



Complaints Procedure (England)

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1.0	January 2021	Deborah Harvey	Deborah Harvey	

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Complaints Procedure

1 Introduction

1.1 Policy statement

The purpose of this document is to ensure that all staff are aware of the complaints procedure within **St Peter's Medical Centre** affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received at the practice.

1.2 Status

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

1.3 Training and support

The practice will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

2 Scope

2.1 Who it applies to

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.

2.2 Why and how it applies to them

All staff at **St Peter's Medical Centre** are to be fully conversant with this policy and is to understand that all patients have a right to have their complaint acknowledged and investigated properly. **St Peter's Medical Centre** 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.



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3 Guidance

3.1 Legislation

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 \(2017\)](#) whilst also conforming to guidance detailed in:

1. [Good Practice Standards for NHS Complaints Handling 2013](#)
2. [Parliamentary & Health Service Ombudsman's Principles of Good Complaints Handling 2009](#)
3. [My Expectations 2014](#)
4. [The NHS Constitution](#)
5. [Health and Social Care Act 2008 \(Regulated Activities\) Regulations 2014: Regulation 16](#)

3.2 Definitions of a complaint

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 response¹.

There is no difference between a "formal" and an "informal" complaint. Both are expressions of dissatisfaction².

3.3 Complaints procedure promulgation

St Peter's Medical Centre has prominently displayed on our Practice TV screen detailing the complaints process. In addition, the process is included on the practice website and a complaints leaflet is also available from reception.

The information provided is written in conjunction with this policy and refers to the legislation detailed in 3.1.

3.4 Responsible person

At **St Peter's Medical Centre**, the responsible person is Deborah Harvey, Practice Manager They are responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint.

¹ [NHS\(E\) Complaints Policy 2017](#)

² [Good Practice for Handling NHS Complaints 2013](#)



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3.5 Complaints manager

At **St Peter's Medical Centre**, the complaints manager is: Deborah HARVEY, 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 person³.

3.6 Complainant options

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

- a. This practice via the complaints manager
- b. NHS England: Telephone 03003 112233, email 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

3.7 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 Deborah HARVEY, Practice Manager

3.8 Response times

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager at **St Peter's Medical Centre** will provide an initial response to acknowledge **any** complaint within three working days after the complaint is received.

There is no end date by which the complainant must receive their response to allow a full investigation including that of third parties to occur. However, regular updates from the practice to the complainant must occur throughout the investigation. In

³[A Guide to Effective Complaints Resolution England](#)



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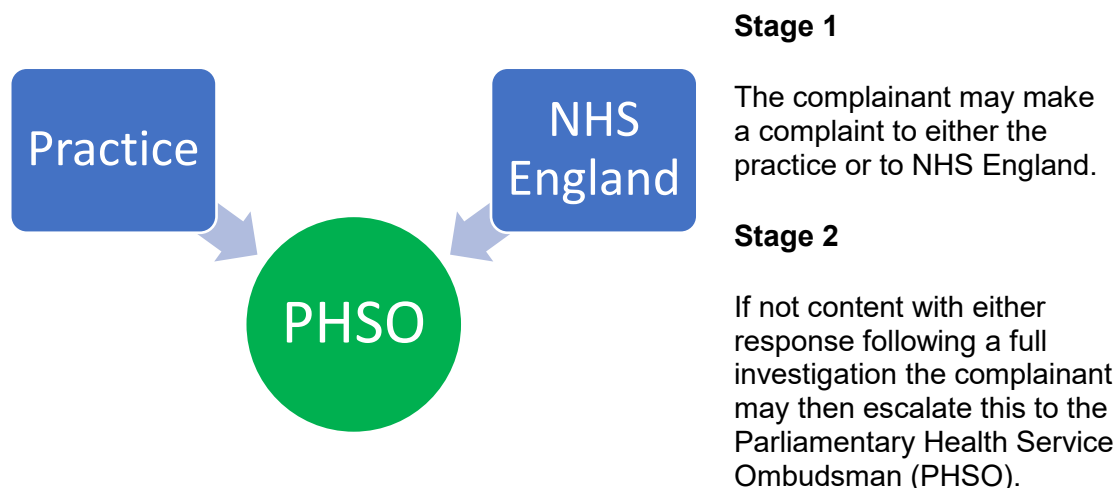
addition to regular updates, a response or decision should be made within six months; if it extends beyond this time then you must advise the complainant⁴.

