

Title	<b>COMPLAINTS PROCEDURE</b>			Number	<b>G02</b>
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Contacts:					

## Version Control

<b>DATE</b>	<b>CHANGE</b>	<b>CHANGED BY</b>
24.02.16	No changes	SB
14.12.18	No changes	SB
09.03.21	Reviewed, no changes	KE, SB

## INTRODUCTION

This procedure outlines the steps which need to be followed for the management of any complaint. Complaints are generally received from a patient directly, via a carer or relative, from a commissioning body or from the patient's GP.

### 1. INITIAL RESPONSE

Responsibility: Quality & Compliance Dept  
Timescale: as soon as possible; maximum 3 working days

#### 1.1 RECEIVED FROM COMMISSIONER OR GP

- Acknowledge receipt – within 3 working days
- Confirm if originator requests Badger to manage complaint
- If yes > ask to send information and explain we will contact complainant
- If no > explain expectation that Badger normally manages complaints  
If there are exceptional reasons for a request of documentation explain that Badger requires consent for the release of such information.

#### 1.2 DIRECT FROM PATIENT, CARER OR RELATIVE (third party)

- Introduce yourself by name and confirm your role in co-ordinating the investigation of the complaint.
- Confirm how complainant wishes to be addressed (Mr Smith, Dr Smith, John Smith, John, etc)
- Confirm how complainant wishes to be contacted throughout the investigation (phone, email, post)
- Acknowledge receipt of the complaint (must be written) – within 3 working days
- Confirm / ask what they hope will happen as a result of the investigation
- Explain procedure for investigation

An investigation will be carried out which usually includes the records, recordings of telephone calls (where relevant), written reports and sometimes interviews with staff involved. This is carried out by an Associate Medical Director (AMD). This director then writes to the complainant with a response within 20 working days from receipt of information.

- Ensure the patient understands the timescale and agrees to it.
- Confirm you will send information by post to the complainant (or the patient if the complainant says this is what they require) including a consent form for them to complete and return indicating their agreement to the investigation. Meanwhile, Badger will start the investigation immediately.

## 2. WRITTEN ACKNOWLEDGMENT

Responsibility: Quality & Compliance dept.

Timescale: As soon as possible: maximum 3 working days from initial receipt

Contents of acknowledgement being sent:-

- Written acknowledgment of complaint
- Patient guide to the complaints process
- Advocacy information
- Response form to confirm
  - Patient details
  - To whom the response is to be sent
  - Consent of patient or guardian
  - Consent to response to be copied to Commissioner
- Stamped, addressed envelope for response

Follow-up: If there has been no response within 20 working days, Q & C to follow up by telephone

If there has still been no response after a further 5 working days, the Medical Director will consider whether to abandon the investigation or continue as an untoward incident.

## 3. GATHERING INFORMATION

Responsibility: Quality & Compliance Dept

Timescale: Within 5 working days from receipt of complaint

The following information will be gathered relating to the complaint:

- Written and computerised call records
- Transcripts of telephone conversations where relevant

- The Q&C dept. to write out to all relevant individuals who dealt with the original case, for their response to the complaint – required within 5 working days of the request being made
- On receipt, all information to be sent to the AMD within 3 working days

## 4. RESPONSE

Responsibility: Associate Medical Director (AMD)

Timescale: Within 20 working days of receiving information

- Written response to be sent out within 20 working days from receipt of information, including details and conclusions of the investigation and inviting the complainant to ask questions or comment on any unresolved issues.
- For patients from member practices a copy of the response to be sent to the patient's GP.
- For patients from non member practices a copy of the response to be sent to the CCG.
- If there has been no response within one month the complaint can be closed
- If there are further issues, questions or comments these are to be referred to the AMD for consideration, with a further response provided, including:-
  - Answers to the additional questions
  - Response to any comments
  - Offer of a meeting if appropriate
  - Information about recourse to the Ombudsman

## 5. MEETING

Responsibility: Investigating clinician or medical director

Timescale: By agreement with complainant

Should a meeting be requested by the complainant then the following arrangements are to be made:-

- Location by agreement with the complainant
- Q & C to attend to provide continuity for complainant and to take notes
- Follow-up letter to be sent within 5 working days of meeting.

## 6. PATIENT CONFIDENTIALITY

It is important to remember that throughout any investigation patient confidentiality must be maintained at all times in line with the Information Governance policy. Breaches of patient confidentiality will be recorded on the Caldecott log and an Incident form completed. For any email correspondence containing Patient Identifiable Data (PID) the following policies must be adhered to:-

- IG13 – Guidelines for transferring PID sensitive information

• IG37 – Email policy



