



Complaints policy and procedure

Document Control

A. Confidentiality Notice

This document and the information contained therein is the property of Dr Valda Porcionato LTD ("the Organisation").

This document contains information that is privileged, confidential or otherwise protected from disclosure. It must not be used by, or its contents reproduced or otherwise copied or disclosed without the prior consent in writing from Dr Valda Porcionato LTD.

B. Document Details

Organisation:	Dr Valda Porcionato LTD
Current Version Number:	2.0
Date Approved:	21/03/2023
Review Date	31/03/2025

C. Document Revision and Approval History

Versio n	Date	Version Created By:	Version Approved By:	Comments
1.0	21/03/2023	Dr Valda Porcionato	Dr Valda Porcionato	
2,0	31/03/2024	Dr Valda Porcionato	Dr Valda Porcionato	



Complaints policy and procedure

1 INTRODUCTION

This policy outlines procedures and responsibilities within Dr Valda Porcionato LTD ("the Organisation ") for handling any concerns, issues or complaints that may arise.

2. RELEVANT CQC FUNDAMENTAL STANDARD/H&SC ACT REGULATION (2014)

- Regulation 16: "Receiving and acting on complaints".

3. PURPOSE AND OBJECTIVES

The purpose of this Policy is to ensure that any complaints or concerns by patients are correctly managed.

In spite of the efforts of all staff it is likely that a complaint will be made by a patient at some point. To reduce the anxiety and apprehension for both patients and staff it is crucial to have a procedure for handling complaints.

Dr Valda Porcionato LTD aspires to meet the following principles:

- The right to have any complaint made about Dr Valda Porcionato LTD services dealt with efficiently and to have it properly investigated.
- The right to know the outcome of any investigation into a complaint.
- The right to take a complaint to independent review if the complainant is not satisfied with the way their complaint has been dealt with by us
- The commitment to ensure patients are treated with courtesy and receive appropriate support throughout the handling of a complaint; and the fact that they have complained will not adversely affect their future treatment.
- When mistakes happen they shall be acknowledged; an apology made; an explanation given of what went wrong and the problem rectified quickly and effectively.
- The commitment to ensure that the organisation learns lessons from complaints and claims and uses these to improve our services.

This policy serves to indicate how issues concerning patient concerns or complaints should be managed within the Organisation .

4 DUTIES AND RESPONSIBILITIES

The Complaints Manager [ROMULO RABELO] holds overall responsibility for ensuring the development, implementation and operation of this policy regarding complaints. The Complaints Manager will lead and oversee the



process of the implementation of this policy, as well as monitoring its compliance and effectiveness.

The Complaints Manager will act as the designated complaints manager for the Organisation. He is:

- Responsible for managing the procedures for handling and considering complaints.
- Responsible for ensuring that action is taken if necessary in the light of the outcome of a complaint or investigation.
- Responsible for the effective management of the complaints procedure.

5. PRINCIPLES

Dr Valda Porcionato LTD will:

- publicise for patients how any complaints can be made (*complaint form - appendix I*), and also how any concerns or issues can be raised.
- the Organisation will aim to resolve any concerns or issues without recourse to the need to make use of the formal complaints policy whenever possible.
- acknowledge receipt of a complaint and offer to discuss the matter with the complainant within three working days.
- deal efficiently with complaints and investigate them appropriately.
- write to the complainant on completion of any investigation explaining how it has been resolved, what appropriate action has been taken.
- indicate that recourse to independent arbitration or mediation can be made by a patient if they are still unhappy.
- assist the complainant in following the complaints procedure, or provide advice on where they may obtain such assistance.

If a complaint is made orally and is resolved to the complainant's satisfaction within 24 hours, it need not be responded to formally.

6. PROCEDURES

6.1. **Period within which complaints can be made**

The period for making a complaint is normally:

- (i) 12 months from the date on which the event which is the subject of the complaint occurred; or
- (ii) 12 months from the date on which the event which is the subject of the complaint comes to the complainant's notice.

The Organisation has discretion to vary this time limit if appropriate.

i.e. where there is good reason for not making the complaint sooner, or where it is still possible to properly investigate the complaint despite extended delay.



