**Complaints Procedure (Wales)**

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# Introduction

## Policy statement

The purpose of this document is to ensure that all staff are aware of the complaints procedure within Bryngwyn Surgery, affording patients or their representatives the opportunity to make a complaint about the care or treatment they have received from the practice.

All staff at Bryngwyn Surgery are to be fully conversant with this policy and are to understand that all patients have a right to have their complaint acknowledged and investigated properly. Bryngwyn Surgery takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner.

We will maintain communication with the complainant (or their representative) throughout, ensuring they know the complaint is being taken seriously.

The policy is aligned to the mandatory requirements within the [General Medical Council (GMC) ethical guidance](https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice) which states that a ‘good’ doctor will:

* Make the patients your first concern
* Take prompt action if you think the patient is being compromised
* Establish and maintain good relationships with patients
* Be honest and open and act with integrity.
* Listen to, and respond to, patients’ concerns and preferences.

The practice will aim to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents). Consideration has been given to the impact this policy might have regarding the individual protected characteristics of those to whom it applies.

## Status

This document applies to all employees of the organisation and other individuals performing functions in relation to the organisation such as agency workers, locums and contractors.

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

## Welsh Language Policy

Bryngwyn Surgery must take account of the needs of individuals to ensure that the Welsh language is utilised, published and displayed.

Therefore, in accordance with the Welsh Language Policy, all information must be in a variety of formats e.g., leaflets, posters and websites and free of charge. Primarily, all information will be offered in both Welsh and English coupled with any other language that may be required.

## Health Inspectorate Wales

Health Inspectorate Wales would expect any primary care organisation in Wales to have a policy to support this process which during inspection should be used as evidence of compliance against [NHS Wales Health and Care Standards](http://www.wales.nhs.uk/governance-emanual/health-and-care-standards).

# Guidance

## Legislation

Every NHS Wales facility has a complaints procedure; this permits a patient (or their nominated representative) to submit a complaint either to the NHS Wales practice or the organisation that has been commissioned by NHS Wales to provide a service.

This practice adopts a patient-focused approach to complaint handling in accordance with:

* [National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011](https://www.legislation.gov.uk/wsi/2011/704/contents/made)
* Whilst also conforming to NHS Wales complaints guidance detailed in [Putting Things Right](http://www.wales.nhs.uk/sitesplus/documents/861/Healthcare%20Quality%20-%20Guidance%20-%20Dealing%20with%20concerns%20about%20the%20NHS%20-%20Version%203%20-%20CLEAN%20VERSION%20%20-%2020140122.pdf).

Bryngwyn Surgery will ensure that appropriate procedures are in place to enable individuals (or their representatives) to make a complaint about the care or treatment they have received at this practice.

## Definition of a complaint

A complaint or concern is an expression of dissatisfaction about an act, omission or decision of NHS Wales, either verbal or written, and whether justified or not, which requires a response.

There is no difference between a “formal” and an “informal” complaint. Both are expressions of dissatisfaction.

## Complaints procedure promulgation

Bryngwyn Surgery has prominently displayed notices in Welsh and English at reception and in the waiting room detailing the complaints procedure. In addition, the procedure is included on the practice website and a complaints leaflet is also available from reception.

The information provided is written in conjunction with this policy and refers to the legislation detailed in [Section 2.1](#_Legislation).

## Responsible person

At this practice, the responsible person is Dr M Jadoon. They are responsible for ensuring compliance with the complaints regulations and making sure action is taken because of the complaint.

|  |
| --- |
|  |

## Complaints manager

At this practice, the complaints manager is Michele Richards. They are responsible for managing all complaints procedures and must be readily identifiable to service users. The responsible person and complaints manager can be the same person.

## Complainant options

The complainant, or their representative, can complain about any aspect of care or treatment they have received at this practice to:

* This practice via the complaints manager
* The local health board of the practice. Health boards can be contacted by telephone, post or e-mail. Full contact details of all health boards in Wales can be found on the Complaints and Concerns NHS Wales [website](https://gov.wales/nhs-wales-complaints-and-concerns-putting-things-right#section-49684).

## Timescale

The time constraint for bringing a complaint is 12 months from the occurrence giving rise to the complaint or 12 months from the time that the complainant becomes aware of the matter about which they wish to complain.

If, however, there are good reasons for complaints not being made within the timescale detailed above, consideration may be afforded to investigating the complaint if it is still feasible to investigate the complaint *effectively* and *fairly.* Should any doubt arise, further guidance should be sought from NHS Wales by the complaints manager.