The complaints manager will advise of the complaints procedure to the complainant or their representative. In many cases a prompt response and, if upheld, an explanation and an apology will suffice and will prevent the complaint from escalating (an apology does not constitute an admission of organisational weakness).

3.9 Route of a complaint

Patients will opt to complain either verbally or in writing. No matter what the cause of the complaint, all staff is to offer empathy when entering into discussions with the complainant. In accordance with Regulation 16⁵, all staff at **St Peter's Medical Centre** will fully understand the complaints process.

The complainant should be provided with a copy of the Practice Leaflet detailing the complaints process at [Annex F](#) and they should be advised that the process is a TWO STAGE process as detailed below:



Important: Complaints do not get escalated to NHSE following the practice response. A complaint made to either/or the practice or NHS E will escalate to PHSO.

3.10 Verbal complaint

If a patient wishes to complain verbally and if the patient is content for the person dealing with the complaint to deal with this matter and if appropriate to do so, then complaints should be managed at this level. After this conversation, the patient may suggest that no further action is needed. If this should be the case, then the matter

⁴ <http://www.themdu.com/guidance-and-advice/journals/inpractice-july-2014/timescales-for-acknowledging-investigating-and-responding-to-complaints>

⁵ [Heath & Social Care Act 2008 Regulation 16](#)



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can be deemed to be closed, although the complaints manager should still be informed as these needs to be added to the complaints log at [Annex G](#).

This local resolution is the quickest method of resolving a complaint and will negate the requirement for the complaint to proceed through the formal complaint process.

An acknowledgement of the verbal complaint will suffice and therefore the complaints manager does not need to subsequently respond in writing, although the verbal complaint must be recorded 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.

If the matter demands immediate attention, contact the complaints manager who may offer the patient an appointment or may offer to see the complainant at this stage.

Staff are reminded that when internally escalating any complaint to the complaints manager then a full explanation of the events leading to the complaint is to be given to allow any appropriate response.

3.11 Written complaints

An alternative option is for any complaint to be forwarded by letter or email to the complaints manager. When a complaint is received then the response is to be as per [Article 3.8](#).

3.12 Complaints advocates

Details of how patients can complain and also how to find independent NHS complaints advocates are to be detailed within the practice leaflet at [Annex F](#). Additionally, the patient should be advised that the local Healthwatch:

Harrow Mencap

Which is an Independent Advocacy Service,

Telephone:- 0208 869 8484

Email: advocacy@harrowmencap.org.uk

You can also write to them at

3 Jardine House

Harrovia Business Village

Bessborough Road

Harrow. HA1 3EX

Advocacy Service

Advocacy can help you understand your rights and the choices you have. They can also assist you to speak up about the care you receive. You may get an advocate if you find it hard to:

- Understand what is happening and the choices that you have
- Decide what care and support you need
- Tell people what you want

Harrow Independent Care Act Advocacy is available during your:



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- Care and support assessments
- Care and support reviews
- Care and support planning
- Safeguarding processes

Independent advocacy services include:

1. POhWER – a charity that helps people to be involved in decisions being made about their care. POhWER's support centre can be contacted via 0300 456 2370
2. SeAp Advocacy – gives advocacy support. Call 0330 440 9000 for advice or text SEAP to 80800 and someone will get back to you.
3. Age UK – may have advocates in your area. Visit their website or call 0800 055 6112

3.13 Investigating complaints

St Peter's Medical Centre will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance.

This practice will adhere to the following standards 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.

3.14 Final formal response to a complaint

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



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- 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, a response will be given 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 **St Peter's Medical Centre** and if the complainant is not satisfied then they should contact the PHSO.

3.15 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.

