## Complaints, Compliments, Comments and Concerns Policy

<table>
<thead>
<tr>
<th>Version:</th>
<th>1.2</th>
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<td>Practice:</td>
<td>Sidcup Medical Centre</td>
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<tr>
<td>Responsible GP Partner:</td>
<td>Dr. Deshmukh</td>
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<tr>
<td>Name of originator/author:</td>
<td>Fiona Bedus</td>
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<tr>
<td>Date:</td>
<td>November 2016</td>
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<td>Ratified by:</td>
<td>Practice Meeting</td>
</tr>
<tr>
<td>Next review date:</td>
<td>November 2019</td>
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<td>Target audience:</td>
<td>Sidcup Medical Centre Staff</td>
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<tr>
<th>Applicable CQC quality outcome</th>
<th>Outcome 1, 16, 17</th>
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<tr>
<td>Applicable QOF standard</td>
<td>EDUCATION 6, 7, 10,</td>
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<td>Applicable contract monitoring requirement</td>
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<td>Applicable information governance toolkit standard</td>
<td>10-211, 10-212, 10-213, 10-320</td>
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Sidcup Medical Centre is committed to providing the public it serves with what it needs, not only in respect of excellent clinical care and safe and efficient treatment, but also in passing on their thanks, providing them with information, answering their questions and concerns, or resolving their complaints, in an open, efficient and timely way to ensure that they receive an appropriate response to whatever their specific needs are. It will provide a focal point for the provision of accurate, effective and sensitive information, supporting all patients, their representatives or anyone who may be affected by the actions of Sidcup Medical Centre or need information from it.

It has therefore developed the following policy; Compliments, Comments, Concerns and Complaints Policy which is designed to enable Sidcup Medical Centre to manage compliments, comments, concerns and complaints, while ensuring that compliance to the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (the Regulations) is maintained.

The Practice Meeting gladly accepts its responsibility for the effective management and performance of Sidcup Medical Centre in handling compliments, comments, concerns and complaints. In particular, the Practice Meeting will ensure that:

- staff managing such issues are appropriately trained, have adequate administrative resource and access to senior management supervision and support, where necessary;
- the Policy is integrated into the clinical governance, risk management and quality framework of Sidcup Medical Centre;
- staff who may have a concern or complaints made against them are adequately supported;

Sidcup Medical Centre and its managers will adhere to the principle of openness and honesty in all investigations and responses to those who wish to communicate with it in any way or to make any complaint about the care Sidcup Medical Centre has provided.

It will take each contact seriously and resolve issues about its services in an open, courteous and conciliatory manner, which meets the satisfaction of the person making the contact and will provide documented procedures for investigating and managing complaints, including clear guidelines relating to staff responsibility and accountability for dealing with complaints. Staff are expected to maintain a professional and caring approach to all contacts and complainants.

Sidcup Medical Centre has the right to refuse to investigate any issues raised where the incident happened over 12 months prior to the date received, however, sensitivity should be used in the decision to refuse any investigation and a decision should be sought from Fiona Bedus on whether such issues will be investigated.

It is essential that all issues are managed quickly and effectively through the required procedures, with the aim of satisfying the contact that they have been listened to, offering an apology and explanation as appropriate, ensuring that any actions identified are completed and learning outcome utilised.
Sidcup Medical Centre will ensure that the way it manages all issues will also:

- Enhance the reputation of Sidcup Medical Centre;
- Avoid protracted correspondence;
- Avoid unnecessary litigation;
- Use complaints as a means of improving services;
- Be fair to practitioners and staff;
- Maintain a proper accountability for the actions of Sidcup Medical Centre and its staff;
- Guarantee that all contacts and complainants will be dealt with fairly and impartially and therefore will not be treated differently as result of making a complaint/concern;

Appendix 1 of this Policy provides a flowchart illustrating how contacts in respect of such issues will be managed by Sidcup Medical Centre.

