

# Complaints Policy

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## **Introduction**

MySkinDoctor is committed to ensuring that those who use its services can readily access information about how to make a complaint and that the issues raised are dealt with promptly and fairly.

We aim to provide a complaints service that meets the complainant's needs and objectives while complying with the requirements set out in this policy.

We recognise that the information derived from complaints provides an important source of data to help improve our services. Complaints can act as an early warning of failings in systems and processes that need to be addressed.

We ensure that the care of people who complain about our services will not be adversely affected because they have complained. Complaints correspondence is stored and recorded separately from healthcare records.

MySkinDoctor serves a diverse patient population. We are committed to providing a complaints service to all regardless of their racial or cultural background, gender or sexual orientation, religion or disability.

## **Scope**

This policy relates to patient-related complaints only. All formal patient complaints, however received, should be managed as set out in this policy. Complaints from staff are dealt with under the relevant Human Resources policies.

### **Privately-funded / PMI patients (ISCAS Code)**

Where a complaint relates to care funded privately (including Private Medical Insurance), MySkinDoctor will manage the complaint in accordance with this Policy and, where applicable, the ISCAS Code of Practice for Complaints Management (Stages 1–3), including access to independent adjudication at Stage 3. For NHS-funded care, the complaints process is managed in accordance with the NHS Complaints Regulations, as set out within this Policy.

## **Definitions**

Under the NHS Complaints Regulations, upon receipt of any written complaint from an NHS patient, MySkinDoctor must follow the process set out in this document. For privately-funded care (including PMI), MySkinDoctor will follow the ISCAS Code of Practice for Complaints Management as incorporated within this Policy (Stages 1–3), including independent adjudication by ISCAS at Stage 3 where a complaint becomes deadlocked.

A verbal complaint may be treated as a formal complaint if, after discussing it with the complainant, they wish their concerns to be treated formally. In this case, the recipient of the complaint must make a detailed written record and send it to the complainant with an invitation for it to be signed for accuracy and returned to the Registered Manager or nominated representative. Patients and carers wishing to raise informal complaints can speak directly to any member of staff or can be directed to a senior manager within MySkinDoctor.

**ISCAS** – Independent Sector Complaints Adjudication Service (a dispute adjudication service owned by CEDR) will provide independent adjudication at Stage 3 for complaints that become deadlocked following Stages 1 and 2.

**Privately-funded / PMI patient** – A patient whose care is paid for privately, including by Private Medical Insurance.

**Stage 1 (Local Resolution)** – The provider's initial investigation and response to the complaint.

**Stage 2 (Internal Review)** – A review of the Stage 1 outcome conducted by a senior person not involved in the matters complained of and not involved in the Stage 1 response, to determine whether the complaint has been handled appropriately and whether further remedy is required.

**Stage 3 (ISCAS Adjudication)** – Independent adjudication by ISCAS following deadlock after Stages 1 and 2; the service is free of charge to the patient.

**Deadlock** – The point at which Stages 1 and 2 have been completed, and MySkinDoctor has issued a final Stage 2 response, but the complainant remains dissatisfied, and the complaint cannot be resolved further through MySkinDoctor's internal process.

### **Duties & Responsibilities**

**DR BHAVNEET SINGH SHERGILL** – Registered Manager

#### ***Registered Manager Responsibilities***

The responsibilities of this role are as follows:

- Will have overall responsibility for the management of all formal complaints in accordance with this policy and procedure and within timescales set out in this policy.
- Raise any issues related to an inability to complete the complaints process in line with this document with the Chairman of the Board, who will advise on issues as they arise.
- Ensure that the Chairman is made aware of any actual or potential issues arising from complaints that could put MY SKIN DOCTOR at risk, including potential legal claims.
- Ensure that patients and anyone else who requests information about the complaints procedure can access it (online).
- Inform members of staff about complaints received about them.
- Is responsible for reviewing all complaints to ensure that appropriate lessons are learned. This will be done by supporting the relevant director during the complaint's investigation and reviewing reports.

