Complaints Policy

Policy Number: PP 033

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Date of First Issue	**09/06/2021**
Date of Last Review	**13/10/2025**
Date of Next Review	**13/10/2027**

Table of Amendments

Version	Revised Date	Authorised by	Amendments/Comments
1.0	09/06/2021	L Mason	First issue
1.1	19/07/2022	L Mason	Minor Amendments, job role changes, retention period change iaw Limitation Act 1980
1.2	23/11/2023	L Mason	Updated duties and responsibilities, changed nominal roles and added new feedback procedure
1.3	16/05/2025	A Cairns	General review and amend to include Chaperone Policy
1.4	13/10/2025	A Cairns	Process Updates

CONFIDENTIALITY OF INFORMATION

This document and the information contained within it are strictly confidential and are intended for use only by internal members of IPRS Health colleagues and specific third-party contractors.

Published by:

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1. Executive Summary

IPRS Health is committed to delivering clinical services that provide high quality, evidence-based, safe, and effective care to its service users. In order that IPRS Health can uphold these high standards of clinical excellence it must embed transparency, candour, and accountability as part of its culture, to build trust and respect in its stakeholders. Customer feedback is a key measure of quality and one of the main drivers of quality improvement. To improve its services, IPRS Health must listen to its customers, treat them fairly and respond honestly, learning from its mistakes to achieve continuous improvement.

2. Introduction

1.1. No matter how efficient, well-planned, and effective its services are, IPRS Health recognises that things will go wrong sometimes. In these situations, IPRS Health must view a negative event as an opportunity to learn, to put things right and to improve.

1.2. IPRS Health will treat complaints seriously and ensure complaints and concerns raised by patients, relatives and carers are properly investigated in an unbiased, non-judgmental, transparent, timely and appropriate manner.

1.3. The outcome of any investigation, along with any resulting actions will be provided in writing or verbally to the complainant or their representative (e.g., their referrer, insurer, family member, etc.), in accordance with the complainant's wishes.

3. Purpose of this policy

1.4. This document outlines IPRS Health's commitment to dealing with complaints and provides information about how we manage, respond to, and learn from complaints made about our services.

1.5. The key issues that must be considered are that a complainant:

1.5.1. Knows how to complain.

1.5.2. Is confident their issues will be taken seriously.

1.5.3. Understands their issues will be investigated, where this is possible.

1.5.4. Knows how the complaint will be managed.

1.5.5. Is aware they will be informed of the findings of the investigation.

1.5.6. Trusts that IPRS Health will learn from feedback, whether negative or positive by applying lessons learned and sharing best practice.

1.5.7. Knows that their care will not be adversely affected by making a complaint.

1.6. The aim of this policy is to ensure that when dealing with complaints/concerns or feedback IPRS Health will do so according to the following standards:

1.6.1. Being open, honest and transparent about our mistakes.

1.6.2. Using evidence-based, complainant-led investigations and responses.

1.6.3. Applying a consistent approach in how to manage and investigate complaints, using a logical and rational approach.

1.6.4. Responding to complainants in a timely and sympathetic manner.

1.6.5. Providing different ways for stakeholders to offer feedback.

1.6.6. Communicating effectively throughout the complaints process.

1.6.7. Identify the root causes of issues and to take action to prevent recurrences.

1.6.8. Use lessons learned to drive change and improvement.

1.7. This policy will act as a key tool in ensuring and maintaining IPRS Health's good reputation and guarantee that any legal obligations are met.

4. Definitions

1.8. A 'Complaint' or 'Concern' is any expression of dissatisfaction or discontent, either verbal or written, and whether justified or not, about any act, omission, or decision of IPRS Health or its representatives, and which requires a response.

1.9. 'Complainant' refers to any person(s) or organisation that makes a complaint or raises a concern on their own behalf or as the authorised representative of the individual.