2 Responsibilities

2.1 Dr. Deshmukh of Sidcup Medical Centre

is the Accountable Officer for all patient related contact with Sidcup Medical Centre. Dr. Deshmukh is a member of the Practice Meeting.

2.2 Fiona Bedus

is responsible for ensuring that such issues are completed in a timely and appropriate way within their service area. They will sign off and respond to complainants on behalf of Dr. Deshmukh where required. Fiona Bedus will be responsible to Dr. Deshmukh for the development of effective Practice wide policies and procedures. Specific responsibilities will include monitoring all areas of risk management, complaints, concern, comments and compliments, maintaining and developing Sidcup Medical Centre's Risk Register and acting as the point of reference within Sidcup Medical Centre for all internal and external contacts in relation to all matters relating to risk management.

Fiona Bedus also has responsibility for implementing and managing the relevant procedures on behalf of Dr. Deshmukh.

Fiona Bedus will be supported by Louise Wright and all patient related contacts received by Sidcup Medical Centre will be directed immediately to them, who will manage the process on the behalf of Fiona Bedus. Issues of particular seriousness or which would have a serous impact on Sidcup Medical Centre will be directed immediately to Fiona Bedus. The matter will be managed throughout the process by Fiona Bedus who will be the direct contact for the management of these issues. Louise Wright will regularly update the "You Said, We Did" template on a monthly basis.
Fiona Bedus will develop awareness throughout Sidcup Medical Centre, keeping accurate records and statistics and monitoring performance targets, ensuring that any changes in national guidance are disseminated appropriately. They will also monitor trends and any learning will be disseminated throughout Sidcup Medical Centre. They will manage the PSOs to deliver an effective, caring, honest and timely service. To enable them to do so effectively, they will have access to all relevant Practice records.

2.3 Investigating Officers
(relevant line manager or those identified) are responsible for undertaking a detailed investigation, complying at all times with this Policy and relevant procedures.

2.4 All Staff
have a responsibility to read and understand the Policy. If they have been asked for information pertaining to an issue or complaint, whether it involves them or not, they must co-operate and provide any relevant information to any investigating officer when asked to do so. They must also forward any written or the details of any verbal issues received by them to Kate Thomas or Fiona Bedus as soon as possible. If required to be interviewed, either when on or off duty, in order to complete an investigation on time, staff are expected to give their full support as part of this Policy.

2.5 Practice Meeting
The meeting will review all contacts made with Sidcup Medical Centre which are covered by this Policy and all areas of patient experience. This group will review the handling and quality of the complaints, concern, comments and compliments process and identify keys trends, monitoring action plans and performance. It will also ensure that trends and learning outcomes are covered within the education and training programme to ensure best practice is shared across Sidcup Medical Centre. The Practice Meeting monitors and reviews on behalf of Sidcup Medical Centre’s governance arrangements, which includes co-ordinating and prioritising clinical and non-clinical risk management issues. They will therefore monitor performance of Sidcup Medical Centre in respect of its response to all issues of compliment, comment, concern or complaint and review trends identified from these as identified within this Policy and relevant procedures.

3 Compliments

All compliments received by Sidcup Medical Centre through whatever route should be directed to Fiona Bedus and managed in line with this Policy.

3.1 What is a compliment?
Complaints, Compliments, Comments and Concerns Policy

Compliments are the appreciation or expressions of thanks, received from anyone who has received clinical treatment or used one of the services Sidcup Medical Centre provides. It is as essential that these compliments are treated with the same respect and importance as concerns or complaints. To this end, Sidcup Medical Centre has a compliments procedure that will be used when such communications are received.

These compliments will be reviewed by the appropriate Responsible GP Partner, who will write to and send a copy to any staff involved and thank the originator of the communication. Copies of correspondence will be lodged on the personal files of members of staff, a database will be kept of all compliments and these will be reported on by area.

An update on all compliments received by Sidcup Medical Centre will be regularly shared with staff.

