

# Concerns and Complaints Management Protocol

*To describe the process of effective  
Concerns and Complaints Management*

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**CONCERNS AND COMPLAINTS MANAGEMENT PROTOCOL**

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## DOCUMENT HISTORY

### Revision History

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25 February 2016	2	Corporate Governance Manager	Approved revised version 2016
9 May 2017	3	Tim Knifton/ Roxann Davies	Approved revised version 2017
14 May 2018	4	Roxann Davies	Annual revision for 2018
August 2023	5	Peter Stephenson/Roxann Davies	Revision to bring up to date with current arrangements

### Reviewers

This document requires the following reviews:

Date	Version	Name	Position
25 May 2017	3	Senior Management Team	Approval
24 May 2018	4	Senior Management Team	Approval
26 January 2024	5	Senior Leadership Team	Approval

### Authorisation

Signing of this document indicates acceptance of its contents.

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Approver's Name:	Senior Leadership Team		
Role:	Final approver		
Signature:			Date:

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**EXECUTIVE SUMMARY**  
**Concerns And Complaints Management Protocol**

<b>Overview:</b>	This document sets out the arrangements by which the NHS Wales Shared Services Partnership (NWSSP) will manage complaints in order to meet the requirements of the Code of Practice on Openness in the NHS (1995), the NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011), Welsh Government Putting Things Right Guidance on Dealing with Concerns about the NHS (Version 3 November 2013), Public Services Ombudsman for Wales Act (April 2019), Health and Social Care (Quality and Engagement) (Wales) Act 2020 ( <i>particularly Part 2 – Duty of Quality and Part 3 – Duty of Candour</i> ) and in accordance with the Velindre University NHS Trust Handling Concerns Policy and Concerns Toolkit.
<b>Who is the Protocol Intended for:</b>	All Staff, particularly staff nominated in handling concerns and complaints. NWSSP has a Protocol in order to advise staff and provide a strategy for the handling and investigation of concerns and complaints. This document details the specific process by which NWSSP operates the main requirements of the Putting Things Right process.
<b>Key Messages included within the Protocol:</b>	NWSSP is committed to dealing with complaints in an open, accessible, and fair manner. The process set up for the investigation and handling of concerns and complaints ensures: <ul style="list-style-type: none"> <li>• There is an established single point of entry for the submission of complaints;</li> <li>• Complaints are thoroughly investigated in an open and efficient manner;</li> <li>• Where local concerns have been escalated to a complaint, these are handled efficiently;</li> <li>• The person raising the concern or complaint is treated with respect and courtesy at every stage;</li> <li>• Expectations of the person raising the concern or complaint are established and involved within the process as identified; and</li> <li>• The person raising a concern or complaint to NWSSP will receive a timely and appropriate response to their complaint and is kept informed if there is a delay in response.</li> </ul>
<b>PLEASE NOTE THIS IS ONLY A SUMMARY OF THE PROTOCOL AND SHOULD BE READ IN CONJUNCTION WITH THE FOLLOWING FULL DOCUMENT</b>	

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### 1. Introduction

This document sets out the arrangements by which NHS Wales Shared Services Partnership (NWSSP) will manage concerns and complaints in order to meet the requirements of the Code of Practice on Openness in the NHS (1995), the NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011), Welsh Government Putting Things Right Guidance on Dealing with Concerns about the NHS (Version 3 November 2013), Public Services Ombudsman for Wales Act (April 2019), Health and Social Care (Quality and Engagement) (Wales) Act 2020 (*particularly Part 2 – Duty of Quality and Part 3 – Duty of Candour*) and in accordance with the Velindre University NHS Trust Handling Concerns Policy and Concerns Toolkit.

