

COMPLAINTS  
Policy and Procedure  
v1.2 Nov 2024



# COMPLAINTS

## Policy and Procedure

Company No 12911052  
[www.questapsych.com](http://www.questapsych.com)  
[admin@questapsych.com](mailto:admin@questapsych.com)  
02381 924877

Registered office:  
Exchange House  
Cross Street  
Newport PO30 5PZ

---

## Introduction

At Questa, we are totally committed to delivering the highest standards of care. An essential component of this is that we take responsibility to maintain high standards of professional ethics and have solid procedures to investigate and to decide upon concerns or complaints.

The purpose of the policy is to ensure that all patients (or their representatives) who have cause to complain about their care or treatment can have freely available access to the process and can expect a truthful, full and complete response.

We align with the standards of conduct, performance and ethics set out by the Health and Care Professions Council (HCPC) which means that we must be 'open, honest and candid when something has gone wrong with the care, treatment or other services that we provide' and take action to correct the mistake if possible.

(<https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/>)

Complainants have the right not to be discriminated against as the result of making a complaint and to have the outcome fully explained to them. The process adopted in the practice is fully compliant with the relevant NHS Regulations (2009) and guidance available from doctors' representative bodies and the Care Quality Commission. Everyone in the practice is expected to be aware of the process and to follow it.

The general principle of the practice in respect of any concerns or complaints will be to respect confidentiality and manage any risk. We regard it first and foremost as a learning process and an opportunity to correct the mistake if possible, however in appropriate cases and after full and proper investigation the issue may form the basis of a separate disciplinary action. In the case of any complaint with implications for professional negligence or legal action, the relevant governing body may also be informed.

---

## Procedure

### **WHO CAN MAKE A COMPLAINT?**

This complaints procedure is not limited to clients (patients) whether they be adults or children; any person may make a complaint to Questa about any provision of facilities or services that we provide. Unless complaints are dealt with under separate statutory procedures we will use this complaints procedure.

### **THE DIFFERENCE BETWEEN A CONCERN AND A COMPLAINT**

A concern may be defined as 'an expression of worry or doubt over an issue considered to be important for which reassurances are sought'.

A complaint may be defined as 'an expression of dissatisfaction however made, about actions taken or a lack of action'.

It is in everyone's interest that concerns and complaints are resolved at the earliest possible stage. Many issues can be resolved informally, without the need to use the formal stages of the complaints procedure. Questa takes concerns seriously and will make every effort to resolve the matter as quickly as possible.

If you have difficulty discussing a concern with a particular member of staff, we will respect your views. In these cases, one of the Directors should be your first point of contact. The ability to consider the concern objectively and impartially is paramount.

We understand however, that there are occasions when people would like to raise their concerns formally. In this case, Questa will attempt to resolve the issue internally, through the stages outlined within this complaints procedure.

---

### **How to raise a concern or make a complaint**

A concern or complaint can be made in person, in writing or by telephone. They may also be made by a third party acting on behalf on a complainant, as long as they have appropriate consent to do so.

**Concerns** should be raised with the Clinical Director in the first instance. If the issue remains unresolved, the next step is to make a **formal complaint**. Please mark them as Private and Confidential.

---

### **Who can make a complaint?**

A complaint can be made by or, with consent, on behalf of a patient (i.e. as a Representative); a former patient, who is receiving or has received treatment at the practice; or someone who may be affected by any decision, act or omission of the practice.

A Representative may be:

- either parent or, in the absence of both parents, the guardian or other adult who has care of a child;
- a person duly authorised by a local authority to whose care a child has been committed under the provisions of the Children Act 1989;
- a person duly authorised by a voluntary organisation by which a child is being accommodated;
- someone acting on behalf of a patient/ former patient who lacks capacity under the Mental Capacity Act 2005 (i.e. who has Power of Attorney etc.) or physical capacity to make a complaint and they are acting in the interests of their welfare
- someone acting for the relatives of a deceased patient/former patient

In all cases where a Representative makes a complaint in the absence of patient consent, the practice will consider whether they are acting in the best interests of the patient and, in the case of a child, whether there are reasonable grounds for the child not making the complaint on their own behalf. In the event that a complaint from a Representative is not accepted, the grounds upon which this decision was based must be advised to them in writing.

---

### **Who is responsible at Questa for complaints?**

The practice "Responsible Person" is the Clinical Director. At the time of writing the Responsible Person is Bandna Rekhi. She is charged with ensuring complaints are handled in accordance with the regulations, that lessons learned are fully implemented, and that no Complainant is discriminated against for making a complaint. If she is not available Dr Karen Quatermass, Director will deputise.

All staff have a responsibility to alert one of the Directors if they believe a mistake has been made or something has gone wrong and to take action to correct it if possible.