3.16 Persistent and unreasonable complaints

The management of persistent and unreasonable complaints at **St Peter's Medical Centre** is achieved by following the guidance detailed at [Appendix 2](#) of the NHS England Complaints Policy.

3.17 Complaints involving locum staff

St Peter's Medical Centre 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.

3.18 Summary

The care and treatment delivered by **St Peter's Medical Centre** 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.



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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 practice staff (if known). Continue on a separate page if required.

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SECTION 3: OUTCOME

--

SECTION 4: SIGNATURE

Surname & initials		Title	
Signature		Date	

SECTION 5: ACTIONS

Passed to management	YES	/	NO
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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

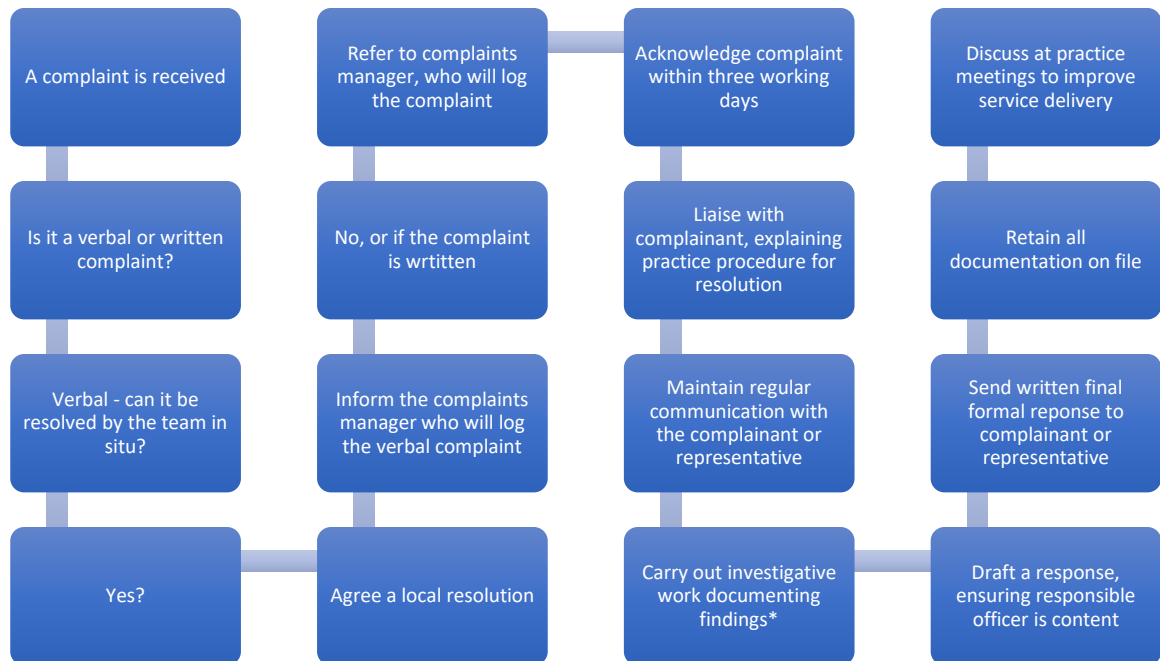
SECTION 4: SIGNATURE

Surname & initials		Title	
Signature		Date	



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Annex C – Complaint Handling Desktop Aide-Memoire



* It may be necessary to liaise with external third parties such as hospitals in order to gather additional information or to formulate a joint response. Where this is the case the patient or their representative must be advised accordingly.



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Annex D – Annual Complaints Report

Introduction

The purpose of the Annual Complaints Report (ACR herein) is to detail the complaints received by **St Peter's Medical Centre** during each financial year. The practice takes a proactive approach to the management of complaints, a process that is aimed at improving the quality of service and delivering a better patient experience.

Purpose

The purpose of the ACR is to:

- Specify the number of complaints received during the reporting period
- Specify the number of complaints that were warranted, unwarranted or partially warranted
- Specify the nature of the complaints (source, staff group, categorisation)
- Specify the number of referrals to the ombudsman
- Identify trends that can be analysed and audits undertaken
- Identify remedial actions and learning points
- Notify patients of any changes to policy as a result of complaints

In accordance with NHS(E) directives regarding the complaints process, the ACR for **St Peter's Medical Centre** will be available to the public upon request.

