

**Complaints  
Policy and Process**

Policy No	C04
Responsible Person	Registered Manager
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Authorised by	Dr Adam Hazell
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Title	<b>Complaints Policy and Process</b>
Author	Martha Walker/ Adam Hazell
Responsible Person	Registered Manager - Dr. Adam Hazell
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References	GMC: Good Medical Practice 2013 DoH: Listening Responding Improving CQC: Fundamental Standards
Appendix	1. Patient Complaint Information Leaflet 2. Complaint Record 3. Complaint Register
Scope	All individuals in the employ of this establishment ( <i>'employ' means any person who is employed, self-employed, a volunteer, working under practising privileges or contract of service with this establishment</i> )

## AIM

To ensure that all patient concerns and complaints are dealt with promptly with due care and consideration, resulting in satisfactory conclusions and improvement in delivery of care where appropriate.

## POLICY

The Tyburn Medical Practice accepts the rights of patients (and their relatives or representatives, if appropriate) to make complaints and to register comments and concerns about the services received, and further accept that they (the patients) should find it easy to do so. The Tyburn Medical welcomes complaints and looks upon them as opportunities to learn, adapt, improve and provide better services.

This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments by patients and their relatives, carers and advocates are taken seriously.

The policy is not designed to apportion blame, to consider the possibility of negligence or to provide compensation. It is not part of the company's disciplinary policy.

This policy ensures that a duty of candour is accepted and delivered by all clinicians, support and administrative staff.

The Tyburn Medical Practice believes that failure to listen to or acknowledge complaints leads to an aggravation of problems, service user dissatisfaction and possible litigation. The Tyburn Medical Practice supports the idea that most complaints, if dealt with early, openly and honestly, can be sorted at a local level between just the complainant and the company.

### Aim of the Complaints Procedure

The Tyburn Medical aims to ensure that its complaints procedure is properly and effectively implemented, and that patients feel confident that their complaints and worries are listened to and acted upon promptly and fairly.

Specifically it aims to ensure that:

- Patients and their representatives are aware of how to complain and that The Tyburn Medical Practice provides easy to use opportunities for them to register their complaints.
- A named person will be responsible for the administration of the procedure.
- Every complaint is acknowledged within 2 working days.
- All complaints are investigated and responded to in writing within 21 days of being made.
- Patients (and their representative, if appropriate) will be updated on the progress of the investigation if the 28 working days cannot be met.
- Complaints are dealt with promptly, fairly and sensitively, with due regard to the upset and worry that they can cause to both service users and staff.

### **Responsibilities**

The registered manager is responsible for following through complaints for the company. All complaints are reviewed at the Clinical Governance Committee meetings.

### **Complaints Procedure**

#### **Verbal complaints**

The Tyburn Medical accepts that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.

Front-line care and administration staff who receive a verbal complaint are expected to seek to solve the problem immediately. If they cannot solve the problem immediately, they should offer to get their line manager to address the problem.

Staff are expected to remain polite, courteous, sympathetic and professional to the complainant. They are taught that there is nothing to be gained by adopting a defensive or aggressive attitude.

At all times in responding to the complaint, staff are encouraged to remain calm and respectful.

Staff should not accept blame, make excuses or blame other staff.

If the complaint is being made on behalf of the patient by a relative or other representative (advocate), it must first be verified that the person has permission to speak for the patient, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the service user when they may not). If in doubt, it should be assumed that the patient's explicit permission is needed prior to discussing the complaint with the advocate.

After talking the problem through, the manager or member of staff dealing with the complaint will suggest a course of action to resolve the complaint. If this course of action is acceptable then the member of staff should clarify the agreement with the complainant (advocate) and agree a way in which the results of the complaint will be communicated to the complainant (i.e. through another meeting or by letter) and the patient.

If the suggested plan of action is not acceptable to the complainant or the patient, then the member of staff or manager will ask the complainant to put their complaint in writing to the registered manager. The complainant should be given a copy of the company's complaints procedure if they do not already have one.

Details of all verbal and written complaints must be recorded in the Complaints Register and the patient's file.