## Response times

The complainant has a right to be regularly updated regarding the progress of their complaint. The complaints manager at Bryngwyn Surgery will provide an initial response to acknowledge any complaint within two working days after the complaint is received. It should be noted that two working days is the maximum permitted under the NHS Wales complaints guidance.

All complaints are to be added to the complaints log in accordance with [Section 2.27](#_Logging_and_retaining).

The NHS Wales complaints guidance states that the complainant can expect that:

* They will be kept up to date with the progress of their complaint
* If a case has passed the 30-working day target (or the timescale agreed with the complainant if different), thereafter they must inform the complainant (and their advocate if relevant) of any delay and a full response should be provided within six months. This could be by telephone, email or letter but the format should be agreed with the complainant
* They can expect to receive a quality response with assurance that action has been taken to prevent a recurrence
* They will be informed of any learning

The [Medical Defence Union (MDU)](https://mdujournal.themdu.com/issue-archive/summer-2019/managing-patient-complaints) advises that, in addition to regular updates, a response or decision should be made within six months. If it extends beyond this time, then the complainant must be advised.

The complaints manager will advise the complaints procedure to the complainant or their representative. In many cases, a prompt response and, if the complaint is upheld, an explanation and an apology will suffice and will prevent the complaint from escalating (an apology does not constitute an admission of organisational weakness).

## Route of a complaint

Patients can opt to complain either verbally or in writing. No matter what the cause of the complaint, all staff are to offer empathy when entering into discussions with the complainant. In accordance with Putting Things Right [Section 3](http://www.wales.nhs.uk/sitesplus/documents/861/Healthcare%20Quality%20-%20Guidance%20-%20Dealing%20with%20concerns%20about%20the%20NHS%20-%20Version%203%20-%20CLEAN%20VERSION%20%20-%2020140122.pdf), all staff at Bryngwyn Surgery must fully understand the complaints process.

The complainant should be provided with a copy of the practice leaflet detailing the complaints process at [Annex D](#_Annex_F_–) and they should be advised that the process is a two-stage process as detailed below.

**Stage 1**

The complainant may make a complaint to either the practice or to NHS Wales via the local health board

**Stage 2**

If not content with either response following a full investigation, the complainant may then escalate this to the Public Services Ombudsman for Wales (PSOW)

**Important:**  Complaints are not escalated to NHS Wales following the practice’s response. A complaint made to either the practice or NHS Wales will escalate to the PSOW.

## Meeting with the complainant

An improved outcome may be that a meeting is arranged between the complainant and the complaints lead. Whilst this is not an absolute requirement, the [BMA](https://www.bma.org.uk/advice-and-support/gp-practices/complaints-in-primary-care/complaints-in-primary-care) suggests that *a meeting should be arranged for the investigator to discuss the complaint with the complainant*.

Therefore, whilst requesting a meeting is not a mandatory requirement, as this is deemed best practice and with better outcomes often resulting from a meeting.

## Verbal complaints

If a patient wishes to complain verbally and if the patient is content for the person dealing with the complaint to deal with this matter and if appropriate to do so, then complaints should be managed at this level. After this conversation, the patient may suggest that no further action is needed. If this should be the case, then the matter can be deemed to be closed, although the complaints manager should still be informed as this needs to be added to the complaints log in accordance with [Section 2.27](#_Logging_and_retaining).

This local resolution is the quickest method of resolving a complaint and will negate the requirement for the complaint to proceed through the formal complaint process.

An acknowledgement of the verbal complaint will suffice and therefore the complaints manager does not need to subsequently respond in writing, although the verbal complaint must be recorded in the complaints log. This will enable any trends to be identified and improvements to services made if applicable. The complaints manager should record notes of the discussion (for reference only) which may be used when discussing complaints at meetings.

If the matter demands immediate attention, the complaints manager should be contacted who may then offer the patient an appointment or may offer to see the complainant at this stage.

Staff are reminded that when internally escalating any complaint to the complaint’s manager then a full explanation of the events leading to the complaint is to be given to allow any appropriate response.

## Written complaints

Whilst this is not the preferred option due to the timescales involved in compiling a letter of complaint and any subsequent response for both the patient and the complaints manager, an alternative option can be offered for any complaint to be forwarded by letter or email to the complaints manager.

When a complaint is received then the response is to be as per [Section 2.8](#_Response_times).

