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## **Complaints Policy**

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## Statement:

**Sonographers Medical** recognises that complaints may be unavoidable. It is important to us that all complaints are dealt with, in as constructive a manner as possible to the satisfaction of all parties. We shall attempt to act impartially in the investigation of all complaints and shall attempt to ensure that lessons are learnt by each unfortunate occasion.

**Sonographers Medical Ltd** shall make every effort to ensure that the number of complaints received from our stakeholders is kept to a minimum.

The following policy has been established to ensure that where a complaint does arise, it is dealt with in a professional, speedy and courteous manner.

This policy has been written to comply with the requirements of the NHS complaints system, as modified in 2009.

## Responsible Person:

Definition: The 'Responsible Person' is tasked with ensuring that the Complaints policy and Procedure is in compliance with the complaint regulations, Standards and Best Practice.

**Sonographers Medical** has nominated a Company Director, Mr Kevin Rendell, as their Responsible Person. Our Responsible Person is appointed as Complaints Manager.

## Equality Impact Assessment:

An Equality Impact Assessment has been performed on this policy. The EIA demonstrates the policy is robust; there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken.

## Training Requirements:

Dealing with Complaints is a standard aspect of the Companies Mandatory Induction training for clinical staff, as well as being a subject for annual review training.

All staff are required to have a full understanding of this policy and its implementation. Staff have access to the policy content 24 hours per day, 7 days per week.

Training requirements as a result of upheld complaints are assessed by the Board of Directors and implemented accordingly.

## Awareness Plan:

Promotion of stake holders right to make a complaint is provided as widely as possible. This includes written statements on contact letters and feedback forms and downloadable complaint forms on Company websites.

Sonographers Medical also publicises the number of upheld complaints received on its corporate website.

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## Policy Details:

- \* Complaints may be received in person, by telephone, fax or email or in writing.
- \* Complaints can be made by patients or someone 'who is affected, or likely to be affected, by the action, omission or decision of the body which is the subject of the complaint'.
- \* As per NHS requirements, Complaints can be made up to 12 months after the incident that gave rise to the complaint, or from when the complainant was made aware of it. Beyond this timescale it is at the Company's discretion whether to investigate the matter.
- \* It is the responsibility of the person receiving the complaint to ensure that the full nature and details of the complaint are understood and that the originator is made aware of this complaints procedure.
- \* The importance of dealing with complaints swiftly and effectively is clear. If an oral complaint is dealt with to the complainant's satisfaction within 24 hours then it will not be necessary to embark upon the formal complaints process. Swift resolutions are therefore good for the image of the Company and for avoiding bureaucratic burdens.
- \* All complaints that cannot be settled as above, must be presented to a Company Director and undergo the formal Complaints procedure
- \* In the event that a complainant has raised major issues but does not want a full investigation, the Company shall investigate fully even if the complainant does not wish to be informed. The issues may not be of interest to the complainant, but the investigation could be extremely important for the future of the Company.
- \* To help evaluate the seriousness of a complaint, the company has adopted the risk matrix published by the Department of Health documents "listening, Responding, Improving: A guide to Better Customer Care. 2009. **See Appendix 1**
- \* It is a contractual requirement that all staff and sub-contractors abide by the Company's Complaints policy assist fully in any complaint investigation, even if they are no longer working with the Company.
- \* In the formal process, an initial acknowledgement on all complaints shall be made by one of the Company Directors within 7 working hours, with written acknowledgement within 2 working days.
- \* If for some reason, none of the Company Directors are available within this time slot, an initial response shall be given by a Manager or, as a last resort, another member of staff.
- \* One of the Company Directors shall investigate every complaint made and make a telephone and written response within 7 working days.
- \* If further time is required to fully investigate the complaint, the originator shall be kept informed of progress on a regular basis.
- \* Final report with a telephone or face-to-face discussion, as preferred by the originator.
- \* A complaints process flow-chart is provided in **Appendix 2**
- \* Time-stamps of keypoints are recorded on the Complaints Procedure log **See Appendix 3**
- \* Records of all complaints will be kept on for at least 10 years

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## Joint Complaints:

Where there is a complaint about the Company service and a third party, usually, the organisation with the largest part in the complaint would be considered the lead agency and would be responsible for co-ordinating the investigation. The Company will, however, take a subsidiary role if requested to do so by an NHS organisation involved in the complaint.