---

## Time limits for making complaints

The period for making a complaint is normally:

(a) 3 months from the date on which the event which is the subject of the complaint occurred; or

(b) 3 months from the date on which the event which is the subject of the complaint comes to the complainant's notice.

The practice has discretion to extend these limits if there is good reason to do so and it is still possible to carry out a proper investigation. The collection or recollection 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 suitable reasons for declining a time limit extension, however that decision should be able to stand up to scrutiny.

---

## Action upon receipt of a complaint

**Verbal Complaints:** It is always better to try and deal with the complaint at the earliest opportunity and often it can be concluded at that point. A simple explanation and apology by staff or action to correct the mistake at the time may be all that is required.

A complaint may be made orally, in writing or electronically.

Where a complaint is made orally, the responsible body to which the complaint is made must:

- Make a written record of the complaint; and
- Provide a copy of the written record to the complainant.

A verbal complaint need not be responded to in writing if it is dealt with to the satisfaction of the complainant by the end of the next working day. The practice will however record them for the purposes of monitoring trends or for Clinical Governance. Verbal complaints not formally recorded will be discussed when trends or issues need to be addressed and at least annually, with minutes of those discussions being kept.

If resolution is not possible, the Responsible Person will set down the details of the verbal complaint in writing and provide a copy to the complainant within three working

days. This ensures that each side is well aware of the issues for resolution. The process followed will be the same as for written complaints.

**Written Complaints:** On receipt, an acknowledgement will be sent within three working days which offers the opportunity for a discussion (face-to-face or by telephone) on the matter. This is the opportunity to gain an indication of the outcome the complainant expects and also for the details of the complaint to be clarified. In the event that this is not practical or appropriate, the initial response should give some indication of the anticipated timescale for investigations to be concluded and an indication of when the outcome can be expected.

It may be that other bodies (e.g. secondary care/ Community Services) will need to be contacted to provide evidence. If that is the case, then a patient consent form will need to be obtained at the start of the process and a pro-forma consent form included with the initial acknowledgement for return.

If it is not possible to conclude any investigations within the advised timescale, then the complainant must be updated with progress and revised time scales on a regular basis. In most cases these should be completed within six months unless all parties agree to an extension.

---

## The Investigation

The practice will ensure that the complaint is investigated in a manner that is appropriate to resolve it speedily and effectively and proportionate to the degree of seriousness that is involved.

The investigations will be recorded in a complaints file created specifically for each incident and where appropriate should include evidence collected as individual explanations or accounts taken in writing.

---

## Final Response

This will be provided to the complainant in writing (or email by mutual consent) and the letter will be signed by the Responsible Person. The letter will be on headed notepaper and include:

- An apology if appropriate (The Compensation Act 2006, Section 2 expressly allows an apology to be made without any admission of negligence or breach of a statutory duty). Our HCPC guidelines state that 'you must apologise to a service user and their carer when something has gone wrong with the care, treatment or other services that you provide'. Occasionally human beings do make mistakes and we should be prepared to admit it and apologise if that is the case.
- A clear statement of the issues, details of the investigations and the findings, and clear evidence-based reasons for decisions if appropriate
- Where errors have occurred, explain these fully and state what has been or will be done to put these right or prevent repetition. Clinical matters must be explained in accessible language
- A clear statement that the response is the final one and the practice is satisfied it has done all it can to resolve the matter at local level.
- A statement of the right, if they are not satisfied with the response, to refer the complaint to the HCPC or other appropriate statutory regulatory body.

### **ANNUAL REVIEW OF COMPLAINTS**

The practice will produce an annual complaint report

The report will include:

- Statistics on the number of complaints received
- The number considered to have been upheld
- Any known referrals to the HCPC
- A summary of the issues giving rise to the complaints
- Learning points that came out of the complaints and the changes to procedure, policies or care which have resulted

Care must be taken to ensure that the report does not inadvertently disclose and confidential data or lead to the identity of any person becoming known.

---

## Confidentiality

All complaints must be treated in the strictest confidence and the practice must ensure that the patient etc. gives consent for any confidential information to be disclosed to a third party.

The practice must keep securely a record of all complaints and copies of all correspondence relating to complaints.

---

## "Informal complaints"

The collection of data about any informal concerns or issues - often referred to as "grumbles" - is a good tool for identifying how well we are performing services and the way they are offered to our patients.

Members of Questa are encouraged to raise any issues at practice meetings in order to identify any issues or shortfalls at the earliest opportunity so that amendment of procedures or targeted training needs may be adopted.

At Questa, we are committed to giving a helpful and honest response to anyone who complains about the care, treatment or other services they have received. We want our patients to have trust and confidence in our professionalism and experience and we constantly strive to deserve it.

Author: Dr Karen Quatermass

Date: January 2022

Revised: November 2024

Review: November 2026