Complaints Policy

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2	07.02.2024	Carolina Guariniello	Paul Flynn	
2.1	07.02.2025	Carolina Guariniello	Paul Flynn	Points 2.1 to 2.4 added
2.2	06.02.2026	Carolina Guariniello	Paul Hornsey	Added point 1.2

1. Introduction

1.1 Policy Statement

The purpose of this document is to ensure all staff at Harbor understand that all patients have a right to have their complaint acknowledged and investigated properly. This organisation takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner.

The organisation will maintain communication with the complainant (or their representative) throughout, ensuring they know their complaint is being taken seriously.

In accordance with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Regulation 16), all staff at this organisation must fully understand the complaints process.

Patients using the Harbor independent healthcare service will have access to a complaints procedure in the event they are unhappy with any aspect of the service being provided.

1.2 Status

In accordance with the Equality Act 2010, we have considered how provisions within this policy might impact on different groups and individuals. This document and any procedures contained within it are non-contractual, which means they may be modified or withdrawn at any time. They apply to all employees and contractors working for the organisation.

2 Requirements

2.1 Complaints management team

The organisation has a responsible person for complaints who is known as the Complaints Lead. This person is responsible for maintaining both legislative and regulatory requirements. This role is supported by the Complaints Manager who is responsible for the day-to-day management of any complaint that may be received. The responsible person and Complaints Manager can be the same person.

2.2 Definition of a complaint versus a concern

A concern is something that a service user is worried or nervous about and this can be resolved at the time the concern is raised whereas a complaint is a statement about something that is wrong or that the service user is dissatisfied with which requires a response.

Should a service user be concerned and raise this as such, if they believe that it has not been dealt with satisfactorily, then they may make a complaint about that concern.

A concern may also be called a criticism.

2.3 Complaints information

Written information on the complaint's procedure will be available for all Harbor patients. Information on how to make a complaint will be available on the Harbor patient booklet.

Patients will be assured that they will not be discriminated against for making a complaint.

2.4 A duty of candour

The duty of candour is a general duty to be open and transparent with people receiving care at this organisation. Both the statutory duty of candour and professional duty of candour have similar aims, to make sure that those providing care are open and transparent with the people using their services whether something has gone wrong or not.

2.5 Making a complaint

Harbor is committed to providing a high-quality healthcare service. However, if any patient is unhappy with any aspect of the healthcare service being provided, they will be invited to make a complaint.

Complaints can be submitted verbally or in writing to any Harbor employed staff or associates. All staff/associates must forward the complaints to the Operations Manager, who, in collaboration with the clinical governance body, will investigate and respond to the client.

No patient, or person acting on their behalf, will be discriminated against for making a complaint.

No person's care and treatment at Harbor will be affected in any way if a complaint is made by them or on their behalf.

2.6 Receiving and recording a complaint.

Complaints can be made by a patient, a former patient, or someone acting on a patient's behalf.

If the complaint is from a child i.e. someone under 18 years old, the complaint may be made by the child, either parent of the child, the legal guardian, or other adult who is legally responsible for the care of the child.

All received complaints, whether written or verbal, will be recorded. Recorded details will include:

- the date and time the complaint was received
- a description of the complaint
- details of the investigation carried out
- any actions taken, and
- whether or not the complaint was upheld.

Where a complaint is received anonymously, Harbor will carry out an investigation as far as it reasonably can, depending on the content and nature of the complaint.

Harbor will maintain a complete record of all complaints received and copies of all related correspondence. These records will be kept separately from patients' healthcare records.

2.7 Handling a complaint

- All complaints received at Harbor will be treated in the strictest confidence.
- All complaints, written or verbal, will be investigated.
- All complainants will receive a written acknowledgement of their complaint within two (2) working days, unless a full reply can be sent within five (5) working days.
- The written acknowledgement will include the name and contact details of the person investigating the complaint on behalf of Harbor.
- The Operations Manager of Harbor will offer to meet with the complainant in order to discuss the manner in which the complaint is to be handled and how the issue/s might be resolved.
- At this meeting, the following information will be obtained and/or provided (as far as is reasonably possible):

- How the complainant wishes to be addressed e.g. Miss, Ms, Mr, Mrs or their first name.
- How the person wishes to be kept informed e.g. in writing by letter or email, by telephone, or through an agreed third-party representative or advocate.
- Confirm with the person if they give their consent to access healthcare records (where appropriate) for the purposes of investigating the complaint.
- Confirm if the person has any disabilities that need to be taken into account during the investigation.
- Advise the person that they can have a representative to support them through the complaints process.
- Ask the person what they are seeking as an outcome to the complaints investigation e.g. an apology, new appointment, reimbursement for costs or loss of personal belongings, or an explanation.
- Agree a plan of action, including when and how the complainant will hear back from Harbor.

- In the event that the complainant does not accept the offer of a meeting as set out at above, Harbor will itself determine the response period and notify the complainant in writing of that period.
- Harbor will carry out an investigation of the nature of the complaint and provide a full written response to the complainant within twenty (20) working days of the complaint being received.
- If a full response cannot be given within twenty (20) working days of receiving the complaint, Harbor will write to the complainant to explain the reason for the delay.
- A full written response will be made within five (5) days of a conclusion and outcome being reached.
- If a complainant is not satisfied after a complaint has been investigated by Harbor and a response provided, the Clinical Director will provide further information to the complainant in terms of potentially escalating the complaint to an external body such as the General Medical Council (GMC) or the Care Quality Commission (CQC).
- This will be done on an individual complaint specific basis depending on the nature of the complaint.
- Harbor will co-operate with any independent review of a complaint that has been escalated.

2.8 Receiving and handling unreasonable complaints

In situations where the person making the complaint can become aggressive or unreasonable, Harbor will instigate appropriate actions from the list below and will advise the complainant accordingly:

- Ensure contact is being overseen by an appropriate senior member of Harbor staff who will act as the single point of contact and make it clear to the complainant that, if applicable, any other employed or associate members of staff will be unable to help them.
- Ask that they make contact in only one way, appropriate to their needs e.g. in writing.
- Place a time limit on any contact.
- Restrict the number of telephone calls or meetings during a specified period.
- Ensure that a witness will be involved in each contact.
- Refuse to register repeated complaints about the same issue.
- Do not respond to correspondence regarding a matter that has already been closed; only acknowledge it.
- Explain that Harbor will not respond to correspondence that is abusive.
- Make contact through a third person such as an independent advocate (where appropriate).
- When using any of these approaches to manage contact with unreasonable or aggressive people, provide an explanation of what is occurring and why.
- Maintain a detailed dated and timed record of each contact with the complainant during the ongoing relationship.

2.9 Care Quality Commission (CQC)

- A complaints summary will be sent to the Care Quality Commission at any time on request, no later than 28 days from the date of receiving such a request.
- Any complaints summary provided to the Care Quality Commission, will not contain any confidential personal information about complainants.

2.10 Learning opportunities

- Harbor will review all complaints received with a view to continuous quality improvement within the independent healthcare service.

- All complaints received will be used as a learning exercise to consider improving aspects of the healthcare service provided to patients.

2.11 Annual review of complaints

Harbor will review all complaints on an annual basis in terms of:

- The number of complaints received
- The issues that these complaints raised in terms of any trends or areas of risk that might need to be addressed
- Whether complaints have been upheld, and
- Any improvements or changes to the healthcare service that were made.

Signature:	Carolina Guariniello
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