# Complaints Policy and Procedure

**Our Commitment**

At Queensgate Dental Practice we are committed to providing high-quality dental care to all our patients. We take feedback and complaints seriously and view them as an opportunity to learn, improve our services, and maintain trust and transparency with our patients.

We aim to handle all complaints courteously, efficiently, and promptly so that concerns can be resolved as quickly as possible.

The person responsible for handling all complaints in the practice is **Jacqueline Cumpstey - Practice Manager.** She can be reached by telephone on 01282 428435 or email on PM@Queensgate-dental.co.uk

**How to Make a Complaint**

We hope that most issues can be resolved quickly and informally, often at the time they arise and with the person concerned.

If your concern cannot be resolved this way, or you would prefer to make a formal complaint, you may do so verbally, in writing, or by email.

**Complaints Made Verbally**

If you make a complaint in person or by telephone:

- We will listen to your concerns and, where possible, attempt to resolve them immediately.
- If the Complaints Lead is not available, a team member will record your details and a brief description of your complaint.
- Your complaint will be acknowledged within 3 working days, and arrangements will be made for the Complaints Lead to contact you directly.

**Complaints made in writing or by email**

Written and emailed complaints will be passed immediately to the Complaints Lead, who will acknowledge receipt within 3 working days of receiving your correspondence.

**Complaints Handling Process**

The practice follows the steps below when managing complaints:

Step 1 – Receipt of Complaint

The complaint will be received by a member of staff and passed to the Complaints Lead as soon as possible.

Step 2 – Acknowledgement

The complaint will be acknowledged within 3 working days. The complainant will be informed who is handling the complaint and how they can be contacted.

Step 3 – Initial Assessment

The Complaints Lead will review the complaint, identify any immediate risks or concerns, determine whether further information is required and agree the scope of the investigation.

Step 4 – Investigation

Relevant records, documentation and staff accounts will be reviewed. Where appropriate, clinical advice may be sought. The complainant may be contacted if clarification or further information is required.

Step 5 – Progress Updates

If the investigation cannot be completed within 10 working days, the complainant will be informed of the reason for the delay and provided with regular updates until the complaint is concluded.

Step 6 – Outcome

The complainant will receive a written response outlining:

- The findings of the investigation
- Any apology where appropriate
- Any lessons learned
- Any actions taken or planned

Step 7 – Escalation

If the complainant remains dissatisfied, they will be informed of the relevant external organisations available to review their concerns.

Step 8 – Learning and Improvement

The complaint will be reviewed through the practice governance process to identify trends, learning opportunities and service improvements.

**Investigation and Response**

- We will make every effort to resolve your complaint within 10 working days of acknowledgment.
- If the investigation is likely to take longer (for example, where clinical advice is required), we will inform you of the reason for the delay and agree on an updated timescale with you.
- If your complaint involves clinical care or treatment, the matter will usually be referred to the treating dentist, unless you specifically request otherwise.
- Once our investigation is complete, we will contact you via your preferred method (letter, email, or telephone) to share our findings and any actions taken.

Where necessary, we may seek advice from our indemnity provider, insurer, or legal adviser to ensure a fair and compliant response. In such cases, only relevant information will be shared, and confidentiality will be maintained at all times.

The Complaints Lead will keep the complainant informed throughout the process and provide progress updates at agreed intervals, particularly where investigations are ongoing or external advice is being sought.

**Complaints Involving the Registered Manager or Practice Manager**

Where a complaint is made about the Registered Manager, Practice Manager, or another member of the senior management team responsible for handling complaints, the practice will ensure the complaint is managed impartially and without conflict of interest.

In such circumstances:

- The complaint will be escalated to an alternative senior person within the organisation (e.g. Clinical Director, Practice Owner, or Deputy Complaints Lead not involved in the issue).
- Where no appropriate internal person is available, the complaint may be referred to an external adviser or relevant governing body for independent review.
- The complainant will be informed of who will be handling their complaint and provided with clear contact details.
- All complaints will continue to be handled in line with the practice complaints procedure, ensuring fairness, transparency, and timely response.