1.10. What is not a Complaint:

1.10.1. Requests for information or service.

1.10.2. Matters of IPRS employee discipline.

1.10.3. Colleague concerns or grievances.

5. Scope

1.11. This policy applies to the handling of complaints or concerns relating to services provided by, or on behalf of, IPRS Health.

1.12. It applies to all IPRS Health colleagues, including temporary workers and contractors, involved in providing those services.

1.13. IPRS Health supports a customer's right to complain about those services without prejudice.

6. Duties and responsibilities

1.14. Every IPRS Health colleague is responsible for supporting people who wish to provide feedback or raise a complaint or a concern.

1.15. The complaints policy and process are the responsibility of the IPRS Health Quality and Clinical Governance Director and IPRS Health Clinical Governance Lead.

1.16. All IPRS Health complaints and concerns will be managed and co-ordinated by the by the IPRS Health Complaints Officer in accordance with this policy and the IPRS Health Feedback Procedure (see Appendix 1).

1.17. The IPRS Health Complaints Officer will be the central contact point for acknowledging complaints and concerns, co-ordinating the required process, and where appropriate sending formal responses to the complainant, though each Expert Investigator may need to contact the complainant individually as part of the investigation.

1.18. The Clinical Governance Lead, Complaints Officer, and Quality & Clinical Governance Director will meet monthly to review complaints, conduct root cause analysis, and identify trends to feed into the IPRS Health Quality Assurance and Improvement Programme.

1.19. The Quality & Clinical Governance Director will report complaint data to the IPRS Health Senior Leadership Team (SLT) in monthly reports.

7. Who can make a complaint or raise a concern?

1.20. A complaint can be made by the individual affected by IPRS Health's act, omission, or decision, or by someone acting on that individual's behalf when the individual:

1.20.1. Is a minor, providing the complaint is in the best interests of the minor.

1.20.2. Lacks the capacity (either physical or mental) to complain for themselves.

1.20.3. Has given consent for that person to act on their behalf, in which case confirmation from the individual of their consent will be required.

1.20.4. Has a delegated authority, e.g., a Health and Welfare Lasting Power of Attorney.

8. How complaints or concerns can be raised

1.21. Information about making a complaint or raising a concern can be found on the IPRS Health website

1.22. A complaint or concern can be made in any format the complainant wishes:

1.22.1. Verbally by telephone or in person

1.22.2. In writing by email or by letter

1.22.3. Via the ClearTrackCX patient feedback system

1.23. A complaint or concern can be made to any IPRS Health colleague, who will either log the complaint or forward it to complaints@iprsgroup.com.

1.24. IPRS Health Contact Details

IPRS Health Ltd

Units 11-14, Opus Park Exchange Place

Old Ipswich Road

Claydon

Ipswich

IP6 0FU

Telephone 0800 072 1227

Email health@iprsgroup.com

9. Complaint timescales

1.25. Complaints must be made no later than twelve months after the date on which the complaint matter occurred or came to the notice of the complainant.

1.26. If there is a justifiable reason for not having made the complaint within twelve months, IPRS Health will consider whether it is still possible to investigate effectively and fairly.

1.27. If IPRS Health considers that it is not possible to investigate effectively and fairly, the matter will not be investigated, and a response will be provided about this to the complainant.

10. IPRS Health Complaints Process

1.28. The complaint will be acknowledged by email within three working days of being received.

1.29. The complainant will be advised of the timescales for responding to the complaint.

1.30. If the investigating officer requires further information, they will contact the complainant by email to request a telephone interview with the affected individual and/or their representative if appropriate.

1.31. The Complaints Officer will be the main contact with the complainant otherwise.

1.32. The complaint will be investigated, and a response provided within twenty working days.

1.33. The response will include:

1.33.1. The findings of the investigation.

1.33.2. A detailed explanation based on the facts of the case.

1.33.3. The conclusions reached by the investigating officer.

1.33.4. Details of any action taken, or lessons learnt.

1.33.5. An apology where appropriate.

1.33.6. Whether the complaint is upheld or not.

1.34. The response will be made by the complainant's preferred method of communication, whether in writing or verbally. If a verbal response is required, a written summary of the response will form part of the complaint record.

