

WELBECK ROAD HEALTH CENTRE

COMPLAINTS POLICY



Authorised by: PARTNERS

Document Author: Sarah Fillipich

Last Review: May 26

Due for Review: May 27

Introduction

Purpose

The objective of this policy is to ensure that all patients (or their representatives) who wish to raise concerns regarding their care or treatment have unrestricted access to a transparent complaints process. Every complainant is entitled to a truthful, comprehensive response and, where appropriate, a formal apology.

Rights and Compliance

Complainants have a fundamental right to be treated without discrimination following the submission of a complaint and deserve a thorough explanation of the final outcome. This practice's procedure is fully aligned with the NHS Regulations (2009), as well as current guidance from medical defence organisations, professional representative bodies, and the Care Quality Commission.

All staff members are required to be familiar with this process. It is essential to remain mindful that individual conduct and communication directly influence the reputation of the practice and can potentially escalate into formal complaints or legal proceedings.

Guiding Principles

The practice views every complaint primarily as an opportunity for organisational learning. However, following a robust and objective investigation, matters may be escalated to separate disciplinary proceedings if appropriate. In any instance where a complaint carries implications for professional negligence or potential litigation, the relevant medical defence organisation must be notified without delay.

The purpose of the policy is to ensure that all patients (or their representatives) who have the cause to complain about their care or treatment can have freely available access to the process and can expect a truthful, full and complete response and an apology where appropriate.

Complaints Management Procedure

Information Accessibility

The practice website and public materials (such as the Practice Leaflet) provide comprehensive information on the complaints process. These resources also signpost complainants to the NHS Complaints Advisory Service for independent support.

Escalation and External Complaints

While we encourage local resolution, patients who prefer not to complain directly to the practice should be directed to NHS England (NHSE):

- Telephone: 03003 11 22 33
- Email: england.contactus@nhs.net
- Post: NHS England, PO Box 16738, Redditch, B97 9PT

The practice will cooperate fully with NHSE investigations, providing all requested information promptly.

Eligibility to Complain

Complaints may be submitted by current or former patients, or anyone affected by an act or omission of the practice. A Representative may also complain on a patient's behalf if:

- The patient has provided explicit consent.
- The patient is a child (parental/guardian role applies).
- The patient lacks capacity under the Mental Capacity Act 2005.
- The representative is acting for the relatives of a deceased patient.

In the absence of formal consent, the practice will determine if the representative is acting in the patient's best interests. If a representative's complaint is declined, the grounds will be provided in writing.

Key Personnel

- Complaints Lead: A Practice Partner (as per BMA guidance) responsible for regulatory compliance, implementing lessons learned, and ensuring non-discrimination.
- Complaints Managers: Michelle Turner (Assistant Practice Manager) and staff group managers are responsible for managing daily investigations.

Timeframes

Complaints should normally be made within 12 months of the incident or within 12 months of the matter coming to the complainant's attention. The practice may extend these limits if a fair investigation remains possible despite the passage of time.

Investigation and Documentation

Investigations will be proportionate to the seriousness of the issue and aimed at a speedy, effective resolution. Each incident will have a dedicated file containing all evidence and written accounts. Crucially, complaint records must be kept separate from patient medical records.

Annual Statutory Reporting

The practice produces an annual report for the local Commissioning Body (NHSE), which is also available under the Freedom of Information Act. This report includes:

- Total statistics and the number of upheld complaints.
- Summary of issues and referrals to the Ombudsman.
- Identified learning points and subsequent procedural changes.
- *Note: All reports are strictly anonymised to protect patient confidentiality.*

Managing Unreasonable or Vexatious Behaviour

If a complainant becomes unreasonable, aggressive, or excessively rude, the practice may implement formal restrictions, such as:

- Restricting contact to a single method (e.g., writing only) or a single senior staff contact.
- Setting strict behaviour standards or time limits on interactions.
- Refusing repeated complaints regarding the same closed issue.

Staff and Locums

The practice retains full responsibility for investigating complaints involving locum staff (Doctors, Nurses, or temporary staff). Locums must be involved early to provide a factual account of the incident. The practice will provide factual information rather than subjective opinions on temporary staff conduct.

APPENDIX A- COMPLAINTS FLOWCHART

INITIAL COMPLAINT RECEIVED

Verbal

In Writing

To speak to an appropriate manager

To APM (holding response within 3 days)

Resolved to complainant's satisfaction

Unresolved to complainant's satisfaction

Admin

Clinical

Feedback to Complaints Lead/ Partners

Either ask complainant to put complaint in writing or complaint relayed to the Complaints Lead/Partners.

Send response within 10 days

APM to discuss with clinician at next management session/ appropriate administration time.

Clinician to input with response as required

APM to contact MDDUS/CNSGP if necessary

Send response with clinician input - if not within 10 days, complainant informed of delay/progress

All complaint themes to be discussed by the team, at staff group meetings, on the Partner meeting agenda and recorded in the complaints summary.
 Complaints Lead to be kept informed of all complaints.
 Trends, patterns and learning to be identified at every opportunity.