Complaints Meetings – Pre-meeting

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Are you considering a complaints meeting?

Doctors and dentists have professional and contractual obligations regarding complaint handling. These include the need to respond promptly, fully, and honestly to complaints and provide an apology where appropriate.

The MDDUS advisory guide [Complaints | MDDUS](https://www.mddus.com/advice-and-support/medical/medical-advisory-guides/complaints) summarises the key aspects of the NHS complaints procedure in each UK nation and is recommended reading to accompany this advice guidance.

A face-to-face meeting can sometimes be helpful during a complaint investigation. It can also help resolve a complaint by avoiding unnecessary escalation or clarifying any decisions arising from it.

The Parliamentary and Health Service Ombudsman in England recognises this and recommends that the individual undertaking a complaint investigation always offer to talk to the complainant, where possible, face-to-face or by telephone.

There will be circumstances where holding a meeting would not be helpful or appropriate. For example, where there are concerns that the complainant may be abusive, aggressive, or violent or where the complainant communicates their desired outcomes for a meeting that you will not be able to meet.

Holding a face-to-face meeting is a recommendation, not a requirement, so consideration should be given when an individual being complained about doesn’t feel able to attend a meeting due to their own well-being concerns.

**When can a meeting be held?**

A meeting can be held at an early stage to facilitate information gathering or to better understand what is being complained about. For example, a complainant may not have clarified this in a complaint letter.

Meetings can also be held to discuss the outcomes of a complaint investigation, providing details of your findings and conclusions and offering further explanations to the complainant.

**How should a meeting be offered?**

The practice can offer a meeting verbally or in writing to the complainant. In either case, sufficient notice should be provided to allow the complainant time to prepare and consider any specific arrangements which may be needed.

Ensure that any communications are recorded in the complaint file.

**Where can a meeting be held?**

It is important to consider where the meeting will take place.

The subject of the complaint may be challenging, so the chosen environment should provide a comfortable experience for the complainant and not add to any existing stress.

Consider any preferred methods of communication, including any reasonable adjustments that may be required.

Consider the facilities available. The room's layout, any special requirements due to disability, furniture available, lighting, noise, distractions, and privacy should all be reviewed. Fresh water and a box of tissues may also come in handy.

It may be possible to hold the meeting remotely. For example, if the complainant is housebound, has to work, or needs additional support.

Consider personal safety. Complaints meetings can escalate and result in unacceptable behaviour, including aggression and violence. Ensure that practical safety measures are in place, such as having an exit strategy to hand and agreed processes for ending a meeting and summoning assistance.

**Who can attend a meeting?**

A friend, family member, or someone else they trust can attend as support. It is helpful if this can be established in advance, and this type of request should be facilitated wherever possible.

Inform the complainant who will be present at the meeting on behalf of the organisation. This will most likely be a complaints lead, clinician(s) involved in the complaint, or any other relevant parties.

Ensure that the most appropriate people attend the meeting based on the complaint itself. A scribe should be present who can concentrate solely on taking notes, as it is vital that a record of the meeting (or recording) is made so there is no ambiguity about what was discussed.

Consider whether English will be the complainant's first language and be prepared to offer the services of an NHS interpreter if required.

Occasionally, a complainant will request to bring a solicitor or other legal representative with them to the meeting. This would be acceptable, but you should make clear from the outset that the purpose of the meeting is to discuss the complaint under the NHS complaints procedure and not to discuss matters of compensation or possible litigation.

**What needs to be in place?**

If practicable, agree on the relevant areas for discussion beforehand. Set out a proposed agenda to share with the complainant or ask them to provide you with a list of questions they would like answered before the meeting.

In the early stages of a complaint, this is an opportunity to set realistic timescales for how long any investigation may take, depending on its content and complexity.

A complainant may not have considered the outcomes they seek or expect when raising a complaint, and it would be helpful to understand what the patient is looking for.

Obtain the complainant's consent to discuss their complaint in the presence of any third-party representative. This may be particularly important where clinical issues of particular sensitivity exist.

Be prepared to answer questions the complainant raises openly, honestly, and to the best of your ability. This may include allowing the complainant to ask supplementary or additional questions.

If the complainant provides notice of clinical questions they wish to discuss, you must include or provide answers from a colleague with relevant clinical knowledge and patient experience.

It is important also to recognize the potentially stressful nature of taking part in a complaint meeting for clinicians, who will also need to prepare. Employers can support and listen to any concerns about the process before meetings to avoid possible defensiveness, emphasising the need for empathy and an apology where appropriate.