**MENDLESHAM MEDICAL GROUP**

**COMPLAINTS PROCEDURE**

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Complaints Procedure Leaflet

**1. Introduction**

The purpose of this document is to ensure that all staff are aware of the complaint procedure within Mendlesham Medical Group, affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received at the practice.

This document applies to all employees of the practice and other individuals performing functions in relation to the practice, such as agency workers, locums and contractors.

All staff at Mendlesham Medical Group are to be fully conversant with this policy and are to understand that all patients have a right to have their complaint acknowledged and investigated properly. Mendlesham Medical Group takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner. We will maintain communication with the complainant (or their representative) throughout, ensuring they know the complaint is being taken seriously.

The practice aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the Equality Act 2010. Consideration has been given to the impact this policy might have in regard to the individual protected characteristics of those to whom it applies.

Every NHS facility has a complaints procedure; this permits a patient (or their nominated representative) to submit a complaint either to the NHS organisation or the organisation that has been commissioned by the NHS to provide a service.

This practice adopts a patient-focused approach to complaint handling in accordance with the [National Health Service England Complaints Policy (2021)](https://www.england.nhs.uk/wp-content/uploads/2021/09/item7ii-nhs-england-complaints-policy.pdf) whilst also conforming to guidance detailed in:

1. [Good Practice Standards for NHS Complaints Handling 2013](https://www.noeccn.org.uk/resources/Documents/Education%20Group/Resources/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf)
2. [Parliamentary & Health Service Ombudsman’s Principles of Good Complaints Handling 2009](https://www.ombudsman.org.uk/sites/default/files/page/0188-Principles-of-Good-Complaint-Handling-bookletweb.pdf)
3. [My Expectations 2014](https://www.ombudsman.org.uk/sites/default/files/Report_My_expectations_for_raising_concerns_and_complaints.pdf)
4. [The NHS Constitution](https://www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-england)
5. [Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16](https://www.cqc.org.uk/sites/default/files/20150510_hsca_2008_regulated_activities_regs_2104_current.pdf)
6. [The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009](https://www.legislation.gov.uk/uksi/2009/309/contents/made?view=plain)

A complaint or concern is an expression of dissatisfaction about an act, omission or decision of NHS England, either verbal or written, and whether justified or not, which requires a response[[1]](#footnote-1).

There is no difference between a ‘formal’ and an ‘informal’ complaint. Both are expressions of dissatisfaction[[2]](#footnote-2).

**2. Procedure**

**2.1 Availability of Information**

Mendlesham Medical Group has prominently displayed notices in the waiting rooms at both Mendlesham and Bacton surgeries detailing the complaints process. In addition, the process is included on the practice website, and a complaints leaflet is also available from both receptions.

**2.2 Responsible Person/s**

At Mendlesham Medical Group, the ‘responsible person/s’ are the Partners. They are responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint.

**2.3** **Complaints Manager**

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At Mendlesham Medical Group, the complaints manager is also the Practice Manager. They are responsible for managing all complaints procedures and must be readily identifiable to service users. The responsible person and complaints manager can be the same person[[3]](#footnote-3).

**2.4 Complaint Options**

The complainant, or their representative, can complain about any aspect of care or treatment they received at this practice to:

1. This practice via the complaints manager
2. NHS England: Telephone 03003 112233, email [england.contactus@nhs.net](mailto:england.contactus@nhs.net) or in writing: NHS England, PO Box 16738, Redditch, B97 9PT. In British Sign Language (BSL) patients can talk to NHS England via a video call to a BSL interpreter

**2.5 Timescale**

The time constraint on bringing a complaint is 12 months from the occurrence giving rise to the complaint, or 12 months from the time that they become aware of the matter about which they wish to complain.

If, however, there are good reasons for complaints not being made within the timescale detailed above, consideration may be afforded to investigating the complaint if it is still feasible to investigate the complaint *effectively* and *fairly.* Should any doubt arise, further guidance should be sought from NHS England by the Complaints Manager.

**2.6 Responding to a Complaint**

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager at Mendlesham Medical Group will provide:

* An initial response to acknowledge **any** complaint within three working days after the complaint is received
* Regular updates during the investigation
* Resolution of the complaint within 40 days

The complaints manager will negotiate a complaints plan with the complainant or their representative which will detail the agreed timescales for investigation. In many cases a prompt response, including an explanation and an apology, will suffice and prevent the complaint from escalating (an apology does not constitute an admission of organisational weakness).

Patients will opt to complain either verbally or in writing. No matter what the cause of the complaint, all staff are to offer empathy when entering into discussions with the complainant. In accordance with Regulation 16[[4]](#footnote-4), all staff at Mendlesham Medical Group will fully understand the complaints process.

**2.7 Verbal Complaints**

If a patient wishes to complain verbally, an appointment is to be made for them to meet the complaints manager who is also the Practice Manager. An acknowledgement of the verbal complaint by the complaints manager, or nominated deputy in their absence, will suffice as an acknowledgement. The complaints manager does not need to respond in writing, but must record the verbal complaint in the complaints log; this will enable any trends to be identified and improvements to services made if applicable. The complaints manager should record notes of the discussion (for reference only) which may be used when discussing complaints at practice meetings.

Discussing the nature of the complaint with the complainant in person or via telephone may enable a local resolution, which is the quickest method of resolving a complaint and will negate the requirement for the complaint to proceed through the formal complaint process.

**2.8 Written Complaints**

If a patient opts to complain in writing (letter or email), the complaints manager is to acknowledge receipt of the complaint within three working days. This acknowledgement will offer the complainant the opportunity to have a discussion about their complaint, while explaining the process and enabling the complaints manager to determine if local resolution is achievable. Where possible, patients and/or their representatives should be encouraged to use the the appropriate complaint form at Annex A or Annex B of this policy.