### 2. Definitions

Key terms used in the Protocol are defined as follows:

- **NWSSP** – NHS Wales Shared Services Partnership.
- **Concern** - Incident or expression of dissatisfaction that does not require a formal response.
- **Complaint** - An expression of dissatisfaction made towards NWSSP, related to its services, or the complaint-handling process itself, where a response or resolution is explicitly or implicitly expected. A flow chart of the process is shown at **Appendix 1**.
- **Complainant** – A person notifying NWSSP of a concern or complaint.
- **Resolution**- The solution provided by NWSSP that is acceptable to the complainant.
- **Early Resolution Complaint** – Concerns or complaints which are raised and dealt with, to the satisfaction of the complainant within 48 hours, are referred to as having been dealt with on the spot and will be recorded as “early resolution complaints”. It is important for staff to check if the complainant is satisfied with the immediate actions taken to resolve the concern or complaint, as if they are not, then the matter should proceed to a formal complaint. A flow chart of the process is shown at **Appendix 2**.
- **Working Day** – Monday to Friday (excluding Bank Holidays).

### 3. Purpose and Scope

The vision as set out by NWSSP is “Delivering Value, Innovation and Excellence through Partnership”. NWSSP is committed to the delivery of high-quality services to its customers in which developing customer insight and a customer focused culture is a key corporate objective. It is therefore essential to have an

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effective Concerns and Complaints Management Protocol for all NWSSP staff to follow when the organisation fails to provide a high-quality service and/or does not satisfy the service user's expectations.

### 4. Roles and Responsibilities

**Responsible Officer - The Managing Director of NWSSP** - Has overall responsibility for dealing with concerns and complaints relating to NWSSP that comply with the above Legislation, Regulations and Guidance.

**Director of Finance and Corporate Services** – Responsible for maintaining a strategic overview of this Protocol and its operation, this involves:

- Overseeing how organisational arrangements are operating at a local level;
- Ensuring that complaints are dealt with in compliance with the Legislation, Regulations and Guidance;
- Ensuring arrangements are in place to review the outcome of the investigation of concerns and complaints to ensure that any failures in the provision of NWSSP services are rectified, improved, monitored and lessons learned are communicated widely; and
- Ensuring that the NWSSP information on concerns and complaints is publicised on both the intranet and internet and is on display in public areas, in a bilingual format.

**NWSSP Complaints Lead: Corporate Services Manager** - Operational responsibility for the management of this Protocol and central management of all incoming communication in relation to concerns and complaints.

Ensures arrangements are in place to:

- Deal with concerns and complaints in line with this Protocol and the Putting Things Right Guidance;
- Ensure that the principles of this Protocol are followed, including Putting Things Right Guidance;
- Provide for concerns and complaints to be dealt with under a single governance arrangement;
- Follow a standardised approach to concerns and complaints;
- Develop an integrated investigation framework for NWSSP to standardise its approach to concerns and complaints;
- Ensure systems are in place to evaluate the quality and timeliness of investigations;
- Administration and recording of concerns and complaints using an established system to ensure quality and timeliness of investigations;
- Ensuring an Annual Report is prepared summarising all concerns and complaints, from all services, to include the presentation of the timeliness of response in accordance with compliance targets set;
- Review of any processes followed and reviewer of the initial draft formal written response, before final approval by the Director of Service, for release; and

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## Concerns and Complaints Management Protocol

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- Act as a central contact when following the Concerns and Complaints Management Protocol and a key contact for the complainant.

**NWSSP Directors of Service** – Local responsibility for addressing concerns and complaints relating to their directorate and ensuring that guidance given by the Complaints Lead in reference to the Protocol is followed. They are responsible for overseeing the consideration of concerns and complaints received that have been sent to them directly or indirectly from the Complaints Lead. They may be supported by senior managers within their directorate. Direction will be given by the Complaints Lead, as required.

The main duties are:

- Responsible for the consideration of concerns and complaints relating to their directorate;
- Implementation of processes to ensure compliance with the Protocol that needs to include working in conjunction with the NWSSP Complaints Lead;
- Identify contributory factors and root causes of concerns and complaints to ensure a satisfactory resolution is reached to a concern or complaint and implement necessary identified remedial actions that are monitored for effectiveness;
- Feedback given to the NWSSP Complaints Lead as to lessons learned from complaints being investigated; and
- Provision of investigation outcomes or reasons to the NWSSP Complaints Lead in conjunction with providing a draft formal response to the Complaints Lead to approve and issue a final response to the complainant.

