

Complaints – core principles

It is a professional responsibility to listen, respond to and learn from comments, concerns and complaints from patients. This is part of the delivery of high-quality care to patients. It cannot be avoided and, conversely, should be actively encouraged. Healthcare delivery today is achieved by a partnership between doctors, dentists, patients and the public.

Basic Considerations

It is inevitable that in any modern health service the standard of care will sometimes fall below a patient's expectations – reasonable or not – and this will result in a complaint.

To receive a complaint can be both stressful and upsetting. Doctors and dentists often feel unsupported and fearful of consequences, including litigation. But making a complaint can be equally difficult. It is often not easy to stick your head above the parapet. Patients may worry about the possible adverse effects complaining might have on their future treatment or that of their family. This is not to say that all complaints are reasonable. Dealing with apparently frivolous concerns and vexatious complainants can be both frustrating and time-consuming.

Most patients are not interested in pursuing long drawn-out formal complaint procedures. More often than not a complaint can be dealt with on the spot with an honest and direct explanation and apology (where appropriate). Often just listening without interruption to a patient's concern can be enough to defuse the situation.

Complainants often seek:

- being "heard out and listened to"
- acknowledgement of a wrong done
- explanation of why things went wrong
- convincing assurance that the problem will be addressed and will not happen again either to the patient or other patients
- an apology demonstrating sincere regret.

Staff should be trained to accept comments and feedback, and demonstrate that these are welcomed and used to improve services. A patient who is confident that his or her comment or feedback will be used in this way may not feel that it is necessary to make a formal complaint.

Patient complaints may often start out as "comments" or "concerns" or "suggestions". It is important that all staff members are trained to capture complaints and demonstrate professionalism in dealing with them. The manner and approach adopted initially in a complaint can have a profound effect upon the process and outcome.

NHS complaints procedures

A patient, or anyone with authority to act on the patient's behalf, can instigate a complaint. In England and Wales, complainants have 12 months to act from the occurrence that gives rise to the complaint or from the time the complainant became aware of the matter. In Scotland and Northern Ireland, complaints should normally be made within six months of the incident or within six months of the date of knowledge provided that is within 12 months of the incident. These timescales can be extended however.

The exact requirements for NHS complaints procedures vary between England, Wales, Scotland and NI but in general all require:

- "ownership" of and familiarity with the process by all practice staff
- a named individual and/or complaints manager/officer being responsible for ensuring complaints are handled in compliance with regulations and for administering the procedure
- leaflets, posters or web pages publicising the process and explaining how to lodge a complaint, with expected timescales (in languages and formats to reflect the community served)
- investigation of the complaint, including, where appropriate, an interview with the complainant, the practitioner and practice staff
- a full response provided where indicated, information on independent advice, support and contact details.

A copy of the practice complaints procedure should be provided to the complainant and should also be prominently displayed and available in a variety of formats.

Remember that it is important to consider patient confidentiality if the complaint is made by a relative or other representative; consent from the patient is normally required.

Acknowledgement

In England, Scotland, and NI an acknowledgement must be provided within three working days. In Wales the requirement is two working days.

The exact requirements of the content of the acknowledgement vary between England, Wales, Scotland and NI. Including an offer to discuss the handling of the complaint, signposting to advocacy, and advice regarding the timescale for the investigation and response is good practice. Advice on this can be obtained by speaking to an MDDUS adviser. At this stage it can also be helpful to include wording to the effect: "your care and treatment will not be affected by your complaint". This demonstrates to the patient that you are aware of their concerns and reassures them of the professionalism of your team.

Investigation and formal responses

Investigations into complaints are best carried out in a climate of openness and objectivity. The aim should not be to apportion blame but to establish the facts. Be aware that an investigation will sound biased if it simply assumes that the healthcare professional's version of events is the correct one; a complainant will expect convincing reasons for this.

Should the complaint involve a clinical matter, the relevant doctor or dentist or other healthcare professional should be given a copy of the complaint and encouraged to respond with a written statement, which can later be incorporated into a formal practice response. A minuted meeting with the complainant in the presence of the complaints manager/officer and relevant staff can often assist in resolving matters amicably.