1.35. The complainant will be given a period of one week to review the response and decide whether to accept IPRS Health's resolution of the complaint or to appeal the response.

1.36. If the complainant chooses to appeal the response, the complaint record will be reviewed, and a response provided by the Appeal Officer within twenty working days.

1.37. Mediation through an external body may be considered and approved by the SLT following escalation from the Quality & Clinical Governance Director.

11. Confidentiality and consent

1.38. Complaints will be handled in strictest confidence and complaint records will be kept separately to health records.

1.39. If a complaint should require escalation to an external third party, e.g., a professional body, this will be with the complainant's consent unless there is a safeguarding issue (see section 15).

1.40. Where necessary, consent will be pursued, however if consent is not received within thirty calendar days and there is no safeguarding issue, the complaint will still be investigated but the complainant's details will not be disclosed, and the outcome will not be shared.

12. Exceptions to the policy

1.41. Other than in safeguarding situations, there may be circumstances in which it is the best interests of an individual, group, or organisation where information will be disclosed without consent. This includes suspicions of fraud, bribery or any other financial misconduct, or any suspicions of criminal behaviour of any kind.

13. Record keeping

1.42. Complaint records, including all correspondence related to the complaint, will be retained centrally in access controlled electronic files.

1.43. Complaint records are not part of the electronic health record but will be included as part of a data subject access request.

1.44. IPRS Health will retain complaint files for a period of six years after which time the data will be anonymised, and all correspondence will be permanently deleted.

14. Monitoring and reporting

1.45. IPRS Health will monitor complaints and concerns and will use all feedback to drive quality improvement and promote best practice within the organisation.

1.46. Relevant data related to complaints and concerns will be reported to the Senior Leadership Team monthly and quarterly detailing:

- 1.46.1. The number of complaints received and as a ratio of the referral volume.
- 1.46.2. The number of complaints upheld and as a ratio of the referral volume.
- 1.46.3. Data related to root causes, nature, and sources of complaints.
- 1.46.4. The performance against the complaints KPI.
- 1.46.5. Any key trends or issues.
- 1.46.6. How complaint data has been used to make improvements

1.47. Complaint data will be included in IPRS Health's Quality Account.

1.48. An annual complaint report will be produced and shared with the SLT.

15. Safeguarding

1.49. Safety and safeguarding are fundamental to quality and key elements of effective complaint management. As part of the IPRS Health complaints process, it is necessary to consider if any information provided as part of the complaint or its investigation raises concerns about patient or colleague safety or safeguarding. This would include issues regarding:

- 1.49.1. An individual's physical or mental capacity that has not been previously addressed.
- 1.49.2. The adequacy of care/support being provided to the individual.
- 1.49.3. The safety of vulnerable persons, including minors.
- 1.49.4. The behaviour of a health care professional to an individual.

1.49.5. The behaviour of the individual towards professional colleagues.

1.50. Should a safeguarding concern arise, the relevant safeguarding procedure should be followed, in accordance with IPRS Health's Safeguarding policies.

16. Quality and compliance

1.51. IPRS Health will monitor the effectiveness of the complaints and concerns process and how the data is being using to inform service improvement.