## Who can make a complaint?

As mentioned in the NHS Wales Putting Things Right document, almost anyone can raise a concern and the responsible body will be under a duty to consider whether it can be investigated.

However, it might not always be possible to share the full details of the investigation with the person raising the concern, for instance, if they are not the patient or not their next of kin.

Full information that details the various nuances can be found [here](http://www.wales.nhs.uk/sitesplus/documents/861/Healthcare%20Quality%20-%20Guidance%20-%20Dealing%20with%20concerns%20about%20the%20NHS%20-%20Version%203%20-%20CLEAN%20VERSION%20%20-%2020140122.pdf).

## Complaints advocates

Details of how patients can complain and how to find independent NHS complaints advocates are to be detailed within the complaints leaflet at [Annex D](#_Annex_D_–).

The Community Health Council’s independent advocacy service provides free and confidential support. Local Community Health Councils sit within each health board. Full contact details can be found on the NHS Wales [website](https://www.wales.nhs.uk/ourservices/directory/CommunityHealthCouncils).

Independent advocacy services also include:

1. [Action against medical accidents](https://www.avma.org.uk/) (AvMA) can be contacted on 0845 123 2352. Self-help guides are also available on their website

1. [Meic](https://www.meiccymru.org/) is the helpline service for children and young people up to the age of 25 in Wales and provides information on advocacy
2. [Age Cymru](https://www.ageuk.org.uk/cymru/) may have advocates in the area. Visit their website or call 0300 303 4498
3. Local councils can offer support in helping the complainant to find an advocacy service visit [Gov.Wales](https://gov.wales/find-your-local-authority)

##  Investigating complaints

Bryngwyn Surgery will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance.

This practice will adhere to the following standards when addressing complaints:

* The complainant has a single point of contact in the practice and is placed at the centre of the process. The nature of their complaint and the outcome they are seeking are established at the outset
* The complaint undergoes initial assessment and any necessary immediate action is taken. A lead investigator is identified
* Investigations are thorough, where appropriate obtain independent evidence and opinion, and are carried out in accordance with local procedures, national guidance and within legal frameworks
* The investigator reviews, organises and evaluates the investigative findings
* The judgement reached by the decision maker is transparent, reasonable and based on the evidence available
* The complaint documentation is accurate and complete. The investigation is formally recorded with the level of detail appropriate to the nature and seriousness of the complaint
* Both the complainant and those complained about are responded to adequately
* The investigation of the complaint is complete, impartial and fair
* The complainant should receive a full response or decision within six months following the initial complaint being made. If the complaint is still being investigated then this would be deemed to be a reasonable explanation for a delay.

##  Conflicts of interest

The complaints manager and/or investigating clinician must consider and declare whether there are any circumstances by which a reasonable person would consider that their ability to apply judgement or act as a clinical reviewer could be impaired or influenced by another interest that they may hold.

This includes, but is not limited to, having a close association with the complained about, having trained or appraised the complained about and/or being in a financial arrangement with them previously or currently.

Should such circumstances arise, the practice should seek to appoint another member of the practice as the responsible person with appropriate complaint management experience.

##  Final formal response to a complaint

A final response should only be issued to the complainant once the organisation that provides indemnity for the practice has been consulted and General Medical Practice Indemnity ([GMPI](https://nwssp.nhs.wales/ourservices/legal-risk-services/areas-of-practice/general-medical-practice-indemnity-gmpi/)) have had sight of the complaint and an opportunity to comment.

Upon completion of the investigation, a formal written response will be sent to the complainant and will include the following as per NHS Wales complaints policy:

* An apology
* A summary of what the concern was about
* An explanation of how the concern was investigated
* Copies of any expert opinion obtained as part of the investigation
* Copies of any relevant medical records, where appropriate
* An explanation of any actions taken
* An offer to discuss the response to the concern with the executive officer or their nominated representative
* Details of the person’s right to raise their concern with the PSOW

Consideration must be given to the fact that the response is likely to be read by the complainant’s family and possibly legal advisers.

A full explanation and apology may assist in avoiding a claim. However, if a

patient subsequently brings a claim for compensation, the complaint file is likely to

be used in those proceedings so it is important that any response to a complaint is

clear and well explained and can be supported by evidence.

The full and final response should ordinarily be completed within six months although should it be likely that this will go beyond this timescale, the complaints manager will contact the complainant to update and give a projected completion timescale.

A template example of the final response letter can be found at [Annex F](#_Annex_I_–).

