



Responsible Manager: Wendy Lemon
Responsible Partner: Dr Simon Bowers
Date of last review 03/03/22
Date of next review 13/09/22

Purpose

The protocol sets out the approach of Fulwood Green to the handling of complaints. The protocol applies to all employees and any one who works at Fulwood Green including non-clinical staff and visitors.

This protocol will be reviewed bi-annually to ensure that it remains effective and relevant.

Importance of having a complaints procedure

Fulwood Green Medical Centre welcomes all feedback, both positive and negative. We would always encourage our patients or their representatives to approach us first if they have concerns about any aspect of our service.

In spite of the efforts of all staff it is likely that a complaint will be made by a patient at some point. To reduce the anxiety and apprehension for both the patient and staff it is crucial to have a procedure for handling complaints.

Complaints will be handled efficiently, comprehensively and honestly.

We will admit-to and apologise for our mistakes.

How complaints can be made

We are happy to receive complaints in any format whether orally, in writing or digitally via e-mail to FulwoodGreen.Medicalcentre@nhs.net

However, we also have a standard complaints form that can be printed and handed-to or e-mailed to patients. This form will also be accessible via our website.

When complaints are made orally to staff, the patient should be encouraged to complete a complaints form or offered an appropriate time to speak to a member of the management team should they prefer.

Any complaints posted on social media or NHS choices will be proactively investigated and, where the patient is identifiable without breaching confidentiality, the patient informed of the outcome.

Where a patient is unable to communicate by either means on their own then arrangements will be made to facilitate the complaint either through a qualified interpreter or a nominated representative.

Consent will be gained from the patient should a representative or interpreter be used.

Persons who can complain

Complaints can be made by patients, former patients, someone who is affected, or likely to be affected, by the action, omission or decision of individuals working at the practice, or by a representative or advocate of a patient as above.

When a complaint is made on behalf of a child or young person, an assessment of the child's capacity must be made. The complaint must be being made in the best interest of the child.

If this is not the case, then written notification of the decision not to investigate the complaint must be sent to the representative. If the practice feels the young person has capacity to consent any response should be directed to them and be confidential.

Time limit for making a complaint

Complaints can be made up to 12 months after the incident that gave rise to the complaint, or from when the complainant was made aware of it. Beyond this timescale it is at the discretion of the practice as to whether to investigate the matter. We will however, always endeavour to respond to any reasonable complaint.

Complaints Manager

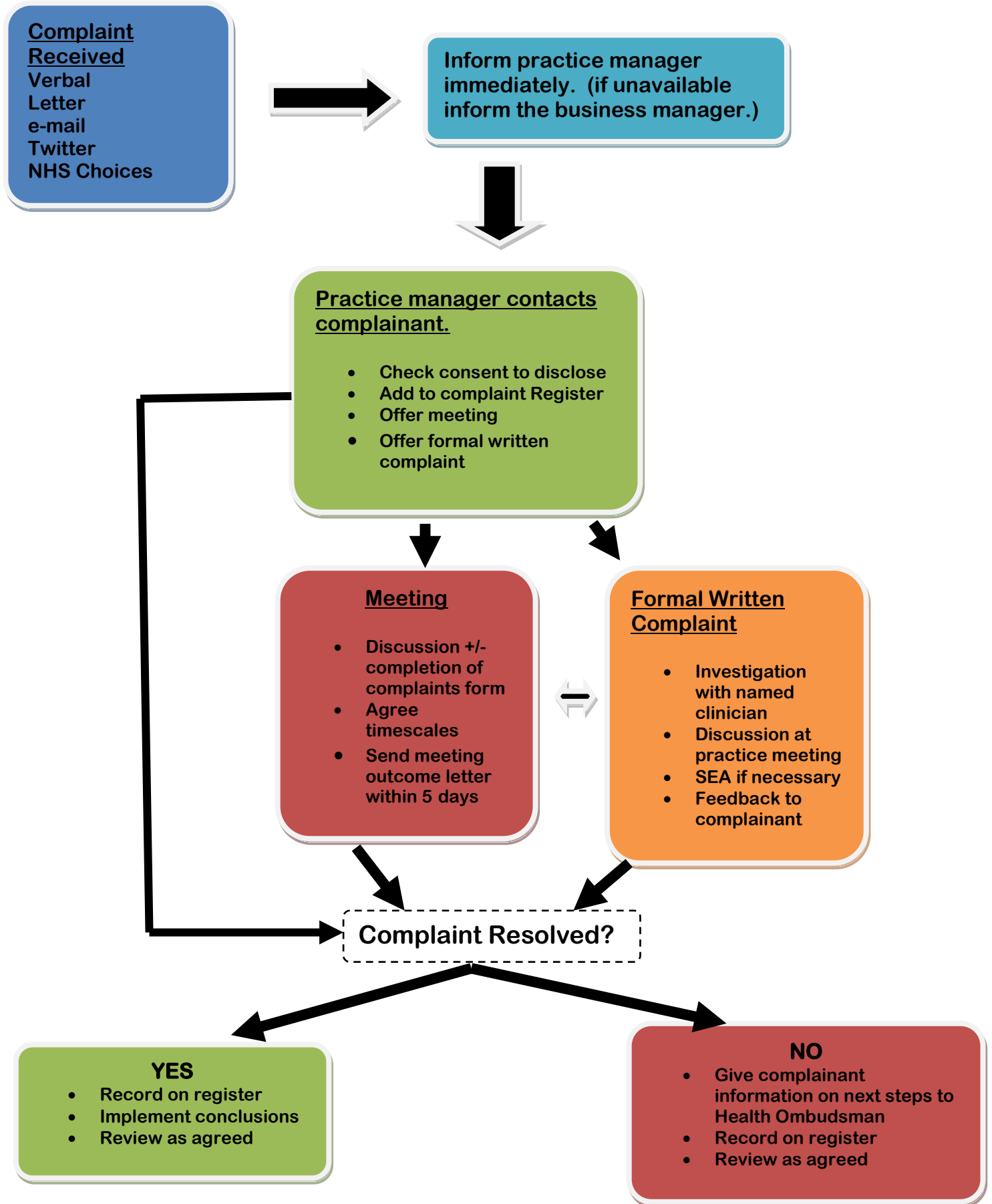
The Practice Manager (Wendy Lemon) is responsible for the handling and investigations of complaints on behalf of the partners.

