**Complaints Policy and Procedure**

MyPharmacyServices (Slotab Ltd) — Version 1.2, 25 August 2025

**Document Control**

* Policy Lead: Uroš Hostnik — Clinical Director & Pharmacist Independent Prescriber (GPhC)
* Applies to: All staff and contractors involved in the delivery of services
* Review due: Annually (or following a significant complaint/incident)

**1. Purpose and Scope**

This policy sets out how MyPharmacyServices identifies, receives, records, investigates and responds to complaints in a fair, timely and transparent manner to improve care quality and patient experience.

Regulatory status: MyPharmacyServices is delivered solely by a pharmacist independent prescriber and is outside the scope of CQC registration for the regulated activity Treatment of disease, disorder or injury. We nevertheless align our governance with the CQC Fundamental Standards (e.g., Reg. 16: Receiving and acting on complaints; Reg. 17: Good governance). Our professional practice follows GPhC In‑Practice Guidance for Pharmacist Prescribers (April 2025) and the RPS Prescribing Competency Framework (2021; review 2026).

**2. Principles**

* Accessible and simple: patients and others can complain without unnecessary barriers (phone, email, post).
* Fair and independent: conflicts of interest are managed; an independent investigator will be appointed where necessary.
* Timely and transparent: clear timeframes with regular updates if there are delays.
* Learning culture: complaints inform quality improvement, audit and peer review.
* Non-retaliation: raising a complaint will not adversely affect a person's care now or in the future.

**3. Definition of a Complaint**

Any expression of dissatisfaction about our service (whether justified or not) that requires a response. This includes concerns raised by patients, carers, clinicians, pharmacies, or other third parties.

**4. How to Make a Complaint**

You can complain via any of the following:

* Email: info@mypharmacyservices.co.uk
* Phone/SMS: 0303 040 1082
* Post: Flat 16, Park Reach, 102 Chapel Road, Southampton, SO14 5BT, UK

Please tell us what happened, when, who was involved, and what outcome you are seeking. If you need help to make a complaint, we can provide reasonable adjustments or signpost advocacy services.

**5. Privacy in Complaints**

We process complaint information under legitimate interests and to meet our professional obligations. Information is handled securely and only shared where necessary to investigate and respond. Complaints about privacy/data protection can be escalated to the Information Commissioner’s Office (ICO).

**6. Acknowledgement and Response Times**

* Acknowledgement within 2 working days (confirming the investigator and next steps).
* Aim to provide a full written response within 20 working days.
* If we cannot conclude within 20 working days, we will provide holding updates at least every 10 working days with reasons for delay and a revised completion date.
* A final response will summarise the investigation, findings, any upheld elements, apologies where appropriate, and actions taken to prevent recurrence.

**7. Investigation Framework**

1. Triage for risk, safeguarding and urgency.
2. Allocate a complaint reference number and an investigator. If the complaint concerns the Policy Lead/Clinical Director, an independent investigator will be appointed to avoid conflicts.
3. Collect evidence (records, interview notes, communications). Keep complaint correspondence separate from the clinical record; only clinically relevant outcomes are noted in the clinical record.
4. Decision-making and outcomes documented with rationale. If service failings are found, agree remedial actions and learning.
5. Safeguarding and imminent risk: if the complaint indicates immediate danger or safeguarding concerns, we will act promptly (including contacting emergency services or the local authority as appropriate).
6. Professional duty of candour: be open and honest when things go wrong; provide explanations and apologies where appropriate; record actions taken.

**8. Escalation Routes (Stage 2)**

If you are dissatisfied after our final response, you may consider the following independent routes:

* General Pharmaceutical Council (GPhC) — concerns about professional conduct/fitness to practise.
* Information Commissioner’s Office (ICO) — data protection/privacy concerns.
* Citizens Advice — consumer/service issues and options.
* Healthwatch — independent advice on how to pursue concerns.
* Care Quality Commission (CQC) — information only. CQC does not adjudicate individual complaints for this pharmacist‑led service; people may inform CQC if they believe a provider is carrying on a registrable activity without registration.

**9. Recording, Retention and Reporting**

* All complaints are logged in the Complaints Register with dates, subject, investigator, actions and outcome.
* Complaint files are kept securely and separately from clinical records; only clinically relevant outcomes are noted in the patient record.
* Retention: at least 6 years (or longer if linked to clinical care, incidents or claims), in line with our Records Management Policy.
* Anonymised trends are reviewed in clinical governance meetings and used for quality improvement.

**10. Roles and Responsibilities**

* Policy Lead: oversees compliance, assigns investigators, signs off final responses and improvement actions.
* Investigating Officer: gathers evidence, drafts the response, identifies learning and proposes actions.
* All Staff/Contractors: cooperate with investigations and implement agreed improvements.

**11. Monitoring and Review**

* Key metrics: number of complaints, categories, resolution time, upheld rate, actions completed.
* Annual review of this policy or earlier following significant changes, incidents or regulatory updates.

**12. References and Standards**

* Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 — Reg. 16 (Complaints), Reg. 17 (Good governance) — alignment only.
* GPhC — In practice: Guidance for pharmacist prescribers (April 2025).
* RPS — A Competency Framework for all Prescribers (2021; review due 2026).
* ICO — UK GDPR guidance on handling complaints and personal data.
* CQC Fundamental Standards — alignment only (not registered).

**Approved by:** Uroš Hostnik, Clinical Director & Pharmacist Independent Prescriber