Tabular representation

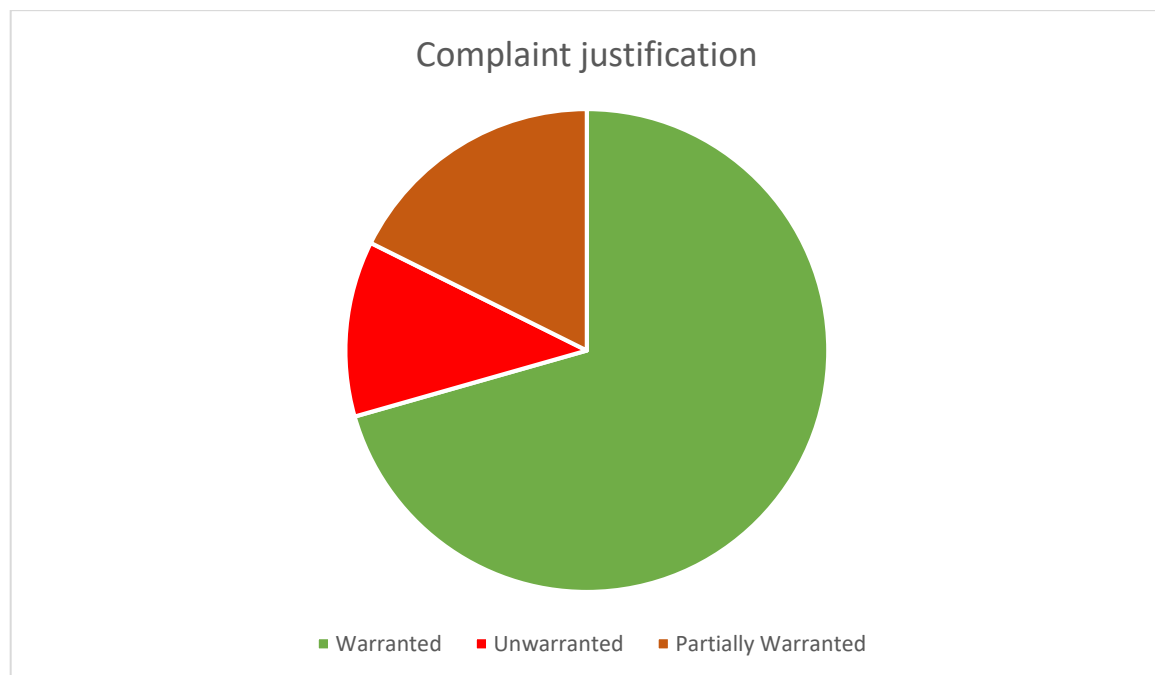
For ease of reading, the ACR is presented in tabular form and illustrated overleaf.



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Example Table 1: – Complaints received during reporting year [01 Apr 20xx – 31 Mar 20xx

Month	Number of complaints received	Warranted	Unwarranted	Partially warranted
April	2	1	1	0
May	2	1	1	0
June	2	1	0	1
July	3	1	0	2
August	1	1	0	0
September	1	1	0	0
October	1	1	0	0
November	0	0	0	0
December	2	2	0	0
January	1	1	0	0
February	1	1	0	0
March	1	1	0	0