The Process

- 1) Any complaint, howsoever received will be brought to the practice manager's attention on the day of receipt. Any patient asking about complaints at reception should be offered a complaints form. All staff will consider customer service their first priority when handling complaints. It is a stressful subject for both parties and we will aim to make the process as easy as possible.
- 2) The Practice Manager will contact the complainant to have an informal discussion, offer a resolution meeting or discuss the formal written complaints procedure.
- 3) Any resolution meeting will be held in a supportive, non-adversarial manner and the complainant will be offered the opportunity to bring a representative. A written outcome letter of any meeting will be sent to the patient within 7 working days of the meeting (when possible).
- 4) When the complaint cannot be resolved the patient is to be asked to make a written complaint. A complaints form will be made available and if necessary the complaints Manager will complete the form on their behalf verbatim. The written complaint will be recorded in the complaints register.
- 5) The complaint will be acknowledged formally by letter or e-mail within 5 working days of receipt (when possible) and will include the expected timescale for investigation and resolution.
- 6) The timescale to respond (maximum 8 weeks) is to be agreed with the complainant and documented in the complaints register.
- 7) An investigation will follow led by Practice Manager and a named clinician.
- 8) The full response to the complainant is to be signed by the Complaints Manager and will include.
 - a) An explanation of how the complaint was considered.
 - b) The conclusions reached in relation to the complaint and any remedial action that will be needed.
 - c) Confirmation as to whether the practice is satisfied that any action has been or will be taken.
- 9) Should the Practice Manager and named clinician feel necessary, the complaint could trigger a full Significant Event Review. In any case, the complaint and its conclusions will be discussed at the monthly clinical meeting.
- 10) If it is not possible to send the complainant a response in the agreed period it is necessary to write to the complainant explaining why. Then a response is to be sent to the complainant as soon as it is possible.
- 11) If the complainant is dissatisfied with the handling of the complaint then they are to be advised to contact the Health Service Ombudsman and how to do so.

<http://www.nhs.uk/choiceintheNHS/Rightsandpledges/complaints/Pages/NHScomplaints.aspx>

Complaints flow-chart



The Family & Friends Test

The practice manager will submit the contractual data for the friends and family test monthly as per the contract. The practice manager will review the responses and provide a report to the clinical meeting quarterly on key themes.

Recording complaints and investigations

A record must be kept of

- a) each complaint received
- b) the subject matter of the complaint
- c) the steps and decisions taken during and investigation
- d) the outcome of each investigation
- e) when the practice informed the complainant of the response period and any amendment to that period
- f) Whether a report of the outcome of the investigation was sent to the complainant within the response period or any amended period.

Review of complaints

Complaints received by the practice are to be reviewed at clinical meetings to ensure that learning points are shared and any identified patterns can be discussed.

A report on complaints is to be submitted to the commissioner annually (year end 31st March). This report is to:

- a) Specify the number of complaints received
- b) Specify the number of complaints which it was decided were well founded.
- c) Specify the number of complaints which the practice could not resolve and which, if any were referred to the ombudsman
- d) Summarise the subject matter of complaints received;
- e) Summarise any matters of importance arising from those complaints or the way they were handled;
- f) Summarise any matters where action has been or is to be taken to improve services as a consequence of the complaint

This report is to be made available to any person on request

Publicity

This protocol is available on the practice website or on demand and is part of induction for all new staff.