

The Community Practice



Central Canvey Primary Care Centre, Long Road, Canvey Island, Essex, SS8 0JA

Tel: 01268 222188

Website: www.thecommunitypractice-canveyisland.nhs.uk

C. Document Revision and Approval History

This policy is checked and renewed annually.

This Policy and Procedure complies with The Local Authority Social Service and National Health Service Complaints (England) Regulations 2009, introduced on 1st April 2009 across health and social care and are in line with the Care Quality Commission.

Policy

- The Practice will take all reasonable steps to ensure that its staff are aware of and comply with this Procedure.
- The Practice has nominated the team leader Jade Painter as the complaints advisor, to be responsible for managing the procedures for handling and considering complaints in accordance with the Policy and Procedure. The practice has nominated the Practice Manager Caroline Dove as the Complaints Manager who will oversee all complaints.
- The Practice has nominated Jade Painter and Caroline Dove as the Responsible Persons, to be responsible for ensuring compliance with the Policy and Procedure, and in particular ensuring that action is taken, if necessary, in the light of the outcome of a complaint.
- The Practice will take all reasonable steps to ensure that patients are aware of:
 - The Complaints and Comments Procedure
 - The roles of the Practice, Mid and South Essex ICB & Service Ombudsman with regard to patient complaints.

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This includes the alternative facility for the patient to complain directly to the ICB instead of making their complaint to the Practice, as well as their right to escalate their complaint to the Health Service Ombudsman when they are dissatisfied with the initial response.

N.B. ALL escalation must be directed to the Health Service Ombudsman (so when a patient is dissatisfied with the Practice response to their complaint, they must escalate their complaint to the Health Service Ombudsman, not the ICB).

- Their right to assistance with any complaint from the Patient Advise and Liaison Service (PALS); The Independent Complaints Advocacy Service (ICAS); Citizens Advice Bureaux, NHS Direct and the Care Quality Commission
- The Practice Complaints and Comments Patient Information Leaflet, the Practice Patient Information Leaflet/Booklet and the Practice Website will be the prime information sources for implementing this Policy and will be kept up to date and be made freely available to all Patients.
- Patients must put their complaints **in writing** unless the patient is unable to in which case a verbal complaint will be considered by the Complaints advisor/Complaints manager. The patient will make the care navigator aware why they are unable to make the complaint in writing. The patient / patient's representative will receive a call from the complaints advisor to discuss the complaint. Verbal complaints will not receive an outcome during this call due to investigations that may be needed, and the full outcome will be sent to the patient in writing as per normal procedure.
- All complaints will be treated in the strictest confidence.

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- Patients who make a complaint will not be discriminated against or be subject to any negative effect on their care, treatment, or support.
- Where a complaint investigation requires access to the patient's medical records and involves disclosure of this information to a person outside the Practice, The Complaints advisor/the Complaints Manager, will inform the patient or person acting on their behalf.
- The Practice will maintain a complete record of all complaints and copies of all related correspondence. These records will be kept separately from patient's medical records.

Procedure:

Who can a formal complaint be made to?

ONLY TO – either the Practice – OR- ICB

In the event of anyone not wishing to complain to the Practice they should be directed to Mid and South Essex integrated care board.

You can do this by:

- **Telephone:** 01268 594444
- **E-mail:** Mseicb.complaints@nhs.net
- **Writing:** Mid and South Essex Integrated Care System · Phoenix House, Christopher Martin Road, Basildon, Essex, SS14 3HG

In those cases where the complaint is made to Mid and South Essex ICB, the Practice will comply with all appropriate requests for information and co-operate fully in assisting them to investigate and respond to the complaint.

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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:

- By either parent or, in the absence of both parents, the guardian or other adult who has care of the child; by 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 by 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 Health 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

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.

Complaint initiated on Practice Premises

- In the event that a Practice staff member notices that a patient appears to be distressed/upset on the Practice premises, they should

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immediately contact the complaints advisor, who will attempt to identify and resolve the problem personally at that time, but this may not always be possible.

