Complaints Policy

Summary	Document outlining the company complaints policy and procedures. The document covers how complaints and concerns can be raised with the company and how the company will respond to any complaints or concerns raised.
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Target Audience	All directors and staff, patients and carers.
Date Issued	16/2/2026
Approved by Directors	
Next Review Date	April 2027

Capmed Diagnostics discourages the retention of hard copies of policies and procedures. The company can only guarantee that the policy in the company website is the most up-to-date version. If, in exceptional circumstances, you need to print a policy off, it is only valid for 24 hours.

Version Control

Date	Author	Version	Page	Change / Reason for change
16/2/26	Mark Edson	1.0		Original Document

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Introduction

Capmed Diagnostics Ltd, referred to herin as the company, is committed to providing a safe, effective and high-quality service. However, we recognise that sometimes things do not always go to plan or can go wrong. Whenever concerns or complaints are raised, the company has a responsibility to acknowledge, investigate and put things right as quick as possible. We have a duty to our patients to ensure that lessons are learnt to prevent reoccurrence.

The purpose of this policy is to set out how to raise a concern or complaint and how the business will respond to those concerns or complaints raised. The company aims to create a culture where all members of the team respond to concerns or complaints as soon as possible and as close to the point of care as possible i.e. local resolution. In circumstances where early local resolution is not possible this policy describes the processes in place to ensure that concerns and complaints are handled efficiently and investigated thoroughly.

The policy clarifies the roles and responsibilities of members of the team in assessing, acknowledging and investigating concerns and complaints. The main aims of the policy are;

1. The complainant is listened to and is aware of how their concern will be handled.
2. The complainant receives an open, honest and proportionate response in a timely manner.

Scope

This policy covers concerns and complaints made by patients, their representatives, or members of the public about care or services provided by the company. The policy covers the handling of concerns and complaints across organisational boundaries and the responsibilities for handling cases where business operations may be carried out alongside (or sub-contracted to) other companies that have a commercial relationship with the company.

The company is not required to consider (as part of this policy) a case in the following circumstances.

- Feedback about directors or employees that is not related to their duties, roles and responsibilities within the company.
- A complaint by an employee, sub-contractor or another individual or business that has a commercial relationship with the company, relating to their employment or terms and conditions of an agreed contract.
- A complaint, the subject matter of which has previously been investigated or has/is being investigated by the Independant Sector Complaints Adjudication Service (ISCAS).
- A complaint arising out of the alleged failure to comply with a request for information under the current data protection legislation.
- If a concern or complaint is made 12 months after the date on which the matter which is the subject of the complaint occurred; or if later, the date on which the matter which is the subject of the complaint came to the notice of the complainant.

- A complainant or anyone acting on their behalf that might be deemed to be a persistent or unreasonable complainant.

The company will consider each case individually and as soon as is reasonably practicable, notify the individual in writing of its decision and the reason for the decision.

Definitions

Term	Definition
The Company	Capmed Diagnostics Ltd.
Concern / Informal Complaint	A patient, their carer or family member, or a member of the public wishes to make the company aware of an issue, event or incident, but does not want a formal investigation and is happy to receive an informal response (most likely verbal or email). These are often issues where more immediate action is required, where things are 'going wrong' or general help and support is required. At any point the individual can ask their concern to be investigated as a formal complaint.
Complaint	An expression of dissatisfaction with any aspect of the service, provided by the company, to a patient, their carer or family member, or a member of the public which requires the company to provide a formal response regardless of the seriousness of the issues raised.
Complainant	The individual who has made contact with the company to highlight a concern or complaint. A complainant can be a patient, their carer or a member of their family, or a member of the public.
Unreasonable Complainant	• A complainant (or anyone acting on their behalf) that meets two or more of the following criteria: • Persist in pursuing a complaint where the company complaints procedure has been fully and properly implemented and exhausted. • Change the substance of a complaint or continually raise new issues or seek to prolong contact by continually raising further concerns or questions upon receipt of a response, whilst the complaint is being addressed. • Unwilling to accept documented evidence of treatment. • Deny receipt of an adequate response despite correspondence specifically answering their questions or do not accept that facts can sometimes be difficult to verify when a long period of time has elapsed. • Do not clearly identify the precise issues which they wish to be investigated, despite reasonable efforts by the company, to help them specify their concerns, and/or where the issues identified are not within the remit of the company to investigate. • Focus on a trivial matter to an extent which is out of proportion to its significance and continues to focus on this

