



Monkfield Medical Practice

Feedback and Complaints Policy

POLICY	FEEDBACK AND COMPLAINTS POLICY
VERSION	V1.0
AUTHOR	H CRISFORD
REVIEW PERIOD	ANNUALLY
DATE OF ISSUE	20.05.24
DATE RATIFIED BY BOARD OF DIRECTORS	24.05.24

1. Purpose and Overview

The Surgery is committed to ensuring that there is a clear and effective process in place that enables patients to provide positive or negative feedback or to formally complain when dissatisfied with care, treatment and services at the surgery.

It is a requirement that all healthcare organisations have a written procedure for handling complaints and that all personnel understand these procedures and can deal with any complaints received in the correct manner.

We aim to enable patients to express positive or negative comments, suggestions and complaints when they feel dissatisfied with the service provided. We will provide patients with an explanation of what has happened; where appropriate, an apology; and provide an assurance that steps will be taken to prevent the problem recurring, where this is possible. Information on how to access the complaints process should be made available to the complainant at the earliest opportunity.

2. Patient Feedback and Satisfaction

The Surgery will request regular feedback from patients attending the Service. This is normally undertaken by providing a feedback form to the patient and encouragement, where appropriate, for the form to be completed and returned to the Reception.

We recognise that one of the best ways to ensure ongoing service improvement is to listen to our patients' comments – whether positive or negative.

Forms are designed to give the option for patients to be identified or remain anonymous if they wish.

A mechanism of feedback collation will be in place for each service whereby forms are collated and presented to the Clinical Lead who then undertakes a review of the feedback. The Clinical Lead is required to provide a quarterly report, which includes details of patient feedback and an overall satisfaction score, to the Clinical Governance Committee.

The Surgery is receptive to feedback not only from patients but also from clinicians and additional and specific surveys will be conducted according to circumstances.

We see feedback, whether positive or negative, as an opportunity to continuously improve and we are very supportive to our service teams who are not subject to any form of blame culture should there be negative feedback of any kind.

3. Handling a Complaint

It is essential that all surgery staff are aware of what constitutes a complaint and how to handle a complaint.

All personnel, when dealing with a complaint, will be required to do the following:

- To try and help the patient feel relaxed. It is important that he or she realises that the complaint will be dealt with professionally and sympathetically;
- If the person is upset, angry or nervous, to remain calm and show empathy;
- To give assurance that the procedure has been set up for our patients' benefit and we regard responding to complaints as part of good management;
- To offer to take the patient into a private area to discuss the matter privately, if they so wish;
- To listen carefully to establish the facts;

4. The Complaints Process

The process is as follows:

- It must be explained to the patient that there is a complaints procedure in place, which involves the completion of the Complaints and Comments Leaflet (Appendix A). The completed leaflet should be passed onto the surgeries administrative staff for action.
- If the patient is not satisfied, the patient should then be asked if they would like to discuss their concerns with the Practice Manager.
- If the patients is still not satisfied following a talk with the Practice Manager and wishes to continue with making a complaint then they should be advised to complete a formal written complaint;
- The patient should be informed that they will receive an acknowledgement either by telephone or in writing within three working days;

The surgeries administrative staff will ensure that:

- All complaints receive an acknowledgement within 3 working days of receipt;
- A full written response will be made within 20 working days of receipt, or where the investigation is still in progress, will write to the complainant explaining the reason for the delay and supply a full response within 5 days of a conclusion being reached. This procedure will ensure that the complainant receives written confirmation of the stages of the investigation and of the action taken;
- If the complaint is being made on behalf of someone else, then a Consent Form must also be completed by the patient concerned;
- Complainants are alternatively invited to discuss the matter in person.

5. Other Requirements

In ensuring that the complaints process is as accessible as possible to all, special consideration should be given to the patient and/or family members or carers who may need additional support and advice in using the complaints procedure. Where care and treatment is provided to children, it is important that staff are aware of the difficulties a child faces in expressing concerns or complaints and should offer support to help the child overcome these.

The surgery will maintain an annual register of all complaints received, including information on whether or not the complaint was upheld, the results and action taken and a written record of each investigation.

It is essential that it be made clear to those who work within the organisation that they can raise concerns, through the appropriate channels, about their colleagues' performances with impunity.

6. Patient Rights

It is hoped that a complaint may be satisfactorily dealt with via the relevant in-house complaints procedure. However, any NHS patient who is treated by an independent organisation continues to have access to the NHS complaints procedure.