- In the event of a Practice staff member being advised that a patient wishes to make a complaint, the patient should be passed a copy of the current Practice Complaints and Comments Information Leaflet which advises the patient of the appropriate ways to make a complaint or asked to write their complaint as a letter to the Practice Complaints Advisor/Practice Manager.
- Once a complaint is received it will be acknowledging within 3 working days from the receipt of the form/letter/email

Receipt and acknowledgement of complaints

The Practice may receive the following complaints:

- A complaint made directly by the patient or former patient, who is receiving or has received treatment at the Practice.
- A complaint made on behalf of a patient or former patient (with his/her consent), who is receiving or has received treatment at the Practice.
- Where the patient is a child
 - By either parent, or in the absence of both parents, the guardian or other adult who has care of the child;
 - By a person duly authorised by a Local Authority into whose care the child has been committed under the provisions of the Children Act 1989;
 - By a person duly authorised by a voluntary organisation, by which the child is being accommodated.

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- Where the patient is capable of making a complaint, by a representative who has an interest in his/her welfare.
- All complaints, whether written or verbal will be recorded by the complaints advisor/Practice Manager in the dedicated complaints record.
- All written complaints will be acknowledged in **writing via letter/email within 3 working days of receipt.**
- If the Practice identifies that the complaint will involve an additional provider, it will agree with that provider which organisation will take the lead in responding and communicating with the complainant.

Periods of time within which complaints can be made

- The periods of time within which a complain can be made is normally:
 - 12 months from the date on which the event/incident which is the subject of the complaint occurred; or
 - 12 months from the date on which the event/incident which is the subject of the complaint comes to the complainant's notice.

Initial action upon receipt of a complaint

- All complaints, whether verbal or in writing must be forwarded immediately to the Complaints advisor.
- Where the complaint is made verbally, a written record will be made of the complaint.

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- A verbal or written acknowledgement of receipt of the complaint must be made not later than 3 working days after the day on which the Practice receives the complaint.
- If the complaint is made verbally, if the matter can be resolved within one working day, then there is no further requirement to respond in writing to the complainant.
- This written acknowledgement will include:
 - The name and contact details of the complaints adviser who will be investigating the complaint.
- As much of the following information as possible will be obtained, to enable their concerns to be assessed correctly, resolved quickly if possible and build a good ongoing relationship with them:
 - Ascertain they would like to be addressed – as Mr, Mrs, Ms or by their first name.
 - Ascertain how they wish to be kept informed about how their complaint is being dealt with – by phone, letter, email or through a third party such as an advocacy or support service.
 - Check if consent is needed to access someone’s personal records
 - Check if they have any disabilities or circumstances that need to be taken account of.
 - Ensure that they are aware that they can request an advocate to support them throughout the complaints process, including at the first meeting.
 - Systematically go through the reasons for the complaining so that there is a clear understanding why they are dissatisfied.
 - Ascertain what they would like to happen as a result of the complaint (for example, an apology, new appointment,

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reimbursement of costs or loss of personal belongings or an explanation).

- Advise them at the outset if their expectations are not feasible or realistic.
- Formulate and agree a plan of action, including when and how the complainant will hear back from the Practice.
- If it is considered that the matter can be resolved quickly without further investigation, the Practice will do so, providing the complainant agrees and there is no risk to other service users.
- In the event the complainant does not accept the offer of a discussion, the Practice will itself determine the response period and notify the complainant in writing of that period.

Investigation and response

- Complaints should be resolved within a “relevant period” i.e. **6 months from the day on which the complaint was received.**
- However, at any time during the “relevant period”, The Complaints Advisor / Practice Complaints Manager or Responsible Person has the discretion to liaise with the complainant to extend this timeframe to a mutually agreeable date, provided it is still possible to carry out a full and proper investigation of the complaint effectively and fairly.

When an extension to the 6 months timeframe is being considered, it is essential that the Complaints Advisor / complaints Manager or Responsible Person takes into account that either party may not be able to remember accurately the essential details of the event/incident and also the feasibility of being able to obtain other essential evidence specific to the time of the event.