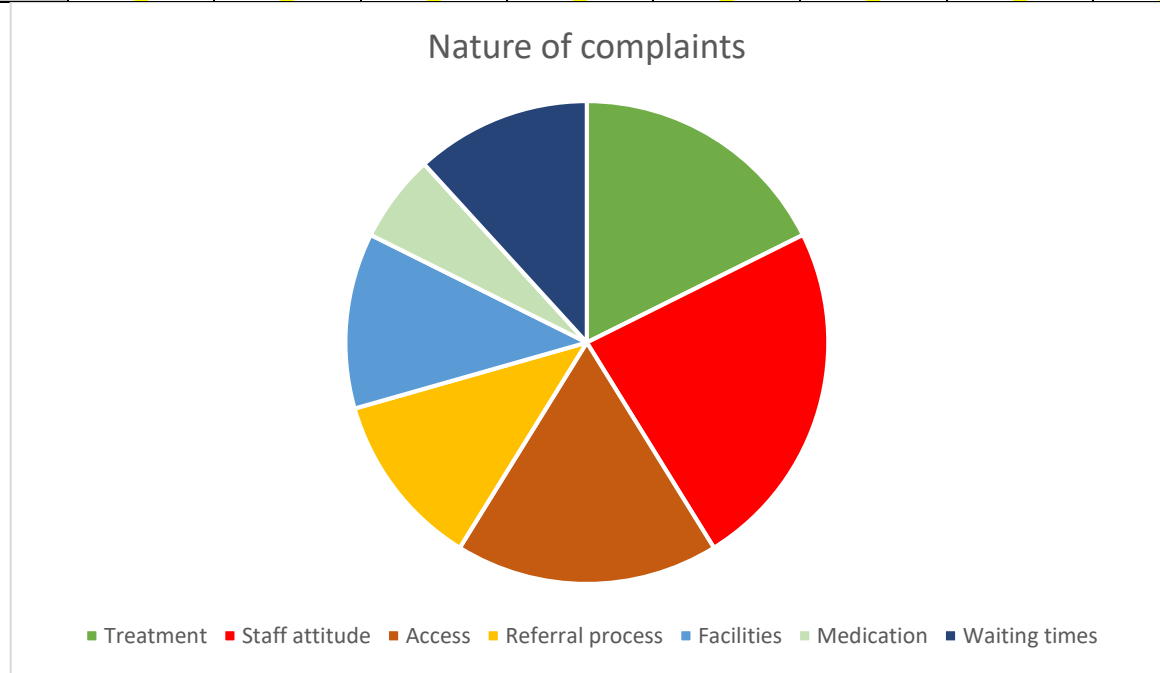




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Example Table 2 – Nature of complaints during the reporting year [01 April 20xx – 31 March 20xx– add columns as required.

Month	Number of complaints	Treatment	Staff attitude	Access	Referral process	Facilities	Medication	Waiting times
April	2	1	1	0	0	0	0	0
May	2	1	0	0	1	0	0	0
June	2	0	0	1	0	1	0	0
July	3	0	0	0	0	0	1	2
Aug	1	0	1	0	0	0	0	0
Sept	1	0	0	1	0	0	0	0
Oct	1	0	0	0	1	0	0	0
Nov	0	0	0	0	0	0	0	0
Dec	2	0	1	1	0	0	0	0
Jan	1	1	0	0	0	0	0	0
Feb	1	0	1	0	0	0	0	0
Mar	1	0	0	0	0	1	0	0