##  Confidentiality in relation to complaints

Any complaint is investigated with the utmost confidence and all associated documentation will be held separately from the complainant’s medical records.

Complaint confidentiality will be maintained, ensuring only managers and staff who are involved in the investigation know the particulars of the complaint.

##  Persistent and unreasonable complaints

The management of persistent and unreasonable complaints at Bryngwyn Surgery is achieved by following the guidance for NHS Wales organisations detailed within [Putting Things Right](http://www.wales.nhs.uk/sitesplus/documents/861/Healthcare%20Quality%20-%20Guidance%20-%20Dealing%20with%20concerns%20about%20the%20NHS%20-%20Version%203%20-%20CLEAN%20VERSION%20%20-%2020140122.pdf).

##  Complaints citing legal action

Should any complaint be received and the content states that legal action has been sought then, prior to any response, contact must be made for further advice from MPS and GMPI.

Indemnity insurers can assist with the complaint procedure, from drafting an initial response to supporting the practice if the complaint is referred to the PSOW. GMPI provides clinical negligence indemnity for providers of GP services in Wales for compensation arising from the care, diagnosis and treatment of a patient following incidents which happen on or after 1 April 2019.

##  Multi-agency complaints

If a complaint is about more than one health or social care organisation, there should be a single co-ordinated response. Complaints managers from each organisation will need to determine which the lead organisation will be, and the lead organisation will then be responsible for co-ordinating the complaint, agreeing timescales with the complainant.

If a complaint becomes multi-agency, the practice should seek the complainant’s consent to ask for a joint response. The final response should include this.

## Complaints involving external staff

Should a complaint be received about a member of another practice’s staff, then this is to be brought to the attention of the complaints manager at the earliest opportunity. The complaints manager will then liaise with any other managers as appropriate.

##  Complaints involving locum staff

Bryngwyn Surgery will ensure that all locum staff, be it GPs, nurses or administrative staff, are aware of the complaints process and that they will be expected to partake in any subsequent investigation even if they have left the practice (keeping in mind the 12-month time frame to complain).

Locum staff must receive assurance that they will be treated equally and that there is no difference between locum staff, salaried staff or partners.

##  Significant events

When a complaint is raised, it may prompt other considerations, such as a significant event (SE). SEs are an excellent way to determine the root cause of an event and Bryngwyn Surgery can benefit from the learning outcomes because of the SE.

It is advised that the complainant, their carers and/or family are involved in the SE process. This helps to demonstrate to the complainant that the issue is being taken seriously and investigated by Bryngwyn Surgery.

Further information on the significant event process can be sought from the Significant Event and Incident Policy.

## Fitness to practise

When a complaint is raised, consideration may need to be given to whether the complaint merits a fitness to practise referral. Advice may need to be sought from the relevant governing body such as the General Medical Council, the Nursing and Midwifery Council (NMC), Healthcare Professionals Council (HCPC) etc.

At Bryngwyn Surgery, the senior partner will be responsible for firstly discussing the complaint with the clinician involved and then seeking guidance from the relevant governing body where applicable.

## Staff rights to escalate to PSOW

It should be noted that any staff who are being complained about can also take the case to the PSOW. An example may be that if they are not satisfied with a response given on their behalf by an external body.

##  Logging and retaining complaints

All practices will need to log their complaints and retain as per the [Records Retention Schedule](https://practiceindex.co.uk/gp/forum/resources/record-retention-schedule.767/).

In line with NHS Wales complaints guidance, each practice must prepare an annual report for each year. The report must contain, as a minimum:

* Number of concerns received
* Number of concerns deemed well founded
* Number of concerns referred to the PSOW

The annual report should also summarise:

* The nature and substance of concerns received
* Any matters of general importance arising out of these concerns or the way that they were handled including areas of concern within departments, staff groups, treatments or services provided, that is reporting on trends
* Actions taken to improve services because of a concern/s being notified

A copy of the annual report on the handling and investigating of concerns should be sent to the Local Health Board by 31 March each year.

# Use of complaints as part of the revalidation process

## Outlined processes

As part of the revalidation process, GPs must declare and reflect on any formal complaints about them in tandem with any complaints received outside of formal complaint procedures at their appraisal for revalidation. These complaints may provide useful learning.

The Royal College of General Practitioners has produced appraisal [guidance](https://www.rcgp.org.uk/your-career/revalidation/appraisal-revalidation-support) for this purpose.

