

# THREE VILLAGES MEDICAL PRACTICE

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Change History		
Version	Date	Comments
2.4	Nov 2010	Change of manager/addition of timeline
2.5	Nov 2011	Change of role of PCT
2.6	July 2013	Removal of mention of PCT, addition of NHS England
3.0	Feb 2015	Modernisation of policy in line with current national policy
4.0	July 2018	Changes made to the policy
5.0	Oct 2018	Policy updated, new processes explained
5.1	Dec 2018	Policy slightly amended and shared with all staff
5.2	May 2021	Update to complaints lead/staff
5.3	April 2022	Minor formatting changes and letterhead updated.
6.0	October 2023	Updated to include new complaints form / minor formatting
6.1	February 2024	Reviewed / minor formatting
6.2	April 2025	NHSE removed and replaced with the Time2Talk Team.

6.3	February 2026	Amendment of NHS Choices to Google Reviews. Responsible persons updated.
6.4	March 2026	Removal of Teams Manager Role. Update on Deputy PM role in complaints handling. Update on private work complaints.

<b>Document complies with the Equality Act 2010</b>	
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## **PART 1: COMPLAINTS**

From 1<sup>st</sup> April 2009 a common approach to the handling of complaints was introduced across health and adult social care.

### **INTRODUCTION**

The NHS Constitution sets out the following rights for patients:

- To have the right to have any complaint about NHS services dealt with efficiently and to have it properly investigated
- To have the right to know the outcome of any investigation of a complaint
- To have the right to take the complaint to the Independent Health Service Ombudsman if not satisfied with the way the complaint has been handled by the HS organisation

### **RESPONSIBILITIES**

All staff at the practice are responsible for the handling of complaints. The first person to be made aware of the complaint is the initial complaint handler.

The Deputy Practice Manager is responsible for all informal complaints received by the practice that cannot be resolved by the initial staff member.

The Deputy/Practice Manager is responsible for all formal complaints received by the practice.

The overall responsible person for complaints is Dr D Harrison. It is the duty of the Responsible Person to ensure that all aspects of regulations and constitutional rights have been complied with in respect of all complaints received by the practice. Dr Harrison will also lead investigations into complaints regarding clinical matters.

### **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 responsible complaints handler 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 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.

## **POLICY OBJECTIVES**

Three Villages Medical Practice will:

- Ensure patients are aware of the right to complain.
- Ensure patients know how to complain and who to complain to.
- Ensure patients understand how their complaint will be handled and the timeframe.
- Ensure there is a robust system to respond, record and review complaints.

## **MAIN PROVISIONS OF THE REGULATIONS**

- Patients wishing to complain may do so verbally, in writing or electronically to either the Practice or the Time2Talk Team.
- Complaints can be made within 12 months of an incident occurring or them becoming aware of the problem. The time limit can sometimes be extended (so long as it's still possible to investigate the complaint). An extension might be possible, for instance in situations where it would have been difficult for the patient to complain earlier, for example, if grieving or hospitalised.
- Verbal complaints which are satisfactorily resolved no later than the next working day are not subject to the regulations.
- Complaints can be made by patients (or former patients) or on behalf of a patient as long as the appropriate third party consent form has been signed by the patient. Where the patient is a child, the complainant may be either parent, 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 provision of the Children Act 1989 or by a person duly authorised by a voluntary organisation by which the child is being accommodated. Where the patient is incapable of making a complaint, by a relative or other adult who has best interests in the patient's welfare.
- Complainants can complain directly to the Time2Talk Team rather than to the Practice.
- All NHS organisations (including voluntary and independent sector organisations under contract) are all governed by the same legislation therefore coordinated complaint handling should be easier. If a complaint is received that involves other organisations, the Practice should, with the patient's consent, copy the complaint and the acknowledgement letter to the organisations concerned.

## **RESPONDING TO COMPLAINTS**

### **VERBAL COMPLAINTS**

Where a complaint is made verbally, the staff member receiving the complaint should try to resolve the complaint immediately to the satisfaction of the patient. If this is not resolved within 24 hours, it should be escalated to a written complaint. If resolved, depending on the nature or seriousness of the complaint the staff member may choose to make a written record of the complaint and / or fill out a significant event form, as most appropriate. Any written record (complainant, subject matter, date) should be passed to the Deputy/Practice Manager to keep in the complaints file, which is kept separately from clinical records

If the staff member feels they are unable to deal with the complaint they should take as much information as possible and offer to liaise with a senior member to discuss next steps, keeping the complainant updated. The first point of call would be the Lead Receptionist but in their absence it would be the Deputy Practice Manager.

The Practice Manager is the last point of call at this stage as they deal with written complaints, in the event of the Deputy Practice Manager being unable to, and therefore should not be involved in the first stages of those complaints that are escalated further.

### **WRITTEN COMPLAINTS**

Patients/Carers can send a complaint via the complaints form and hand deliver / post this to the Practice or email to [m87005.edm@nhs.net](mailto:m87005.edm@nhs.net). Individual staff email address should not be given out.