1.52. Learning from complaints and concerns raised will be shared across the organisation to inform best practice.

1.53. Complaints and concerns will be used as a measure of organisational and individual performance and quality.

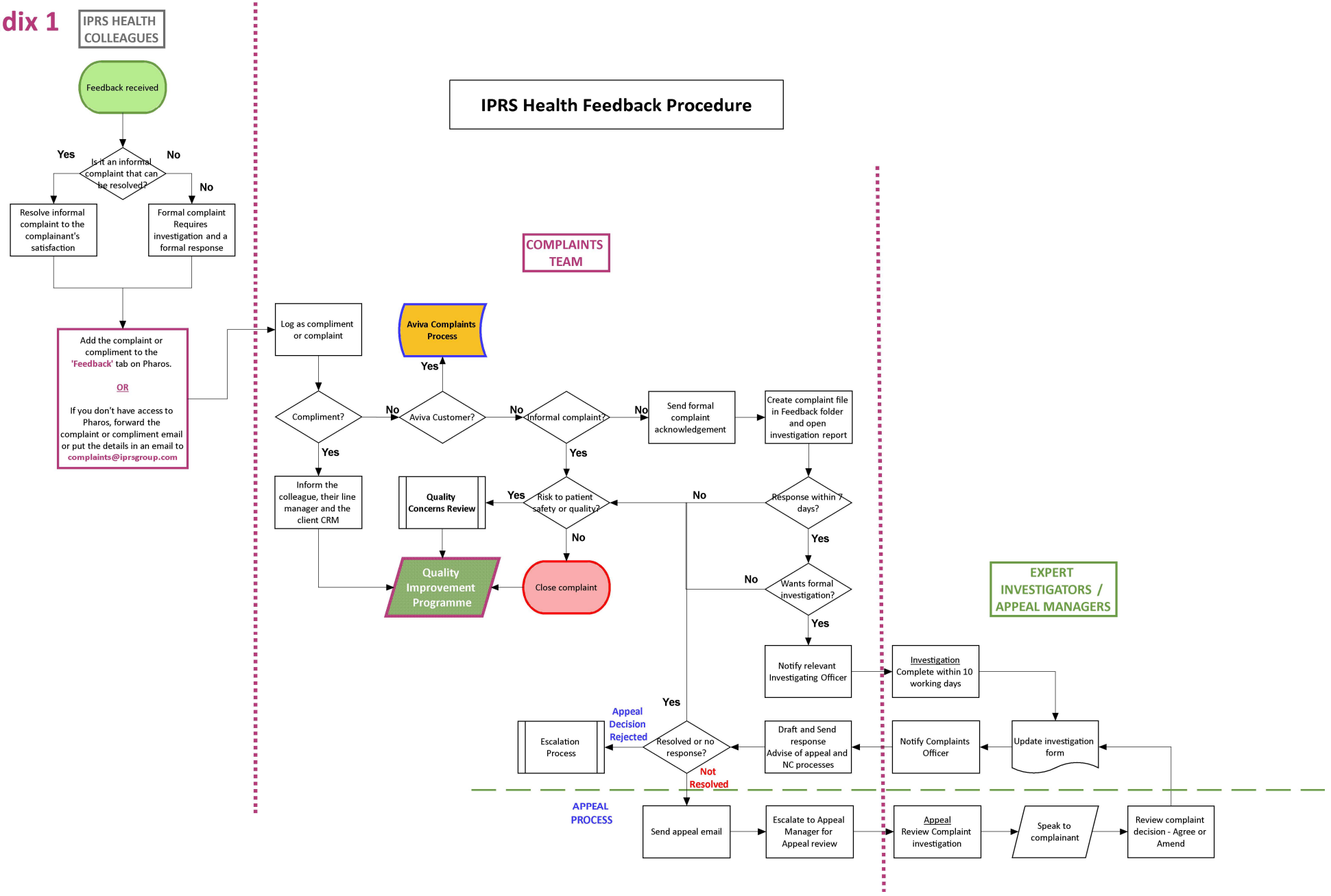
1.54. Complaint and concern data will be used to guide personal and professional development of IPRS Health colleagues.

1.55. Compliance with the complaints policy and procedures will be monitored as part of IPRS Health's Quality Management System. Internal and external audits of the policy and procedures will be conducted in accordance with the organisation's ISO9001 auditing schedule.