## **Serious or written complaints**

### **Preliminary steps:**

When The Tyburn Medical Practice receives a written complaint it is passed to the named complaints manager who records it in the Complaint Register and sends an acknowledgment e-mail/letter within two working days to the complainant. (If the complaint is received via e-mail then the acknowledgement is returned via e-mail and likewise for a letter.)

The manager also includes a leaflet detailing The Tyburn Medical Practice's procedure for the complainant.

If necessary, further details are obtained from the complainant; if the complaint is not made by the patient but on the patient's behalf, then consent from the patient, preferably in writing, must be obtained from the complainant

If the complaint raises potentially serious matters, advice could be sought from a legal advisor. If legal action is taken at this stage, any investigation by the organisation under the complaints procedure immediately ceases.

*NOTE: Where possible verbal communication should be started with the complainant as soon as possible. All verbal communication must be recorded in the complaint record.*

### **Investigation of the complaint by The Tyburn Medical Practice:**

Immediately on receipt of the complaint, the complaints manager will start an investigation and within 21 working days should be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned.

If the issues are too complex to complete the investigation within 21 working days, the complainant will be informed of any delays.

Dr. Adam Hazell is a member of the Independent Doctors Federation and will refer to the IDF if internal resolution cannot be achieved. Should there still be an impasse then the IDF will refer the complaint to the Independent Healthcare Sector Complaints Adjudication Service. ISCAS and its findings will be final to both parties.

### **Meeting:**

If a meeting is arranged, the complainant will be advised that they may, if they wish, bring a friend or relative or a representative such as an advocate.

At the meeting a detailed explanation of the results of the investigation will be given and also an apology if it is deemed appropriate (apologising for what has happened need not be an admission of liability).

Such a meeting gives the company management the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.

### **Follow-up action:**

After the meeting, or if the complainant does not want a meeting, a written account of the investigation will be sent to the complainant. This includes details of how to approach the Care Quality Commission if the complainant is not satisfied with the outcome.

The outcomes of the investigation and the meeting are recorded in the Complaint Book and any shortcomings in company procedures will be identified and acted upon.

The company management / clinical governance committee formally reviews all complaints at least every three months as part of its quality monitoring and improvement procedures, to identify the lessons learned.

### **Vexatious Complainers**

The Tyburn Medical Practice takes seriously any comments or complaints regarding its service. However, there are service users who can be treated as vexatious complainers due to the inability of the company to meet the outcomes of the complaints, which are never resolved. Vexatious complainers need to be dealt with by the arbitration service in order that the time factor required to investigate repeatedly becomes less of a burden on the organisation, its staff and other service users.

They can share information with CQC but only when they feel it is appropriate. CQC will redirect individual complaints to them, and they will inform CQC about outcomes that point at regulatory failures.

### **Complaints that involve clinicians or other healthcare professionals**

Complaints made about the clinical care delivered at The Tyburn Medical Practice are treated seriously. The manager will immediately seek advice from other clinicians and the other company director and will take advice from the GMC and/or the MDU or other indemnity organisation. The manager will work with these team members to resolve the complaint. (Note: if the complaint is made about the manager, they will share the complaint with another clinician or the other company director).

### **Complaints that involve children**

Complaints involving children are to be treated seriously and investigated with care. If the complaint is of a safeguarding nature, then the safeguarding lead must be contacted immediately and will lead the investigation.

### **Training**

The registered manager is responsible for organising and co-ordinating training on the complaint's procedure.

All staff receive training in dealing with and responding to verbal and written complaints. The complaints policy and procedures are included in new staff members' induction training. In order to learn from mistakes, staff group meetings and supervisions are used to discuss formal complaint issues, in order that all staff can share and learn from the experiences.

### **External bodies**

As required by the CQC, The Tyburn Medical Practice will give the contact details of the regulator in the clinic's Complaint Information leaflet. (Note: the CQC will not arbitrate in a complaint but require the provider to make their contact details available to the service user).

