



Complaint Policy

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1. Introduction

This Policy exists to ensure that all our patients (or their representatives), who have cause to complain about their care or treatment, can have freely available access to the process, and can expect a truthful, thorough and complete response, and apology, where appropriate.

The process adopted by Hampton Medical Centre is fully compliant with the NHS Regulations (2009), and the Care Quality Commission.

Everyone in the Practice is aware of the process, and is expected to remember that everything they do and say, may present a poor impression of the Practice and may prompt a complaint, or even legal action.

2. Purpose and Scope

The general principle of the Practice in respect of all complaints, will be to regard it, first and foremost, as a learning process. However, in appropriate cases, and after full and proper investigation, the issue may form the basis of a separate disciplinary action. In the case of any complaint with implications for professional negligence or legal action, the appropriate defence organisation must be informed immediately.

3. Responsibilities, Accountabilities and Duties

Business Partners

The practice partners have ultimate responsibility and 'ownership' for the implementation of the Complaint policy within the practice.

This is provided by:

- Demonstrating strong and active leadership from the top and ensuring there is visible, active commitment from the staff.
- Ensuring there are effective 'downward' and 'upward' communication channels embedded within management structures.
- Ensuring adequate resources are made available so that the requirements of this policy and good sickness absence practices can be fulfilled.

Business Manager

The Practice Business Manager has specific accountability to ensure that responsibilities for complaint policy are effectively assigned, accepted and managed at all levels in the practice and consistent with good practice. In practice the Business Manager may discharge these responsibilities by delegation to other members of the management team.

Employees

All employees have a delegated responsibility, which includes, but is not limited to:

- Taking reasonable care for themselves and others they may come into contact with.
- To present the practice in a good light.
- Not to place a patient or fellow colleague into the path of harm.
- To adhere to the complaint policy.

4. Complaint Information

Hampton Medical Centre will ensure that there are notices advising on the complaints process conspicuously displayed in all reception areas. The Practice website will detail the complaint process and provide a copy of the Practice Complaint Policy. Paper copies of the complaint policy will be kept on the Reception Desk and they will also be available in an easy to read format.

5. Who can make a complaint?

Ideally a complaint will be made by the patient but in some cases a representative(s) may make a complaint on behalf of the Patient.

A Representative may also submit a complaint:

- Either parent or, in the absence of both parents, a guardian, or other adult who has care of the child, a person duly authorised by a local authority in to whose care the child has been committed under the provisions of the Children Act 1989, or a person duly authorised by a voluntary organisation by which the child is being accommodated.
- Someone acting on behalf of a patient/former patient who lacks capacity under the Mental Capacity Act 2005 (i.e. who has Power of Attorney etc.), or physical capacity to make a complaint and they are acting in the interests of their welfare
- Someone acting for the relatives of a deceased patient/former patient.

Hampton Medical Centre will consider whether they are acting in the best interests of the patient, and, in the case of a child, whether there are reasonable grounds for the child not making the complaint on their own behalf. In the event a complaint from a representative is not accepted, the grounds upon which this decision was based must be advised to them in writing.

In cases where a representative makes a complaint, on behalf of the patient, Hampton Medical Centre will request the completion of a consent form or written or verbal consent to be obtained from the patient and returned to the Practice. If the patient lacks the mental capacity to provide this consent, evidence will be required that the representative has the legal right to make the complaint of the patient's behalf.

6. Complaint Handling process

Verbal Complaints

All Reception Staff are responsible for dealing with front line verbal complaints i.e. those complaints made by patients at the reception desk or on the phone.

The Practice will try and resolve a verbal complaint as it arises with the patient or their representative(s). If the verbal complaint cannot be resolved by the member of staff dealing with it, then they will escalate the complaint to the Reception Manager for his/her intervention and resolution. In the absence of the Reception Manager, staff can escalate the complaint to the Business Manager.

Verbal complaints of significance will be logged on the Practice Complaints Register.

Written complaints

In the first instance, the Patient or their representative may send their written complaint either to the Practice, or directly to the National Health Service. We encourage patients to contact the Practice first with their complaints, so that we can respond to them directly and more promptly.

Practice details for receiving complaints are:

Email: queries.hamptonmedicalcentre@nhs.net

Address: Reception Manager, Hampton Medical Centre, Unit 6b Serpentine Green Shopping Centre, Hampton, Peterborough PE7 8DR.

In Person: At the Reception Desk.