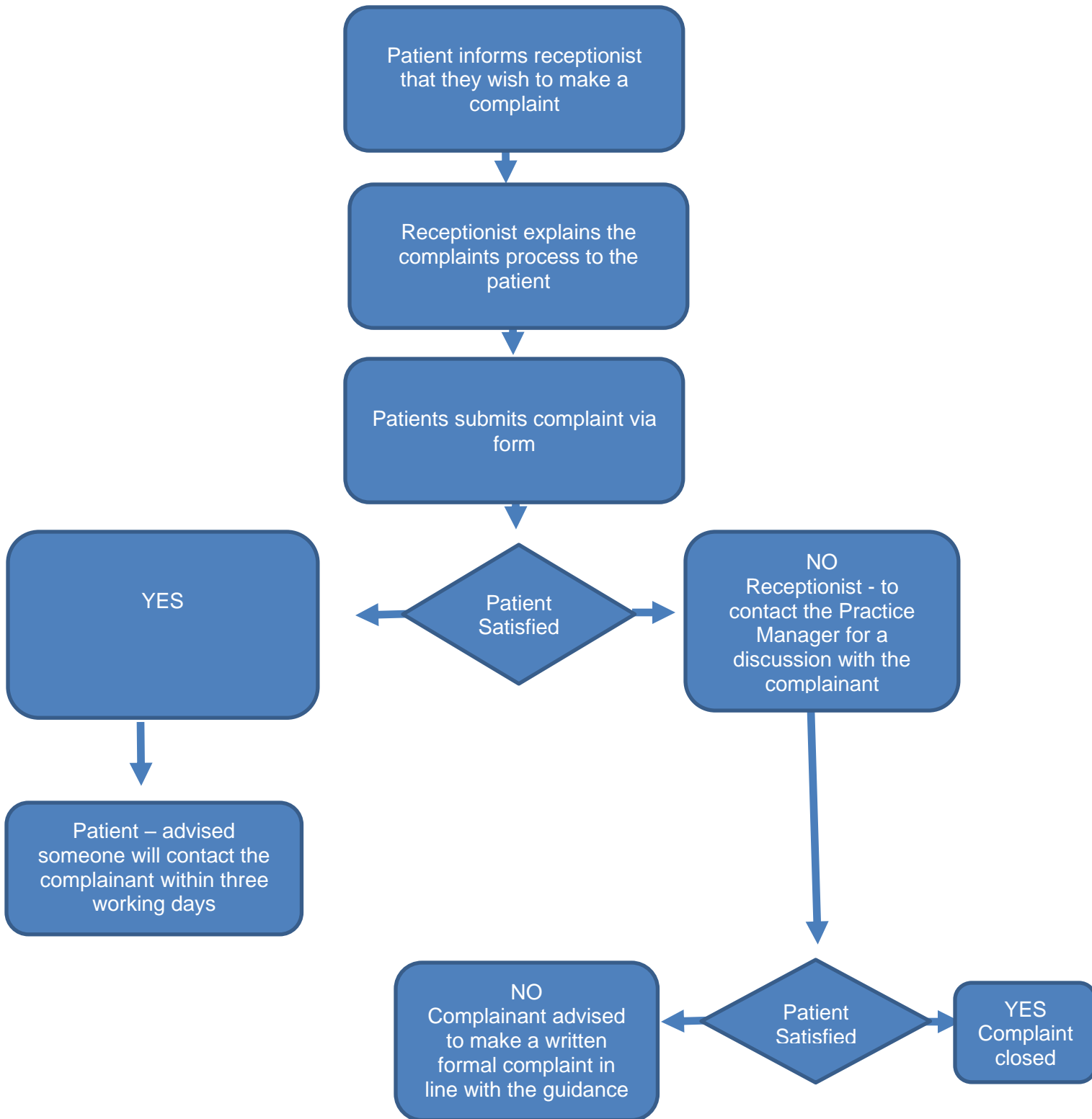
If the patient is unhappy with the response received from the surgery the patient can refer their complaint directly to:

- Parliamentary and Health Service Ombudsman - www.ombudsman.org.uk
Complainants should apply, with supporting papers, via their Member of Parliament.
- The General Medical Council - www.gmc-uk.org;

Patients may also like to take advice from the Independent Complaints Advocacy Service (ICAS) - www.icas.org.uk. This completely independent and free service is intended to provide additional support to patients and will act as their advocate if required.

Patients may wish to notify the Care Quality Commission (CQC) of any complaint regarding quality of care – www.cqc.org.uk. The CQC encourage patients to share information with them in order to use the information to help improve services for everyone; however CQC is not able to investigate an individual patient complaint.

Complaints Process Map



Appendix A – Patient Complaint Form

SECTION 1: PATIENT DETAILS

Surname		Maiden name	
Forename		Title (i.e. Mr, Mrs, Ms, Dr)	
Date of birth		Address:	
Telephone No.		Postcode:	
NHS number (if known)		Hospital number (if known)	

SECTION 2: COMPLAINT DETAILS

Please give full details of the complaint below, including dates, times, locations and names of any practice staff (if known). Continue on a separate page if required.

SECTION 3: SIGNATURE

Surname & initials		Title (Mr,Mrs,Ms,Dr)	
Signature		Date	