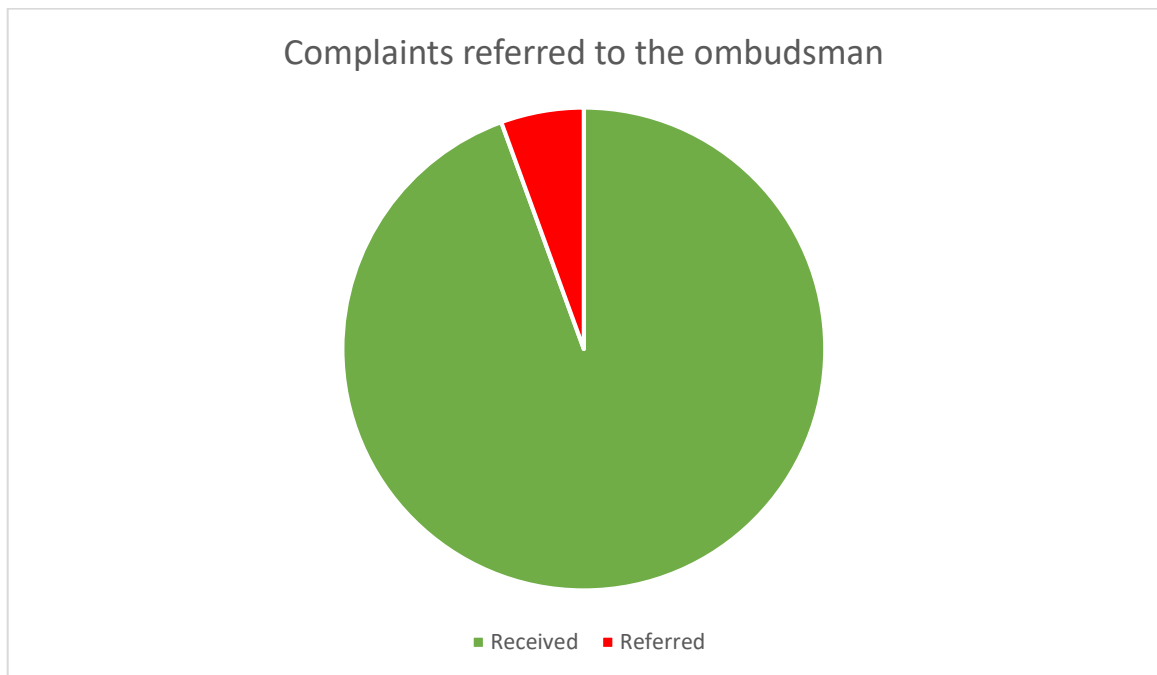




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Example Table 3 – Referrals to the ombudsman during the reporting year [01 Apr 20xx – 31 Mar 20xx]

Month	Number of complaints received	Referrals to ombudsman
April	2	0
May	2	0
June	2	0
July	3	0
August	1	0
September	1	0
October	1	1
November	0	0
December	2	0
January	1	0
February	1	0
March	1	0



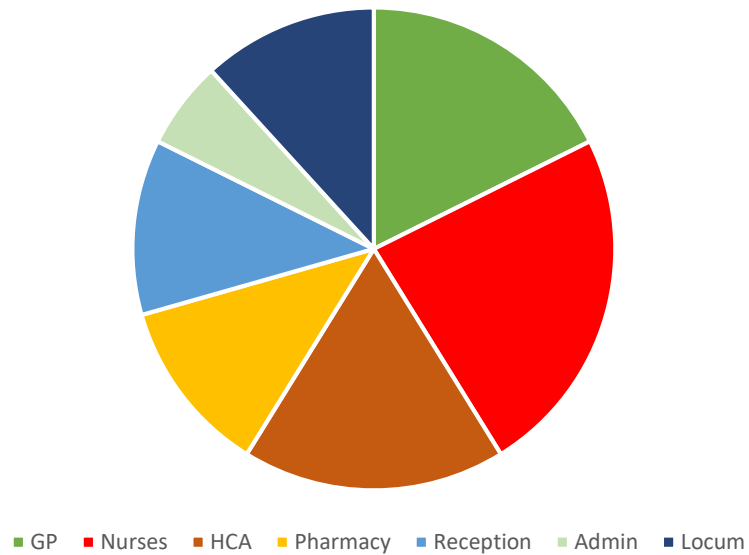


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Example Table 4 – Categorisation of complaints by staff group during the reporting year [01 April 20xx – 31 March 20xx

Month	Number of complaints	GP	Nurse	HCA	Pharmacy	Reception	Admin	Locum
April	2	1	1	0	0	0	0	0
May	2	1	0	0	1	0	0	0
June	2	0	0	1	0	1	0	0
July	3	0	0	0	0	0	1	2
Aug	1	0	1	0	0	0	0	0
Sept	1	0	0	1	0	0	0	0
Oct	1	0	0	0	1	0	0	0
Nov	0	0	0	0	0	0	0	0
Dec	2	0	1	1	0	0	0	0
Jan	1	1	0	0	0	0	0	0
Feb	1	0	1	0	0	0	0	0
Mar	1	0	0	0	0	1	0	0

Categorisation by staff group





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Example Table 5 – Complaint trends identified during the reporting year [01 April 20xx– 31 March 20xx