	point. It is accepted that a trivial matter is subjective and careful consideration should be given in applying this criterion. • Have threatened or used actual physical violence towards any member of the company, their families or associates at any time. • Have in the course of addressed a registered complaint, had an excessive number of contacts with the company placing unreasonable demands on representees of the company. A contact might be in person or by telephone, letter or email. • Have harassed or been personally abusive or verbally aggressive on more than one occasion towards those dealing with their complaint, their families or their associates. This includes written abuse e.g. emails, letters. • Known to have recorded meetings or face-to-face or telephone conversations without the prior knowledge and consent of other parties involved. • Display unreasonable demands or expectations, and fail to accept that these might be unreasonable, e.g. insisting on responses to complaints or enquiries more quickly than is reasonable. • Repeatedly focus on conspiracy theories and/or does not accept documented evidence as being factual. • Makes excessive calls, sends excessive number of emails, letters or messages to any member of the company. This is not an exhaustive list
Commercial relationship	Relationship (contractual or not) with another organisation or individual, independent of the company, that the company pays money for / receives money from, for the provision of services (or parts of services).
Sub-Contractor	Another organisation contracted by the company to provide services on behalf of the company.

Roles and Responsibilities

The Board of Directors

The board of directors should discuss, as part of the annual business cycle, complaints and concerns raised. Themes and trends should be analysed, discussed and systematic learning and appropriate actions are taken in response to concerns and complaints raised. The board should discuss at subsequent meetings whether the actions have been successful.

Individual Directors

All Individual Directors should be prepared to take on investigations appropriate to their area of the business and/or previous expertise in line with the procedures laid out in this policy.

All staff

All staff employed by, or carrying out work on behalf of, the company have a responsibility to respond to any concern or complaint raised to them, in an open, constructive, and non-judgemental manner. Where possible, the matter should be resolved immediately, or as soon as possible, or referred onwards to a suitable company representative at the time, with an emphasis on early resolution.

All staff who deal with or investigate concerns/complaints should possess the necessary skills to undertake this role. The company has the responsibility to ensure that staff have adequate access to training and support to enable this.

Procedures and Processes

The company will align, and work in accordance with, widely accepted time limits within healthcare settings that, the time limit for making a complaint is 12 months after the date on which the subject of the complaint occurred; or on the date on which the subject of the complaint came to the notice of the complainant. The company will apply this rule to all concerns.

There will be four stages that the company will use to handle complaints and concerns.

1. ### Patient (or patients' representative) raises a concern or makes a complaint.

   The company will provide several routes for patients to raise a complaint or raise a concern including (but not limited to)

   a. Email
   b. Telephone
   c. Letter

   The company will provide contact details, as well as notification of change of contact details for any of the above methods, on the company website and in appropriate company literature.

   If contact is from a third party, the relevant consent from the patient to share information and confirm that they want to raise a concern/register a complaint must be sought **prior to submission** of complaint/concern to the company. If necessary, the third party should also obtain consent to share information with other organisations involved in delivery of care or which the company has a commercial relationship to enable delivery of care.

   In the case of a third party pursuing a complaint or concern on behalf of a person that has died, the company needs the consent from recognised next of kin or person holding Power of Attorney for Health and Welfare. In the case of a person who is unable by reason of physical capacity or lacks capacity within the meaning of the Mental Health Capacity Act 2005, to make a complaint or raise a concern themselves, the company needs a copy of the complainants Power of Attorney for Health and Welfare document.

2. Receiving and categorisation of complaints.

The company is committed to listening to anyone who wishes to raise concerns or make a complaint about the quality of their care regardless of personal characteristics including age, disability, gender, marital status, pregnancy or maternity, race, religion and/or beliefs, sex and sexual orientation. The company will endeavour to make reasonable efforts to ensure that peoples' individual requirements are considered and that there are no barriers to particular groups' making their voices heard.

Complaints will be classified as informal the first instance, unless any of the three characteristics of a formal complaint are present, as outlined within this policy. Informal complaints are those that can be resolved via informal methods. This can be by means of discussion (verbal or electronic) or a goodwill gesture. If during discussion with the complainant, the company chooses to make a goodwill gesture this is not an admission of liability and should not be treated as such. This should be seen in the spirit intended, as an opportunity for the company to build and/or repair a relationship with the complainant.

Responses to informal complaints can be verbal or electronic and the company is not obliged to provide a formal written outcome to the complainant. An informal complaint will be classed as completed when either the complainant accepts any gesture of goodwill offered by the company, or the company believes that it us unable to progress any further with resolution.