When considering an extension to the time limit it is important that The CQC Registered Manager takes into consideration that the passage of time may prevent an accurate recollection of events by the clinician concerned or by the person bringing the complaint. The collection of evidence, clinical guidelines or other resources relating to the time when the complaint event arose may also be difficult to establish or obtain. These factors may be considered as a suitable reason for declining a time limit extension.

6.2. Action upon receipt of a complaint

Complaints may be received either verbally or in writing and must be forwarded to the Complaints Manager, who must:

- Acknowledge the complaint within 3 working days verbally or in writing and at the same time,
 - offer to discuss, at a time to be agreed with the complainant
 - decide the manner in which the complaint is to be handled,
 - ascertain the period within which the investigation of the complaint is likely to be completed and the response is likely to be sent to the complainant.
- From the discussion, a complaint action plan should be developed.

6.3 Complaints Action Plan

If the complainant does not accept the offer of a verbal discussion in an effort to resolve matters, the Complaints Manager or someone designated to act on his behalf will notify the complainant in writing of the time period within which it is intended to respond to the complaint.

If a clear plan and a realistic outcome can be agreed with the complainant from the start, the issue is more likely to be resolved satisfactorily. Having a plan will help the Organisation to respond appropriately. It also gives the person who is complaining more confidence that the Organisation is taking their concerns seriously.

If someone makes a complaint, the person making the complaint will want to know what is being done and when. However, accurately gauging how long an issue may take to resolve can be difficult, especially if it is a complex matter involving more than one person or organisation. To help judge how long a complaint might take to resolve, it is important to:

- address the concerns raised as quickly as possible
- stay in regular contact with whoever has complained to update them on progress



- follow closely any agreements made – and, if for any reason this is not possible, then explain why.

It is good practice to review any case lasting more than six months, to ensure everything is being done to resolve it.

6.4 Investigation and Responses to Complaints

During the investigation, the complainant will be kept informed of progress either verbally or in writing as agreed with the complainant. The response must be signed by the Complaints Manager and include:

- an explanation of how the complaint has been considered;
- the conclusions reached in relation to the complaint, including any remedial action to be taken
- **details of how to seek arbitration or mediation if the complainant remains dissatisfied:**
 - **Patient Complaints Adjudication Service For Independent Healthcare (ISCAS)**

info@iscas.org.uk

020 7536 6091

7. AUDIT

The operation and effectiveness of this policy will be incorporated into the Organisation's ongoing audit programme.

As required, anonymised summaries of complaints will be provided to the Care Quality Commission upon request.

8. CONFIDENTIALITY

All complaints will be treated in the strictest confidence.

Where the investigation of the complaint requires consideration of the patient's medical records, the Complaints Manager or someone designated to act on his behalf will inform the patient or person acting on his/her behalf if the investigation may involve disclosure of information contained in those records to a person other than the Organisation, or an employee/contractor working for the organisation.

9. UNREASONABLE COMPLAINTS



Where a complainant becomes aggressive or, despite effective complaint handling, unreasonable in their promotion of the complaint, some or all of the following formal provisions will apply and will be communicated to the patient:

- The complaint will be managed by one named individual at senior level who will be the only contact for the patient
- Contact will be limited to one method only (e.g. in writing)
- Place a time limit on each contact
- The number of contacts in a time period will be restricted
- A witness may be present for all contacts
- Repeated complaints about the same issue will be refused
- Only acknowledge correspondence regarding a closed matter, not respond to it
- Establish behavioural standards to uphold positive conduct.
- Keep detailed records and ensure the maintenance of only relevant documentation and discard or return any irrelevant documentation.



Appendix 1

Complaint Form

Patient Information
Patient Name:
Address:
Phone Number:
Email:

Complaint Information
Complaint Date:
Complaint Details:
First Response (to be completed by complaint manager):
Correction Acton Person(s):
Correction Acton Follow-up:
Conclusion
Date:

**Your complaint should be sent to
admin@drvaldaporcionato.co.uk
Our team could assist you if required.**

