



## Complaints Policy and Procedure

### Policy Statement

All complainants will have their complaint dealt with speedily and efficiently and in a respectful and sympathetic way.

### Purpose

- GDoc Ltd recognises the importance and value of an effective process of complaints handling as part of a comprehensive framework of quality improvement activity in accordance with the recent NHS regulatory review and line with the development and implementation of Clinical Governance
- GDoc Ltd will ensure that the handling and consideration of complaints is actioned appropriately, that the arrangements are in place to ensure complaints are dealt with speedily and efficiently
- That complainants are treated courteously and sympathetically and as far as possible involved in decisions about how their complaints are handled and considered.

### Scope

This policy applies to all staff involved in the service provision on behalf of GDoc Ltd, including those on temporary contracts and/or employed as subcontractors to GDoc Ltd.

### Exclusions

None

### Policy

#### 1. Introduction

GDoc Ltd recognises the value of direct communications with patients and service users. Whilst continuously striving to improve services the Organisation accepts that causes for concern can arise. GDoc Ltd sees constructive comments, suggestions and complaints as part of the process of maintaining and developing good quality reflective services.

In view of this, GDoc Ltd aims to deal with complaints as quickly, appropriately and as close to the source of the problem as possible. The Organisation's open culture aims to empower all staff, with the support of GDoc Ltd's Registered Manager, to deal with 'complaints' (problems) informally at the point of service delivery.

In addition by having a lean, open organisation GDoc Ltd believes it is easy:

- For all staff to receive formal complaints and feed them into the complaints procedure

Date of Review	28 April 2016
Next Review Due	28 April 2018



- For complainants to receive a rapid, open, conciliatory response which meets the needs of the complainant whilst being fair to staff
- For complaints to have a high profile within the Organisation
- For complaints to be used as a means of providing information to management in order that, where appropriate, services can be improved.

## **2. Organisational Responsibilities**

GDoc's responsibilities in handling complaints are to:

- Investigate complaints against the Organisation itself and the service it provides by local resolution or formal investigation as per the wishes of the complainant. It is also responsible for investigating complaints in respect of services it commissions, working jointly with partners to resolve any issues.
- Investigate complaints in respect of services it commissions, working jointly with partners to resolve any issues
- Provide support to all its staff at local resolution stage
- Co-operate with any investigation requested by the commissioning Trust if appropriate
- Co-operate with any investigation carried out by the Independent review Panel or the Health Service Ombudsman.

GDoc Ltd's Registered Manager is ultimately responsible for the quality of care within the Organisation and is responsible for signing off all responses to complaints and for ensuring lessons learned are implemented.

The Registered Manager will receive reports at regular intervals detailing the cause of complaints and action taken to improve care/services. These reports will be discussed quarterly at the Clinical Governance Committee, which will monitor progress on the completion of any actions.

## **3. Implementation**

The continued development of an effective complaints handling function will be overseen by the Registered Manager and Clinical Governance Committee.

## **4. Financial Redress**

Although compensation would normally need to be sought through legal channels, the Organisation has the discretion to provide financial reimbursement of expenses or losses where fault has been found; for example, reimbursement of lost property.

## **5. Access to Health Records**

Where copies or access to records is provided as a part of the resolution of a complaint, these will be provided promptly and free of any charge.

Date of Review	28 April 2016
Next Review Due	28 April 2018



## **6. Complaints Procedure**

### **6.1 Introduction**

The DOH reform of the complaints system (April 2009) identifies the new arrangements for handling complaints. The system allows for a flexible approach and encourages local resolution of complaints. Whilst still providing for a more formal investigation should the need arise.

GDoc Ltd recognises the value of direct communications with patients and service users and regards constructive comments, suggestions and complaints as part of the process of maintaining and developing services. GDoc Ltd undertakes to investigate all complaints and incidents thoroughly and promptly.

Any complaint who remains dissatisfied with the outcome of the investigation has the right to refer to the Independent review panel and the Health Service Ombudsman.

### **6.2 Legislative Context**

This policy takes into account the changes in procedure set out in the Department of Health – Reform of the complaints system - April 2009

### **6.3 Resolution of Complaints**

Complaints about GDoc Ltd and the services it provides should be dealt with as follows:

Staff are encouraged in conjunction with their line manager to deal with concerns and request for Information to which they can provide an immediate response.

Where this is not possible, GDoc Ltd must acknowledge receipt of a complaint and offer to discuss the matter within 3 working days.

Agree with the complainant the manner in which they would like their complaint investigated (Local/ Formal) and an acceptable timeframe.

Investigate the complaint in a full and objective way.