Informal complaints can be escalated to formal complaints by the complainant at any point throughout the process. This does not restart the complaints process but requires the company to follow the formal response procedure outlined within this policy. Escalation of a complaint to a formal level does not mean that the company will change any decisions reached as part of the informal process. However, the company reserves the right to reconsider any decisions made as part of the informal process.

The company will categorise complaints as formal when they are submitted via one of the approval routes previously outlined within this policy and either

a. Outlined within the submission that the complaint is of formal nature.
b. Is of structured format for example, a letter (physical or electronic) addressed to the company and/or the directors within the company.
c. Is a deliberate action to address an issue through established channels, designed to initiate a formal review or investigation within the parameters outlined within this policy.

When a formal complaint is received via the approved channels, the company will acknowledge the complaint with a formal initial response within 3-5 working days. The company will then aim to investigate and deliver a formal outcome within 20 working days from the confirmed date of receipt. In total the company aims to deliver an outcome for a formal complaint within a 30-working day period.

If the company is unable to meet the 30-working day deadline for formal response, then the company should contact the complainant at the earliest opportunity and outline when they should expect to receive the company response by. If there are continuing delays and the company is unable to give an indication of when a response can be delivered the company should continue to update the complainant at regular intervals at least once every 28-days.

3. Investigation and resolution.

All complaints will be overseen by a nominated company director. This includes complaints which may be related to another director within the company. The nominated company director is responsible for ensuring that information from appropriate sources is gathered, both from inside and outside the company, in response to any points made within the complaint.

The nominated director is not obliged to gather all information pertinent to their enquiries themselves and may enlist the help of other people from within or outside the company as necessary, including if they do not have the required skillset to retrieve information for example, accessing systems or equipment that require specialist training.

Once all information is gathered the nominated company director is responsible for making a decision regarding the outcome and remedial actions taken by the company. The nominated director is able to seek advice from colleagues, and/or other trained professionals with expertise relevant to the complaint and investigation, including (but not limited to) other medical professionals outside of the company, legally trained professionals, consultants or specialists in the relevant area of investigation.

The nominated director is responsible for providing an outcome, via letter, physically or electronically, to the complainant.

If a concern or complaint involves multiple organisations, then the company will provide a response related to any points raised that directly relate to the company in accordance with its policies and procedures. Responsibility for response to areas that relate to other organisations is the responsibility of the specific organisation and is covered by their own complaints policy.

Concerns and complaints made about services provided by other organisations on behalf of the company (sub-contractors) will be investigated within the context of this policy from the company perspective.

4. Follow-up and outcome.

The nominated director's decision in relation to any complaint is final. If as part of the final decision the nominated director has proposed actions in terms of resolution of the complaint (or specific elements of the complaint), the nominated director remains responsible for ensuring that the actions have been/are taken within the timescales communicated in the outcome letter.

Once a final decision has been reached and communicated, and subsequent related actions have been carried out and completed, the complaint is considered completed and closed.

No further actions will be taken by the company once a complaint is considered completed and closed and no further elements of the complaint can be introduced, if not declared as part of the original complaint submission.

If the complainant is unhappy with the outcome of the complaint, and/or proposed resolutionary actions, then they should refer their complaint to the Independant Sector Complaints Adjudication Service (ISCAS) or their Healthcare provider depending on how any treatment was funded.

In the event that a complainant is unhappy with the outcome of their complaint, the company reserves the right to withhold proposed remedial actions until any investigation by the ISCAS or Healthcare provider has concluded. If the company has not been made aware of a submission to the ISCAS or patient Healthcare provider and incurs costs as part of any remedial action, the company reserves the right to recover any costs from the complainant.

Compliance and Enforcement

Compliance and enforcement of this policy will be carried out as part of the business cycle of directors meetings throughout the year. Compliance in relation to measurement of KPI's will be discussed within directors' meetings and the nominated director for each formal complaint that is non-compliant with timescales and/or other key-performance indicators outlined within this policy is responsible for providing a written submission updating as the reasons of non-compliance. The other directors within the company must consider if there are any other actions that they or the company would be able to carry out to support the nominated director to achieve compliance.

A quarterly report will be produced for the directors highlighting all complaints and concerns raised within the quarter and outlining trends and actions that have/will be completed in relation to the complaints and concerns included within the report.

This policy and document will be reviewed on an annual basis or sooner if there are any changes to regulations affecting the delivery of this policy.

Related Policies

- Treatment Terms and Conditions.
- Consent to Examination or Treatment Policy.
- Equality, Diversity and Inclusion Policy.
- Quality and Governance Policy.
- Safeguarding Policy and Procedures.