4 Comments or questions

All comments or question received by Sidcup Medical Centre through whatever route should be directed to Fiona Bedus and managed in line with this Policy.

4.1 What is a comment or question?

Anyone is free to communicate with Sidcup Medical Centre and provide it with their views and comments about the services it provides. They may also need to ask a question of Sidcup Medical Centre or seek advice or signposting within the wider NHS or social care network. This may be a patient, those affected by the actions of Sidcup Medical Centre, member of the public, GP, or MP, or any other person.

These comments and questions will be logged under the direction of Fiona Bedus, acknowledged and responded to as appropriate in line with procedures and the comments and any response will be used in the monitoring and review process in order to influence the development of services Sidcup Medical Centre provides where appropriate.

5 Concerns

All concerns received by Sidcup Medical Centre through whatever route should be directed to Fiona Bedus and managed through this Policy.
5.1 What is a Concern?

A concern is an issue or worry which has not been specified as a formal complaint.

This may be identified by anyone, either a patient, those affected by the actions of Sidcup Medical Centre, a member of the public, GP or MP, or any other person, who has concerns about the actions Sidcup Medical Centre or any member of its staff has taken. Although these issues may not have been specified as a complaint, they will be as seriously and investigated in the same way to ensure a fair and effective resolution.

These concerns will be managed and logged under the direction of Fiona Bedus, acknowledged and responded to, the comments and any responses will be used in the monitoring and review process in order to influence the development of services Sidcup Medical Centre provides where appropriate.

Healthcare Professionals – may write directly to Dr. Deshmukh or a manager of Sidcup Medical Centre and these concerns will be also be managed and logged under the procedure, under the direction of Fiona Bedus. Some issues however, may be raised at a local level and these will be addressed under the individual professional feedback process that is in place locally. It is important however to ensure that if these issues are of a serious or significant nature that may impact on Sidcup Medical Centre or Sidcup Medical Centre/person raising the issue, that they are forwarded to Fiona Bedus for managing centrally.

5.2 What will happen if a concern is not resolved?

If the person involved feels that their concern has not been addressed appropriately or adequately, the matter will be reviewed by Fiona Bedus and referred to the relevant manager concerned for further investigation if necessary and a second response will be provided. If this is not possible or the result still unacceptable, then the matter will be escalated if the issue or the person contacting Sidcup Medical Centre fits the criteria for a formal complaint.

6 Complaints

All complaints received by Sidcup Medical Centre through whatever route should be directed to Fiona Bedus and managed in line with this Policy.

Sidcup Medical Centre has an effective complaints procedure which is in line with Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (the Regulations), which provides the statutory framework for NHS complaints procedures. This procedure will be managed directly by Fiona Bedus and Dr Deshmukh on Sidcup Medical Centre’s behalf. Complaints to Sidcup Medical Centre will only be managed through this procedure.
6.1 What is a complaint and who can complain?

A complaint is an expression of dissatisfaction in respect of any actions of Sidcup Medical Centre and the complaints procedure is designed, in line with the Regulations to address such expressions made by a patient or someone on their behalf.

A complaint may be made by:

- a person who receives or has received services from Sidcup Medical Centre; or
- any person who is affected by, or likely to be affected by, the action, omission or decision of the NHS body which is the subject of the complaint providing they fit the criteria for someone who is able to make a complaint;

Patients have a right to complain and the fact that a patient or their advocate has made a complaint will not affect the patient’s current or future care and may not be just related to clinical care.

A complaint may be made about a decision taken by an NHS body that is likely to affect the complainant or about the behaviour or attitude of a member of Practice staff or someone acting on its behalf. Each complaint must be taken on its own merit and responded to appropriately.

A complaint may be made by a representative acting on behalf of a person mentioned above if that person:

- has died;
- is a child;
- is unable by reason of physical or mental capacity to make the complaint themselves;
- has requested the representative to act on their behalf;

In all but the latter, Fiona Bedus is required to have confidence that the representative has sufficient interest in the person’s welfare, is a suitable person to act as representative and is acting in the best interests of the person on whose behalf the complaint is being made. If this confidence is not held, Fiona Bedus must notify that person in writing stating their reasons.