**Chairman of the Board** (or nominated independent senior reviewer) – Stage 2 Review Responsibilities (Private/PMI complaints under ISCAS)

The Chairman of the Board (or a nominated independent senior reviewer) will:

- Conduct Stage 2 Internal Reviews for privately-funded / PMI complaints in accordance with the ISCAS Code, ensuring the reviewer was not involved in the matters complained of and was not involved in the Stage 1 response.
- Determine whether the Stage 1 investigation and response were adequate and whether any further remedy, apology, learning, or service improvement action is required.
- Issue (or approve) the Stage 2 response, including, where applicable, a "deadlock" outcome letter that signposts the complainant to Stage 3 ISCAS adjudication.

Complaints Manager – ISCAS Liaison Responsibilities (Private/PMI complaints under ISCAS)

The Complaints Manager will:

- Provide patient-facing information explaining the three stages of the ISCAS Code, including (but not limited to) the ISCAS Patient Guide.
- Where a complaint proceeds to Stage 3, compile and securely share the Stage 3 complaint file with ISCAS in accordance with confidentiality and data protection requirements.

- Record Stage 2 and Stage 3 outcomes in the complaints register and ensure learning is captured and reported.

## **Procedures:**

### **Aim of Local Resolution**

The main objective of the local resolution is to ensure that complaints are dealt with promptly and satisfactorily by ensuring that MySkinDoctor:

- Investigate each complaint thoroughly
- Identifies any lessons to be learnt
- Ensures that appropriate remedial actions are taken
- Communicates effectively with the complainant and resolves the matter to the complainant's satisfaction.

### **Verbal Complaints**

Wherever possible, complaints and concerns should be dealt with at the time they arise by the appropriate clinician, departmental manager, and/or director.

### **Formal Complaints**

People wishing to make formal complaints should be advised to write their concerns and address them to the Complaints Manager. If a formal complaint is made orally to the Registered Manager or other member of staff, the member of staff who has spoken to the complainant should prepare a written record detailing the issues of concern. This record should then be forwarded to the complainant, asking them to confirm that the issues of concern have been correctly understood and to sign the written record.

### **Time Limit for Making a Formal Complaint**

**NHS-funded care:** A complaint should be made within twelve months of the event(s) giving rise to the complaint, or within twelve months of the complainant becoming aware of the matter, unless there is good reason for the complaint not having been made within that time period.

**Privately-funded / PMI care (ISCAS Code):** A complaint should ordinarily be raised within six months of the event(s) giving rise to the complaint. Any request to escalate a complaint to Stage 2 should be made within six months of the Stage 1 response. Any request to escalate a complaint to Stage 3 (ISCAS) should be made within six months of the Stage 2 response (deadlock letter).

In exceptional circumstances, MySkinDoctor may consider complaints or escalation requests made outside these timeframes where it is reasonable to do so.

### **Who May Complain?**

A patient may make a complaint, a person acting on behalf of a patient, or anyone who has been affected by any action/omission/decision of MySkinDoctor. Where a complainant is acting on behalf of a patient, written consent must be obtained from the patient before a response can be sent. Where the patient is a child without capacity, a complaint may be made by the parent or guardian. Where the patient has died, the complaint may be made by the named next of kin or by a person nominated by the named next of kin. In other circumstances where the complainant may have difficulty complaining on their own behalf or have other requirements e.g., vulnerable children and adults or people with mental health difficulties, the Chief Compliance and Risk Officer will review each situation in light of current legal requirements and good practice guidance from the Department of Health and offer help and support to a complainant as appropriate.

## Handling a Complaint

On receipt of a formal complaint, the Complaints Manager will:

