

Complaints Policy Statement

The Salisbury Practice Ltd views complaints as an opportunity to learn and improve for the future as well as a chance to put things right for the person or organisation that has made the complaint.

Our policy is:

To provide a fair complaints procedure which is clear and easy to use for anyone wishing to make a complaint

To publicise the existence of our complaints procedure so that people know how to contact us to make a complaint.

To make sure everyone at The Salisbury Practice Ltd knows what to do if a complaint is received. To make sure all complaints are investigated fairly and in a timely way.

To make sure that complaints are, wherever possible, resolved and that relationships are repaired. To gather information which helps us to improve what we do.

Definition of a Complaint

A complaint is any expression of dissatisfaction, whether justified or not, about any aspect of The Salisbury Practice Ltd.

Where Complaints come from

Complaints may come from any person or organisation which has a legitimate interest in The Salisbury Practice Ltd.

A complaint can be received verbally, by phone, by email or in writing.

The policy does not cover complaints by staff who should use The Salisbury Practice Ltd.'s Discipline and Grievance policies.

Confidentiality

All complaint information will be handled sensitively, telling only those who need to know and following any relevant data protection requirements.

Responsibility

Overall responsibility for this policy and its implementation lies with Steve Holmes – Director, The Salisbury Practice Ltd.

Publicised contact details for complaints:

Written complaints to be sent to Dr. Steve Holmes at The Salisbury Practice, 50 High Street, Salisbury, SP1 2NT or steve@thesalisburypractice.co.uk

Verbal complaints may be made by phone to 01722 324343 or in person to any member of the team at The Salisbury Practice, 50 High Street, Salisbury SP1 2NT or at any of our events or activities.

Receiving Complaints

Complaints may arrive through channels publicised for that purpose or through any other contact details or opportunities the complainant may have.

Complaints received by telephone or in person need to be recorded. The person who receives a phone or in person complaint should;

Write down the facts of the complaint

- Take the complainant's name, address and telephone number
- Note down the relationship of the complainant to The Salisbury Practice (for example: client, member)
- Tell the complainant that we have a complaints procedure
- Tell the complainant what will happen next and how long it will take
- Where appropriate, ask the complainant to send a written account by post or by email so that the complaint is recorded in the complainant's own words.

Aim of Local resolution

The main objective of local resolution is to ensure that complaints are dealt with promptly and satisfactorily by ensuring that The Salisbury Practice:

- Investigates each complaint thoroughly
- Identifies any lessons to be learnt
- Ensures that appropriate remedial actions are taken
- Communicates effectively with the complainant and resolves the matter to the satisfaction of the complainant.

Stage One

In many cases, a complaint is best resolved by the person responsible for the issue being complained about. If the complaint has been received by that person, they may be able to resolve it swiftly and should do so if possible and appropriate.

Whether or not the complaint has been resolved, the complaint information should be passed to Steve Holmes within one week.

On receiving the complaint, Steve Holmes records it in the complaints log. If it has not already been resolved, Steve will investigate any complaints herself. However, if the complaint is about Steve then she will ask a senior associate or practice manager to investigate it and take appropriate action if that is most appropriate. Otherwise, she will proceed as though it is a stage 2 complaint.

If the complaint relates to a specific person, they should be informed and given a fair opportunity to respond.

Complaints should be acknowledged by the person handling the complaint within two weeks when necessary but ideally within a week.

The acknowledgement should say who is dealing with the complaint and when the person complaining can expect a reply. A copy of this complaint's procedure should be attached.

Ideally complainants should receive a definitive reply within four weeks. If this is not possible because for example, an investigation has not been fully completed, a progress report should be sent with an indication of when a full reply will be given.

Whether the complaint is justified or not, the reply to the complainant should describe the action taken to investigate the complaint, the conclusions from the investigation, and any action taken as a result of the complaint.

Stage Two

If the complainant feels that the problem has not been satisfactorily resolved at Stage One, they can request that the complaint is reviewed by a national body or independent organisation.

At this stage, the complaint will remain with Steve Holmes who will acknowledge receiving it within two weeks where necessary (but ideally one week) by letter. Steve Holmes will advise the person making a complaint regarding which independent organisation or national body has responsibility for professionally monitoring the individual member of staff, e.g., Health Care Professionals Council, British Association of Behavioural and Cognitive Psychotherapies and/or any other relevant body. Steve will include the team members' membership details if appropriate. Steve will inform the team member of this action.

Unreasonable or Vexatious Complaints

Where a complainant becomes unreasonable or excessively rude or aggressive in their promotion of the complaint, some or all of the following formal provisions will apply and must be communicated to the patient by the Responsible Person in writing:

- The complaint will be managed by one named individual at senior level who will be the only contact for the patient
- Contact will be limited to one method only (e.g. in writing)
- Place a time limit on each contact
- The number of contacts in a time period will be restricted
- A witness will be present for all contacts
- Repeated complaints about the same issue will be refused unless additional material is being brought forward
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Set behaviour standards
- Return irrelevant documentation
- Detailed records will be kept of each encounter
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Confidentiality

All complaints must be treated in the strictest confidence and the practice must ensure that the patient etc. is made aware of any confidential information to be disclosed to a third party

The practice must keep a record of all complaints and copies of all correspondence relating to complaints.

Time Limit for Making a Formal Complaint

A complaint should be made within twelve months of the time the event(s)

Duty of candour

As a practice we understand our responsibilities relating to the statutory duty of candour.

As such the Director will notify the relevant person as soon as reasonably practicable after becoming aware that a notifiable safety incident has occurred.

As part of this we will provide an account, which will be accurate and will contain all the facts the Director knows about the incident as at the date of the notification.

We will also advise the relevant person what further enquiries into the incident we believe to be appropriate to fully comply with our responsibilities under the duty of candour.

This will include an apology and will be recorded in a written record that will be kept securely by the Director in records relating to the complaint/incident.

Monitoring and Learning from Complaints

Complaints are reviewed annually to identify any trends which may indicate a need to take further action.

