OTTER VALLEY
EAR CARE



Complaints Policy

Author:	Tanya Cannon
Approved:	Tanya Cannon
Effective from:	24/09/2026
Review date:	24/09/2027
Reference:	COMP_002.0
Version:	v2.0

Otter Valley Ear Care Ltd.
contact: email@ottervalleyearcare.co.uk

Contents

Policy Statement 3
Purpose 3
Scope 3
How to Raise a Concern or Complaint 4
Accessibility, Support and Reasonable Adjustments 4
Receiving, Acknowledging and Triage of Formal Complaints 5
Investigation Process 5
Complaints Relating to the Registered Manager 6
Professional Advice, RCN Membership and Indemnity Arrangements 7
Outcomes and Final Response 7
Duty of Candour 8
Safeguarding, Serious Concerns and External Notifications 8
Complaints Made on Behalf of Another Person 8
Record Keeping and Confidentiality 8
Learning, Action and Clinical Governance 9
Closure and Further Review 9
External Advice and Escalation 10
Unreasonable, Persistent or Abusive Behaviour 10
Monitoring and Review of this Policy 10
References and Supporting Framework 11
Approval 11
Appendix 1 - Patient Information: Comments, Concerns and Complaints 13
- **How to contact us** 13
- **What happens next?** 13
- **What if my complaint is about Tanya Cannon?** 13
- **External concerns** 13

Appendix 2 - Patient Complaint Form 14
- **Please tell us what happened** 14
- **What are you most concerned about?** 14
- **What outcome would you like us to consider?** 14
- **Supporting information** 14

If you are complaining on behalf of another person.....15
Declaration.....15
For office use 15

Policy Statement

Otter Valley Ear Care Ltd is committed to providing safe, effective, compassionate and person-centred ear care services and welcomes complaints as an essential source of feedback to support continuous improvement. All complaints will be handled fairly, promptly and in accordance with Regulation 16 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and CQC Fundamental Standards. Individuals will be treated with dignity and respect throughout the process and will not experience any disadvantage in relation to their care as a result of raising a concern. The service promotes a culture of openness, transparency and learning, and will act in line with the Duty of Candour where appropriate. The complaints process is accessible to all, with reasonable adjustments made in line with the Equality Act 2010 and the Accessible Information Standard. Where required, independent external clinical advice may be sought to ensure fairness, objectivity and transparency in the investigation of complaints.

Purpose

Otter Valley Ear Care Ltd is committed to delivering safe, effective, compassionate and person-centred ear care services to individuals within their own homes and community settings across East Devon. We recognise that feedback, including complaints, is a vital component of service quality and clinical improvement. Complaints are welcomed as an opportunity to understand the experience of people who use the service, to identify where care or communication may have fallen short of expectations, and to improve future practice.

We aim to ensure that anyone who raises a concern feels listened to, taken seriously, and treated with dignity and respect throughout the process. Individuals will not experience any disadvantage or change in the quality of care as a result of making a complaint.

This policy explains how complaints can be made, as well as how they are received, managed, investigated, responded to and how learning from complaints is used to improve the service. The policy supports compliance with Regulation 16 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and aligns with CQC Fundamental Standards.

Scope

This policy applies to all complaints relating to any aspect of care or service delivery provided by Otter Valley Ear Care Ltd. This includes, but is not limited to, clinical assessment of ear conditions, microsuction procedures, prescribing decisions, clinical advice, communication, professional conduct, domiciliary care delivery, appointment management, administrative processes, confidentiality, documentation, and any concerns relating to patient safety or service experience.

The policy applies to complaints raised by patients, relatives, carers, advocates, or any individual acting lawfully on behalf of a patient. These could be concerns raised during care, after care has been delivered or following discharge from the service.

Commitment to Openness and Learning

Otter Valley Ear Care Ltd operates a culture of openness, transparency and learning. Complaints are not treated defensively but as valuable feedback that supports reflective practice and continuous improvement. We are committed to ensuring that concerns are handled fairly, without bias, and that outcomes are based on a thorough and proportionate investigation of the facts.

Where care has fallen below expected standards, we will acknowledge this openly, provide a clear explanation, and offer a sincere apology where appropriate. Any apology offered is done so as part of compassionate care and does not constitute an admission of liability.

How to Raise a Concern or Complaint

Concerns may be raised verbally during or after an appointment, by telephone, by email, in writing, through the website, or through a representative or advocate. The patient information leaflet at Appendix 1 explains the process in plain language and Appendix 2 provides an optional complaint form.