A written complaint will be acknowledged within 3 working days of receipt by telephone or in writing. The patient will be advised of the manner in which the complaint will be investigated and the likely timescale for this investigation and when they are likely to receive a response (usually 20 working days).

The investigation of the complaint will be made in the most appropriate manner and shall be conducted efficiently, at all times keeping the patient up to date with progress. As soon as possible after completion of the investigation, the complainant will be sent a written response.

Complaints regarding administration procedures will be investigated by the Deputy/Practice Manager.

Complaints regarding clinical concerns will be investigated by Dr Harrison or in his absence another GP partner.

The response will include an explanation of how the complaint has been considered, conclusions reached and how they may affect the complainant. It will confirm any actions that need to be taken as a consequence of the complaint. If local resolution has not been reached, it will identify the right to take the complaint to the Health Service Ombudsman.

## **OMBUDSMAN DETAILS**

The Ombudsman is completely independent of the NHS and Government and can be contacted at Millbank Tower, Millbank, London SW1P 4QP. Tel 0345 015 4033 or emailing [phso.enquiries@ombudsman.org.uk](mailto:phso.enquiries@ombudsman.org.uk) or by accessing [www.ombudsman.org.uk](http://www.ombudsman.org.uk)

## **UNREASONABLE COMPLAINTS**

We have a separate policy for Unreasonable and Unreasonably Persistent Complaints in our Zero Tolerance Policy.

## **COMPLAINTS REPORT**

The practice will establish an annual complaints report, incorporating a review of complaints received, along with any learning issues or changes to procedures which have arisen. This report is to be made available to any person who requests it, and may form part of the Freedom of Information Act Publication Scheme.

This will include:

- Statistics on the number of complaints received
- Justified / unjustified analysis
- Known referrals to the Ombudsman
- Subject matter / categorisation / clinical care
- Learning points
- Methods of complaints management
- Any changes to procedure, policies or care which have resulted

The report will be updated on completion of each complaint. Data can be analysed throughout the year and common themes can be identified.

## **COMPLAINTS INVOLVING GP REGISTRARS/MEDICAL STUDENTS**

Any complaints received that have named a GP registrar will be forward to both the individual trainee as well as their designated Clinical Supervisor for training and reflective purposes. Once discussed, reviewed and agreed between trainee and supervisor, any outcomes of reflective practice must be provided to either the Deputy/Practice Manager/GP Complaints Lead to assist in the completion of formal complaint response to patient. The time frame for response is to remain the same as above, unless exceptional circumstances.

Any complaint with medical student named will be dealt with by the lead GP for medical students.

## **COMPLAINTS CODING SYSTEM**

Each complaint requires its own file creating on the shared drive; these are named C001 and so on. The numbering reverts back to C001 at the start of the New Fiscal Year. Each folder will have the complaint number followed by one of the following numbers which will indicate which stage the complaint is at:

**C00X - 1** – Folder contains info but formal complaint and / or permission to complain on behalf of patient has not yet been fully received