**END**

## Appendix 1

### Patient Complaint Information Leaflet

As a clinic we strive to provide the best possible service for our patients. However, we recognise that sometimes you may feel that we have not met your needs.

If you have any complaint or concern about the service you have received from the doctors or staff working at this centre, you are entitled to ask for an explanation.

We operate an in-house complaints procedure to deal with your complaint. This procedure does not deal with matters of legal liability or compensation.

#### Our promise to you

We will:

- **Listen** to your complaint or concern;
- **Respond** by establishing a clear, appropriate plan of action, and provide you with relevant support and advice;
- **Improve** the service however we can.

#### How to make your complaint

We hope that we can resolve your problem easily and promptly, often at the time the problem arises and with the person concerned. If your problem cannot be sorted out in this way and you wish to make a complaint we would like you to do so as soon as possible. This will enable us to establish what happened more easily.

Please make your complaint in writing to the medical director and registered clinic manager, Dr. Adam Hazell. If you would like assistance with making your complaint, a member of staff will be able to help you complete a Complaint Form.

Please be assured that any complaint you make, written or verbal, will be treated in strict confidence and have no effect upon the level of treatment and care that you receive at the practice.

If you would prefer a family member, friend or advocate to make the complaint on your behalf, they may do so and the centre will work with them, and yourself, to resolve the problem. However, whilst we can receive a complaint on your behalf, we cannot provide any medical information to a third party without your authority. To discuss or provide confidential information we would require a note signed and dated by you. A member of our staff would be happy to assist you with this.

#### What happens next?

Your complaint will be acknowledged within two working days of receiving it. This may well be a phone call from Dr. Hazell to you (or your advocate) to make sure we fully understand your complaint.

We aim to make a full response to you within the next 28 working days. During that time we will conduct an investigation to find out what has happened and whether there is any action that can be taken to put things right. If at the end of 21 days we are still conducting our investigations, we will notify you of the position and keep you fully informed until our investigations have been concluded.

As a result of the practice investigation we will:

- Make sure you receive an apology.
- Find out what has happened and what went wrong.
- Make it possible for you to discuss the problem with those concerned.
- Keep you informed of our progress.
- Identify what we can do to make sure that problem does not happen again.

### **Getting further help with your complaint**

We hope that, through our practice complaints procedure, we can resolve your problem satisfactorily. We believe that this will give us the best chance to put the matter right with you and the opportunity to improve our services for all our patients

Dr. Hazell is a member of the Independent Doctors Federation and will refer to the IDF if internal resolution cannot be achieved. Should there still be an impasse then the IDF will refer the complaint to the Independent Healthcare Sector Complaints Adjudication Service. ISCAS and its findings will be final to both parties.

You may also contact the Care Quality Commission, if you feel that your complaint is not being dealt with in a satisfactory manner, on 03000 616161. (Note: the CQC will not arbitrate in a complaint but require the provider to make their (CQC) contact details available to the service user).

*Thank you,*

*Dr Adam Hazell*

## Appendix 2

### Patient Complaint Record

OFFICE USE ONLY
Problem/complaint received by: .....
Nature of complaint: Clinical/Non-Clinical ( <i>Please circle</i> )
Date and time received: ...../...../..... .....

Patient name: .....

Address: .....

Telephone number: .....

Best time of day to be contacted on phone: .....

If complaint is being made on behalf of the patient, please note relationship to patient:

.....

Telephone number: .....

Best time of day to be contacted on phone: .....

Nature of complaint / problem:

\*Signed by: ..... on ...../...../..... Time: .....

Referred to: ..... on ...../...../..... Time: .....

*\*Please note: If a patient is unable to put his/her complaint in writing, please use this form to record the complaint and indicate that you are writing it on behalf of the patient and ask them to sign at the end of the statement to confirm it is accurate and you have permission to refer it on.*



**Appendix 3**

**Complaint Register**

Register of Complaints from ...../..... to ...../.....

*Note: This register is to be at front of Complaints File – do not identify individuals on this register.*

Date of complaint	Complaint reference	Patient reference	Upheld Yes / No	Notes