Nurses may also wish to use information about complaints as part of their [NMC revalidation](https://www.nmc.org.uk/revalidation/overview/what-is-revalidation/). This feedback can contribute towards submissions about practice related feedback, and it can also be part of a written reflective account. Likewise, pharmacists and other healthcare professionals may wish to consider using complaints and their management as part of their revalidation process.

The General Pharmaceutical Council revalidation process can be sought [here](https://www.pharmacyregulation.org/revalidation) and information relating to the HCPC revalidation process can be found [here](https://www.hcpc-uk.org/globalassets/resources/reports/continuing-fitness-to-practise---towards-an-evidence-based-approach-to-revalidation.pdf?v=636785062220000000).

# Further information

Further relevant information is available within both:

* [The Data Protection Act 2018](https://www.legislation.gov.uk/ukpga/2018/12/contents/enacted)
* [The General Data Protection Regulation Public Interest Disclosure Act 1998](https://www.legislation.gov.uk/ukpga/1998/23/contents)

# Summary

The care and treatment delivered by Bryngwyn Surgery is done so with due diligence and in accordance with current guidelines. However, it is acknowledged that sometimes things can go wrong.

By having an effective complaints process in place, this practice can investigate and resolve complaints in a timely manner, achieving the desired outcome for service users, whilst also identifying lessons learned and ultimately improving service delivery.

#

# Annex A – Patient complaint form

**SECTION 1: PATIENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  |

|  |
| --- |
| Address |
|   |

 |  |
| Date of birth |  |
| Telephone no. |  | Postcode |  |

**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: OUTCOME**

|  |
| --- |
|  |

**SECTION 4: SIGNATURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname & initials |  | Title |  |
| Signature |  | Date |  |

**SECTION 5: ACTIONS**

|  |
| --- |
| Passed to management Yes/No |

# Annex B – Third party patient complaint form

**SECTION 1: PATIENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  |

|  |
| --- |
| Address |
|   |

 |  |
| Date of birth |  |
| Telephone no. |  | Postcode |  |

**SECTION 2: THIRD PARTY DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename |  |

|  |
| --- |
| Address |
|   |

 |  |
| Date of birth |  |
| Telephone No. |  | Postcode |  |

**SECTION 3: DECLARATION**

I hereby authorise the individual detailed in Section 2 to act on my behalf in making this complaint and to receive such information as may be considered relevant to the complaint. I understand that any information given about me is limited to that which is relevant to the subsequent investigation of the complaint and may only be disclosed to those people who have consented to act on my behalf.

This authority is for an indefinite period/for a limited period only\*.

Where a limited period applies, this authority is valid until ………./………./……….

**SECTION 4: SIGNATURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname & initials |  | Title |  |
| Signature |  | Date |  |

# Annex C – Complaint handling desktop aide-memoire

**\*** It may be necessary to liaise with external third parties such as hospitals to gather additional information or to formulate a joint response. Where this is the case, the patient or their representative must be advised accordingly.

# Annex D – Complaint leaflet

A patient information leaflet regarding complaints is shown overleaf.

| Advocacy supportCommunity Health Councils in Wales provide advocacy support, visit their website for local details <http://www.wales.nhs.uk/sitesplus/899/home>[Meic](https://www.meiccymru.org/) is the helpline service for children and young people up to the age of 25 in Wales 0808 80 23456Age Cymru may have advocates in the area. Visit their website or call 0300 303 44 98Further actionIf you are dissatisfied with the outcome of your complaint from either NHS Wales or this practice, then you can escalate your complaint to:Public Services Ombudsman for Wales1 Ffordd yr Hen GaePencoedCF35 5LJ Tel 0300 790 0203 or email ask@ombudsman-wales.org.uk  | Bryngwyn Surgery[Insert full address][Insert telephone number and email address] |  | The Complaints ProcessBryngwyn Surgery  |
| --- | --- | --- | --- |



Talk to us

Every patient has the right to make a complaint about the treatment or care they have received at Bryngwyn Surgery.

We understand that we may not always get everything right and, by telling us about the problem you have encountered, we will be able to improve our services and patient experience.

Who to talk to

Most complaints can be resolved at a local level. Please speak to a member of staff if you have a complaint; our staff are trained to handle complaints. Alternatively, ask to speak to the complaint’s manager, [insert name and role].