Appendix 2 of this Policy provides definitions of a complaint and concern and who may raise them.
6.2 **Issues that cannot be dealt with as a Complaint**

There are some instances where Sidcup Medical Centre is unable to investigate and report an issue as a complaint and they are:

- those from other NHS or Local Authority Social Services bodies;
- those made by an employee about any matter relating to their contract of employment, their current or past work or employment;
- anyone applying to work for Sidcup Medical Centre;
- those arising out of the alleged failure to comply with a request for information under the Freedom of Information Act 2000;
- complaints made by an independent provider or an NHS Foundation trust about any matter relating to arrangements made with them;
- complaints that have been investigated by the Parliamentary and Health Service Ombudsman;
- where someone has stated specifically in writing that they will take legal proceedings;
- an investigation of a criminal offence;
- a complaint which has already been investigated by Sidcup Medical Centre;

Although the forelisted cannot be investigated as a complaint, these issues should still be treated seriously and investigated under the appropriate Organisation policy or procedure where necessary.

6.3 **What will happen if a complaint is not resolved?**

The response to the person will include the information on how they can contact Sidcup Medical Centre again if they feel that their complaint has not been resolved to their satisfaction and they may then refer the matter back to Sidcup Medical Centre. The matter will then be reviewed by Fiona Bedus and if required will be re-investigated and a second response provided.

6.4 **The Parliamentary and Health Service Ombudsman**

If Sidcup Medical Centre has done everything it can to resolve a complaint and the complainant is still not satisfied with the outcome, they may ask the Parliamentary and Health Service Ombudsman to review the matter.

The Ombudsman will ensure that the complaint falls within their jurisdiction after which they may check that everything has been done to resolve the issue locally. If they think more can be done they will refer the issue back to Sidcup Medical Centre.

Before taking the matter on, the Ombudsman will consider several factors including what has gone wrong, what injustice this has caused and what is the likelihood of achieving a worthwhile outcome. If the case is taken on, Fiona Bedus
must provide the Ombudsman with the full complaint file.

If the Ombudsman believes there is a case to answer, they will direct Sidcup Medical Centre to take actions which are specified by them.

Sidcup Medical Centre will take steps to ensure that all complainants are aware of their right to approach the Ombudsman if they are not satisfied.

6.5 Complaints relating in part to other NHS or Local Authority Social Services

A complaint may be received which relates not only to Sidcup Medical Centre but also raises issues which pertain to another health or local authority. Sidcup Medical Centre should in this case co-operate in order to try to co-ordinate the handling of the complaint and ensure that the complainant receives a co-ordinated response unless the complainant has requested separate responses.

Where required, organisations involved will agree where appropriate, on which will take the lead in co-ordinating the handling of the complaint and communicating with the complainant.

Sidcup Medical Centre will cooperate in resolving the complaint and share any relevant information and attend any joint meetings reasonably arranged to consider the complaint in order to facilitate a more effective outcome. The complaint will be identified as belonging to this Practice here it is identified as the lead and as a concern where this Practice is providing information for another organisation to lead and respond.

6.6 Complaints relating to another organisation

Sidcup Medical Centre is only required to respond to complaints about services it provides or manages but may receive complaints about another NHS organisation. In these cases the complainant will be informed of this and asked if they wish the matter to be forwarded directly to that organisation on their behalf, naming them in the correspondence. If the complainant agrees, the complaint will be forwarded appropriately and the decision and actions taken recorded in writing.

Where this applies to the actions of a local authority, within 5 working days the complainant will be asked if they want the matter to be forwarded to the local authority involved on their behalf, naming them in the correspondence. Again, if the complainant agrees, the complaint will be forwarded appropriately and the decision and actions taken recorded in writing.