- Acknowledge a written complaint within three working days of receipt and provide (or signpost to) patient-facing information explaining the complaints process. For privately-funded / PMI patients, this will include an explanation of the three stages of the ISCAS Code, including (but not limited to) the ISCAS Patient Guide, and confirmation that Stage 3 adjudication is free of charge to the patient..
- Send a copy of the complaint to the relevant director or service lead and ask them to advise on the most appropriate way to resolve it, e.g., by meeting, telephone call, investigation, or formal letter.
- Ask the relevant director or service lead for a report on the concerns raised by the complainant.
- Upon receipt of the department's advice, send a letter to the complainant on behalf of MySkinDoctor with either an offer of a meeting or telephone conversation with relevant department staff or confirmation that a formal investigation is underway (again indicating anticipated time for response).
- Record the complaint details onto the MySkinDoctor's complaints register.
- Advise the Board of Directors of any complaints that may have legal implications.
- Monitor the agreed time scale for response to a complaint
- If the Directorate decides to resolve the complaint through a formal letter of response to the complainant, draft a written response for the Board of Directors to consider alongside the information received from the relevant Clinical Director or Registered Manager. This may be in the form of a letter, an investigation report, or a covering letter.
- The response should include details of any action being taken to implement changes in practice and procedure identified as a result of the complaint.
- Ensure final letters of response or investigation reports are sent to the appropriate staff for approval of the content before being sent to the complainant.
- Send an approved final response to the complainant within the agreed set timescale. If the final response is delayed, inform the complainant in writing.
- For privately-funded / PMI complaints: ensure the Stage 1 response includes clear information on how to request a Stage 2 Internal Review (including applicable time limits). Where Stage 2 is completed, and the complaint is deadlocked, ensure the Stage 2 response includes a "deadlock" outcome letter that explains how to escalate to Stage 3 ISCAS adjudication (including applicable time limits and contact details / website).
- Ensure copies of the response to the complaint are sent to the relevant staff.
- Be responsible for maintaining secure and accurate records of each complaint.
- Monitor complaints which are reopened to identify whether the initial investigation and response were appropriate or whether new issues have been raised.

## Action Plans

Where the investigation of a complaint identifies the need to make changes in practice and systems, it is important that all remedial measures are clearly documented, acted upon and monitored. When staff are asked to provide accounts during an investigation, they should be asked to provide details of any action or procedural change that may be made as a direct result of the complaint. The relevant director will be responsible for agreeing to any procedural changes and developing action plans in conjunction with the Board of Directors if the plan is relevant to more than one directorate and for monitoring adherence to them and their effectiveness. Action plans should be developed after the completion of the investigation into the complaint.

When a complaint involves care provided by several organisations, the Registered Manager will liaise with those organisations to identify the most appropriate handling process for the investigation and who will lead on co-ordinating the complaint.

### **Details of Complaints which Warrant Professional Disciplinary or Criminal Investigation**

Complaints involving professional misconduct, poor performance, theft, assault, wilful negligence, or abuse will be passed on to the Chief People, Quality & Compliance Officer and the Board of Directors for consideration and possible action.

### **Complaints about Members of Staff**

Where complaints are expressed against a staff member, the following process should be followed (except where professional, disciplinary or criminal investigation is warranted). Advice in this regard can be sought from the NHS Counter Fraud Champion.

When a complaint is received regarding a member of staff, information should be obtained from the member of staff via interview or statement. The member of staff's line manager will then be asked to review this. Following review by the line manager, actions such as counselling, supervision or training should be initiated by the line manager as appropriate.

### **Complaints Involving Other Organisations**

Where a complaint is received involving a local healthcare partner, wherever possible, a joint investigation should be carried out with the complainant's permission. The Registered Manager dealing with the complaint should contact the partner organisation when the complaint is received. An agreement should be reached on who will prepare the joint response, and the complainant should be advised accordingly.

### **Complaints received via the media**

MySkinDoctor will not correspond with complainants via the media. People who contact the local press to complain about the care they or their relatives have received should be advised to contact the complaints department if they wish to pursue a formal complaint against MySkinDoctor.

The Registered Manager will work with the Executive Board to prepare statements on specific issues where this is considered to be appropriate.

### **What cannot be investigated as a formal complaint**

The formal complaints process will be suspended if:

- The complainant expresses an intention to pursue a legal claim against MySkinDoctor.
- The complaint concerns a staff member who may be subject to disciplinary proceedings relating to the issue raised in the complaint.

In either of the above circumstances, the complainant will be notified in writing that the complaints procedure has been suspended and that the matter is being dealt with in accordance with medico-legal or human resources policies and procedures. There will be ongoing liaison with the complainant where appropriate.