Where a concern can be resolved promptly through clarification, explanation or an immediate practical remedy, this will be encouraged where the person is comfortable with that approach. Informal resolution will never be used to discourage a person from making a formal complaint. If the person asks for a formal investigation, if the matter cannot be resolved satisfactorily, or if the concern raises significant clinical, safeguarding, professional or governance issues, it will be managed formally under this policy.

Complaints will normally be encouraged within 12 months of the event concerned or within 12 months of the person becoming aware of the matter. A complaint outside that period will not be rejected automatically. It will be considered where it remains possible to investigate fairly and there is a reasonable basis for the delay.

Accessibility, Support and Reasonable Adjustments

The complaints process will be accessible and responsive to individual needs. Information can be provided or communicated in a different format where reasonably required, and additional time, advocacy, interpretation or other communication support will be considered according to the

person's circumstances. The service will take account of disability, sensory impairment, language, literacy, neurodiversity and other factors that may affect a person's ability to participate.

A person who makes a complaint will not be discriminated against, victimised or treated less favourably. Their ongoing care will not be adversely affected because they, or somebody acting on their behalf, has raised a concern.

Receiving, Acknowledging and Triage of Formal Complaints

A formal complaint will be acknowledged in writing within three working days. The acknowledgement will confirm receipt, summarise the issues understood to require investigation, identify any clarification required and explain the proposed process and anticipated timescale. Where appropriate, the complainant will be asked what outcome they are seeking so that this can be considered as part of the investigation.

At the outset, the complaint will be triaged to determine its seriousness, any immediate risk to the patient or others, whether evidence needs to be preserved, whether Duty of Candour may apply and whether the matter requires referral or notification to another body. Particular attention will be given to allegations of abuse or neglect, serious clinical harm, unsafe practice, professional misconduct, criminal conduct or any concern suggesting an ongoing risk to patients.

The triage will also determine who is sufficiently independent and competent to investigate. Complaints that concern Tanya Cannon's own practice or conduct will follow the independent arrangements set out in Section 9.

Investigation Process

The investigation will be proportionate to the nature, seriousness and complexity of the complaint. Relevant evidence may include the clinical record, appointment history, consent documentation, correspondence, prescribing information, referral or GP communication, policies and procedures, equipment or treatment records, and accounts from those involved. The investigator will distinguish between established facts, professional judgement, areas where evidence is incomplete and matters on which accounts differ.

The investigation will seek to identify both the immediate circumstances and any contributory factors. Where a clinical issue falls outside the investigator's expertise, appropriately qualified external clinical advice will be sought rather than conclusions being drawn outside the investigator's competence.

A full written response will normally be provided within 20 working days. This is an organisational response standard rather than a reason to compromise the quality or independence of an investigation. Where the complaint is complex, independent input is required or the timescale

cannot reasonably be met, the complainant will be informed of the reason for the delay, given a revised timescale and kept appropriately updated.

Complaints Relating to the Registered Manager

Otter Valley Ear Care Ltd recognises that, as a small independent healthcare provider, Tanya Cannon fulfils the roles of Registered Manager, Director and sole practising Advanced Nurse Practitioner. Whilst this model enables continuity of care and clear professional accountability, it also presents the potential for an actual or perceived conflict of interest where a complaint relates directly to her own clinical practice, professional judgement, prescribing decisions, communication or management of the service.

The organisation is committed to ensuring that no complaint is investigated by the individual whose actions are the subject of that complaint. Where concerns relate directly to the Registered Manager, responsibility for investigating the complaint will therefore be transferred to an appropriately qualified independent Advanced Nurse Practitioner from another healthcare organisation who has experience of clinical governance, complaints handling and incident investigation and who has agreed in advance to undertake independent investigations for Otter Valley Ear Care Ltd when required.

The independent investigator will have had no involvement in the patient's care and must be free from any relationship or interest that could reasonably call their impartiality into question. Before accepting an investigation, they will declare any actual or potential conflict of interest. If a conflict exists, or the agreed investigator is unavailable, an alternative appropriately qualified external investigator will be appointed. The identity and agreed role of the standing investigator will be maintained separately within the organisation's confidential governance records rather than in this public-facing policy.

