

Document Details	
Document Title	Complaints Procedure
Version Number	1.0
Issue Date	29 January 2026
Next Review Date	1 February 2027
Responsible Person	Senior GP Partner
Complaints Manager	Practice Manager

1. Introduction

We want every patient to receive high-quality, personalised care. If something has gone wrong or you're unhappy with our service, we want to know. Our complaints process is designed to be fair, straightforward and timely.

This procedure explains how we handle complaints in line with the Local Authority Social Services and NHS Complaints (England) Regulations 2009, CQC Regulation 16, CQC GP Mythbuster 103, and the Parliamentary and Health Service Ombudsman's NHS Complaint Standards.

2. Scope and Alignment

This procedure applies to all staff at Berinsfield Health Centre and covers all services we provide or arrange.

3. Informal Concerns

Most issues can be resolved quickly and informally. If something is worrying you, please speak to a member of the team as soon as possible so we can try to sort it out straight away.

4. How to Make a Formal Complaint

You can make a formal complaint verbally or in writing. We will never insist that you put anything in writing.

You can contact us by:

- Our online Complaints Form (via the practice website)
- Email: bobicb-ox.berinsfield.pm@nhs.net
- Writing to: Practice Manager, Berinsfield Health Centre, Fane Drive, Berinsfield, Wallingford, OX10 7NE

5. Time Limits

Complaints should normally be made within 12 months of the issue, or 12 months from when you first became aware of it. If there are good reasons for a delay and we can still fairly investigate, we may accept a complaint outside this timeframe.

6. Who Can Complain?

Patients can complain about their own care. If you are complaining on behalf of someone else, we usually need their written consent unless they lack capacity or are a child.

7. What You Can Expect from Us

We will contact you within 3 working days to confirm we've received your complaint. We will investigate the issues raised and keep you updated. You will receive a written response explaining our findings, learning, and any actions taken.

8. Meetings

You may be invited to meet with the Practice Manager and/or a GP Partner to discuss the complaint. You may bring someone with you for support.

9. Advocacy & Support

Independent advocacy is available if you'd like help with the complaints process.

In Oxfordshire, support is provided by VoiceAbility (0300 303 1660). They can help you understand the process, draft correspondence, or attend meetings with you.

10. Confidentiality

All complaints are handled in confidence. Where investigation requires access to medical records, we will inform the patient or their authorised representative. Complaints files are kept separate from clinical records.

11. Accessibility (Accessible Information Standard – AIS)

We follow the Accessible Information Standard and will provide information in a format that suits your needs (e.g., large print, email, easy read, audio, BSL interpreters).

12. Roles & Responsibilities

Responsible Person (a GP Partner): legally accountable for compliance with complaints regulations and ensuring learning from complaints informs service improvement.

Complaints Manager (Practice Manager): responsible for day-to-day handling, acknowledgements, coordination of investigations, responses, and maintaining the complaints log.

All Staff: must understand the complaints procedure, respond courteously, signpost advocacy, escalate urgent safety issues, and contribute to learning.

13. Duty of Candour

We are open and transparent with patients. For notifiable safety incidents, we will inform the patient in person as soon as reasonably practicable, provide a truthful account, explain further enquiries, give a written follow-up including an apology, and record the communication. Apologising does not constitute an admission of liability.

14. Records, Data Protection & Retention

We keep a secure complaints log and store complaint documents separately from medical records.

Complaints are kept for 10 years, following the NHS Records Management Code of Practice and UK GDPR principles.

15. Learning, Governance & Audit

We review complaints quarterly to identify themes, learning and service improvements and report these through our governance processes. We audit compliance with acknowledgement timescales, clarity of issues, communication quality, and documentation. Learning actions are tracked to completion.

16. Providing Remedies

Where something has gone wrong, we will take reasonable steps to put it right. This may include an explanation, apology, changes to services, or other actions aimed at preventing the same issue happening again.

17. If You're Still Not Satisfied

If you remain dissatisfied after our final response, you may contact the Parliamentary and Health Service Ombudsman (PHSO): Millbank Tower, Millbank, London SW1P 4QP. Telephone: 0345 015 4033.

The Ombudsman independently investigates unresolved NHS complaints.

18. Accessibility & Publication

This procedure and a patient-friendly summary are available on our website and in reception. On request we can provide alternative formats or translations.

19. Providing Information to CQC

When requested by CQC, we will provide within 28 days a summary of complaints, responses, further correspondence and any other relevant information, as required by Regulation 16.

20. Review

This procedure is reviewed annually or sooner if regulations or standards change. Document control details (version, issue date, next review, owner) are maintained and published.