Once the investigation has been completed, a written response should be sent to the patient. Timescales vary and in England the regulations require only a “timely” response, with the response time to be agreed with the complainant. In Scotland the reply should be sent in 20 working days. In NI, investigations should be completed within 10 working days (20 for hospitals) and the patient should be informed in advance if there will be any delays. In Wales, the timescale is 30 working days for all complaints.

Consider taking advice from a senior colleague and/or from MDDUS before formulating and sending a final reply. An MDDUS adviser can review a draft response and offer comments and suggestions.

Summarising the complaint, numbering the concerns and providing a chronology of events can be helpful and you should also indicate the extent and nature of the investigation you have carried out. If the complaint relates to clinical matters, explain the view taken by the clinician and the practice on the matter. Specific responses to the numbered concerns should be set out, along with the rationale for the conclusions reached.

You should note any agreement that has been reached, for example at a conciliation meeting, and provide details in plain English of any learning points and action plan you have implemented to prevent a recurrence. Remember to offer an apology where and when it is appropriate.

The response should include details of the complainant’s right to complain to the relevant Ombudsman should he or she remain dissatisfied at the end of local resolution:

- Scottish Public Services Ombudsman (SPSO)
- Parliamentary and Health Services Ombudsman in England (PHSO)
- The Northern Ireland Public Service Ombudsman
- The Public Service Ombudsman for Wales.

Each Ombudsman provides recommended wording to include in a complaint response about their role.

For non-NHS private dental care, the GDC requires a complaints procedure which sets similar standards and time limits to the NHS procedure. If local resolution does not resolve the complaint, the patient can approach the Dental Complaints Service, which is an independent body funded by the GDC to assist dental patients and professionals to resolve complaints about private dental services. The service covers the whole of the UK and is open to patients wishing to complain about any aspect of private (non-NHS) dental care, treatment or service involving any member of a dental team.

Common pitfalls

- Being overly defensive.
- Not addressing all the issues raised by the complainant.
- Taking too long to respond and not keeping the complainant updated about the reasons for this and when they can expect a response.

Key points

- Follow a clear framework when responding to complaints in writing or verbally.
- Provide an acknowledgement and express regret that the complainant is unhappy with their care. A sincere apology can assist matters greatly from the outset.
- Outline a summary of the complainant's concerns – this can be particularly helpful if the complaint is complicated or multi-faceted.
- Describe how the complaint has been investigated
- It can be helpful to provide a chronological account of care. Should you identify potential learning points as a result of your investigation, it is helpful to include these.
- Offer of a face-to-face meeting.
- Remind the complainant that if they remain dissatisfied with your explanation and response that they are entitled to raise their concerns with the ombudsman and signpost how the complainant can contact them.
- Remember that complaint-handling procedures are slightly different for each of the countries in the UK, and these should be referred to when responding to complaints. This is important in respect of statutory timescales.

Further guidance

- The Local Authority Social services and National Health Service Complaints (England) Regulations 2009:
http://www.legislation.gov.uk/uksi/2009/309/pdfs/uksi_20090309_en.pdf
- The National Health Service (Concerns, complaints and redress arrangements) (Wales):
<http://www.wales.nhs.uk/sites3/Documents/932/The%20NHS%20Concerns%2c%20Complaints%20and%20Redress%20Arrangements%20Wales%20Regulations%202011%20Inc%20SI%20Number.pdf>
- NHS Scotland Complaints Handling Procedure 2017:
<http://www.msg.scot.nhs.uk/wp-content/uploads/Circulars/DL%27s/NHS%20Model%20Complaints%20Handling%20Procedure%20-%203%20October%202016.pdf>
- Northern Ireland Quality and Outcomes Framework 2017:
<https://www.health-ni.gov.uk/>

[Scottish Public Services Ombudsman \(SPSO\)](#)

[Parliamentary and Health Services Ombudsman in England \(PHSO\)](#)

[The Northern Ireland Public Service Ombudsman](#)

[The Public Service Ombudsman for Wales](#)

- General Dental Council. Focus on Standards (Principle 5 Have a clear and effective complaints procedure): <https://standards.gdc-uk.org/pages/principle5/principle5.aspx>
- MDDUS Medical advisory guide: [Complaints | MDDUS](#)

MDDUS Training & CPD resources: <https://www.mddus.com/training-and-cpd>