Where the complainant does not want their complaint forwarded they will be advised that Sidcup Medical Centre is unable to deal with it and if they wish to pursue it further they must contact the relevant organisation directly. These actions will be recorded in writing.
6.7 Independent Complaints Advocacy Service (ICAS)

Section 12 of the Health and Social Care Act places a legal duty on the Secretary of State to make arrangements to provide Independent Complaint Advocacy Services to assist individuals making complaints against the NHS.

Within the area covered by Sidcup Medical Centre ICAS is provided by SEAP. ICAS focuses on helping individuals to pursue complaints about the NHS, its aim is to ensure complainants have access to the support they need to articulate their concerns and navigate the complaints system. This Organisation has a duty to make complainants aware of ICAS and the services it provides.

7 Consent

Consent is required from the patient or person involved for the outcome of any investigation to be released to a third person. In the case of a minor, the permission should be sought from the parent or guardian.

If it is not possible to gain formal consent, for instance if the patient's clinical condition is such that it would make it inappropriate for it to be sought, or a similar genuine barrier exists in gaining it, then Fiona Bedus may use their discretion in waiving consent.

If consent could be reasonably expected, but not received, Sidcup Medical Centre has the right to refuse to investigate further or can provide limited information as appropriate, with advice to the contact that no further action can be taken.

Should a complaint be made via an MP on behalf of a constituent, the letter will be passed to the divisional PSA for registering and acknowledgement in the normal way. If the letter is categorised as a complaint and a letter from the constituent is enclosed then consent is implied. If the constituent has not written to the MP or if it is a third party who has contacted the MP, then the constituent's written consent should be obtained, although it is understood that it may not always be possible to gain this and Fiona Bedus's discretion may be used in these cases. If the constituent's details are known, the acknowledgement and final response will be sent to them as well as the MP.

8 Monitoring & viewing

The Practice Meeting will review and monitor compliments, comments, concerns and complaints.

Ad hoc reports on numbers, outcomes and trends of all contacts with Sidcup Medical Centre by any process, will be provided to any Responsible GP Partner,
or manager of Sidcup Medical Centre for any department when requested; also to any commissioning body for whom Sidcup Medical Centre provides services.

Regular reports will also be made to the Practice Meeting to establish:

- the effectiveness of the complaints management process;
- consistency of management and remedial action taken;
- whether systems for dealing with complaints are integrated with clinical governance and risk management processes and systems for improving the patient experience;
- trends in the subject of contacts are identified and that lessons are learnt;
- the effectiveness of any changes to the complaints management process identified as a result of contacts;
- review action plans and ensure any recommendations are implemented Practice wide, if appropriate;

Sidcup Medical Centre will prepare an annual report on its handling and consideration of complaints.

Sidcup Medical Centre will provide all required reports to the Care Quality Commission and the annual return KO41b in respect of complaints to the Department of Health as required Specific for NHS organisations or contracted services on behalf of aforementioned organisations.

Sidcup Medical Centre is committed to the use of the outcomes from all issues to inform its actions and to use as positive steps to improve the quality of the service it provides.

It will learn from its mistakes and incorporate any lessons into its operational procedures and policies to prevent a reoccurrence.

9 How information will be used

All information in respect of all such contacts with Sidcup Medical Centre will be treated confidentially and only those who are required to enable a satisfactory resolution to be achieved will have access to it. It will be subject to the rules of confidentiality which all GPs, managers and staff agree to within their contract of employment and not divulged to anyone other than those required for a satisfactory conclusion of the matter without the permission of the person expressing the concern or complaint.

All personal data is held in accordance with the Data Protection Act 1998 and the NHS Confidentiality Code of Practice. Closed files will be stored securely in the relevant Practice offices until archived within secure archive facilities provided by Sidcup Medical Centre and kept for the period of 10 years for compliments, comments and concerns and 8 years for complaints.

10 Promotion and communication
It is key that patients and/or their representatives are aware of how to access Sidcup Medical Centre to make it aware of their needs.

