



## COMPLAINTS POLICY

### 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 with 24 hours will be recorded as locally resolved in the Complaints Register.

Where the complaint relates to a breach of statutory regulations and the organisation is registered with the Care Quality Commission (CQC) patients can contact the CQC on: 03000 616161 or via <https://www.cqc.org.uk/>

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

A complaints notice is available for all our patients



If required, we will ensure it is also available in appropriate languages and formats to meet the needs of the patients using the service. We will also use services of qualified translators if required.

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.

A copy of the complaints process is held in the clinic and can also be found on our website <https://facialaesthetics.co.uk>

### **Promoting Feedback**

Information is provided about the complaints policy and external complaints bodies that patients can go to with a complaint, such as [Save Face Ltd] in a variety of ways, including:

- On our website
- Through our patient feedback brochure
- Publicity about the service
- Posters in reception
- Discretely located suggestion boxes; and by clinicians and staff inviting feedback and comments.

### **Clinician and Staff Training**

All clinicians and staff need to have been appropriately trained to manage complaints competently.

Regular reviews are conducted by the clinical director to check understanding of the complaints process among clinicians and staff.

### **Complaints Policy**

Patients are encouraged to provide suggestions, compliments, concerns and complaints and we offer a range of ways to do it.

Patients are encouraged to discuss any concerns about treatment and service with their treating clinician [or alternate], or they can complete our customer feedback form.

Clinicians and staff can also use the feedback form to record any concerns and complaints about the quality of service or care to customers.

All complainants are treated with respect, sensitivity and confidentiality.

All complaints are handled without prejudice or assumptions about how minor or serious they are. The emphasis is on resolving the problem.



Patients and staff can make complaints on a confidential basis or anonymously if they wish, and be assured that their identity will be protected.

Patients, clinicians and staff will not to be discriminated against or suffer any unjust adverse consequences as a result of making a complaint about standards of care and service.

Clinicians and staff are expected to attempt resolution of complaints and concerns at the point of service, wherever possible and within the scope of their role and responsibility.

Any concerns raised remotely, via telephone, email or text must be acknowledged promptly but a face to face appointment booked in order to discuss in detail, with accompanying assessment and review for medical records.

### **The process of resolving the problem will include:**

An expression of regret to the patient for any harm or distress suffered;

An explanation or information about what is known, without speculating or blaming others;

Considering the problem and the outcome the patient is seeking and proposing a solution;

and confirming that the patient is satisfied with the proposed solution.

If the problem is resolved, clinicians and staff are expected to document the details of the complaint and how it was resolved, and provide a report to the patient.

Clinicians and staff will consult with their manager if addressing the problem is beyond their responsibilities.

### **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.

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 and on any website advertising the service.
- (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 to CQC, 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 by ourselves to such complaints and any further correspondence with the complainants in relation to such complaints information requested by CQC

## **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**

All correspondence relating to a complaint will be kept for 5 years.

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

If the complaint is regarding the Director of the clinic, then this will be referred to the external adviser, Dr Alex Zarneh [alex@chelbournelpa.com](mailto:alex@chelbournelpa.com) who will decide on how to progress the complaint to a satisfactory resolution.

## Patient Complaint timeline

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- Contact patient within 2 days.
  - Suggest if patient would like to come in and we can talk about the issue, since sometimes they just want to be heard.
  - Invite them to sit down and talk.
  - Reiterate taking complaint seriously.
  - If complaint couldn't be dealt with there and then, collate notes and assess.
  - Investigate complaint
  - Decision would then be made within 20 days as to how we dealt with the complaint.
  - Once a decision has been made will notify the patient of the outcome by letter
  - If the patient is not happy with the response will direct them to the Ombudsman or the NMC - Details provided below in the Complaints contacts.
  - Patient could also choose to have the complaint referred to ISCAS - Independent Sector Complaints and Adjudication services (<https://iscas.cedr.com>)
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- We are members of the Cosmetic Redress Scheme. If you remain unhappy with the response received from us and have exhausted our complaints procedure, you can contact the Cosmetic Redress Scheme to ask them to investigate your complaint. In order to take your complaint to The Cosmetic Redress Scheme you must first have carried out the following:
    - o You have waited 8 weeks from the date of your written complaint to us for a response; and
    - o It is still within 6 months from the our last communication with you regarding this complaint

The Cosmetic Redress Scheme is a government approved Redress Scheme who resolves complaints between Members and their consumers. The complainant must have exhausted the Member's internal complaints procedure and remain dissatisfied with the Member's response. The Cosmetic Redress Scheme is free to use for the complainant and further information and guidance on how to resolve complaints is available via their website.

In order to make a complaint, please contact the Cosmetic Redress Scheme directly or alternatively, visit their website and fill out a Complaints Form.



## Patient Complaint Contacts

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- Facial Aesthetics Complaints Manager. FAO of Julie Scott, Park House, Park Road, Rivenhall Essex CM8 3PS
  - ISCAS - Independent Sector Complaints and Adjudication services (<https://iscas.cedr.com>)
  - NMC – Complaints can be made by email ([newreferrals@nmc-uk.org](mailto:newreferrals@nmc-uk.org)) , by phone (0207 681 5248) you can also access information at the NMC Website <https://www.nmc.org.uk/concerns-nurses-midwives/support-for-patients-families-and-public/who-to-contact/>
  - Health Watch Essex - Is an independent advocacy agency. Email:[enquiries@healthwatchessex.org.uk](mailto:enquiries@healthwatchessex.org.uk) by Phone 01376 572829 or in writing to 49 High Street, Earls Colne, CO6 2PB
  - Cosmetic Redress Service - <https://www.cosmeticredress.co.uk/>
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## Fitness to practise: keeping you safe



**1** You complain to us about a nurse, midwife or nursing associate

### What do I need to provide?

- Details of your concerns.
- Any relevant documents.
- Details of the nurse, midwife or nursing associate.

### What are the possible outcomes?

- We look at the complaint to see if we should investigate it.

We decide whether to investigate further in **less than 8 weeks**

**2** If necessary, we investigate

### What do I need to provide?

- We might ask you for a witness statement.

We aim to finish our investigation in **less than 25 weeks**

**3** Our case examiners decide what happens next

### What are the possible outcomes?

- We issue a warning, give advice or agree actions to address the concerns
- We send to a hearing.
- We close the case because there's no case to answer.

Our case examiners aim to make decisions in **less than 6 weeks**

If case examiners send the nurse, midwife or nursing associate to a hearing...  
**4** We prepare for a hearing

### What do I need to provide?

- We might ask for more information to support your statement.
- We might ask you to attend the hearing as a witness.

Preparing for a hearing takes up to **26 weeks**

**5** We hold a hearing

### What are the possible outcomes?

- The individual may be removed from the register, suspended, have conditions of practice imposed, be cautioned, or the case may be closed.

### What support is there for me?

- Witness liaison service (you can **get in touch by email** or call them on 020 7681 5390).

Most hearings take between two days and two weeks.







Initial Action Taken

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