



Complaints Resolution Procedure

Information for Service Users

If you are unhappy with the facilities or services you have received from the Scottish Vein Centre or from the doctor looking after you, we would like to know about it as soon as possible so we can investigate your concerns and explain, apologise and take positive action where necessary.

In most circumstances, if you tell us about your concern quickly, we can resolve matters straightaway. To let us know about something with which you are unhappy please speak with Deirdre McBride, Practice Manager in the first instance. (Tel 07366591367)

If you are not fully satisfied you can put your concerns in writing and use our formal Complaint Resolution Procedure which meets with the requirements set out by Healthcare Improvement Scotland and the Independent Doctors Federation (IDF) for its members and also the Independent Sector Complaints Adjudication Service (ISCAS).

Exceptionally, if you would prefer not to let us know directly, but wish to make a complaint to the regulatory authority in Scotland, then you can contact Healthcare Improvement Scotland. (see their website) www.healthcareimprovementscotland.org/

The Complaint Resolution Procedure has three stages and reflects the principles of Healthcare Improvement Scotland and the ISCAS Code of Practice:

Stage 1: Local resolution within the individual practice

Stage 2 : Healthcare Improvement Scotland (HCIS) procedure

Stage 3: Independent Adjudication from ISCAS

Stage 1 :

To start the formal Complaint Resolution Procedure you should write or preferably e-mail to:

Dr Kieran McBride
Medical Director
Scottish Vein Centre (Office)
15/1 Great King Street
Edinburgh
EH3 6QW
info@scottishveincentre.co.uk

You should state what has caused you to have concerns and make your points clear. Please document when the relevant events took place and what results you expect from your complaint.

The SVC Practice will send you an acknowledgement of your letter within **3 working days** of receipt of the complaint.

A full response to your complaint will be made **within twenty days** of the receipt of the complaint. If the investigation is still in progress after twenty days a letter will be sent to you explaining the delay and a full response made within five days of reaching a conclusion. In any event a holding letter will be sent every twenty days where an investigation is continuing.

Full complaint resolution should be concluded **within three months** of initial receipt of complaint.

If you remain dissatisfied following the final response from the practice, then you can request a review of your complaint, known as Stage 2 by contacting Healthcare Improvement Scotland (HCIS) They should be informed of the complaint in any case.

Stage 2 : HCIS investigation procedure

The independent healthcare services complaints handling procedure reflects Healthcare Improvement Scotland's (HCIS) commitment to addressing complaints made about a registered independent healthcare service in a person-centred way and to respect the rights of everyone involved. It will support it's staff to respond thoroughly, impartially and fairly by providing evidence-based decisions based on the facts of the case.

The procedure has been developed using the model complaints handling procedure developed by the Scottish Public Services Ombudsman (SPSO). HCIS have a standard approach to handling complaints across independent healthcare services in Scotland, which follows the principles of the SPSO's model complaints handling procedure. This procedure aims to help us 'get it right first time'. HCIS and SVC share the wish to have quicker, simpler and more streamlined complaints handling with early resolution.

Contact details ;

Complaints
Corporate Governance Office
Healthcare Improvement Scotland
Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Email: hcis.complaints@nhs.net

Telephone: 0131 623 4300

Procedure and time-line

- Where possible, HCIS will always encourage the complainant to resolve the issues that concern them with the provider (SVC).
- If the complainant is unable to do this or would rather come to HCIS first, they will investigate their complaint.

- This will involve an initial assessment of eligibility of the complaint and will be carried out within **one working day**. Complaints can be made up to six months following an event. A list of appropriate and inappropriate issues for complainants is provided on the HCIS website.
- Complaints can be made by phone, in person or in writing (letter or e-mail) with contact details. An acknowledgement of the complaint will be sent to the complainant and the provider (SVC) **within five working days**.
- HCIS will undertake a thorough investigation of the issues complained about. This may involve reviewing the investigation undertaken by the provider (SVC), talking to the relevant staff and examining clinical or other relevant records.
- Normally, HCIS will complete their investigation and respond **within 20 working days**. If they are unable to do this they will explain the reasons and the timescale in which they expect to respond.
- HCIS will produce a complaint investigation outcome report and once this report has been approved by Healthcare Improvement Scotland Chief Inspector or one of the Regional Inspectors, a response will be sent to the complainant and those complained against (SVC).
- If a complainant or service/provider disagrees with an outcome decision in a complaint investigation outcome report, they have **10 working days** following receipt of the investigation outcome report to request a post-investigation review.
- When HCIS receive a request for a post-investigation review, they will write to the requestor **within 5 working days** to confirm receipt of the request.
- HCIS will decide whether to carry out a post-investigation review **within 10 working days** of receiving the request.
- HCIS will write to the requestor **within 20 working days** explaining the outcome of the post investigation review and the final decision they have reached.
- These reports will detail the following:
 - a list of the complaint areas that HCIS investigated
 - the action HCIS took to investigate
 - the evidence HCIS have considered
 - HCIS outcome decisions
 - areas for improvement that HCIS have identified, and
 - action the service/provider (SVC) must take.
- HCIS will make their decisions taking into account all the evidence they find during their investigation.
- The complaint investigation outcome report will state whether or not a complaint has been:
 - upheld, or not upheld.
- Where requirements or recommendations have been made, HCIS will expect the service/provider (SVC) to return a complaint investigation action plan.

- HCIS will publish all upheld complaint investigation outcome reports on their website, along with service/providers' complaint investigation action plans.
- All upheld complaint investigation outcome reports will be placed on the relevant service's page on the HCIS website and will include a summary of the complaint. No individuals will be able to be identified in the report.
- Complaint investigation action plans will be followed up **16 weeks** after the date of the complaint investigation outcome report. If HCIS have made any requirements or recommendations as a result of a complaint investigation, these will be followed up and reported on as part of the service's next programmed inspection. However, if any urgent requirements were made, these may be followed up separately, before the next inspection.

Stage 3 : ISCAS

This stage is only available to complainants who remain dissatisfied once Stage 1 and Stage 2 are exhausted. This written request for adjudication must be made **within 6 months** of the final determination by HCIS at Stage 2.

A complainant should request the Adjudication by writing to the Secretariat:

Independent Adjudication Secretariat
 Independent Sector Complaints Adjudication Service (ISCAS)
 Care of CEDR - Centre for Effective Dispute Resolution
 International Dispute Resolution Centre
 70 Fleet Street
 London
 EC4Y 1EU

The Independent Healthcare Sector Complaints Adjudication Service (ISCAS) is the recognised complaints management framework in the independent healthcare sector. It is a voluntary subscription scheme that represents independent healthcare providers across the UK. It operates a Complaints Code of Practice that sets out the standards which subscribers agree to meet when handling complaints about their services. The Scottish Vein Centre through the Independent Doctors Federation (IDF) subscribes to this Code of Practice.

ISCAS can only deal with complaints about ISCAS subscribers, as they are not a regulatory body. Providers who are members of ISCAS can signpost their service users to this independent facility. Further information can be found on the ISCAS website at <http://www.iscas.org.uk/>

This written request for adjudication must be made within twenty-five days of the final determination by HCIS at Stage 2. The complainant at Stage 3 should provide reasons to explain the dissatisfaction with the outcome of Stage 2. The ISCAS Secretariat will seek confirmation from HCIS that Stage 2 has been completed.

The ISCAS Secretariat will notify HCIS of a request for Stage 3 made directly within ten days. The Secretariat will then be the main contact for the complainant once Adjudication is started. A complainant accessing this service will be asked to consent to release of records from the practice and HCIS relevant to the complaint and a report will be made to the complainant, the practice and HCIS.