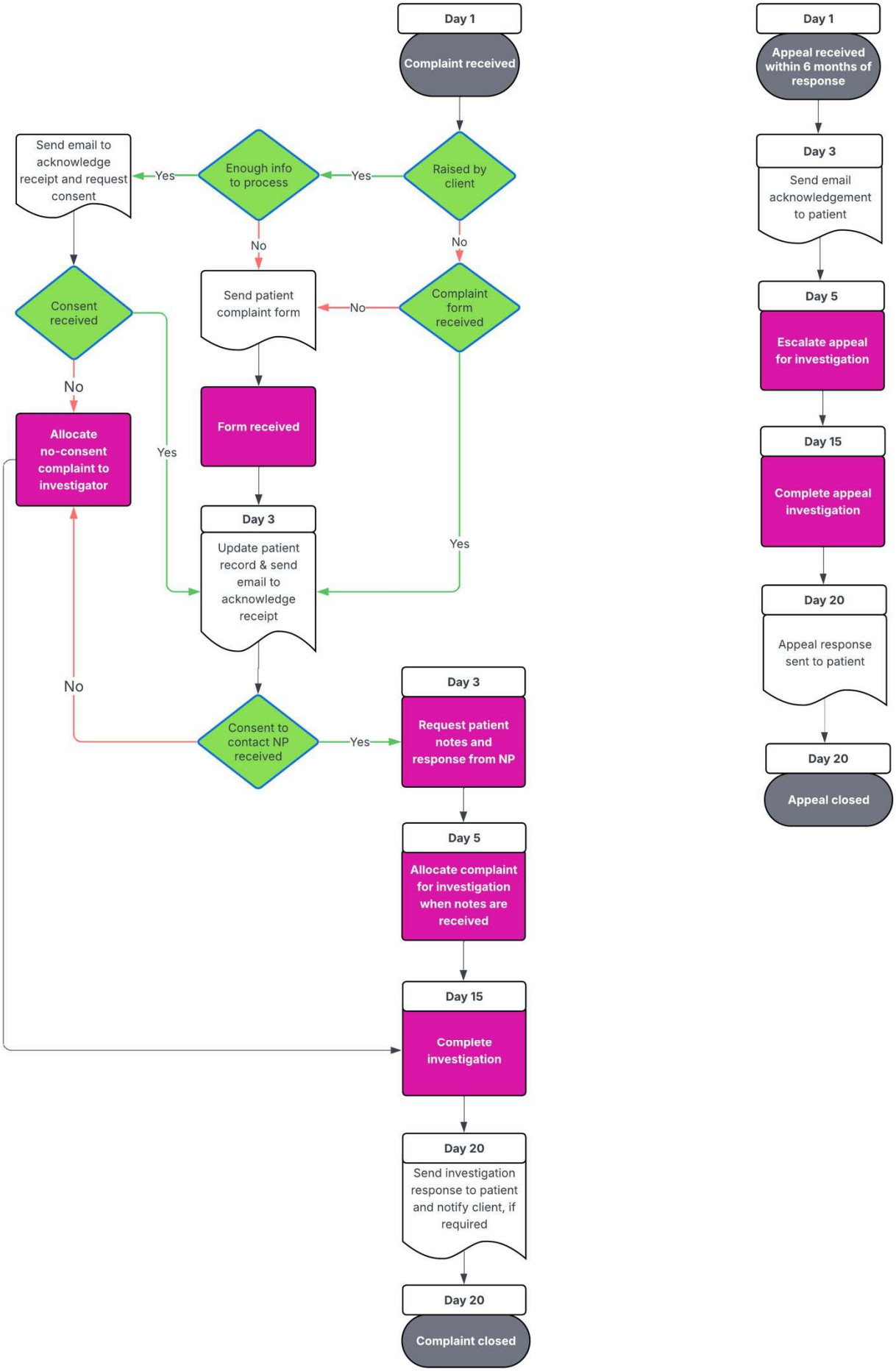
17. Chaperones

Chaperones play a crucial role in ensuring patient safety, comfort, and dignity during consultations, examinations, and procedures. They act as a safeguard for both patients and clinicians, particularly in situations where there might be concerns about potential abuse, allegations, or where a patient's mental health needs might make them feel vulnerable. IPRS Health has a separate Chaperone Policy which can be provided upon request.

