Complaints Handling Policy

This policy outlines how concerns and complaints are handled within the Practice, supporting an open, transparent and effective approach in line with GDC standards.

Susanne Ellis has been appointed as the 'Responsible Person', who ensures compliance with the relevant regulations and that actions are taken where necessary.

Lauren Massey has been appointed as the 'Complaints Manager', responsible for the day-to-day handling and management of concerns raised.

If a complaint is made about the Complaints Manager, it can be directed to the Practice Owner, who will handle it independently, ensuring they do not influence or participate in the process.

Our complaints procedure is on display in all waiting rooms.

A summary of our procedure is also available in our Patient Information Leaflet, and on our website in line with GDC advertising standards.

Feedback and complaints handling framework
This practice has developed a framework for managing complaints and feedback based on these principles:

1. All patient feedback is important to us
2. We want to make it easy for patients to raise a concern or complain if they need to
3. We follow a complaints procedure and keep patients informed
4. We will try to answer all patient questions and any concerns you raise
5. We want patients to have a positive experience of making a complaint
6. Patient feedback helps us to improve our service

Recognising complaints
Our team are aware that complaints are any expression of dissatisfaction about a dental service or treatment. Complaints can be raised verbally, in writing, or electronically and concern any part of the service we provide.

Anyone who has received a service from the practice can raise a complaint. This also includes representatives of a person where it relates to a child, someone who has died, or someone who is unable to complain themselves due to a lack of capacity or incapacity.

Where a representative is acting on behalf of a child or person who lacks capacity, the Practice considers whether it is appropriate for the complaint to be made by the representative rather than by the child or person themselves. If the Practice is unable to consider the complaint on this basis, the representative is notified in writing, with an explanation of the reasons why.

Consideration may be given to whether a complaint can be progressed in circumstances where it is raised outside the usual 12-month timeframe from the date the matter occurred or the date the complainant was made aware of it, and where it is no longer possible to investigate the matter fairly and effectively.

Handling complaints
The practice team is trained to resolve all complaints promptly, efficiently and politely by following the process below:

- Complaint received
- Complaint acknowledged

- Discussion offered
- Early resolution or investigation
- Response issued
- Complaint recorded and reviewed

All concerns are handled fairly and without discrimination.

Acknowledging complaints
The Practice aims to acknowledge all complaints as soon as possible, and in any event within 3 working days of receipt. Acknowledgement can be provided verbally or in writing. If responding verbally, a follow-up letter confirming the details is sent.

At the point of acknowledgement, an offer to discuss the complaint is provided at an agreed time. The purpose of the discussion is to:

- Explain how the complaint will be handled
- Confirm the period during which the investigation will be completed
- Advise when a response following the investigation can be expected

Complainants may decline the offer of a discussion. In doing so, the Practice will determine the response period and notify the complainant of this in writing.

Concerns are managed in a calm, professional, and open manner, with a focus on listening and understanding the individual raising the concern.

Early Resolution
The Practice aims to resolve all complaints as soon as possible. More complex complaints that cannot be resolved quickly are investigated.

Investigation
Where an investigation is required, the concern is thoroughly and proportionately reviewed, with regular updates provided throughout the process, at least every 10 days in line with GDC expectations.

Response timescales
A written response is provided following an investigation, which includes:

- How the concern has been considered
- The conclusions reached and practical solutions where possible
- Any actions taken or planned

Responses are issued as soon as possible and, no later than 6 months after receipt, unless otherwise agreed with the complainant.

Where this is not achievable, an update is provided to the complainant in writing, explaining the reasons why, and when a response can be expected.

Advocacy support
If a patient is not satisfied despite our best efforts to resolve the complaint, other avenues of support are provided, such as:

- Parliamentary and Health Service Ombudsman (PHSO) – Support resolving NHS complaints
- Dental Complaints Service (DCS) – Support with private treatment complaints
- Care Quality Commission (CQC) – Concerns about how the practice is run
- General Dental Council (GDC) – Concerns about a dental professional
- Financial Ombudsmen Service – Concerns about financial arrangements

Recording complaints
All complaints are recorded using the iComply Digital Event Record / HTML Event Record (G 110A) and Event Register (G 110B)] with all correspondence or investigation details stored with the Record.

Complaint Records are treated as confidential at all times and kept separate from clinical records. Access is limited to authorised persons.

Training
The team are trained in managing complaints during induction and throughout the year at regular team meetings. All GDC-registered team members are expected to have completed CPD training in complaint handling as recommended by the GDC.

Complaint monitoring
The complaints system is reviewed regularly to ensure it remains effective. This includes:

- Reviewing trends and themes
- Monitoring response times
- Auditing records and outcomes
- Gathering feedback from patients

The team is involved in reviewing complaints, complaint procedures, and management, so that services, policies, and procedures can be continually improved.

If requested by the Care Quality Commission (CQC), we will provide a summary of our complaints, responses and any other related correspondence within 28 days of the request.

Where a complaint is subject to independent review, the Practice cooperates fully, including providing relevant information and supporting any investigation.

Online reviews
The practice assigns a team member to regularly monitor online reviews. All feedback, both positive and negative, is acknowledged and responded to professionally and courteously.

Related documents
This policy should be read with the Patient Complaints Procedure (G 110C).