBY. DE1 3QT.
• Indirectly through other agencies, such as East Midlands Independent Complaints Advocacy Service (ICAS) or Member of Parliament.

Posters will be displayed in waiting areas to explain to patients how to complain about the service they have received ideally to the responsible person. In addition, these details are included in the practice information leaflet, which is available for all patients.

8. Managing Complaints

Staff are responsible for reporting all complaints to the responsible person, ie Practice Manager or GP Partner.

It is the duty of the responsible person to:-
• Investigate and manage all complaints in accordance with the regulations and contents of this procedure
• Ensure that all complaints are dealt with within the designated time frames set out in this procedure and following an agreement with the complainant
• Support other staff fairly through the complaint process
• Ensure learning takes place following a complaint’s investigation by drawing up action plans that will lead to changes in practices and/or improvements in healthcare services

9. Health Service Commissioner (Ombudsman)

Health Service Ombudsman for England,
Millbank Tower,
Millbank,
LONDON.
SW1P 4QP.

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10. Independent Complaints Advocacy Service (ICAS)

ICAS is a national service, set up to support people who want to complain about the NHS. ICAS provides advocacy, support, help and advice from experienced workers. The service is totally independent of the NHS, completely confidential, follows equal opportunity principles and is free of charge. The service cannot investigate complaints or assist with claims for financial compensation.

Further details on ICAS can be obtained by telephoning 0845 650 0088.

11. The Local Resolution Stage

The local resolution stage is the key stage in the complaints procedure. It is extremely important to deal with complaints locally, quickly and effectively, both from a practical point of view, and from the point of view of maintaining the satisfaction of users.

The intention of the Local Resolution Stage is that it should be open, fair, flexible and conciliatory. The complainant should be given the opportunity to understand all the possible options for pursuing a complaint, and the consequences of following any of these. The process should encourage communication on all sides and provide face-to-face contact if required.

A system for accepting and dealing with complaints is in place within the practice.

A complaint may be made orally, in writing or electronically. Where a complaint is made orally the responsible person should make a written record of the complaint and provide a copy of the record to the complainant.

All complaints will be acknowledged within three working days of receipt. The acknowledgement may be made orally or in writing. At this time the responsible person must offer to discuss with the complainant

- The manner in which the complaint is to be handled
- The response period in which the investigation (if required) of the complainant is likely to be completed
- When the response is likely to be sent to the complainant

If the complainant does not accept the offer of a discussion the responsible person must determine the response period and notify the complainant in writing of that period.

Within the response letter, the complainant must be advised of their right to seek an independent review of the complaint. The letter will include the contact address for the Health Service Commissioner (Ombudsman)

Health Service Ombudsman for England,
Millbank Tower,
Millbank,
London,
SW1P 4QP

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12. The Independent Review Stage

It is hoped and anticipated that the local resolution stage will provide a satisfactory outcome to the majority of complaints received by the practice. If, however, a complainant is still dissatisfied they can then contact the Health Service Commissioner (Ombudsman) for assistance OR NHS England -

By post
NHS England
PO Box 16738
Redditch
B97 9PT

Electronically using the commissioning board’s email address
england.contactus@nhs.net
Please write ‘For the attention of the Complaints Manager’ in the subject line.

By telephone
0300 311 22 33 (Monday to Friday 8am to 6pm, excluding English Bank Holidays)

13. Monitoring of Complaints

An annual return of the total number of complaints made against the practice must be submitted to Hardwick CCG Complaints Manager, C/O GEM CSU, 3rd Floor Cardinal Square, 10 Nottingham Rd, Derby, SE1 3QT. This will be consolidated into a PCT wide return to the Department of Health and also reported to the PEC and Trust Board through the integrated governance report.
Appendix 1

SEE DOCUMENT – PT – COMPLAINTS LEAFLET IN PUBLISHER NETWORKSHARE, GUIDELINES, ADMIN, COMPLAINTS