



Complaints procedures explained



According to the GDC, all dental practices should have an in-house complaints procedure and it recommends that issues are addressed locally first if possible.

Julian Carpenter, Head of Fitness to Practise at the GDC, explains, 'When patients are starting to consider who to approach to make a complaint about dental care, it is helpful to be clear whether the treatment was provided under the NHS or privately. We encourage anyone who isn't sure to check with the registrant or the practice.'

Hazel Adams is Head of the Dental Complaints Service (DCS) which tries to resolve complaints about private dental treatment. It was set up by the GDC but operates at arm's length of it. The service is supported by more than 160 panellists and an Advisory Group made up of eight professional and lay members.

The DCS aims to resolve complaints fairly, efficiently, transparently and quickly by working with the patient and dental professional involved. 'We are completely impartial and consider this an important part of the service – and one which our staff take seriously,' says Hazel.

The service is open to the public and registrants and doesn't charge for its services. It is funded by the GDC and has a local rate helpline, 08456 120 540, run by staff.

Since the DCS was established in May 2006, to February this year it had received 34,000 calls. Those calls resulted in more than 4,500 complaints – an average of 32 a week. In the past 12 months alone it has dealt with more than 10,000 calls.

Hazel explains, 'We can look into complaints about private dental services provided by dental practices in the UK. If you're dealing with a patient's concern about service or treatment – and are struggling to find a solution or way forward – we may be able to help. We tell patients they should have already talked to the dental practice or dental professional involved before contacting us, although we recognise this is not always possible. We believe it's important we get involved only when you've already had a chance to sort things out.' She adds that most of the complaints are from patients and have been about dentures, crowns, fillings, root canal treatments, bridges, service and cost.

The DCS's process for solving and dealing with complaints is that it firstly looks for the



Hazel Adams, Head of the Dental Complaints Service

best way to solve each individual complaint and get a satisfactory result.

'We will let someone know we've received their complaint within 24 hours and explain how we will handle it. We may contact them to get more details and see what they would like us to do to help put things right,' Hazel says.

The process involves looking carefully at the complaint to decide how to help, making initial enquiries with the dental practice involved, and possibly requesting copies of any letters already exchanged between patient and dental professional.

‘One of the first things our advisers will ask any caller is whether they’ve tried to sort out the problem at the practice already; many complaints can be resolved at this point. If that doesn’t happen we can step in to act as an impartial third party,’ explains Hazel.

At this point, the DCS may be able to achieve a satisfactory result using only the information the complainant has provided, or by phoning the organisation or professional involved. However, if this is not possible, it looks into the matter further and invites both parties to a complaints panel.

The complaints panels are made up of two members of the public and one dental professional. Both sides are invited to a meeting to discuss the issues. They then consider the situation and decide the outcome of the complaint, writing to both parties to let them know the final decision. The panel meetings are held as close to the complainant’s location as possible.

Panel recommendations include closing the case with no further action, asking the professional to consider remedial work, asking them to offer an apology or asking them to offer a refund.

Hazel advises DCPs dealing with complaints to respect the patient’s right to complain, deal with it professionally, deal with it calmly, quickly and effectively and keep a written log of complaints.

She cites the GDC’s *Standards for dental professionals* guidelines, which sets out six main principles DCPs should follow and which states ‘Put patients’ interests first and act to protect them.’ This core guidance is supported by *Principles for handling complaints*.

She adds that a breakdown in communication can often be at the root of complaints. ‘Be open and honest about charges, promote your own complaints service and give clear treatment plans. These will all go a long way to developing a relationship of trust and respect.’

If the complainant received NHS treatment, their local Health Authority/Primary Care Trust (England and Wales) or Health Board (Scotland) or Health and Social Care Business Services Organisation (Northern Ireland) will be able to tell them whether their complaint can be dealt with through the NHS complaints process. More information can be accessed through the NHS website at www.nhs.uk.

If the complaint is about private dental treatment and hasn’t been resolved satisfactorily by the dental practice’s own complaints process, the DCS can be contacted on 08456 120540, email: info@dentalcomplaints.org.uk or at their website: www.dentalcomplaints.org.uk.

If a complainant thinks a dentist or DCP has behaved in a way which calls into question whether he or she should be allowed to remain

on the register, the GDC encourages them to report it to them. Julian Carpenter says, ‘We take concerns that a dental professional is falling short of our standards and may not be fit to work very seriously. If necessary, we can restrict or remove a professional’s right to work in the UK. Anyone can report a concern about a registered dental professional to us. We receive reports from a wide range of people and organisations, including patients and other dental professionals.’

He adds that its procedures are designed to protect patients and be fair to the people involved and rules and guidance set out how it deals with concerns about a dental professional’s fitness to practise. You can find the rules and guidance on the GDC website www.gdc-uk.org.

‘It is important to take all complaints very seriously, however minor they seem.’

The GDC states that if a dental professional or a patient thinks somebody may not be fit for their work, because of something they have done, their professional skills or their health, it expects them to report it.

‘We know this can be very difficult - our *Principles of raising concerns* guidance can give you more information if you find yourself in that position,’ says Julian.

Examples of things you might report include: sexual assault or abuse, being under the influence of drink or drugs, fraud, seriously poor treatment, failure to get a patient’s consent (permission) for treatment, not having professional indemnity insurance and cross-infection issues (for example, dirty equipment).

There are, however, some concerns that the GDC cannot look at, for example if a patient wants compensation, as this can only be awarded by the courts. If a patient had a complaint about private dental treatment and it’s something the DCS could help them with, patients can be awarded a refund of their fees or could be offered remedial treatment at no extra cost. Those recommendations are at the

discretion of the complaints panel and are subject to agreement by both parties.

The GDC’s Customer Advice and Information Team on 0845 222 4141 helps patients through the different options open to them, which may include suggesting other organisations which might be able to help.

Once a complaint has been received, and if it is a complaint made against a professional to the GDC’s Fitness to Practise (FtP) team, the complaint is assigned to a caseworker. They have three choices, which are to defer for more information, close the case or refer to the Investigating Committee.

The Investigating Committee meets in private and there are four possible outcomes: to adjourn for further enquiries, close the case, close the case but send advice or a warning letter or to refer the case to a Practice Committee.

The Practice Committee hearings form the third and last stage of the GDC’s complaints procedure. The most serious sanction the Committee can take is to erase a registrant. This means they are ‘struck off’ and not allowed to practise.

There are three Practice Committees, the first being the Professional Conduct Committee (PCC) which is charged with determining whether or not a registrant is guilty of serious professional misconduct (old rules – see below) or whether their fitness to practise is impaired (new rules – see below). If their fitness to practise is found to be impaired or they’re found guilty of serious professional misconduct, the PCC decides whether to impose a sanction.

The Professional Performance Committee (PPC) deals with cases where it appears that a dental professional’s performance is consistently falling below an acceptable standard and the Health Committee (HC) deals with cases where the respondent’s fitness to practise as a dentist or dental care professional is impaired by reason of ill health.

The Interim Orders Committee (IOC) can, as an interim measure, suspend or place conditions upon a registrant pending a full inquiry by the PCC. At all points during the process the dentist or DCP and patient will be kept informed and updated about what’s happening and what’s expected of them.

Hazel concludes, ‘If a complaint is made – and that’s likely to happen at least once in a career - make sure you fully understand it and no matter how minor you might think it is, it’s important to take it seriously.’

All DCPs should undertake some CPD in complaints. To take part in Vital verifiable CPD and complete the questions based on this article, turn to page 50 for instructions on how to subscribe.