

Heywood Family Practice Complaints Procedure

INTRODUCTION

This procedure sets out the Practice's approach to the handling of complaints and is intended as an internal guide which should be made readily available to all staff. A leaflet for patient use is available from reception.

PROCEDURE

1. General provisions

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

- (a) the complaints procedure;
- (b) the role of the North Somerset Clinical Commissioning Group and other bodies in relation to complaints about services under the contract;
- (c) their right to assistance with any complaint from independent advocacy services; and
- (d) their right to complain to the Health Ombudsman should they remain unhappy with the outcome of Local Resolution.

The Practice will take reasonable steps to ensure that the complaints procedure is accessible to all patients.

2. 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:
 - (i) by either parent, or in the absence of both parents, the guardian or other adult who has care of the child,
 - (ii) 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
 - (iii) 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

3. Period within which complaints can be made

The period for making a complaint is:

- (a) twelve months from the date on which the event which is the subject of the complaint occurred; or

(b) twelve months from the date on which the event which is the subject of the complaint comes to the complainant's notice (provided that the complaint is made no later than 18 months after the date of the event).

GPs and / or Complaints managers have the discretion to extend the time limits if the complainant has suffered particular distress that prevented them from acting sooner. When considering an extension to the time limit it is important that the GP or manager 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.

4. Complaints handling

The practice will nominate:

(a) a person (the 'Complaints Officer') to be responsible for the operation of the complaints procedure and the investigation of complaints; and

(b) a Partner will be appointed as a 'responsible person' for the effective management of the complaints procedure and for ensuring that action is taken in the light of the outcome of any investigation

5. Action upon receipt of a complaint

Complaints may be received either verbally or in writing and must be forwarded to the Complaints Officer (or his/her stand-in if the Complaints Officer is unavailable), who must:

- acknowledge in writing within the period of three working days beginning with the day on which the complaint was made or, where that is not possible, as soon as reasonably practicable.
- ensure the complaint is properly investigated
- contact the complainant to discuss how they would like their complaint taken forward and agree a plan of action and negotiate a timescale within which we will respond.

6. Review of complaints

Complaints received by the practice will be reviewed to ensure that learning points are shared with the whole practice team:

- complaints received during the month will be reviewed to ensure any actions required are put into practice.
- A full review of all complaints will be carried out, at least annually, in order to identify any trends or additional actions/learning points.

7. 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 Complaints Officer 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 will 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.