18. Appendix 1



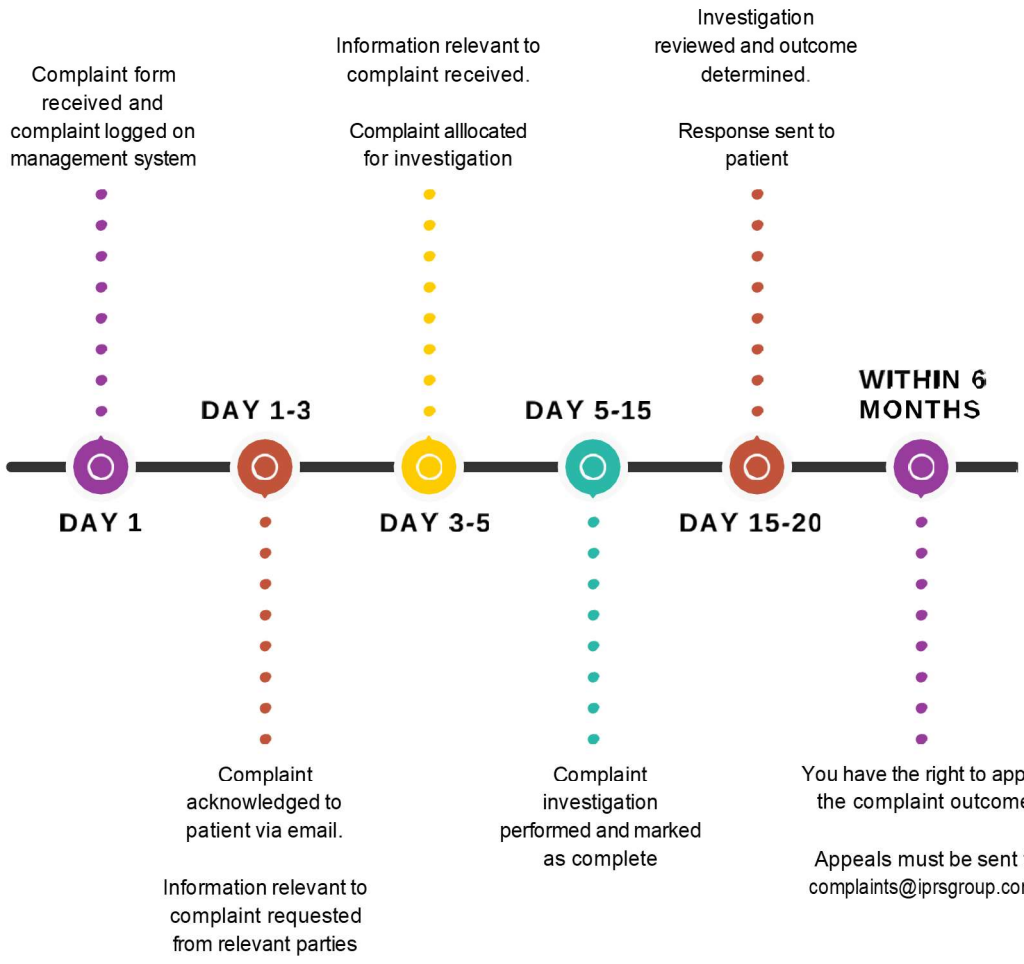
Complaint & Appeal Workflow



Our Complaints Process

Thank you for raising your concern to IPRS Health. We are sorry that you have felt cause to complain. We welcome all feedback, whether this is positive or negative, to help us improve our services.

The complaint you have raised will be investigated in line with our Complaint Process which is documented below. If you have a query or concern at any stage of the process, please contact your designated complaints representative on complaints@iprsgroup.com.