If local resolution is not an option, the complaints manager will then discuss with the complainant a complaints plan and an agreed time frame for an investigation. Complainants should be advised that this timescale is merely indicative and there may be, on occasion, the need to liaise with other service providers, i.e. secondary care, which could delay the process. However, reassurance will be provided that the complainant will be provided with regular updates by the complaints manager regarding their complaint.

**2.9 Investigating Complaints**

Mendlesham Medical Group will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance. This practice will follow eight standards[[5]](#footnote-5) when addressing complaints:

1. The complainant has a single point of contact in the organisation and is placed at the centre of the process. The nature of their complaint and the outcome they are seeking is established at the outset.
2. The complaint undergoes initial assessment and any necessary immediate action is taken. A lead investigator is identified.
3. Investigations are thorough, where appropriate obtain independent evidence and opinion, and are carried out in accordance with local procedures, national guidance and within legal frameworks.
4. The investigator reviews, organises and evaluates the investigative findings.
5. The judgement reached by the decision maker is transparent, reasonable and based on the evidence available.
6. The complaint documentation is accurate and complete. The investigation is formally recorded, the level of detail appropriate to the nature and seriousness of the complaint.
7. Both the complainant and those complained about are responded to adequately.
8. The investigation of the complaint is complete, impartial and fair.

**2.10 Final Response**

Upon completion of the investigation, a formal written response will be sent to the complainant and will include the following information:

* An explanation of how the complaint was considered
* An apology if appropriate
* An explanation based on facts
* Whether the complaint in full or in part is upheld
* The conclusions reached in relation to the complaint, including any remedial action that the organisation considers to be appropriate
* Confirmation that the organisation is satisfied that any action has been or will be actioned
* Where possible, we will respond to people about any lessons learnt
* Information and contact details of the Parliamentary and Health Service Ombudsman as the next stage of the NHS complaints process

The complaints manager will clearly stipulate that this response is the final response to be issued by Mendlesham Medical Group, and if the complainant is not satisfied then they should contact the ombudsman.

**3. Confidentiality in Relation to Complaints**

Any complaint is investigated with the utmost confidence and all associated documentation will be held separately from the complainant’s medical records.

Complaint confidentiality will be maintained, ensuring only managers and staff who are involved in the investigation know the particulars of the complaint.

**4. Persistent and Unreasonable Complaints**

The management of persistent and unreasonable complaints at Mendlesham Medical Group is achieved by following the guidance detailed at Appendix 2 of the NHS England Complaints Policy: <https://www.england.nhs.uk/wp-content/uploads/2016/07/nhs-england-complaints-policy-amended.pdf>

**5. Complaints Involving Locum Staff**

Mendlesham Medical Group will ensure that all locum staff, be it GPs, nurses or administrative staff, are aware of the complaints process and that they will be expected to partake in any subsequent investigation, even if they have left the practice (keeping in mind the 12-month time frame to complain). Locum staff must receive assurance that they will be treated equally and that there is no discrepancy between locum staff, salaried staff or partners.

**6. Summary**

The care and treatment delivered by Mendlesham Medical Group is done so with due diligence and in accordance with current guidelines. However, it is acknowledged that sometimes things can go wrong. By having an effective complaints process in place, this practice is able to investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learnt and ultimately improving service delivery.

**Annex A – Patient complaint form**

**SECTION 1: PATIENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  | |  | | --- | | Address | |  | |  |
| Date of birth |  |
| Telephone no. |  | Postcode |  |

**SECTION 2: COMPLAINT DETAILS**

Please give full details of the complaint below including dates, times, locations and names of any organisation staff (if known). Continue on a separate page if required.

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**SECTION 3: OUTCOME**

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| --- |
|  |

**SECTION 4: SIGNATURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname & initials |  | Title |  |
| Signature |  | Date |  |

**SECTION 5: ACTIONS**

|  |
| --- |
| Passed to management Yes/No |

**Annex B – Third party patient complaint form**

**SECTION 1: PATIENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  | |  | | --- | | Address | |  | |  |
| Date of birth |  |
| Telephone no. |  | Postcode |  |

**SECTION 2: THIRD PARTY DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  | |  | | --- | | Address | |  | |  |
| Date of birth |  |
| Telephone No. |  | Postcode |  |

**SECTION 3: DECLARATION**

I hereby authorise the individual detailed in Section 2 to act on my behalf in making this complaint and to receive such information as may be considered relevant to the complaint. I understand that any information given about me is limited to that which is relevant to the subsequent investigation of the complaint and may only be disclosed to those people who have consented to act on my behalf.

This authority is for an indefinite period/for a limited period only\*.

Where a limited period applies, this authority is valid until ………./………./………. (insert date).

(\*Delete as necessary)

**SECTION 4: SIGNATURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname & initials |  | Title |  |
| Signature |  | Date |  |

1. [NHS Complaints Policy 2021](https://www.england.nhs.uk/wp-content/uploads/2021/09/item7ii-nhs-england-complaints-policy.pdf) [↑](#footnote-ref-1)
2. [Good Practice Standards for NHS Complaints Handling 2013](https://www.noeccn.org.uk/resources/Documents/Education%20Group/Resources/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf) [↑](#footnote-ref-2)
3. [A Guide to Effective Complaints Resolution England](https://mpscdnuks.azureedge.net/resources/docs/mp/advice-booklets/medicolegal-guides/eng-med-complaints-booklet.pdf) [↑](#footnote-ref-3)
4. [Heath & Social Care Act 2008 Regulation 16](http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints#guidance) [↑](#footnote-ref-4)
5. [The Patients Association Good Practice Standards](https://www.noeccn.org.uk/resources/Documents/Education%20Group/Resources/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf) [↑](#footnote-ref-5)