If for any reason you do not want to speak to a member of our staff, then you can request that the Local Health Board investigates your complaint. They will contact us on your behalf:

Contact details for [relevant] health board including email address and telephone]

A complaint can be made verbally or in writing. A complaints form is available from reception. Additionally, you can complain via email to [insert email address].

Time frames for complaints

The time constraint on bringing a complaint is 12 months from the occurrence giving rise to the complaint, or 12 months from the time you become aware of the matter about which you wish to complain.

The [complaints manager] will acknowledge any complaints within three business days.

We will aim to investigate and provide you with the findings as soon as we can and will provide regular updates regarding the investigation of your complaint.

Investigating complaints

Bryngwyn Surgery will investigate all complaints effectively and in conjunction with extant legislation and guidance.

Confidentiality

Bryngwyn Surgery will ensure that all complaints are investigated with the utmost confidentiality and that any documents are held separately from the patient’s healthcare record.

Third party complaints

Bryngwyn Surgery allows a third party to make a complaint on behalf of a patient. The patient must provide consent for them to do so. A third-party patient complaint form is available from reception.

Final response

Bryngwyn Surgery will issue a final formal response to all complainants which will provide full details and the outcome of the complaint.

# Annex E – Acknowledgement of a complaint letter (example)

[Practice name]

[Address]

[Complainant’s name]

[Complainant’s address]

[Date]

Reference [Enter]

Dear [name],

**Acknowledgment of complaint**

Dear [Insert patient’s name]

Re: [Summarise your understanding of the concern]

Thank you for your [letter/email/fax/telephone enquiry] of [insert date] which was received on [insert date] and for taking the time to contact us about your concern/s.

Please accept our sincere apologies for the distress and inconvenience that this has clearly already caused you.

**Contact point**

I will be your named contact at the practice whilst your concern is being investigated. I am available to discuss with you any aspect of how your concern will be taken forward. Additionally, if you have any special requirements such as language, hearing, or sight needs, please let me know.

My telephone number and e-mail details are shown below.

The following information explains the additional support available to you and the overall investigation process.

**Help and assistance**

If you require independent help in taking forward your concern, then advocacy and support services are available to you through your local Community Health Council as outlined in the enclosed leaflet.

**Medical records**

We take confidentiality seriously and it is important for you to know that to investigate your concern we will/may need to access your medical records (e.g., hospital, GP etc.), so that we can see what they say about the situation you have told us about. If you are not happy with this, then you must inform us immediately.

If we do not hear from you with the next few days, then we will assume that you are happy for the investigation to continue and for your notes to be looked at. Please be assured that only people immediately dealing with the investigation will be able to look at your notes.

**Investigation**

We will now look at your concern, which may involve looking at relevant documents, speaking to staff and seeking clinical opinion. We may also need to speak to you during the investigation or ask you to attend a meeting.

After this time, we will respond to you outlining our findings and actions taken. We will normally let you have a reply within 30 working days of receiving your concern. This means that you should expect a reply from us by [insert date]. If we are unable to respond within this time or if further investigation is required, we will let you know. I hope you have found this helpful, and I look forward to hearing from you if you wish to discuss any aspect of this letter.

Yours sincerely

[Insert staff name and role]

Enclosed:

Putting Things Right leaflet

# Annex F – Final response to a complaint letter (example)

[Practice name]

[Address]

[Complainant’s name]

[Complainant’s address]

[Date]

Reference [Enter]

Dear [name],

Re: [Insert patient’s name if third party and summarise your understanding of the concern as outlined in acknowledgement letter]

I am writing further to my letter of [insert date] to provide you with a full response to your concern.

* Give details of investigation, outcome and actions taken such as:
* Summarise nature and substance of the concern/s
* Describe the investigation undertaken
* Include copies of expert opinions (if received during investigation)
* Include copies of any relevant medical records where appropriate (e.g., hospital, GP etc) Where appropriate, include an apology
* Identify what action, if any, will be taken, including where services have been improved as a result of the concern
* Offer the opportunity to discuss the content of the response
* If no liability, give reasons for decision as to why

Thank you for raising your concern with us. I hope this response has addressed all the questions you had and provided some assurance that lessons will be learned from your experiences.

If you are not satisfied with the outcome of our investigation, you can take your concerns to the Public Services Ombudsman for Wales who can be contacted at:

1 Ffordd yr Hen Gae

PENCOED

CF35 5LJ

Tel: 0300 790 0203

Email: ask@ombudsman-wales.org.uk

Yours sincerely,

[Signed]

[Name]

[Role]