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- The Practice will investigate the complaint speedily and efficiently and as far as reasonably practicable, keep the complainant informed of the progress of the investigation.
- After the investigation is completed, the Practice will compile a written report which incorporates:
 - A summary of each element of the complaint
 - Details of policies or guidelines followed
 - A summary of the investigation
 - Details of key issues or facts identified by an investigation
 - Conclusions of the investigation: was there an error, omission or shortfall by your organisation? Did this disadvantage the complainant, and if so, how?
 - What needs to be done to put things right
 - An apology if one is needed
 - An explanation of what will happen next (e.g. what will be done, who will do it and when)
 - Information on what the person complaining should do if they are still unhappy and wish to escalate the complaint, including full contact information on the Health Service Ombudsman.
- The Practice will send the complainant a response within the 6 months “relevant period”, signed by the complaint’s advisor / complaints manager, the Practice Responsible Person. The response will incorporate:
 - 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

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- 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, Millbank Tower, Millbank, London, SW1P 4QP 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 5:30pm, Monday to Friday or send a text to their 'call back' service: 07624813005

The final letter should not include:

- Any discussion or offer of compensation without the express involvement and agreement of the relevant defence 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.
- If the Practice does not send the complainant a response within the 6 month "relevant period", it will
 - Notify the complainant in writing accordingly and explain the reason why; and
 - Send the complainant in writing a response as soon as reasonably practicable after the 6 month "relevant period".
- In the event that the complaint has been incorrectly sent to the Practice, the Practice will advise the patient of this fact within 5 working days from its initial receipt and ask them if they want it to be forwarded to the correct organisation. If it is sent on, the Practice

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will advise the patient of the correct organisation's full contact and address details.

Handling Unreasonable Complaints

- In situations where the person making the complaint can become aggressive or unreasonable, the Practice will instigate the appropriate actions from the list below and will advise the complainant accordingly:
 - Ensure contact is being overseen by an appropriate senior member of staff who will act as the single point of contact and make it clear to the complainant that other members of staff will be unable to help them.
 - Ask that they make contact in only one way, appropriate to their needs (e.g. in writing).
 - Place a time limit on any contact.
 - Restrict the number of calls or meetings during a specified period.
 - Ensure that a witness will be involved in each contact.
 - Refuse to register repeated complaints about the same issue.
 - Do not respond to correspondence regarding a matter that has already been closed, only acknowledge it.
 - Explain that you do not respond to correspondence that is abusive.
 - Make contact through a third person such as a specialist advocate.
 - Ask the complainant to agree how they will behave when dealing with your service in the future.
 - Return any irrelevant documentation and remind them that it will not be returned again.
 - When using any of these approaches to manage contact with unreasonable or aggressive people, provide an explanation of what is occurring and why.
 - Maintain a detailed record of each contact during the ongoing relationship.

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Complaints Register

To ensure the Practice monitors, handles and reviews complaints in a logical and timely manner, and to keep an audit trail of steps taken and decisions reached, the Practice records all complaints received on a dedicated complaints register (see [Appendix A](#)).

Complaints involving Locums

It is important that all complaints made to the Practice regarding or involving a locum (Doctor, Nurse or any other temporary staff) are dealt with by the Practice and not passed off to a Locum Agency or the individual Locum to investigate and respond. The responsibility for handling and investigating all complaints rests with the Practice.

Locum staff should however be involved at an early stage and be advised of the complaint in order that they can provide any explanations, preferable in writing. It would not be usually appropriate for any opinions to be expressed by the Practice on Locum staff. Providing their factual account along with any factual account from the Practice is the best way to proceed.

The Practice will ensure that on engaging any Locum, the Locum Agreement will include and assurance that they will participate in any complaint investigation where they are involved or can provide any material evidence. The practice will ensure that there is no discrepancy in the way it investigates or handles complaints between any Locum staff and either Practice Partners, salaried staff, students or trainees or any other employees.