## **Performance Standards for Stage 1**

MySkinDoctor has set the following performance standards:

- The Complaints Manager must acknowledge formal Complaints on the first working day after receipt (usually within 3 days). If this is not achieved, an explanation for the delay should be included in the complaint file.
- MySkinDoctor's target timescale for responding to formal complaints is **twenty** working days unless the matter is complex (e.g., involving other organisations), in which case the target time will be agreed with the complainant.

MySkinDoctor recognises that achieving this is not always possible, particularly when a complaint is complex. However, it is the responsibility of MySkinDoctor to ensure that timescales set out in this 'Complaints Policy' are adhered to wherever possible.

## **Performance Standards for Stages 2 and 3 (Privately-funded / PMI complaints – ISCAS Code)**

### **Stage 2 – Internal Review (ISCAS Code)**

Where a privately-funded / PMI complainant remains dissatisfied following the Stage 1 response, they may request a Stage 2 Internal Review in writing within the timescales set out in this Policy. Stage 2 will be conducted by the Chairman of the Board (or nominated independent senior reviewer) who was not involved in the matters complained of and was not involved in the Stage 1 response.

MySkinDoctor will acknowledge a Stage 2 request promptly and will aim to provide the Stage 2 outcome in writing within twenty working days, unless the matter is complex, in which case a revised timescale will be agreed with the complainant.

The Stage 2 outcome will confirm whether the complaint is upheld (in whole or in part), what remedy is offered (if any), what learning has been identified, and what actions MySkinDoctor will take.

### **Deadlock and Stage 3 – ISCAS Adjudication**

Where Stage 2 is completed and the complaint remains unresolved (deadlock), MySkinDoctor will issue a "deadlock" letter confirming that the complainant is entitled to escalate their complaint to Stage 3 ISCAS adjudication, which is free of charge to the patient.

Where the complainant chooses to escalate to Stage 3, MySkinDoctor will cooperate with ISCAS and will provide the Stage 3 complaint file as required. The ISCAS adjudication decision is the final stage of the ISCAS process.

### **Handling of persistent complainants**

Persistent or habitual complainants can cause significant problems for the organisation regarding staff time and emotional stress. Such complainants tend to make frequent complaints, but each one is distinct. The amount of time taken to investigate each issue should be determined by the seriousness of the issue and not by the type of complainant. Therefore, in some instances, only a brief response may be required, while in others, a more detailed explanation will be needed.

At the same time, MySkinDoctor has a duty to protect staff against outright abuse of their person or time. It is necessary to identify unreasonably persistent complainants and have a procedure for dealing with this in place.

A persistent or habitual complainant may meet one or more of the following criteria:

- Is in frequent contact with the complaints department, sometimes making daily contact
- Will contact the department by telephone or in-person despite having been given a date for a meeting or advised of the timescale for a written response
- Is aggressive or abusive towards staff
- Is adamant their concerns have not been addressed despite having received detailed responses
- Having received a response, contact the complaints department immediately with a new set of questions or present the original problem in a different way
- Changes the complaint or what they want to achieve part-way through the process
- Dictates who they will speak to and/or meet with
- Seeks an unrealistic outcome and intends to pursue the complaint until that is achieved.

A complainant may meet some or all of the above criteria; the final decision about what action to take will rest with the Board of Directors. In all cases where a complainant is classified as being 'unreasonably persistent', a letter will be sent to them explaining why their behaviour is believed to fall into that category and what action MySkinDoctor is taking. The options are most likely to be:

- Requesting that they contact MySkinDoctor in a particular form (e.g. by letter only)
- Requesting that they contact one particular named person
- Restricting their telephone calls to specific days and times and/or;
- Asking them to enter into an agreement about their future behaviour.

Where the complainant fails to comply with the above and continues to behave unreasonably, MySkinDoctor may decide to terminate further contact with the complainant. The Chairman will advise the complainant of this in writing. Any further correspondence received will be read but not acknowledged unless there are new issues of concern.

The Registered Manager will assess new complaints received from people who have been dealt with under the Persistent Complainants Policy and deal with them as appropriate.