The independent investigator will undertake a proportionate, evidence-based review. This may include examination of the clinical record, consent documentation, prescribing records, communications, relevant policies, professional standards and any additional evidence necessary to establish a fair understanding of the events. Where specialist clinical expertise is required beyond the investigator's scope, further independent clinical advice will be obtained.

The investigator will provide a written report setting out the issues considered, evidence reviewed, findings, conclusions and recommendations. Tanya Cannon will cooperate fully and provide access to relevant information but will not direct the investigation, determine its findings or influence its conclusions. The independent findings will form the evidential basis of the organisation's formal response and any resulting action plan.

Stuart Cannon, whilst a Director of Otter Valley Ear Care Ltd, will not investigate or determine complaints concerning Tanya Cannon because his position within the organisation and his personal relationship with the Registered Manager mean that he cannot provide the required independence. Where appropriate, his involvement may be limited to administrative

coordination or facilitating practical arrangements, provided this does not compromise confidentiality or the independence of the investigation.

The Registered Manager remains accountable for protecting patients, meeting statutory obligations and ensuring that learning and remedial actions are implemented. Independence of investigation does not remove the provider's responsibility to act promptly where an immediate safety issue is identified.

Professional Advice, RCN Membership and Indemnity Arrangements

The organisation distinguishes clearly between independent investigation of a complaint and professional or legal support available to the clinician who is the subject of it. Tanya Cannon is a member of the Royal College of Nursing (RCN) and may seek professional advice, representation or support through the RCN where the circumstances fall within the services and eligibility arrangements available to her. RCN membership and any RCN indemnity that may apply are personal professional support arrangements; they are not presented as an independent complaints investigation service and do not replace the provider's complaints responsibilities.

Otter Valley Ear Care Ltd also maintains separate professional indemnity arrangements. Where a complaint raises a potential claim, significant professional concern or other matter requiring notification, advice will be sought and the relevant insurer or indemnity provider will be notified in accordance with the applicable terms. Advice obtained for Tanya Cannon or the company will remain separate from the independent investigator's fact-finding and conclusions. Neither RCN support nor indemnity advice will be used to compromise the independence of an investigation.

The adequacy and scope of indemnity arrangements will be reviewed separately as part of the organisation's governance and insurance review processes.

Outcomes and Final Response

The final response will be written in clear, respectful language and will address the issues raised. It will explain the investigation undertaken, the evidence considered, the conclusions reached and, where appropriate, whether individual elements of the complaint are upheld, partially upheld or not upheld. Where the evidence does not allow a definitive conclusion, this will be stated openly rather than presenting uncertainty as fact.

The response will identify any apology, remedy, learning or improvement arising from the investigation and will explain any further route available to the complainant if they remain dissatisfied. Information will be shared in a way that respects the confidentiality and rights of other individuals.

Duty of Candour

Otter Valley Ear Care Ltd is committed to being open and honest when things go wrong. A complaint may reveal information that triggers the statutory Duty of Candour or indicates that the organisation should take action under its incident reporting arrangements. Where a notifiable safety incident has occurred, the requirements of Regulation 20 will be followed independently of, but coordinated with, the complaints process.

This will include appropriate notification, a truthful account of what is known, an apology and reasonable support, together with a written record of the process. The complaints process will not be used as a substitute for statutory Duty of Candour obligations.

Safeguarding, Serious Concerns and External Notifications

Where a complaint raises concerns about abuse, neglect, exploitation, serious patient safety risk, professional misconduct or suspected criminal activity, immediate action will take precedence over waiting for completion of the complaints investigation. The organisation will follow its safeguarding and incident procedures and will contact or refer to the appropriate authority where required.

Depending on the circumstances, this may include the relevant local authority safeguarding service, the Care Quality Commission, the Nursing and Midwifery Council, the police or another appropriate statutory or professional body. The rationale for referral, non-referral and any immediate protective action will be documented.

Complaints Made on Behalf of Another Person

Where a complaint is made by someone acting on behalf of a patient, confidentiality will be respected at all times. Information will only be shared where appropriate consent has been obtained or where legal authority exists.

Commented [SC1]: Confidentiality of whom? The patient?

Where a patient lacks capacity, decisions will be made in accordance with best interest principles under the Mental Capacity Act 2005.

Record Keeping and Confidentiality

A secure record will be maintained for every formal complaint, including the complaint received, acknowledgement, triage, investigation material, correspondence, findings, response, outcome, learning and actions. Where no action is considered necessary, the rationale will be documented.

