



Introduction

Practitioners and clinics will use a vast array of internal policies and procedures, but the most appropriate policies will always depend on the size and nature of the individual organisation. The policies are more effective if they are developed and reviewed on an ongoing basis with the involvement of staff, and are tailored to suit the specific needs of a clinic and its activities. However, some guidance and examples mean that you don't have to start from scratch.

Save Face has developed a number of example generic policies which can be used as a basis for your own policies, where relevant these policies should be tailored to suit the needs and requirements of each individual practitioner and clinic.

Disclaimer

Save Face accepts no responsibility for any third party loss or consequences arising from the use of these example policies.

TEMPLATE COMPLAINTS POLICY

Policy Statement

Everyone has the right to expect a positive experience and a good treatment outcome. In the event of concern or complaint, consumers have a right to be listened to and to be treated with respect. Service providers should manage complaints properly so customers' concerns are dealt with appropriately. Good complaint handling matters because it is an important way of ensuring customers receive the service they are entitled to expect. Complaints are a valuable source of feedback; they provide an audit trail and can be an early warning of failures in service delivery. When handled well, complaints provide an opportunity to improve service and reputation.

Aims & Objectives

- We aim to provide a service that meets the needs of our consumers and we strive for a high standard of care;
- We welcome suggestions from consumers and from our clinicians and staff about the safety and quality of service, treatment and care we provide;
- We are committed to an effective and fair complaints system; and
- We support a culture of openness and willingness to learn from incidents, including complaints.

Complaints Policy

- Consumers are encouraged to provide suggestions, compliments, concerns and complaints and we offer a range of ways to do it.
- Consumers are encouraged to discuss any concerns about treatment and service with their treating clinician [or alternate], or they can complete our customer feedback form.
- Clinicians and staff can also use the feedback form to record any concerns and complaints about the quality of service or care to customers.
- All complainants are treated with respect, sensitivity and confidentiality.
- All complaints are handled without prejudice or assumptions about how minor or serious they are. The emphasis is on resolving the problem.
- Consumers and staff can make complaints on a confidential basis or anonymously if they wish, and be assured that their identity will be protected.
- Consumers, clinicians and staff will not to be discriminated against or suffer any unjust adverse consequences as a result of making a complaint about standards of care and service.

Managing Complaints

- All clinicians and staff are expected to encourage consumers to provide feedback about the service, including complaints, concerns, suggestions and compliments.
- Clinicians and staff are expected to attempt resolution of complaints and concerns at the point of service, wherever possible and within the scope of their role and responsibility.

Resolution

The process of resolving the problem will include:

- an expression of regret to the consumer for any harm or distress suffered;
- an explanation or information about what is known, without speculating or blaming others;
- considering the problem and the outcome the consumer is seeking and proposing a solution; and
- confirming that the consumer is satisfied with the proposed solution.

If the problem is resolved, clinicians and staff are expected to complete the Suggestion for improvement form to record feedback from consumers.

Our clinicians and staff will consult with their manager if addressing the problem is beyond their responsibilities.

If the complaint is not resolved

Complaints that are not resolved at the point of service, or that are received in writing and require follow up, are regarded as formal complaints.

Our clinicians and staff refer complaints to [complaints manager/clinical director] if:

- After attempting to resolve the complaint, they do not feel confident in dealing with the complainant; or
 - The outcome the complainant is seeking is beyond the scope of their responsibilities
- Or;
- They or the complainant believe the matter should be brought to the attention of someone with more authority.

If the complaint is not resolved at the point of service, clinicians and staff are expected to provide the complainant with the formal complaints policy.

Clinicians and staff then complete the first two sections of the Complaint Follow up form and forward it to DR HARRY SINGH

The complaints manager coordinates resolution of formal complaints in close liaison with the treating clinician and other staff who are directly involved.

Responsibilities

- DR HARRY SINGH is responsible for coordinating investigation and resolution of formal complaints, conducting risk assessments (in consultation with clinicians), liaising with complainants, maintaining a register of complaints and other feedback, providing regular reports on informal and formal complaints, and monitoring the performance of the complaints policy and procedure.
- DR HARRY SINGH are/is responsible for a proactive approach to receiving feedback from consumers and staff, risk management in consultation with DR HARRY SINGH
- Investigation and review of complaints and follow up action for serious complaints, or where complaints result in recommendations for change in policy of procedures.

DR HARRY SINGH is responsible for;

- Ensuring appropriate action is taken to resolve individual complaints;
- Acting on recommendations for improvement arising from complaints;
- Ensuring there is meaningful reporting on trends in complaints;
- Ensuring compliance and review of the complaints management policy;
- Notifications to insurers; and
- Consultation with professional registration boards, and others where necessary.

Clinician and staff training

All clinicians and staff need to have been appropriately trained to manage complaints competently.

The service provides training in dispute management, customer service and our complaints management procedures as part of induction and through regular updates. Regular reviews are conducted by DR HARRY SINGH to check understanding of the complaints process among clinicians and staff.

Promoting feedback

Information is provided about the complaints policy and external complaints bodies that consumers can go to with a complaint, such as [Save Face Ltd] in a variety of ways, including;

- On our website;
- Through our consumer feedback brochure;
- Publicity about the service;
- Posters in reception;
- Discretely located suggestion boxes; and

by clinicians and staff inviting feedback and comments.