Month	Number of complaints received	Trends by category	Trends by staff group
April	2	Treatment (ear-syringing)	Nursing
May	2		
June	2		
July	3		
August	1		
September	1		
October	1		
November	0		
December	2	Attitude	Reception staff
January	1		
February	1		
March	1		

Trend identification



■ Treatment ■ Attitude



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Example Table 6 – Remedial actions/lessons identified

Month	Number of complaints received	Remedial actions	Lessons identified	Comments
April	2	Treatment plans reviewed for ear-syringing	Staff require regular refresher training	Annual training to be arranged by....
May	2			
June	2			
July	3			
August	1	Review GP rota to ensure sufficient coverage to maintain acceptable waiting times	GPs must ensure they discuss leave requirements in advance with PM – no later than June	Leave pro forma to be emailed to all staff following Easter for summer to enable management time to source cover
September	1			
October	1			
November	0			
December	2	Staff survey conducted, identifying excessive workload at peak times during the year	Practice manager/lead receptionist to maintain an awareness during peak times, monitoring staff for fatigue, etc.	Discuss the rotation of staff between administrative roles and reception to alleviate fatigue
January	1			
February	1			
March	1			



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Example Table 7 – Changes to practice policy

Month	Number of complaints received	Changes to policy
April	2	Ear-syringing protocol changed to reflect annual refresher training requirement
May	2	
June	2	
July	3	
August	1	HR policy regarding leave requests changed, stating new cut-off dates for summer break
September	1	
October	1	
November	0	
December	2	HR policy update regarding monitoring of staff for fatigue
January	1	
February	1	
March	1	

SUMMARY

This ACR ensures transparency between **St Peter's Medical Centre** and its patients. The information is accurate and reflects the complaints received during the reporting year [01 April 20xx to 31 March 20xx]. This information is available to the public upon request and will be displayed within the practice website and also discussed at the PPG meeting.

[Signed]

[Insert name]

[Insert role/position]

[Insert date]



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Annex E – Complaint Review Form

Introduction

The purpose of the complaint review form is to enable **St Peter's Medical Centre** to conduct a detailed analysis of every complaint received with a view to making recommendations for improvements to services and enhancing patient experience within the practice.

Any key points will be used to populate the Annual Complaints Review, identifying trends and learning points for further development in the handling of complaints and routines within the practice.

Usage

This form can be used by the complaints manager and responsible officer and any other parties involved in the management of complaints at **St Peter's Medical Centre**. Where the complaint involves more than one NHS organisation, discussions will take place between the bodies concerned about the most appropriate body to take the lead in coordinating the complaint and communicating with the complainant⁶.

Complaint review form is shown overleaf.

⁶ [NHS England Complaints Policy](#)



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COMPLAINT REVIEW FORM St Peter's Medical Centre

Complaint reference number	Patient identifying number	Date of review

Summary of complaint:

Summary of learning points (explain how this will be communicated to the team):

Action points:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

By whom:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

Complaint category (please delete as appropriate):

- Treatment
- Staff attitude
- Access
- Referral process
- Facilities
- Medication
- Waiting times



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Complaint staff group (please delete as appropriate):

- GP
- Nurses
- HCA
- Pharmacy/Dispensary
- Receptionists
- Admin
- Locum staff

Date team meeting held to discuss complaint (detail those present):

Review date (detail when the complaint was reviewed to ensure actions completed):

Complaints manager signature:	
Complaints manager name:	
Date:	

Responsible officer signature:	
Responsible officer name:	
Date:	

Annex F – Practice Leaflet

A patient information leaflet regarding complaints has been written for this practice

No	Date Received	Format	Consent obtained	Complaint description	Ack'd date	Outcome	Upheld	Date closed
1/19	08 Jan 19	In person	N/A	Fall in car park	N/A	Apologised, SEA raised, repairs to car park. Discussed at all meetings	Yes	31 Jan 19
2/19	10 Feb 19	Email	Yes	Wrong tablets prescribed on mother's prescription	12 Feb 19	Advised that the drug was the same, although different branding. Letter written to daughter following investigation	No	19 Feb 19

Annex G – Complaints Log (example)