If the complainant remains dissatisfied, they will be advised of their right to escalate the complaint to the appropriate external body (e.g. NHS complaints body, Dental Complaints Service for private care, or relevant regulator).

**Complaints Involving the Registered Manager or Practice Manager – sole Trader**

Where the practice operates as a sole trader model, the Principal Dentist may also hold the roles of Clinical Lead, Registered Manager, Nominated Individual, and Complaints Lead. The practice recognises that this creates a potential conflict of interest when complaints are made about the Principal Dentist.

To ensure compliance with regulatory expectations, including CQC Regulation 16 (Receiving and Acting on Complaints), the practice has established the following safeguards to maintain independence, objectivity, and transparency.

**Recognition of Conflict of Interest**

A conflict of interest will be deemed to exist where:

- The complaint relates directly to the clinical care, treatment, or professional conduct of the Principal Dentist
- The Principal Dentist is the subject of the complaint
- There is a reasonable perception of bias, regardless of whether actual bias exists

In such cases, the Principal Dentist will not act as the sole investigator or decision-maker.

**Mandatory Escalation to Independent Review**

Escalation to an independent reviewer is mandatory where:

- The complaint involves the Principal Dentist directly

- Clinical decision-making or treatment outcomes are being challenged
- The complaint is complex, serious, or high risk
- The complainant requests independent review
- There is any identified or perceived conflict of interest

Under these circumstances, the practice will ensure that the complaint is subject to external input and oversight.

**Independent Oversight Arrangements**

Where internal separation of roles is not possible, the practice will obtain independent input through one or more of the following:

- A suitably qualified independent external dental clinician (e.g. GDP, specialist, or professional colleague not involved in the patient's care) –
- The practice's indemnity provider, for advice on complaint handling, risk management, and response content
- A legal or professional adviser where appropriate

The practice acknowledges that indemnity providers support risk management but do not replace the need for independent clinical oversight.

Therefore, clinical input may be sought in addition to indemnity advice where the complaint relates to treatment or clinical decision-making.

**Governance and Quality Assurance Framework**

To ensure appropriate oversight, the practice maintains a governance structure proportionate to its size, including:

- Independent clinical review for complaints involving clinical care where required
- A second-opinion process for complex or high-risk cases
- A central complaints log, including investigation outcomes and learning
- Trend analysis and periodic review of complaints
- Audit of complaint handling, including response times and quality
- Review of compliance with the Duty of Candour

Where internal governance separation is not possible, external review forms a core part of the governance framework.

**Investigation Process and Objectivity**

To ensure fairness and objectivity:

- The investigation will be undertaken or independently reviewed by an external individual where a conflict exists
- The Principal Dentist may provide factual information but will not act as the sole reviewer
- All findings and recommendations will be evidence-based and documented
- The complainant will be informed where independent review has been applied

Under no circumstances will the Principal Dentist act as the sole sign-off authority in complaints where they are the subject to ensure objectivity is maintained.

**Data Protection Complaints**

We recognise that individuals have the right to raise concerns about how their personal data is collected, used, stored, or shared. Any complaint relating to data protection will be taken seriously and handled in accordance with UK GDPR and Data Protection Act 2018 requirements.

**How to Raise a Data Protection Complaint**

Patients, staff, or other individuals may raise a data protection concern:

- In writing, verbally, or via email/webform
- Through the practice's standard complaints process (see above)
- By contacting our Data Protection Lead directly at: [insert contact details]

**Handling Process**

- All data protection complaints will be logged and acknowledged within 3 working days.
- The concern will be investigated promptly, including review of relevant records, systems, and staff actions
- Where appropriate, this may be managed alongside (or as part of) a personal data breach investigation
- A written response will be provided in line with our general complaints process, outlining findings, actions taken, and any remedial measures

Data protection complaints will be assessed to determine whether they constitute a personal data breach under UK GDPR. Where a breach is identified, the practice will follow its Data Breach Protocol, including risk assessment and, where required, reporting to the ICO within statutory timescales.

