



## Complaints Policy Manchester Menopause Hive Ltd.

### Regulation 16: Receiving and acting on complaints

'The intention of this regulation is to make sure that people can make a complaint about their care and treatment. To meet this regulation providers must have an effective and accessible system for identifying, receiving, handling and responding to complaints from people using the service, people acting on their behalf or other stakeholders. All complaints must be investigated thoroughly and any necessary action taken where failures have been identified.'

### Definition of a Complaint

A complaint is an oral or written expression of dissatisfaction about any matter reasonably connected with the services provided by our clinic.

A complaint which is made orally and is resolved within 24 hours will be recorded as locally resolved in the Complaints Register.

Information and guidance are available on how to complain and accessible to everyone who uses our clinic.

Our complaints procedure is designed to make sure that we settle any complaints as quickly as possible.

This policy is in compliance with: <https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-16-receiving-acting-complaints>

### Aims of The Policy

The aims of this policy and procedure is that complaints made by our patients or their representatives are listened to and acted upon effectively by:

- (a) having systems in place to deal with comments and complaints, including providing patients who use services with information about that system.
- (b) supporting patients who use the services and their nominated representatives to make comments or complaints.

- (c) considering fully, responding appropriately and resolving, where possible, any comments or complaints.

Our aim is to give our patients the highest possible standard of service and we try to deal with all the complaints as quickly as possible

Patients are asked that in the event of any complaint, to speak or write to the practice manager.

Patient/s who require further advice regarding the complaints process will be supported by ourselves.

### Timescales for Handling and Investigating Complaints

We shall acknowledge complaints within 2 working days and aim to have considered the complaint closed within 20 days of the date when it was raised, subject to no barriers in completing the investigations.

A full response will be made within 20 working days of receipt of the complaint (if this not possible a letter, explaining the reason for the delay will be sent to the complainant and a full response will be made within 5 working days of the conclusion of the process).

We shall offer an explanation, or a meeting as appropriate. If there are any delays in the process, we will keep the complainant informed.

### Our Investigation Processes

Any complaint received will be investigated and necessary and proportionate action be taken in response to any failure identified by the complaint or investigation.

We operate an effective and accessible system for identifying, receiving, recording, handling and responding to complaints by our patients and other persons in relation to the carrying on of the regulated activity.

We ensure our patients are able to make a complaint to any member of staff, either verbally or in writing

All staff are trained on how to respond when they receive a complaint.

Unless they are anonymous, all complaints should be acknowledged whether they are written or verbal.

Complainants will not be discriminated against or victimised. In particular, people's care and treatment will not be affected if they make a complaint, or if somebody complains on their behalf. We will use this as an opportunity for improvement and lessons learnt.

When we consider a complaint, we shall aim to:

- Find out what happened and what went wrong
- Make it possible for the complainant to discuss the problem with those concerned
- Make sure the complainant receives an apology where appropriate
- Identify what we can do to make sure the problem doesn't happen again

At the end of the investigation, the complaint will be discussed with the complainant in detail, either in person or in writing.

#### Complaining on behalf of someone else

If the complaint is received on behalf of someone else, the rules of patient confidentiality will be kept.

A note signed by the person concerned will be needed unless they are incapable (because of illness) of providing this to allow the complaint to be investigated.

All complaints whether written or verbal will be documented.

We will try to retain all complaints at a local level as escalating a complaint can result in a patient not returning.

#### Payments and refunds

In some cases, it may be appropriate to waive fees or offer a refund.

#### Accessibility of Comments and Complaints Policy

We will make the Complaints Policy accessible to patients and relatives:

- (a) A copy of the Procedure for Handling and Investigating Complaints will be displayed in the reception area.
- (b) Staff will provide help to any patient or relative of any patient who wishes to make a complaint.

#### Notification of Outcome of Complaint

Complainants will be notified of the outcome of their complaint and any actions taken as a result of the complaint immediately upon conclusion of the process.

Depending on the type of complaint received and if escalated externally, we will provide when requested to do so and by no later than 28 days:

- a. A summary of complaints made under such complaints system,
- b. responses made to such complaints and any further correspondence with the complainants

### Complaints Register

A register will be kept of complaints containing the following information:

- (a) Date of complaint
- (b) Name of complainant
- (c) Nature of complaint and details of staff involved
- (d) Action taken to investigate the complaint
- (e) Outcome and action taken as a result of the complaint
- (f) Date of full response to complainant

### Records of Complaints

A register will be kept of all complaints including appropriate details, including outcome.

A quarterly audit of complaints will be produced detailing the nature and outcomes of complaints and a quarterly summary of complaints will be discussed at staff meeting and shall include:

- (a) Number of complaints received
- (b) Nature of complaints and details of staff involved
- (c) Resolutions of complaints
- (d) Actions taken in response to complaints

### Lessons Learnt

We will monitor all complaints over time, looking for trends and areas of risk that may be addressed and share lessons learnt with all staff.

### Additional Support

We hope that, through our practice complaints procedure, we can resolve your problem satisfactorily. We believe that this will give us the best chance to put the matter right with you and the opportunity to improve our services for all our patients

Where the complaint cannot be resolved between the parties, external arbitration will be sought. Dr Zoe Hodson is registered with MEDSU. Should there still be an impasse then the clinic will refer the complaint to this service.

You may also contact the Care Quality Commission, if you feel that your complaint is not being dealt with in a satisfactory manner, on 03000 616161. (Note: the CQC will not arbitrate in a complaint, but require the provider to make their (CQC) contact details available to the service user)

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Dated: April 2024  
Review Date: April 2025

Complaints Register and Record Form

Name of the clinic:	Date of complaint:
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Complaint/Problem Received From:
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Others Involved:
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Complaint/Problem details received via
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<table> <tr><td>letter</td></tr> <tr><td>telephone:</td></tr> <tr><td>word of mouth:</td></tr> <tr><td>audit:</td></tr> </table>	letter	telephone:	word of mouth:	audit:
letter				
telephone:				
word of mouth:				
audit:				

Complaint received by:
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*Please tick as appropriate. Attach any relevant documents
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Details of The Complaint/Problem
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<u>Initial Action Taken</u>
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Action Taken	Date	Actioned By
1)		
2)		

Progress Checks: 2 Day Status:

Signed: ..... Date: .....

5 Day Status

Signed ..... Date: .....

Signed: .....Date: .....

Patient informed: Yes/No

Patient feedback received: Yes / No

Please attach copies of all correspondence