### **Process for monitoring compliance with this Procedure**

The Registered Manager will provide a quarterly report to the Board of Directors detailing the progress of management for any complaint received in the year (and any open complaints from the previous year). The report will show compliance with the complaints process by indicating the identification of the lead for preparing a response and the timeliness of the response. It will detail lessons learned and actions taken or planned in response to the complaint.

For privately-funded / PMI complaints managed under the ISCAS Code, the quarterly report will also include the number and status of Stage 2 Internal Reviews, any complaints escalated to Stage 3 ISCAS adjudication, outcomes, themes, learning and service improvement actions. MySkinDoctor will maintain sufficient evidence to demonstrate annual compliance with the ISCAS Code to ISCAS, including competence and capacity of relevant personnel and provision of patient-facing materials explaining the three stages of the Code.

The Registered Manager will report assurance of compliance with the procedure to the Board of Directors and, if necessary, refer any matters arising from complaints to the Board of Directors for action. The Complaints Manager will monitor changes agreed upon because of feedback from complaints.

**References:**

Independent Sector Complaints Adjudication Service (ISCAS): [www.iscas.cedr.com](http://www.iscas.cedr.com)  
[www.iscas.org.uk](http://www.iscas.org.uk)

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 [http://www.opsi.gov.uk/si/si2009/uksi\\_20090309\\_en\\_1](http://www.opsi.gov.uk/si/si2009/uksi_20090309_en_1)

Department of Health (2009) Listening responding and improving healthcare

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_095408](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_095408)

National Patient Safety Agency. (2005). Patient Briefing - Saying Sorry When Things Go Wrong. London, National Patient Safety Agency.

National Patient Safety Agency. (2005). Being Open Communicating The Data Protection Act 2018

Information. Available at: [www.opsi.gov.uk](http://www.opsi.gov.uk)

Freedom of Information Act 2000 London: Office of Public Sector Information. Available at: [www.opsi.gov.uk](http://www.opsi.gov.uk)

## Appendix A: Equality Impact Assessment

1. Does this Procedure, function or service development affect patients, staff and/or the public?

**YES / NO**

2. Is there reason to believe that the Procedure, function or service development could have an adverse impact on a particular group or groups?

**YES / NO**

3. If you answered **YES in section 2**, how have you reached that conclusion?

*(Please refer to the information you collected e.g., relevant research and reports, local monitoring data, results of consultations exercises, demographic data, professional knowledge and experience): N/A*

4. Based on the initial screening process, now rate the level of impact on equality groups of the Procedure, function or service development:

**Negative / Adverse impact: Low**

(i.e. minimal risk of having, or does not have, a negative impact on equality)

Date completed: 11/10/2025

Name: Adam Harding

Job Title: Chief Operating Officer

## **Appendix B: Process for handling formal complaints**

Process for Handling Formal Complaints:  
(target timetable)

### **Day 1**

Receipt of complaint

### **First working day of registered manager, after receipt of a complaint**

The Complaints Manager acknowledges receipt and advises the complainant of the process and Timescales

### **First working day of Registered Manager, after receipt of a complaint**

The Complaints Manager logs the complaint, sends details to the complaint's lead in the relevant Directorate with the request that they investigate the complaint and sends details of the investigation, including any reports obtained, to MY SKIN DOCTOR's Executive Board, within two weeks\* of the complaint having been registered.

The response should clearly state whether elements of the complaint are upheld or not. If a complaint is upheld, state what lessons will be learned from it and what actions the service will take.

\*Giving a leeway of up to three weeks

### **By Day 20**

Complaints investigation completed\*

Registered Manager formulates response for the Board of Directors

The proposed response to the complainant is checked for accuracy and approved by the Executive Board.

\*If report/statement(s) is not available, the appropriate Director is advised so that they can chase the response.

### **Day 22-24**

Final revision of the response.

If there is an unavoidable delay so that the response cannot be completed within 25 days, the Registered Manager will contact the complainant to inform them of the expected timescale

### **By Day 25**

Finally, the approved letter is signed by the Registered Manager and posted to the complainant.