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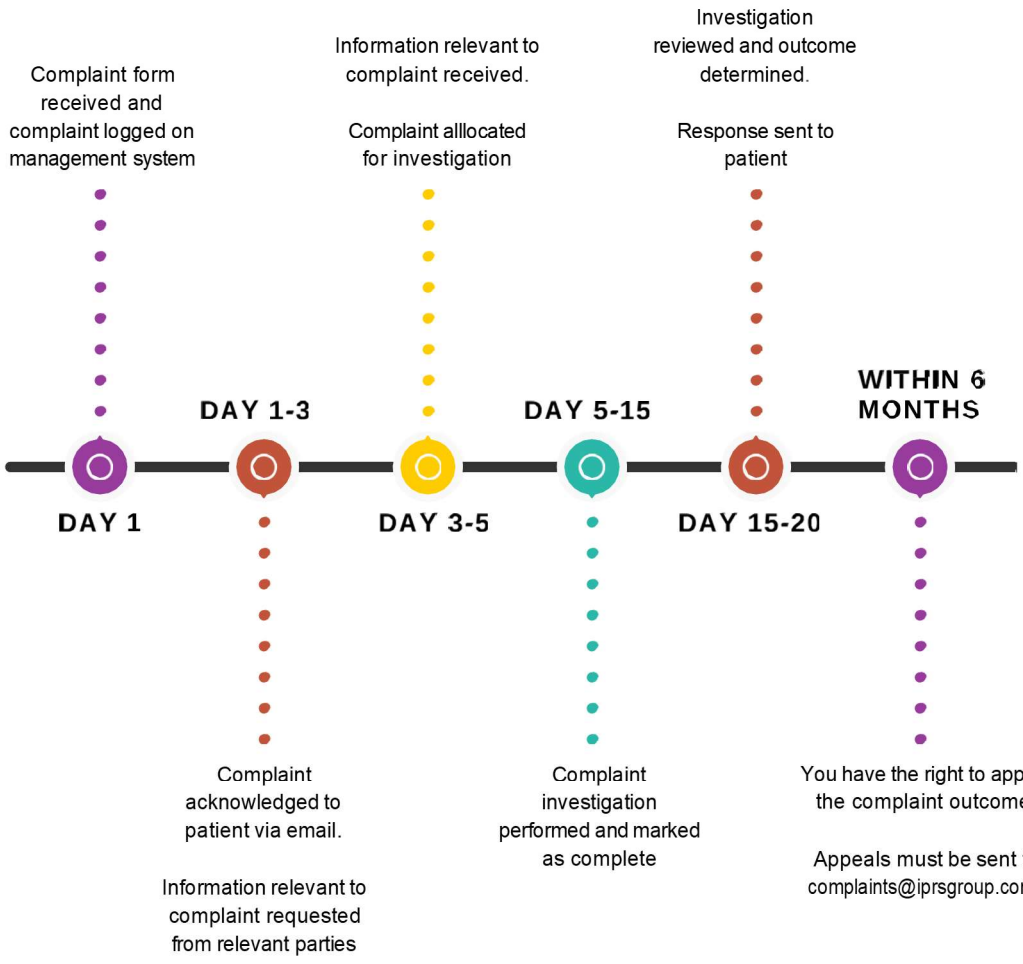

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19. Other IPRS Health or IPRS Group Policies relevant to this policy

The readers are directed to the following policies which are related to this policy:

- PP 030 Safeguarding Adults at Risk
- PP 032 Safeguarding Children
- PP 017 Treating Patients Fairly
- PP 012 Patient Consent
- PP XX Chaperone Policy

20. Other External Policies/Legislation relevant to this policy

- 'Good Practice Standards for NHS Complaints Handling' (Sept 2013)
- Equality Act 2010
- Human Rights Act 1998
- Data Protection Act 2018
- UK General Data Protection Regulation
- Limitation Act 1980