Complaint records will normally be held separately from the clinical record. Information will be added to the clinical record only where it is relevant to the safe and continuing provision of care.

Access to complaint information will be restricted to those who require it for legitimate investigation, governance, professional or legal purposes. Where information is shared with an independent investigator, adviser, regulator or insurer, only information necessary for that purpose will be disclosed and appropriate confidentiality and data protection requirements will be observed.

Otter Valley Ear Care Ltd will be able to provide CQC, when lawfully requested, with the complaint information required under Regulation 16, including summaries of complaints, responses, correspondence and other relevant information.

Learning, Action and Clinical Governance

A complaint is not considered fully resolved simply because a response has been sent. Findings will be reviewed for learning and any required action will be assigned, documented and followed through to completion. Actions may include changes to clinical practice, patient information, documentation, policies, booking processes, communication, equipment, training, referral arrangements or other aspects of service delivery.

Complaints and concerns will be reviewed alongside incidents, audits, feedback and other quality information to identify themes or recurring risks. The Registered Manager will periodically review whether the complaints process itself remains fair and effective, including whether the independent investigation arrangements continue to be appropriate for the size and structure of the service.

An annual complaints assurance review will summarise complaints received, themes, outcomes, learning and completed actions. Where no complaints have been received, this will still be documented and the accessibility and effectiveness of the process will be reviewed.

Closure and Further Review

A complaint will be closed when the investigation and formal response are complete, the outcome has been recorded and any immediate actions have been identified. Longer-term improvement actions may remain open within the governance action log until completed and verified.

If a complainant remains dissatisfied, Otter Valley Ear Care Ltd will consider whether there is further information that has not been addressed, whether the original investigation requires reconsideration and whether additional independent review is appropriate. The service will cooperate with any legitimate external review or regulatory process.

External Advice and Escalation

Patients may share information about the quality or safety of the service with the Care Quality Commission (CQC). CQC regulates health and adult social care services in England and uses information from people who use services as part of its regulatory activity. CQC does not resolve individual complaints on behalf of patients, and contacting CQC does not remove Otter Valley Ear Care Ltd's responsibility to investigate and respond to a complaint.

Where a concern relates to Tanya Cannon's professional fitness to practise as a registered nurse, a patient or member of the public may raise a concern with the Nursing and Midwifery Council (NMC). The NMC's role is professional regulation and fitness to practise; it is not a general dispute-resolution service for routine complaints about appointments, fees or customer service.

The Parliamentary and Health Service Ombudsman is not presented as an escalation route for ordinary self-funded private care because its healthcare jurisdiction does not extend to privately funded healthcare. If Otter Valley Ear Care Ltd later becomes eligible for, or subscribes to, a recognised independent private healthcare adjudication scheme, patient information and this policy will be updated before that route is represented as available.

Patients are free to seek independent advice or support and do not require the organisation's permission to contact a regulator or other appropriate authority.

Unreasonable, Persistent or Abusive Behaviour

On rare occasions, complainant behaviour may become unreasonable, persistent or abusive. While all legitimate concerns will continue to be considered, proportionate steps may be taken to manage such situations. This may include limiting communication methods or setting boundaries for contact. Any such measures will be clearly documented, justified, and kept under regular review. Legitimate new concerns, safeguarding information and patient safety issues will continue to be considered.

Monitoring and Review of this Policy

This policy will be reviewed at least annually and sooner following a significant complaint, a change in legislation or regulatory guidance, a change to the independent investigator arrangement, or learning indicating that the procedure should be strengthened. The standing independent investigator arrangement will also be reviewed annually to confirm continued availability, appropriate professional status, independence and suitability.