## References:

Local Authority Social Services & NHS Complaints (England) Regulations 2009.

Department of Health document Listening, Responding, Improving: A Guide to Better Customer Care. 2009 ([www.dh.gov.uk](http://www.dh.gov.uk)) (steps 1-3) and from the

Primary Care Complaints Consortium document Complaints, A Guide for General Practices, Third Edition, 2009.

GPC document, New complaints process FAQs, 2009

[www.bma.org.uk/employmentandcontracts/independent\\_contractors/managing\\_your\\_practice/complaintfaqs.jsp](http://www.bma.org.uk/employmentandcontracts/independent_contractors/managing_your_practice/complaintfaqs.jsp)

## Policy Review:

Effective From: 30th October 2014.

Last Reviewed V. 3 - 9th March 2016

Reviewed by: K Rendell. Director



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## Appendix 1 - Investigating complaints significance

Step 1: Decide how serious the issue is

Seriousness	Description
<b>Low</b>	Unsatisfactory service or experience related or not directly related to care. Usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of the service. No real risk of litigation.
<b>MEDIUM</b>	Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Justifiable complaint. Some potential for litigation.
<b>HIGH</b>	Significant issues regarding standards, quality of care, and safeguarding of, or denial of rights. Possible professional misconduct. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation High probability of litigation or adverse publicity.

Step 2: Decide how likely the issue is to recur

Likelihood	Description
<b>Rare</b>	Isolated or one-off – slight or vague connection to service provision
<b>Unlikely</b>	Rare – unusual but may have happened before
<b>Possible</b>	Happens from time to time – not frequently or regularly. May occur again at some time but only occasionally.
<b>Likely</b>	Will probably occur several times a year
<b>Almost certain</b>	Recurring and frequent, predictable

