



Complaints Policy

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1.1	July 2017	JM	GP Partners	Updated CQC contact
1.1	August 2020	FP	GP Partners	
1.2	April 2022	FP	GP Partners	Added digital link/updated contact
1.2	April 2023	FP	GP Partners	Added digital ICB link/contact
1.3	April 2024	FP	GP Partners	Policy contacts updated

INTRODUCTION

Although the Practice strives to meet individual patient needs but it also acknowledges that there will always be room for improvement and reflective learning. With this in mind the Practice operates a complaints procedure that adheres to the Department of Health guidelines and meets the NHS requirements.

This procedure sets out the Practice's approach to the handling of complaints and is intended both as an internal guide that should be made readily available to all staff, and also as a summary setting out the approach to complaint handling that should be available at reception for any patient requesting a copy. Complaints should be made within 12 months of the incident as per NHS guidelines.

The sooner you inform the Practice of the problem, the sooner we can address your complaint and treat it appropriately.

We aim to try to resolve problems immediately and effectively using the following three principles:

- **LISTENING** - We will acknowledge your complaint within three working days and aim to offer you a meeting or telephone consultation with the Practice Manager within 7 working days. This will enable us to find out what went wrong and discuss this problem with the relevant member of staff

- **IMPROVING** - Complaints are one of the tools that provide the Practice with a vital insight into how the services that we offer are received by our patient's and where we can make improvements if necessary.
- **RESPONDING** - Once we have all the required information concerning the incident, we will inform you of the outcome of the investigation and offer you an apology, where this is appropriate, within 28 days of receipt.

In the unfortunate event that you feel that you have a problem that needs to be addressed and cannot be resolved at the time with the person concerned; then please complete one of the complaints forms situated on the reception desk. Alternatively, you can use the electronic form located on the Practice Website using the link below:

[Practice policies - Darwen Health Link](#)

COMPLAINTS POLICY

The Practice will take reasonable steps to ensure that patients are aware of:

- The complaints procedure
- The time limit for resolution
- How it will be dealt with
- Who will deal with the complaint
- Lead GP handling complaints
- Their right of appeal
- Further action they can take if not satisfied
- The fact that any issues will not affect any ongoing treatment from the surgery, and they will continue to be treated

RESPONSIBLE PERSON

At Darwen Healthlink, the responsible person is Dr Naylea Choudry, who is responsible for ensuring compliance with the complaints regulations and making sure action is taken as a result of the complaint.

COMPLAINTS MANAGER

At Darwen Healthlink complaints should be addressed to the Practice Manager, Mrs Frances Procter, or Office Supervisor, Mrs Karen Dudley. The Lead GP will assist with the investigations, we kindly ask that the complainant provides as much detail as possible on the complaint form.

PROCEDURE**Receiving of complaints**

- The Practice may receive a complaint made by, or (with his/her consent) on behalf of a patient, or former patient, who is receiving or has received treatment at the Practice, or:
- 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 to whose care the child has been committed under the provisions of the Children Act 2004;
- by a person duly authorised by a voluntary organisation by which the child is being accommodated
- where the patient is incapable of making a complaint, for example if a patient has died or lacks capacity or any other reason, by a relative or other adult who has an interest in his/her welfare.
- All available resources will be made available to provide fair access to services to people of all backgrounds and circumstances e.g. provision of translation service etc, when appropriate.

Period within which complaints can be made

- The period for making a complaint is normally 12 months from the date on which the event which is the subject of the complaint occurred;
or
12 months from the date on which the event which is the subject of the complaint comes to the complainant's notice.
- The Practice Manager or Lead GP does have the discretion to extend the time limits if the complainant has good reason for not making the complaint sooner, or where it is still possible to properly investigate the complaint despite extended delay. For example, longer periods of complaint timescales may apply to specific clinical areas.
- When considering an extension to the time limit it is important that the Practice Manager or the Lead GP takes into consideration that the passage of time may prevent an accurate recollection of events by the clinician concerned or by the person bringing the complaint. The collection of evidence, clinical guidelines or other resources relating to the time when the complaint event arose may also be difficult to establish or obtain. These factors may be considered as suitable reason for declining a time limit extension. Should any doubt arise, further guidance should be sought from NHS England by the complaints manager.
- Complaints not required to be dealt with include a complaint the subject matter of which is the same as that of a complaint that has previously been made and resolved.

Action upon receipt of a complaint***Verbal complaints***

- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 state that all complaints should be acknowledged within three working days after the day the complaint is received.
- 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 can be deemed to be closed.
- 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 meetings.
- If the matter demands immediate attention, the complaints manager should be contacted who may then offer the patient an appointment or may offer to see the complainant at this stage.