Write to the complainant on completion of the investigation, explaining how it has been resolved, what appropriate action has been taken and reminding them of their right to take the matter to the Health Service Ombudsman.

Keep a record of all complaints, the results of investigations, the lessons learned and any actions implemented as a result.

## **7. Complaints across boundaries**

Where complaints against GDoc Ltd are part of a wider complaint, GDoc Ltd staff will work with other Organisations to ensure a single coordinated response.

Date of Review	28 April 2016
Next Review Due	28 April 2018



### 7.1 Who can make a complaint?

- A service user or patient using the service
- Any other person affected or likely to be affected by the action, omission or decision of the NHS body, independent provider or local authority
- Someone acting on behalf of a service user or patient where the service user or patient is unable to make the complaint themselves or has asked a person to make the complaint on their behalf
- Where the service user or patient is unable to complain themselves, the representative will need to have, or had sufficient interest in their welfare and be an appropriate person to act on the service users or patient's behalf.

### 7.2 Exemptions to the complaints arrangements

- A complaint about one health or adult social services organisation against another
- Staff working, or contracted to the Organisation regarding employment issues, contracts, pensions or complaints about one member of staff against another
- Complaints about requests for information under the Data Protection Act or Freedom of Information Act
- Where the complaint has already been investigated
- Private healthcare arrangements or privately covered adult social services including where a person uses direct payment provided by adult social services to purchase services
- Where an investigation has already been carried out under the Local Government Act 1974 or by the Health Service Commissioner under the 1993 Act.

### 7.3 Time limits to make a complaint

A complaint must be raised 12 months from the date the matter occurred or 12 months from the date the matter came to the notice of the complainant.

However GDoc Ltd staff should use their discretion to investigate beyond this time if there are good reasons for it and it is still possible to objectively investigate it.

### 7.4 Support for Complainants

There are a number of organisations that can support service users who wish to make a complaint:

- Independent Complaints Advocacy Service (ICAS)
- POhWER Advocacy Agency
- Citizens Advice Bureau (CAB).

Staff receiving complaints should be aware of and take steps to support people with special needs, (learning disability, hearing impairment or unfamiliar with the English language), to make a complaint.

Date of Review	28 April 2016
Next Review Due	28 April 2018



## 7.5 Support for Staff

The receipt of a complaint can be an extremely stressful experience for any member of staff. The implication that in some way or shape the care that was provided has been perceived as being anything but of the highest quality can have a considerable impact on a person's functioning.

GDoc Ltd is committed to ensuring that all staff are supported during the complaints process by:

- Ensuring fairness, openness and impartiality during complaints investigations
- Ensuring that all staff have an opportunity to comment on any responses made
- Accepting where something has gone wrong and apologise for it
- Equally, if the complaint is unfounded or incorrect fully support both our staff and the service or services questioned.

## 7.6 Second Stage

If the complainant is unhappy with the response from GDoc Ltd they should be supported in taking their case to the Health Services Ombudsman or the Independent Sector Complaints Adjudication Service.

Complainants should also be supported to contact the Care Quality Commission in order to inform them of any concerns that they may have about the regulated service.

## 8. Service Improvements, Clinical Governance and Performance Monitoring Learning from Complaints

GDoc Ltd's Registered Manager should use the issues raised in individual complaints to explore and, where appropriate, initiate service improvements.

Where appropriate, an action plan should be drawn up, a copy of which should be sent to the Directors who will monitor the implementation of actions undertaken.

## 9. Monitoring and Reporting

The Registered Manager will produce a report to the board annually detailing the number of complaints and causes with an analysis of the issues raised, recommendations to address the issues, actions taken as a result of the recommendations and evidence that the actions have been implemented.

In addition an annual report will:

- Specify the numbers of complaints received
- Identify the subject matter of those complaints
- Whether they upheld or not
- Whether referred to the Ombudsman
- A narrative of significant issues through the year.

Date of Review	28 April 2016
Next Review Due	28 April 2018



## 10. Managing persistent complainants

This section sets out our approach to the very few complainants who may persistently use our complaints procedure to the extent that it becomes impossible to operate effectively.

**10.1 Persistent complainants** are those whose contacts with GDoc Ltd, by their frequency, nature or tone significantly hinder the consideration of their own or other people's complaints.

Complainants include anyone acting on behalf of a service user or who contacts GDoc Ltd in connection with a complaint.

The principles set out in this policy also apply to our dealings with people other than complainants.