Risk assessment

After receiving a formal complaint, DR HARRY SINGH reviews the issues in consultation with relevant clinicians to decide what action should be taken, consistent with the risk management procedure.

Assessing resolution options

Formal complaints are normally resolved by direct negotiation with the complainant, but some complaints are better resolved with the assistance of an independent mediator or insurer.

DR HARRY SINGH will consider appointing an independent mediator, or encourage the complainant to take the matter up with [Save face Ltd] if:

- There is a serious question about the adequacy and safety of a health practitioner;
- The complaint is against a senior clinician or manager who will be responsible for investigating the complaint, resulting in a perception that there is a lack of independence; and
- The complaint raises complex issues that require external expertise.

Timeframes

- Formal complaints are acknowledged in writing or in person within 48 hours.
- The acknowledgment provides contact details for the person who is handling the complaint, how the complaint will be dealt with and how long it is expected to take.
- If a complaint raises issues that require notification or consultation with an external body, the notification or consultation will occur within three days of those issues being identified.
- Formal complaints are investigated and resolved within [10–35 days, insert as appropriate].
- If the complaint is not resolved within 20 days, the complainant, clinicians and staff who are directly involved in the complaint will be provided with an update.

Records and privacy

- The complaints manager maintains a complaints and consumer feedback register (e.g.Save Face portfolio), with records of informal feedback (Suggestions for improvement and Consumer feedback forms) and formal complaints.
- Personal information in individual complaints is kept confidential and is only made available to those who need it to deal with the complaint.
- Complainants are given notice about how their personal information is likely to be used during the investigation of a complaint.
- Individual complaints files are kept in a secure filing cabinet in the [complaints manager]’s

office and in a restricted access section of the computer system's file server.

- Consumers are provided with access to their medical records [in accordance with the confidentiality policy]. Others requesting access to a consumer's medical records as part of resolving a complaint are provided with access only if the consumer has provided authorisation [in accordance with the confidentiality policy].

Open disclosure and fairness

- Complainants are initially provided with an explanation of what happened, based on the known facts.
- At the conclusion of an inquiry or investigation, the complainant and relevant clinicians and staff are provided with all established facts, the causal factors contributing to the incident and any recommendations to improve the service, and the reasons for these decisions.

Investigation and resolution

DR HARRY SINGH carries out investigations of complaints to identify what happened, the underlying causes of the complaint and preventative strategies. Information is gathered from:

- Talking to clinicians and staff directly involved;
- Listening to the complainant's views;
- Reviewing medical records and other records; and
- Reviewing relevant policies, standards or Guidelines.

Complaints about individuals

Where an individual clinician or staff member has been nominated by a complainant, the matter will be investigated by the relevant manager or supervisor, who will:

- Inform the clinician or staff member of the complaint made against them;
- Ensure no judgement is made against a clinician or staff member while an investigation is being carried out;
- Ensure fairness and confidentiality is maintained during the investigation; and
- Encourage the clinician or staff member to seek advice from their professional association, if desired.

The clinicians and staff members will be asked to provide a factual report of the incident, identify systems issues that may have contributed to the incident and suggest possible preventive measures.

Where the investigation of a complaint results in findings and recommendations about individual clinicians and staff members, the issues are addressed through the service's staff performance and review process.

Reporting & Recording complaints

The DR HARRY SINGH prepares monthly reports on the number and type of complaints, the outcomes of complaints, recommendations for change and any subsequent action that has been taken. The reports are provided to staff, clinicians, senior management and if appropriate, uploaded into personal portfolio for audit and appraisal. The [complaints manager/quality unit] periodically prepares case studies using anonymised individual complaints to demonstrate how complaints are resolved and followed up, for the information of staff, and for use in audit and appraisal.

Information about trends in complaints and how individual complaints are resolved is routinely discussed at staff meetings and clinical review meetings as part of reflecting on the performance of the service and opportunities for improvement. Complaints reports are considered and discussed at monthly clinical review meetings and directors' meetings.

An annual quality improvement report is published that includes information on:

- The number and main types of complaints received, common outcomes and how complaints have resulted in changes;
- How complaints were managed—how the complaints system was promoted, how long it took to resolve complaints (and whether this is consistent with the policy) and whether complainants and staff were satisfied with the process and outcomes; and
- The results of the annual consumer satisfaction survey.
- The service promotes changes it has made as a result of consumer complaints and suggestions in its general publicity.

Monitoring and evaluation

DR HARRY SINGH continuously monitors the amount of time taken to resolve complaints, whether recommended changes have been acted on and whether satisfactory outcomes have been achieved.

The DR HARRY SINGH annually reviews the complaints management system to evaluate if the complaints policy is being complied with and how it measures up against best practice guidelines. As part of the evaluation, consumers, clinicians and staff are asked to comment on their awareness of the policy and how well it works in practice.

References and Further Reading

- Good Medical Practice (GMC,2013)
- The Code; Standards of Conduct, Performance and Ethics (NMC,2012)
- Standards for Dental Practitioners (2013)