References and Supporting Framework

1. Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 16: Receiving and Acting on Complaints. Available at: https://www.legislation.gov.uk/uksi/2014/2936/regulation/16/made
2. Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 20: Duty of Candour. Available at: https://www.legislation.gov.uk/uksi/2014/2936/regulation/20/made
3. Care Quality Commission (2025) *Regulation 16: Receiving and Acting on Complaints*. Available at: https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-16
4. Care Quality Commission. *Fundamental Standards*. Available at: https://www.cqc.org.uk/what-we-do/how-we-do-our-job/fundamental-standards
5. Care Quality Commission. *Regulation 20: Duty of Candour*. Available at: https://www.cqc.org.uk/guidance-providers/all-services/regulation-20-duty-candour
6. Equality Act 2010. Available at: https://www.legislation.gov.uk/ukpga/2010/15/contents
7. UK Government. *Equality Act 2010 Guidance*. Available at: https://www.gov.uk/guidance/equality-act-2010-guidance
8. NHS England (2025) *Accessible Information Standard (DAPB1605)*. Available at: https://www.england.nhs.uk/publication/accessible-information-standard/
9. NHS England (2025) *Accessible Information Standard – Requirements (DAPB1605)*. Available at: https://www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/
10. NHS England (2025) *Accessible Information Standard – Implementation Guidance*. Available at: https://www.england.nhs.uk/long-read/accessible-information-standard-implementation-guidance/
11. Mental Capacity Act 2005. Available at: https://www.legislation.gov.uk/ukpga/2005/9/contents
12. Data Protection Act 2018. Available at: https://www.legislation.gov.uk/ukpga/2018/12/contents
13. UK General Data Protection Regulation (UK GDPR). Available at: https://www.legislation.gov.uk/eur/2016/679/contents
14. Care Quality Commission. *How to Complain About a Service or Provider*. Available at: https://www.cqc.org.uk/contact-us/how-complain/complain-about-service-or-provider

Approval

Approved by: Tanya Cannon, Registered Manager and Director

Approval date: 24 September 2026

Next scheduled review: 24 September 2027

This version supersedes COMP_001.0 v1.0.

Appendix 1 - Patient Information: Comments, Concerns and Complaints

Otter Valley Ear Care Ltd wants you to feel able to tell us if you are unhappy with any part of your care or experience. Raising a concern will not affect the care you receive and you will be treated fairly and respectfully.

How to contact us

You can raise a concern during an appointment, by telephone on 07891 424814, by email at email@ottervalleyearcare.co.uk, through www.ottervalleyearcare.co.uk or in writing. You may ask somebody you trust to help you. We can make reasonable adjustments to help you use the complaints process.

What happens next?

Where possible, we will try to resolve straightforward concerns quickly. If you make a formal complaint, we will acknowledge it within three working days, explain what will be investigated and tell you what to expect. We normally aim to provide a full written response within 20 working days. If more time is needed, we will explain why and keep you updated.

What if my complaint is about Tanya Cannon?

Tanya Cannon is the Registered Manager and practising Advanced Nurse Practitioner. If your complaint concerns her own clinical care, professional judgement, prescribing, communication or conduct, she will not investigate or determine the findings herself. Otter Valley Ear Care Ltd has an arrangement with an independent Advanced Nurse Practitioner from another healthcare organisation, with relevant governance and complaints experience, who has agreed to undertake independent investigations when required. You will be told how the independent investigation will work.

External concerns

You may share concerns about the safety or quality of the service with the Care Quality Commission (CQC). CQC regulates health and social care services in England but does not resolve individual complaints for patients. If your concern relates to the professional fitness to practise of a registered nurse, you may also contact the Nursing and Midwifery Council (NMC). The NMC can consider concerns about professional standards and public protection.

Care Quality Commission: www.cqc.org.uk

Nursing and Midwifery Council: www.nmc.org.uk | Referrals helpline: 020 3307 6802

The Parliamentary and Health Service Ombudsman does not investigate complaints about ordinary privately funded healthcare. We will explain any other appropriate independent or regulatory route that applies to your circumstances.

If you need this information in another format or need help making a complaint, please contact us.

Appendix 2 - Patient Complaint Form

You do not have to use this form to make a complaint. It is provided to help you give us the information you would like us to consider.

Your name	
Address	
Telephone	
Email	
Patient's name (if different)	
Relationship to patient	
Date(s) of event(s)	

Please tell us what happened

What are you most concerned about?

What outcome would you like us to consider?

Supporting information

Please list or attach any information you would like us to consider. You do not need to provide information that Otter Valley Ear Care Ltd already holds.

If you are complaining on behalf of another person

We may need to confirm that you have authority to act for them before confidential information can be shared. We will explain what is required.

Declaration

I confirm that the information provided is accurate to the best of my knowledge. I understand that relevant personal information may be processed where necessary to investigate and respond to this complaint, subject to applicable confidentiality and data protection requirements.

Name: _____ Signature: _____

Date: _____

For office use

Complaint reference: _____ Date received: _____

Acknowledged: _____ Investigation lead: _____

Independent investigation required: Yes / No Target response date: _____

Date closed: _____ Outcome recorded: Yes / No

Learning/actions transferred to governance log: Yes / No