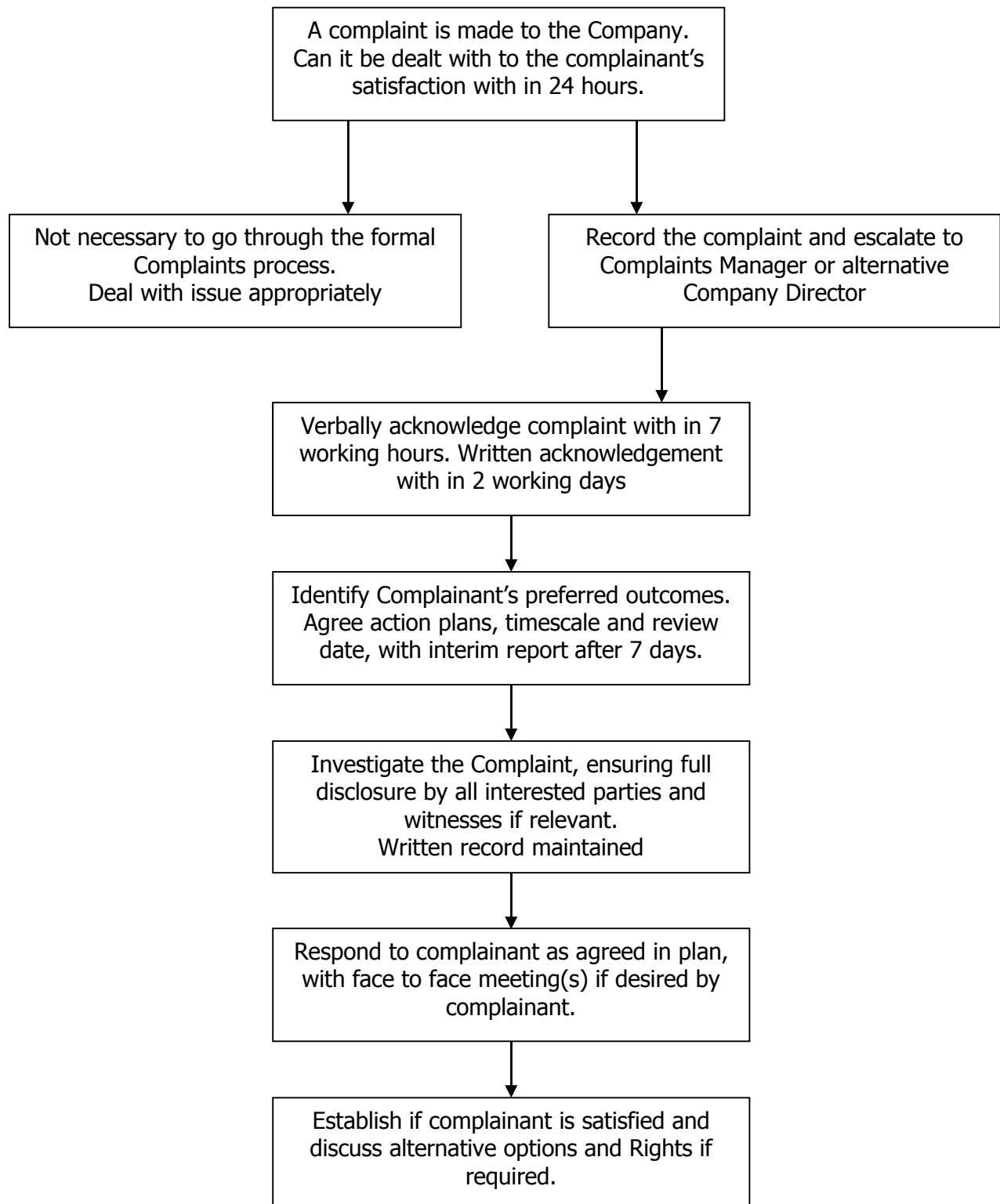
Step 3: Categorise the risk

Seriousness	Likelihood of Recurrence				
	Rare	Unlikely	Possible	Likely	Almost Certain
Low	Low				
Medium	Moderate				
	High				
High			Extreme		

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## Appendix 2. - Complaints Process Flowchart



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## Appendix 3. - Complaints Procedure log.

This record is to be completed for each complaint received by the Company, to document the progress of the complaint investigation in a timely manner.

The Procedure should be read in conjunction with the Company **Complaints Policy**.

This form shall be retained with the Complaint investigation notes and formal responses, and retained for 10 years.

### 1. Name & Position of Complainant.

.....

### 2. Initial complaint received and recorded by:

.....

### 3. Date Complaint received.

Date of Complaint ..... / ..... / ..... Time of Complaint ..... : .....Hrs.

### 4. Attach complaint letter or transcript of telephone complaint to this form.

Complaint Attached. Yes / No

### 5. Pass complaint record log and details to a Company Director.

Complaint passed on for attention. Signed. ....

### 6. Complaint received for attention

Date Received..... / ..... / ..... Time Received ..... : .....Hrs.

### 7. Acknowledgement of complaint made to complainant. **With in 7 hours**

Date Acknowledged ..... / ..... / ..... Time Acknowledged ..... : .....Hrs.

### 8. Complaint investigated.

Initial response obtained Time Received ..... : .....Hrs.

### 9. **7 day Response to Originator** (if not completed earlier)

Date Responded ..... / ..... / ..... Time Responded ..... : .....Hrs.

### 10. Attach transcript to this form and Personnel Management System.

### 11. Further investigation.

### 12. Repeat Role 8 & 9 as required.

Date Responded ..... / ..... / ..... Time Responded ..... : .....Hrs.

Date Responded ..... / ..... / ..... Time Responded ..... : .....Hrs.

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**13. Written Response to Originator**

Date Responded ..... / ..... / ..... Time Responded ..... : .....Hrs.

**14. Attach Copy of letter** to this form and Personnel Management System.

**15. Discussion with staff members** if appropriate

Date Responded ..... / ..... / ..... Time Responded ..... : .....Hrs.

**16. Attach this form to Complaint Record** and retain for 10 years.

All Complaints will be assessed by the Complaints "Responsible Person" to determine risk factors, trend analysis and whether further action is required.

Consideration of including general or specific details in team briefs, raise awareness with any third party interests

Complaint details and trends are collated for inclusion in Directors Board Meeting

**Any Further Action Required:**

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.....  
.....  
.....

**Completed By** ..... **Date** .....

**Procedure Log Review:**

Effective 30th October 2009. Last Reviewed 9th March 2016  
K Rendell. Director & IG Lead. 