The Reception Manager is responsible for receiving and logging written complaints on the Practice Complaints Register.

The Reception Manager must acknowledge the complaint within 3 working days to the patient or their representative(s).

In the absence of the Reception Manager, another member of the Practice Team must acknowledge the complaint within 3 working days.

When acknowledging the complaint the staff member should give an indication of when the patient or their representative(s) might expect a response. This might vary depending on the extent of the complaint, the scale of investigation that might be required to resolve it, and the availability of any staff involved with the complaint.

The Reception Manager will assume responsibility for dealing with, investigating and responding to the complaint. In the absence of the Reception Manager, the Business Manager will assume this responsibility.

Where the complaint involves clinical concerns, the Reception Manager may assign the complaint to the main clinician(s) involved, for their input and/or response. The Reception Manager will assume responsibility for sending the response back to the patient.

Whilst the Practice will always endeavour to reach an outcome and resolution to the complaint, which the patient (or representative) accepts, all responses to written complaints will contain details of the patient's (or representative's) right to refer the matter to the Parliamentary Health Service Ombudsman, if they are not happy with the resolution provided by the Practice.

7. The investigation

The Reception Manager will deal with all written complaints coming into the practice. They will refer clinical, prescription and medication complaints to the appropriate clinician(s) for their investigation, input and draft response, before sending it to the Practice Partners for their input (if any) and approval. The response will then be sent to the Patient.

The Practice will ensure that the complaint is investigated in a manner that is appropriate to resolve it, speedily and effectively, and proportionate to the degree of seriousness that is involved, and with the staff that are involved.

The full details of the complaint and outcome and resolution will be recorded on the Practice Complaints Register.

8. Complaint Learning

The Reception Manager will compile a spreadsheet of complaints and any learning opportunities which have arisen from them.

Learning from complaints is an important part of clinical governance. Complaints of significance will be discussed at the Practice Clinical Governance meetings and learnings that should be taken as a result of the complaint, will be discussed and recorded.

9. Complaint Response

This will be provided to the complainant in writing (or email by mutual consent), and the letter will be signed by the Reception Manager or the Business Manager. The letter will be on Hampton Medical Centre headed paper and include:

- An apology, if appropriate, (the Compensation Act 2006, Section 2 expressly allows an apology to be made without any admission of negligence or breach of a statutory duty)
- A clear statement of the issues, details and the findings of the investigation, and clear evidence-based reasons for decisions, if appropriate.
- Where errors have occurred, explain these fully and state what has been, or will be, done to put this right, or prevent repetition. Clinical matters must be explained in accessible language.
- A clear statement that the response is final but that the practice will support any further questions that the investigation and response has produced.
- A statement indicating that if they are not satisfied with the response, they have the right to refer the complaint to the Parliamentary and Health Service Ombudsman.

10. Confidentiality

Hampton Medical Centre 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, and no reference which might disclose the fact a complaint has been made, should be included on the computerised patient clinical record system.

11. Unreasonable or Vexatious Complaints

Where a complainant becomes unreasonable, or excessively rude or aggressive, in their promotion of the complaint, some, or all of the following formal provisions will apply, and must be communicated to the patient by the responsible person in writing:

- 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).
- 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, once responded to in writing.
- Only acknowledge correspondence regarding a closed matter, not respond to it.
- Set behaviour standards.
- Return irrelevant documentation.
- Detailed records will be kept of each encounter.

12. Complaints involving Locums and students

It is important that all complaints made to Hampton Medical Centre regarding, or involving, a locum (Doctor, Nurse or any other temporary staff member) are dealt with by the practice to investigate and respond. The responsibility for handling and investigating all complaints rests with the practice.

Locum staff should, however, be involved at an early stage, and be advised of the complaint, in order that they can provide any explanations, preferably in writing. All staff named in a complaint should be made aware of the complaint and given the opportunity to respond, whether they are clinical or administrative staff. Providing their factual account, along with any factual account from the Practice is the best way to proceed.

Hampton Medical Centre will ensure that on engaging any Locum, the Locum Agreement will include an assurance that they will participate in any complaint investigation where they are involved or can provide any material evidence.

Hampton Medical Centre will ensure that there is no discrepancy in the way it investigates, or handles, complaints between any Locum staff and either practice partners, salaried staff, students, trainees or any other employees. The clinician/staff member involved will

be given an opportunity to review any records the practice holds with regards to the complaint.