

GP Support Unit

Standard Operating Procedure

Patient Feedback

Version 1.0

Version	1.0
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Ratified By	Quality Assurance Group (QAG)
Date Ratified	16/11/2022
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Implementation Date	17/11/2022
Last Review Date	N/A
Next Review Date	November 2025
SOP Owner	GPSU Patient Experience & Communications Team
Accountability	GPSU Manager & GPSU Clinical Director

Version Control Summary

Version	Date	Author	Comment
1.0	26/10/2022	Katherine Jay & Sharon Avola	Original

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1. Background

GP surgeries must have a complaints or concerns procedure that tells patients how their views can be heard, this should include how to provide both positive and / or constructive feedback. Practices must ensure that complaints receive a timely and appropriate response.

Each practice must ensure there is a designated complaints manager who is responsible for managing the complaints procedure.

2. Purpose

This Standard Operating Procedure (SOP) has been written to:

- Ensure that staff understand their responsibilities in the process of reporting patient feedback
- Ensure that staff understand the steps required for responding to and investigating a patient complaint

3. Scope

This SOP relates to the administrative teams within the GPSU team who may be involved in the process of reporting patient feedback.

- Patient experience and communication team

This SOP references only the GPSU administrative team activity and no clinical actions. Please refer to your local clinical procedure for any clinical activity associated with managing patient complaints.

4. Receiving a patient complaint

Complaints can be received by several different communication channels including:

- Email
- Letter
- Dashboard feedback through practice website
- NHSE
- Local MP
- ELFT complaints

All complaints should be received via the above communication channels. Practice staff must not respond to any complaints or feedback received via social media channels.

All complaints will be sent to the Practice Manager and the Patient Experience and Communications team for investigation, and Q&C Lead for logging on the Datix complaints module.

PALS low-level complaints can be managed and responded to locally. Copies of the original complaint and response letter should be sent to Q&C Lead for logging centrally.

Formal complaints, including any complains via NHSE or local MP, should be investigated locally and draft response sent to Q&C Lead who will arrange sign off by CEO. Draft response must be completed on the template letter.

It is preferred that complaints are submitted to the practice in writing for investigation. The Practice team should ask the patient if they can submit their complaint in writing but if the

patient requests that the complaint is submitted verbally this should be accepted and managed in the same way as written complaints.

All complaints must be acknowledged within 48 – 72 hours and if complainant is not the patient and patient is >16yrs, request written signed consent.

All incidents that fall under this SOP must be added to Datix within 24 hours of the notification by the patient experience and communications team.

4.1 Managing Patient Complaints

- Save scan of complaint on S:/COMPLAINTS
- Investigate via manager of individual/ team involved
 - The patient experience and communication team should support the practice managers and clinical leads with the investigation. This could be through collation of documentation required to support the investigation.
 - All scanned information to the patient experience and communications team at elft.bedspatient.experience@nhs.net
 - In the event of an urgent complaint but the Practice Manager is unavailable the request should be escalated to the GPSU Manager and Head of Operations (ELFT Primary Care)
- Using responses from involved members of staff and managers, the patient experience and communications team will draft formal response from practice manager
- The patient experience and communications team must then send the case file to practice manager to review and sign letter on local practice letter head paper
- Practice Manager returns case file to patient experience and communications team with signed letter
- Signed letter photocopied, added to case file and original posted to patient
- Update complaints spreadsheet for annual NHSE KO41b GP complaint reporting
- Once the investigation into the complaint is complete the written investigation must be sent to ELFT Quality and Compliance lead for review and attaching to the Datix report.

If the written correspondence uses the word 'Complaint' it will be treated as a formal complaint. If the word 'Complaint' is not used it should be treated as feedback or concern.

Lessons Learned: Each month the patient experience and communication team will circulate a lesson learned document to all practice staff.

- Using the available template this should show what has been reported, what has been done about it and what the practice has learnt

5. Feedback Process

Where feedback is provided to the practice there is no requirement to provide acknowledgment of receipt.

1. Written patient correspondence received
2. Save scan of correspondence on S:/ drive COMPLAINTS
3. If correspondence not from the patient and patient is >16yrs, request written signed consent
4. Investigate via manager of individual/ team involved

5. Using responses from involved members of staff and managers, draft formal response from practice manager
6. Send case file to practice manager to review and sign letter
7. Practice manager returns case file to me with signed letter
8. Signed letter photocopied, added to case file and original posted
9. Update complaints spreadsheet for annual NHSE KO41b GP complaint reporting

If the feedback received includes an action or recommendation this should be shared with the practice manager. The primary care participation lead will then work with the PPG representatives on if there is anything the practice can do to implement the feedback received.

6. Review

This policy will be subject to review every three years, or, in light of any changes to National Standards or Trust Policy.