All other complaints

- It is always better to try and deal with the complaint at the earliest opportunity and often it can be concluded at that point
- If it is not possible to manage a verbal complaint immediately or the outcome is not satisfactory the complaints manager / deputy will make a written record of the complaint and provide a copy of the written record to the complainant. This ensures that each side are well aware of the issues for resolution.
- On receipt of a written complaint, the complaints manager at Darwen Healthlink will provide an initial response to acknowledge any complaint within three working days after the complaint is received, saying that a further response will be sent following an investigation of the issues. It should also say who is dealing with it i.e. GP or practice manager.
- All complaints will be added to the complaints log
- The complainant has a right to be regularly updated regarding the progress of their complaint if a case has passed the 28 working day target (or the timescale agreed with the complainant if different), thereafter they (and their advocate if relevant) should receive an update every 10 working days after the target date has been surpassed. This could be by telephone, email or letter but the format should be agreed with the

complainant

- A full investigation should take place with written notes and a log of the progress being made.
- It may be that outside sources will need to be contacted and, if that is the case then a patient consent form will need to be signed to make such a request, and one organisation will take the lead.
- In addition to regular updates, a response or decision should ideally be made within six months. If it extends beyond this time, then the complainant must be advised. Complainants can approach the Parliamentary and Health Service Ombudsman (PHSO) if there is no response within 6 months.
- If a complainant has stated in writing intent to take legal proceedings in relation to the substance of the complaint, medical indemnity guidance will be sought, and it may not be appropriate to deal with the complaint in the above manner.

Complaints on behalf of another person

- The practice is bound by medical confidentiality and therefore cannot divulge information regarding another patient's medical history. It is best if the person involved contacts the Practice direct but if this is not possible then written consent from the person involved will need to be provided to grant you permission to discuss the complaint on their behalf. The Practice will ensure that your confidentiality is respected and that you will be treated in a professional manner.

Complaints involving external staff

- Should a complaint be received about a member of another organisation's staff, then this is to be brought to the attention of the complaints manager at the earliest opportunity. The complaints manager will then liaise with the other organisation's manager.

Complaints involving locum staff

- Darwen Healthlink will ensure that all locum staff, be it GPs, nurses, or administrative staff, are aware of both the complaints process and that they will be expected to partake in any subsequent investigation, even if they have left the organisation (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 difference between locum staff, salaried staff, or partners.

Unreasonable complaints

- Where a complainant becomes aggressive or, despite effective complaint handling, unreasonable in their promotion of the complaint, some or all of the following formal provisions will apply and will be communicated to the patient:
- The complaint will be managed by one named individual at senior level who will be the only contact for the patient
- Contact will be limited to one method only (e.g. in writing)
- Place a time limit on each contact
- The number of contacts in a time period will be restricted
- A witness will be present for all contacts
- Repeated complaints about the same issue will be refused
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behaviour standards
- Return irrelevant documentation
- Keep detailed records

Complaints advocates

Details of how patients can complain and also how to find independent NHS complaints advocates are below.

Additionally, the patient should be advised that the local Healthwatch www.healthwatch.co.uk can also help to find an independent NHS complaints advocacy services in the area.

Independent advocacy services include:

- 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 or go to www.pohwer.net
- Age UK – may have advocates in the area. Visit their website or call 0800 055 6112
- Local councils can offer support in helping the complainant to find an advocacy service. Visit <https://www.gov.uk/find-your-local-council>
- Voice Ability Charity supporting those with Learning Disabilities or Difficulties in submitting a complaint [VoiceAbility | NHS complaints advocacy](#)

Final Response

This will include:

- A clear statement of the issues, investigations, and the findings, giving clear evidence-based reasons for decisions if appropriate
- Where errors have occurred, explain these fully and state what will be done to put these right, or prevent repetition

- A focus on fair and proportionate outcomes for the patient
- A clear statement that the response is the final one, or that further action or reports will be sent later
- An apology or explanation as appropriate
- A statement of the right to escalate the complaint, together with the relevant contact detail process if the complainant is still not satisfied
- If at that point resolution is still not achieved, then either side can refer the matter to the PHSO

Confidentiality

- All complaints must be treated in the strictest confidence.
- Where the investigation of the complaint requires consideration of the patient's medical records, the Practice Manager must inform the patient or person acting on his/her behalf if the investigation will involve disclosure of information contained in those records to a person other than the practice or an employee of the practice.
- The practice must keep a record of all complaints and copies of all correspondence relating to complaints, but such records must be kept separate from patients' medical records.

Summary

The care and treatment delivered by Darwen Healthlink 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 organisation is able to investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learned and ultimately improving service delivery.

You do not need to worry that your future care will be affected due to you making a complaint as all complaints are treated seriously. However, if you feel that your needs have not been met and you wish to discuss this further, then you may contact **NHS Lancashire and South Cumbria Integrated Care Board (ICB)** the details are:

By post:

NHS Lancashire & South Cumbria ICB
Patient Experience Team
Jubilee House
Lancashire Business Park
Leyland
PR26 6TR

Telephone: 0300 373 3550

By E-mail: lscicb-fw.patientexperience@nhs.net

More information can be found at:

<https://www.lancashireandsouthcumbria.icb.nhs.uk/contact-us/customer-care-team>

If the complainant remains dissatisfied

If the complainant remains dissatisfied with the response from the practice or NHS Lancashire & South Cumbria ICB and feel's there is nothing further to be obtained by going back to the practice or NHS Lancashire & South Cumbria ICB, then you may wish to contact the Parliamentary and Health Service Ombudsman to request a review;

Health Service Ombudsman contact details

Helpline: 0345 015 4033

Email: phso.enquiries@ombudsman.org.uk

Address: Parliamentary & Health Service Ombudsman
Millbank Tower, Millbank
LONDON
SW19 4QP

You may also contact the Care Quality Commission;

CQC National Customer Service Centre

Care Quality Commission

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

Tel: 0300 061 6161

enquiries@cqc.org.uk