

Ixworth Surgery

Complaints and Comments Procedure Information For Patients

Document Control

Last review 17th July 2023 – change NHS England contact details to Suffolk and North East Essex Integrated Care Board (SNEEICB) details.

INTRODUCTION

This procedure sets out the Practice's approach to the handling of complaints. From 1st April 2009 a common approach to the handling of complaints was introduced across health and adult social care. This procedure complies with this.

POLICY

The Practice will take reasonable steps to ensure that patients are able to access the complaints procedure for Ixworth Surgery.

Complaint /Concern

A complaint may be received directly by the person complaining either verbally or in writing, or by a member of their family or an advocate with the appropriate consents in place.

The Complaints Manager for the Practice is **Sarah Clarke**
The lead GP Partner for complaints handling is **Dr Vijay Chandraraj**

Complaints can also be sent directly to Suffolk and North East Essex Integrated Care Board (SNEEICB) see contact details at the end of this information sheet. (Please note that you can only complain directly to the practice or SNEEICB and not both).

If you are not satisfied with the practice or SNEEICB final response you can contact the Ombudsman (contact details at the end of this information sheet).

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:

(a) 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 1989;
- by a person duly authorised by a voluntary organisation by which the child is being accommodated

(b) Where the patient is incapable of making a complaint, by a relative or other adult who has an interest in his/her welfare.

All complaints, written and verbal will be recorded, and written complaints will be acknowledged in writing within 3 working days of receipt. Patients will be encouraged to complain in writing where possible. The final

reply to the patient should be made within 40 working days, or the patient should be provided with an update and an estimate timescale.

Period within which complaints can be made

The period for making a complaint is normally:

- (a) 12 months from the date on which the event which is the subject of the complaint occurred; or
- (b) 12 months from the date on which the event which is the subject of the complaint comes to the complainant's notice.

Complaints should normally be resolved within 6 months. The practice standard will be 30 days for a full response.

The Complaints Manager or lead GP has 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. In the absence of the Complaints Manager the initial handling of the complaint may be delegated to the Practice Manager.

When considering an extension to the time limit it is important that the Complaints Manager or the 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.

Action upon receipt of a complaint

Complaints may be received either verbally or in writing and will be forwarded to the Complaints Manager (or the lead GP/Practice Manager if the Complaints Manager is unavailable), who will:

- acknowledge in writing within the period of 3 working days following the day on which the complaint was made or, where that is not possible, as soon as reasonably practicable. It may include an offer to discuss the matter in person, again, if this is reasonably practicable. The discussion will include agreement with the patient as to how they wish the complaint to be handled. E.g. if the complaint is made via an email if an email response is agreeable.
- Advise the patient of potential timescales and the next steps.
- Where the complaint is made verbally a written record will be taken and a copy will be provided to the complainant if the complainant requests this.
- Ensure the complaint is properly investigated. Where the complaint involves more than one organisation/department the Complaints Manager will liaise with his / her counterpart to agree responsibilities and ensure that one coordinated response is sent;
- Where the complaint has been sent to the incorrect organisation, advise the patient or their family member or advocate within 3 working days and ask them if they want it to be forwarded on. If it is sent on, advise the patient of the full contact details;
- Provide a written response to the patient as soon as reasonably practicable ensuring that the patient is kept up to date with progress as appropriate. Where a response is not possible within 30 working days provide an update report to the patient with an estimate of the timescale. The final reply will include a full report.

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 as delegated by the Complaints Manager
- 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 may be refused
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behaviour standards
- Return irrelevant documentation
- Keep detailed records

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, including any remedial action or compensation
- 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
- If appropriate a statement of the right to escalate the complaint, together with the relevant contact detail.

Confidentiality

All complaints will be treated in the strictest confidence.

Where the investigation of the complaint requires consideration of the patient's medical records, the Complaints Manager will 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 will keep a record of all complaints and copies of all correspondence relating to complaints, but such records will be kept confidentially, separate from patients' medical records.

Contact Details

Suffolk and North East Essex Integrated Care Board (SNEEICB)

SNEEICB.complaints@nhs.net

Tele: 0800 389 6819

Parliamentary and Health Service Ombudsman

www.ombudsman.org.uk

Tele: 0345 015 4033

Next Review Date: Jan 2025