Sidcup Medical Centre therefore will ensure that all relevant routes for contact are advertised via up to date information on its website, in leaflets and on posters available across Sidcup Medical Centre area and the appropriate telephone contact numbers advertised within Yellow Pages and similar. Staff should also be aware of these procedures in order for them to pass this information directly to the patients they may support.

11 Implementation plan

11.1 Consultation

This policy has been circulated to all members of the Practice Meeting for comment.

11.2 Ratification

This policy will be approved by the Practice Meeting, which will give approval for it to be issued.

11.3 Dissemination

Once this policy has been ratified, Kate Thomas will publish the policy on the Sidcup Medical Centre internet site and will also email all staff the policy synopsis/summary of changes (written by the policy author) to inform staff of the new policy and its location on the Sidcup Medical Centre internet site. It will also be the responsibility of the relevant managers concerned, to ensure that this policy is cascaded to all staff they are responsible for.

11.4 Audit and/or Monitoring

The monitoring and audit of policies and procedures is a requirement of corporate and clinical governance.

This policy will be reviewed two-yearly and also whenever national reporting guidelines change.
11.5 **Breach of this policy**

A breach of this policy could lead to adverse consequences in relation to patient/staff safety and in other areas related to the incident where an incident is not openly communicated about or is reported but the communication of it does not adhere to the process as outlined. In certain circumstances, a breach of this policy could also lead to disciplinary action.

12 **References**

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<tr>
<td>1</td>
<td>The Local Authority Social Services and National Health Service Complaints (England) – Regulations 2009</td>
<td><a href="http://www.dh.gov.uk/statutoryinstruments">www.dh.gov.uk/statutoryinstruments</a></td>
</tr>
<tr>
<td>3</td>
<td>National Patient Safety Agency – Being Open</td>
<td><a href="http://www.npsa.nhs.uk">www.npsa.nhs.uk</a></td>
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<tr>
<td>5</td>
<td>The Parliamentary and Health Service Ombudsman</td>
<td><a href="http://www.ombudsman.org.uk">www.ombudsman.org.uk</a></td>
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<tr>
<td>6</td>
<td>Independent Complaints Advocacy Service (ICAS)</td>
<td><a href="http://www.seap.org.uk/icas">www.seap.org.uk/icas</a></td>
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<td>7</td>
<td>Care Quality Commission</td>
<td><a href="http://www.cqc.org.uk">www.cqc.org.uk</a></td>
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<tr>
<td>9</td>
<td>NHS Confidentiality Code of Practice</td>
<td><a href="http://www.dh.gov.uk/publications">www.dh.gov.uk/publications</a></td>
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Management of Identified Stages:

- Fiona Bedus
- Dr S Deshmukh - Investigating Officer

Procedures applying to the 4Cs Policy must be managed/facilitated by Fiona Bedus or Dr Deshmukh on their behalf and issues should always be directed to them wherever they are received within by Sidcup Medical Centre
## Appendix 2: Definitions summary

### DEFINITIONS – COMPLAINTS AND CONCERNS

<table>
<thead>
<tr>
<th>WHO</th>
<th>WHAT</th>
<th>HOW</th>
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| COMPLAINT | - a patient;  
- someone acting on behalf of the patient  
who has specified that they wish to make a complaint | - any complaint about the actions of the Organisation or its employees or anyone acting on its behalf | - verbally - either directly or by telephone;  
- by e mail;  
- in writing; |
| CONCERNS | - a patient;  
- someone acting on the behalf of the patient;  
- anyone directly affected by the actions of the Organisation;  
- any MP or GP;  
- any member of the public;  
- other NHS organisations, stakeholder or their representative;  
- any other non NHS organisation;  
- any other organisation; | - any concern in relation to actions of Sidcup Medical Centre or its employees or someone acting on their behalf;  
- any question in respect of the Organisation;  
- requests for Information;  
- advice;  
- request for support during an investigation; | - verbally – directly or by telephone;  
- by e mail;  
- in writing; |