**Outcomes and Actions**

Where a data protection issue is identified, we will:

- Take steps to mitigate any risk or harm
- Implement corrective actions (e.g. staff training, process changes)
- Consider whether the issue meets the threshold for reporting to the Information Commissioner's Office (ICO)

The practice will also consider whether the individual should be formally notified where there is a high risk to their rights and freedoms.

**Escalation Rights**

Individuals may raise concerns with the practice in the first instance; however, they also have the right to lodge a complaint directly with the Information Commissioner's Office (ICO) at any time.

- Website: https://www.ico.org.uk
- Helpline: 0303 123 1113

We encourage individuals to raise concerns with us first so we can investigate and resolve the issue promptly.

**Confidentiality**

All complaints are treated in the strictest confidence. Patient records will remain confidential, and only those involved in investigating or resolving your complaint will have access to the necessary information.

**Accessible Information**

We ensure that patients receive information in formats they can understand and are provided with any communication support they need throughout the complaints process. We comply with the Equality Act 2010, and The Accessible Information Standards to ensure patients don't receive any discrimination based on protected characteristics.

**Cooperation with Independent Reviews**

The practice will cooperate fully with any independent review, investigation or complaint assessment undertaken by an external organisation, regulator, commissioner, ombudsman, indemnity provider or complaints body.

This includes providing relevant records, documentation, statements and information where lawful and appropriate to do so. The practice will implement any recommendations arising from independent reviews where appropriate and will use findings to support service improvement.

**Learning from Complaints**

We record all complaints centrally and regularly review them as part of our governance and quality improvement processes. This ensures we identify any trends, improve our services, and share learning across the team.

**Monitoring the Complaints Process**

The practice will monitor the effectiveness of its complaints system by reviewing:

- Number and type of complaints received
- Complaint response times
- Themes and trends
- Patient feedback
- Outcomes of investigations
- Learning and improvement actions
- Compliance with complaint handling timescales

Findings will be discussed during governance meetings and used to improve patient experience, safety and quality of care.

Where trends, recurring themes or significant concerns are identified, action plans will be developed, implemented and monitored to ensure improvements are made and sustain

**Time Limits for Making a Complaint**

Complaints should normally be made **within 12 months** of the incident or the date the issue came to your attention.However, we will always consider reasonable exceptions if there are valid reasons for the delay.

**If You Are Not Satisfied**

We hope that, if you have a problem, you will use our practice complaints procedure first. We believe this gives us the best chance to put things right and improve our services.
However, if you remain dissatisfied, you may contact one of the following independent bodies:

**The CQC**: The CQC don't get directly involved with complaints made to the practice. They do, however, encourage giving feedback to service providers.
To send feedback to the CQC please go to: https://www.cqc.org.uk/give-feedback-on-care
Telephone: 03000 616161 (Mon to Fri, 8.30am - 5.30pm Excluding Bank Holidays)

**Private Patients**: The Dental Complaints Service handles complaints made by private patients.

Telephone: 0208 253 0800 (Mon-Fri, 9am-5pm)

Website: https://dcs.gdc-uk.org/

**The GDC**

Website: https://contactus.gdc-uk.org/Complaint/Process/13

**The Financial Ombudsman**

Website: Financial Ombudsman - https://www.financial-ombudsman.org.uk , complaint.info@financial-ombudsman.org.uk,

Call the helpline on 0800 023 4567 if you are dissatisfied with our response and your complaint is regulated by the Financial Conduct Authority.you have the right to refer your complaint to the Financial Ombudsman Service, free of charge but you must do so within 6 months of the date of the final response or 8 week holding letter.

Further information and contact details can be found on www.financial-ombudsman.org.uk.

**Document Control**

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| 0.1 | Final | 12.07.23 | DCME | New Template Created |
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The latest approved version of this document supersedes all other versions, upon receipt of the latest approved version all other versions should be destroyed, unless specifically stated that previous version(s) are to remain extant. If any doubt, please contact the document Author.

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