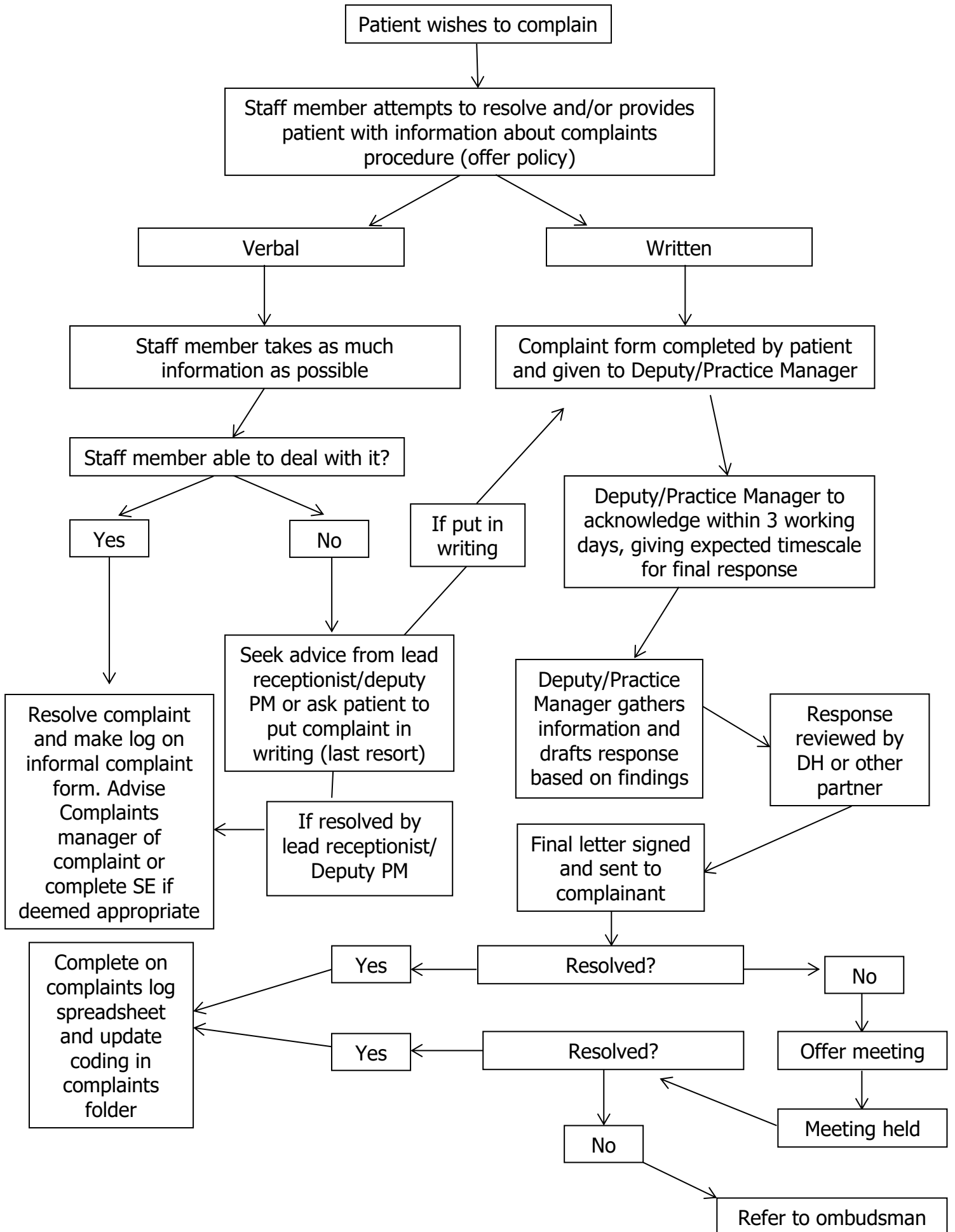
**C00X - 2**- formal complaint received, and initial acknowledgement letter has been sent. Please add date by which response is due next to folder.

**C00X - 3** – formal response has been sent

**C00X - 4** – complaint has been passed to ombudsman

**C00X - 5** – Solicitor involved

## COMPLAINTS PROCESS FLOW CHART



## **SECTION 2: FEEDBACK**

### **METHODS OF LEAVING FEEDBACK**

Patients will be encouraged to give feedback to the practice. Feedback can be given via any of the following channels:

- Leaving feedback on Google Reviews
- Verbally to a staff member
- In writing/via Email
- Completion of a comments form (including practice website)

### **RESPONDING TO FEEDBACK**

#### **GOOGLE REVIEWS FEEDBACK**

Comments left on Google Reviews are responded to directly on the website. The practice will always offer to discuss further, due to the privacy of data on Google Reviews patients are unable to leave their full details so are therefore asked to contact the practice if they wish to discuss further. Comments are circulated on a regular basis to all internal staff.

#### **VERBALLY TO A MEMBER OF STAFF**

The staff member will thank the service user for their feedback and offer that they put it in writing by one of the above methods or if a negative comment, offer a solution, if no solution then offer to speak to a manager and contact the service user with a response.

#### **IN WRITING**

If a service user puts positive feedback in writing, such as in a thank you card, this will be logged and circulated with the regular Google Reviews. If the comments are negative it will be treated as a complaint.

#### **COMPLETION OF COMMENTS FORM**

If a service user puts positive feedback in writing, such as in a thank you card, this will be logged and circulated with the regular feedback to staff. If the comments are negative it will be treated as a complaint. If patient wishes to submit negative feedback via practice website then they will be signposted to our 'comments, complaints and suggestions' patient leaflet

## **Making a complaint to the NHS Commissioner**

From 1st July 2023 the way patients make a complaint about primary care services to the commissioner has changed.

Now, if patients want to make a complaint about primary care services to the commissioner patients will now contact the Black Country Integrated Care Board instead of NHS England.

Patients can do this by:

Telephone: 0300 0120 281

Email: bcicb.time2talk@nhs.net

Writing to: Time2Talk, NHS Black Country Integrated Care Board (ICB) Civic Centre, St Peter's Square, Wolverhampton, WV1 1SH

If patients want to make a complaint directly to the provider of the primary care service, you still can – that does not change on 1 July 2023.

## **Complaints Relating to Private Services**

The Practice provides some services outside of the NHS, which are offered on a private basis (e.g. medical reports, forms, private letters, or examinations not covered under the NHS contract).

Complaints relating to private services are **not covered under the NHS complaints procedure**.

The Practice will not investigate complaints relating solely to private work under the NHS complaints framework.

## **RESOURCES:**

Comments, complaints and suggestions form

Complaints Report

Complaints Leaflet

Consent Form – third party

Informal Complaint Record Form

Friends & family test form

**N:\Three Villages Medical Practice\Practice Admin\Complaints\Complaints Form**