## **ISCAS Code (Privately-funded / PMI complaints) – Stage 2 and Stage 3 escalation**

### **Stage 2 – Internal Review**

If the complainant remains dissatisfied following the Stage 1 response, they may request a Stage 2 Internal Review in writing within six months of the Stage 1 response.

The Stage 2 review will be undertaken by the Chairman of the Board (or nominated independent senior reviewer) who was not involved in the matters complained of and was not involved in the Stage 1 response.

MySkinDoctor will aim to issue the Stage 2 response within twenty working days of receipt of the Stage 2 request, unless the matter is complex and an alternative timescale is agreed with the complainant.

**Stage 3 – ISCAS Adjudication (where deadlocked)**

If the complaint remains unresolved following Stage 2 (deadlock), MySkinDoctor will issue a Stage 2 “deadlock” letter confirming the complainant’s right to refer the complaint to ISCAS for Stage 3 adjudication within six months of the Stage 2 response.

The Complaints Manager will compile and securely provide the Stage 3 complaint file to ISCAS as required. Stage 3 adjudication is free of charge to the patient; MySkinDoctor is responsible for Stage 3 costs as set by ISCAS.

## Appendix C: Guidelines for staff on preparing a report

### Guidelines for staff on preparing a report for an internal investigation or in response to a complaint, legal claim or other formal investigation

You may be required to prepare a factual account of your involvement in the care of a patient for a variety of purposes. These can be:

- As part of an internal investigation following an incident
- In response to a letter of complaint
- In response to an indication that a patient or relative is considering legal action against MySkinDoctor.
- In response to a request from a patient or patient's advisor in relation to a third-party matter

In all cases, there are some basic principles that should be followed:

- a report (or indeed a letter) once signed and 'on the record' is difficult to retract.
- Such a report does not form part of the clinical records; however, the patient usually has the right to see a copy under the Data Protection Act 2018.
- The granting of 'legal professional privilege' (i.e. preventing the patient from obtaining a copy of a report) is only possible once there is a clear indication that a patient/relative is suing and the 'primary purpose of such a report is in support of a defence of a case.
- Following an adverse event or a serious complaint, there will now be an expectation that a report will be prepared, and therefore, such reports are likely to be seen by the patient on request.

Therefore, the following guidelines should be adopted whenever you are called to write a report:

1. Do not write in haste or from memory. Ensure that you have the available factual evidence to hand (i.e. clinical notes/other records relating to the patient).

2. Start your report in the following way *I am Dr/Ms/Mr/Mrs.....(full name).*

*I hold the qualifications of ..... I am currently in the post of, a post that I have been in since.....* If you are not still in the post that you held at the time of the event provide details of that post and your role on the day in question, e.g. *Dermatology Nurse* If you are a trainee/recently qualified briefly describe the relevant experience that you had had up to the event.

3. Consider carefully what you write, stick to the facts you are certain of, and do not stray into areas of practice outside your area of expertise.

4. Account for your actions. Think of the report as relating your thought processes - why you wrote what you did, how you arrived at your diagnosis and treatment plan. Do not simply regurgitate the clinical record.

5. Do not be afraid to be over-detailed. If it is fact, then it can only help.

6. If, in the clinical record, you used any acronyms or diagrams, explain them.

7. If you genuinely cannot remember the patient/episode of care, then it is acceptable to state this, e.g., "I only have a hazy recollection of this patient/this event, and therefore, I am making this record from the records that I and colleagues made at the time and my usual practice. Be clear in

such situations to state whether you are interpreting the records without direct memory or just stating your usual practice.

### **Keep it factual**

Concentrate on what was done and by whom. Do not stray into what might have happened.

**Do not record opinions** in such an account. Usually, at the early stages of an investigatory process, your opinions as to what went wrong are best kept to yourself or discussed verbally with the investigator when your factual account is complete.

If you are inexperienced at preparing such a report, seek advice from the Registered Manager, who may access legal advice on your behalf if required. Present the team with a draft; do not sign it until you have obtained advice. When the final version is complete, destroy drafts, or they may become part of the legal documentation. (Drafts, if not destroyed, can be requested as disclosable documents).