



COMPLAINTS POLICY

Introduction

It is the objective of Mobile Physio that all users of the service have access to information about how to make a complaint and that the issues they raise are handled fairly and promptly. Complaints can act as an indicator that some part of the service is not functioning well, and by keeping a record allows us to recognise trends or take action to implement change or improvements. This policy seeks to provide an effective method by which the users of the service can make a complaint or express concerns over their care or treatment.

- It gives clear guidance on how complaints will be managed and provides a consistent and clear approach for both complainants and any staff that may be involved in the complaint investigation.
- Complainants may be existing or former patients or anyone acting on behalf of the patient with their consent. If the patient is unable to act, consent is not needed, but good practice is to ensure it is sought from the next-of-kin. Complainants may also include referrers or other members of the multidisciplinary team at the individual practices.
- Patients have a right to complain, and if they do so, it should not affect their overall care.
- It is our aim that all complaints be resolved at a local level wherever possible and individual staff are encouraged to support this approach.

Informal Complaints

An informal complaint is where an issue is raised as a complaint, but it is possible to resolve at the time, **to the complainant's satisfaction**, without going through a formal process. If considered necessary, the nature of the complaint and agreed outcome can be recorded, e.g., in the patient notes, or minutes of a meeting.

Formal Complaints

All patients have the right to have their complaint treated as a formal complaint. The process is outlined below.

Receiving complaints

- Complaints may be received in writing or verbally.
- A complaint taken verbally over the telephone, or in a face-to-face meeting, is just as valid as a written complaint and should be treated with the same consideration.
- Patients wishing to put their complaint in writing should be advised to send their correspondence to:

Debbie Rose (Administrator)
19 Tilers Close
Merstham
RH1 3HS
admin@mobile-physio-surrey.co.uk

If an official complaint is made a significant event analysis form must be completed and sent to the chairman and the manager. Following an investigation, the complainant will be written to, and the outcome documented.

Verbal

- a) Where concerns, queries or complaints are received in person or over the telephone, every effort must be made to resolve the situation at the time.
- b)
 - i) Where the individual receiving the complaint is unable to do this, they must seek assistance from a member of staff who is able to help and inform the complainant that this is what they intend to do.
 - ii) The complainant must then be contacted by the appropriate member of staff and an attempt is made to resolve the situation at this point.
 - iii) It is advised that resolution is gained within 2 working days.
- c) A record must be kept of the conversation, including all appropriate details and agreed resolution. A complaints form is provided for this purpose. Personal judgements and opinions must not be included.
- d) If resolution has been agreed by all parties, a copy of the form is sent to the complainant if considered appropriate and a copy is held centrally.

Written

- a) Any complaints received in writing at the individual practices must be sent to Tony Curnow (Chairman of the Trustee) immediately. A telephone call to inform him of the pending complaint is also advised.
- b) Normally, a complaint must be made within 6 months from the incident which caused the problem or within 6 months of the date of discovering the problem. Complaints received after this time may be difficult to investigate due to the time lapse involved. An assessment can be made to see if it is still possible to conduct such an investigation.
- c) Any complaint received must be acknowledged verbally or in writing within 3 working days. They should be advised that a full investigation will take place.

- d) The complainant should be informed in writing of the results of the investigation and proposed action within 14 days, unless planned absence of staff involved, delays the investigation. The complainant must be made aware of the delay. Any verbal communications must also be recorded and dated.
- e) A proactive approach is encouraged to promote speedy resolution of any complaint. This may involve inviting the complainant to a meeting with all those involved before a final response is given. Agreed resolution is documented.
- f) All correspondence must be held in a file centrally, along with copies of all letters sent out, times and dates, telephone and personal conversations, and agreed resolution. All records must be held for 7 years.
- g) Copies of complaint correspondence must not be kept with the patient's medical records. They should be stored separately, subject to the need to record any information which is strictly relevant to their health.

NB. An apology is not necessarily about accepting blame or guilt but may be an acknowledgement of the complainant's feelings about their experience.

Relationship to other policies

The Complaint Investigation Procedure is completely separate from the Grievance Procedure or the Disciplinary Procedure. However, in some circumstances, the findings of a complaint investigation may indicate that there is a need for disciplinary action to be taken.

Reference: The Standards of Proficiency for Physiotherapists; HCPC 2013; Standard 4