

# Pennine GP Alliance Complaints Policy

Pennine GP Alliance views complaints as an opportunity to learn and improve for the future, as well as a chance to put things right for the person or organisation that has made the complaint. This procedure should also be used by staff members who wish to make a complaint about the behaviour of another employee(s) or any other matter related to their work, unless it is covered by the grievance procedure i.e. it relates to a management decision.

## Our policy is to:

- Provide a fair complaints procedure that is clear and easy to use for anyone wishing to make a complaint
- Publicise the existence of our complaints procedure so that people know how to contact us to make a complaint
- Make sure everyone at Pennine GP Alliance knows what to do if a complaint is received
- Make sure all complaints are investigated fairly and in a timely manner
- Make sure that complaints are, wherever possible, resolved and that relationships are repaired
- Gather information which helps us to improve what we do

## Definition of a Complaint :

A complaint is any expression of dissatisfaction, whether justified or not, about any aspect of Pennine GP Alliance, Board Members, employees or our work.

## Where Complaints Come From:

Complaints may come from any person or organisation who has a legitimate interest in Pennine GP Alliance, including members, partner organisations and members of the local community.

A complaint can be received verbally, by phone, via website or by email

This policy does not cover complaints from staff, who should use Pennine GP Alliances Discipline and Grievance policies.

## Confidentiality:

All complaint information will be handled sensitively, telling only those who need to know and following any relevant data protection requirements.

Responsibility Overall responsibility for this policy and its implementation lies with Pennine GP Alliance Board of Directors

## Making complaints

Written complaints may be sent by e-mail to [hello@penninegpa.co.uk](mailto:hello@penninegpa.co.uk) or via our website

Verbal complaints may be made in person to any of Pennine GP Alliances Directors or employees

Some services delivered by Pennine GP Alliance are commissioned by other bodies. If your complaint is not resolved to your satisfaction by Pennine GP Alliance you may also be able to complain directly to the commissioner of that service. Please contact us to check if this applies and if you need their contact details.

## Receiving Complaints

Complaints may arrive through channels publicised for that purpose or through any other contact details or opportunities the complainant may have. Complaints received by telephone or in person need to be recorded. The person who receives a phone or in person complaint should:

- Write down the facts of the complaint
- Take the complainant's name, address and telephone number
- Note down the relationship of the complainant to Pennine GP Alliance, for example: client or member
- Tell the complainant that we have a complaints procedure
- Tell the complainant what will happen next and how long it will take

Where appropriate, ask the complainant to send a written account so that the complaint is recorded in the complainant's own words. For further guidelines about handling verbal complaints, see Appendix 1 Resolving Complaints Stage One In many cases, a complaint is best resolved by the person responsible for the issue being complained about. If the complaint has been received by that person, they may be able to resolve it swiftly and should do so if possible and appropriate.

Whether or not the complaint has been resolved, the complaint information should be written in the complaints log and notified to the Director of Community within 2 working days.

If it has not already been resolved, the Director of Community will delegate an appropriate person to investigate it and to take appropriate action. If the complaint relates to a specific person, they should be informed and given a fair opportunity to respond. Complaints should be acknowledged by the person handling the complaint within a week. The acknowledgement should say who is dealing with the complaint and when the person complaining can expect a reply. A copy of this complaints procedure should be attached. Ideally complainants should receive a definitive reply within four weeks. If this is not possible because for example, an investigation has not been fully completed, a progress report should be sent with an indication of when a full reply will be given.

Whether the complaint is justified or not, the reply to the complainant should describe the action taken to investigate the complaint, the conclusions from the investigation, and, where appropriate, any action taken as a result of the complaint.

### **Stage Two:**

If the complainant feels that the problem has not been satisfactorily resolved at Stage One, they can request that the complaint is reviewed at Board level. At this stage, the complaint will be passed to either of the Board Co-Chairs. The request for Board level review should be acknowledged within a week of receiving it. The acknowledgement should say who will deal with the case and when the complainant can expect a reply. The Chairs may investigate the facts of the case themselves or delegate a suitably senior person to do so. This may involve reviewing the paperwork of the case and speaking with the person who dealt with the complaint at Stage One. If the complaint relates to a specific person, they should be informed and given a further opportunity to respond. The person who dealt with the original complaint at Stage One should be kept informed of what is happening. Ideally complainants should receive a definitive reply within four weeks. If this is not possible because for example, an investigation has not been fully completed, a progress report should be sent with an indication of when a full reply will be given. Whether the complaint is upheld or not, the reply to the complainant should describe the action taken to investigate the complaint, the conclusions from the investigation, and any action taken as a result of the complaint. The decision taken at this stage is final, unless the Board decides it is appropriate to seek external assistance with resolution

### **Variation of the Complaints Procedure:**

The Board may vary the procedure for good reason. This may be necessary to avoid a conflict of interest, for example, a complaint about the Chair should not also have the Chair as the person leading a Stage Two review.

### **Monitoring and Learning from Complaints:**

Complaints are reviewed annually to identify any trends which may indicate a need to take further action.

This policy is reviewed regularly and updated as required.