We seek to:

- Ensure fair and open access for all service users
- Provide a prompt and responsive service, ensuring that our communications are clear and available in a variety of formats and languages to suit our customer needs
- Make it clear to all complainants, both at initial contact and throughout their dealings with us, what we can or cannot do in relation to their complaint. In doing so, we aim to be open and not raise hopes or expectations that we cannot meet
- Deal fairly, honestly, consistently and appropriately with all complainants, including those who we consider to be persistent complainants. We believe that all complainants have the right to be heard, understood and respected. We also consider that our staff have the same rights
- Provide a service that is accessible to all complainants. However, we retain the right, where we consider the actions of persistent complainants to be unacceptable, to restrict or change access to our service
- Ensure other complainants and our employees do not suffer any disadvantage from persistent complainants
- Ensure the resources of GDoc Ltd are used as effectively as possible.

We recognise that the persistent complainant may have a genuine grievance and that being persistent can be a positive advantage when pursuing a complaint.

How we aim to manage these complainants will depend upon their nature and extent. If their persistence adversely affects our ability to do our work and provide a service to others, we may need to manage their unacceptable behaviour by restricting their contact with our service.

Any restrictions applied will be appropriate and proportionate to the nature of the complainant's contacts with GDoc Ltd at that time. The following are examples of the types of restriction, which may be used:

- Placing time limits on telephone conversations and personal contacts
- Restricting the number of telephone calls that will be taken (for example one call on one specified morning/afternoon of any week)
- Limiting the complainant to one medium of contact (telephone, letter, e-mail etc)
- Requiring the complainant to communicate only with a named employee

Date of Review	28 April 2016
Next Review Due	28 April 2018



- If a complaint is currently going through GDoc Ltd's complaints procedure, asking the complainant to enter into a written agreement about their future conduct if the complaint is to be progressed
- Requiring any personal contacts to take place in the presence of a witness
  
- Closing the investigation into a complaint
- Refusing to register and process further complaints providing the complainant with acknowledgements only of further letters, faxes, or e-mails received after a particular point
- Banning a complainant from some or all of our premises
- Involving the police in cases where we believe the complainant has committed a criminal offence (for example, harassment, assault on staff or criminal damage), where assault is threatened, or where the complainant refuses repeated requests to leave GDoc Ltd premises.

Wherever possible, we seek to apply restrictions in a way, which allows a complaint to progress to completion through our complaints process. We will try to maintain at least one form of contact.

A persistent complainant is likely to start by being unhappy with the level of service delivery, and persist in demanding unreasonable levels of service from the provider. If this is the problem then it is for the Registered Manager to decide whether or not the service received has been reasonable. In deciding whether or not they have provided adequate service, consideration will be given as to whether it complies with the law, relevant guidelines or service standards agreed by GDoc Ltd. If the provider considers that further investigation is unjustified the complainant will be advised that we will not necessarily respond to further service requests. If a complainant persists with requests for service, application of one or more of the above restrictions will be considered.

### **10.2 Deciding to Restrict Complainant Contact**

Before making any decision to restrict contact, the complainant will, wherever possible, be warned that, if the specified behaviour or actions continue, we will consider applying some or all of the restrictions set out above.

Decisions about applying this policy will only be taken after careful consideration of the situation by the Registered Manager. He/she will consider whether:

- The complainant is raising legitimate concerns
- The complaint is or has been investigated properly
- Any decision reached was the right one
- Communications with the complainant have been adequate
- The complainant is now providing any significant new information that might affect our view of the complaint
- Any circumstances that relate to the complainants mental health, age, gender, sexual orientation, belief or disability have been considered.

In deciding which restrictions are appropriate, careful consideration will be given to balancing the rights of the individual with the need to ensure other complainants and our employees do not suffer any disadvantage and GDoc Ltd resources are used as effectively as possible.

### **10.3 Appealing a Decision to Restrict Contact**

Date of Review	28 April 2016
Next Review Due	28 April 2018



A complainant can appeal a decision to restrict contact. The appeal will be considered by the Registered Manager, whoever, was not involved in the original decision. They will advise the complainant in writing whether the restricted contact arrangements still apply or a different course of action has been agreed.

#### **10.4 Recording and Reviewing a Decision to Restrict Contact**

We will record all contacts with persistent complainants. Where it is decided to restrict contact, an entry noting this will be made in the relevant file. A decision to restrict contact may be reconsidered if the complainant demonstrates a more acceptable approach.

We will review the status of all complainants with restricted contact arrangements on a regular basis.

We will keep a register of those subject to this policy.

When a decision has been taken not to carry on responding to correspondence, any further letters, faxes or e-mails from the complainant will be read to pick up any significant new information.

When persistent complainants make new complaints about new issues these will be treated on their merits and decisions will need to be taken on whether any restrictions which have been applied before, are still appropriate and necessary.

Date of Review	28 April 2016
Next Review Due	28 April 2018