**All members of NWSSP staff**– All staff have a responsibility to comply with this Protocol. They must be aware of organisational policies and procedures to ensure they know where to direct concerns and complaints if they are received within their directorate. In addition to the above, staff also have a responsibility to:

- Treat persons notifying and reporting concerns with respect, dignity, and courtesy;
- Co-operate fully and openly in the investigation of concerns;
- Address issues and concerns as they arise and escalate for assistance, if unable to manage the matter;
- Attend incident/concerns training and Datix training pertinent to their roles and responsibilities;
- Ensure that safety incidents that they are aware of, are reported, no matter how minor they might appear;
- Ensure awareness of NWSSP's arrangements for handling concerns, in all formats;
- Be open, honest, and transparent; and
- Adhere to this Protocol and supporting procedures.

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### 5. Training

NWSSP will provide awareness training for key staff to assist them in investigating concerns and complaints relative to their directorates and in line with this Protocol.

### 6. Principles for Handling and Investigation of Complaints

NWSSP is committed to dealing with concerns and complaints in an open, accessible, and fair manner. The process followed for the investigation and handling of these ensures:

- There is an established single point of entry for the submission of concerns and complaints;
- Concerns and complaints can be made through a variety of routes. For example, a social media platform, electronically sent, verbally or written. This includes in Welsh or English or another language, if requested by a complainant;
- Concerns and complaints are thoroughly investigated in an open, fair, and efficient manner;
- The complainant is treated with respect and courtesy at every stage;
- Expectations of the complainant are established, and their concern or complaint investigated thoroughly with their involvement sought as required; and
- The complainant will be advised that the Complaints Lead in NWSSP Corporate Services will act as their contact throughout the handling of the concern or complaint unless technical expertise is sought from a more suitable member of staff (e.g. legal services).

The complainant will receive a timely and appropriate response to their complaint and is kept informed if there is a delay. In accordance with the relevant Legislation, Regulation and Guidance, and Velindre University NHS Trust Handling Complaints Policy:

- Acknowledgement of a complaint is to be made **within 2 working days** to the complainant; and
- A formal response to a complaint is to be issued **within 30 working days** of the date of acknowledgement, unless it will take longer to investigate, in which case the complainant will be notified of this.

### 7. Dealing with Receipt of Complaints

Complaints are to be received by the Corporate Services Manager at a single point of entry. The advertised point of contact is:

NHS Wales Shared Services Partnership  
Corporate Services - Complaints  
4-5 Charnwood Court  
Heol Billingsley, Parc Nantgarw  
Cardiff CF15 7QZ

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Telephone: 01443 848585  
Email: [NWSSP.Complaints@wales.nhs.uk](mailto:NWSSP.Complaints@wales.nhs.uk)  
Twitter: @NWSSP

If complaints are received directly to a directorate within NWSSP, the communication is to be sent to the Complaints Lead before an investigation is to take place at [NWSSP.Complaints@wales.nhs.uk](mailto:NWSSP.Complaints@wales.nhs.uk).

This is to ensure that the complaint is managed according to this Protocol and in accordance with Velindre University NHS Trust's Handling Concerns Policy and to ensure that there is accurate recording of the number of complaints received by NWSSP. The investigation of individual complaints will then be handed to the appropriate Head of Service to conduct an investigation. Flow charts of the complaints handling processes are shown at **Appendices 1 and 2**.

The Complaints Lead will log complaints on to a central register in order to keep track of complaints received thus ensuring accurate reporting for the Annual Governance Statement and to inform specific Committees and Forums.

We understand that there may be members of the community who may wish to raise a concern but might not feel able to do so. Staff should be mindful of the issues which might act as a barrier to people raising a concern and look for ways to assure people that it is safe for them to do so.

### **8. Who Can Raise a Complaint?**

NWSSP has a duty to consider all those that are received and whether they can be investigated. Complaints can be raised by:

- People who are receiving or who have received services from NWSSP;
- People affected or likely to be affected by the actions or decisions of NWSSP;
- Staff members – considered on individual merit;
- Independent members;
- Partners;
- Members of the Senedd;
- A third party acting on behalf of a person who is unable to raise a complaint (e.g. a child or someone who lacks capacity to act on their own behalf under the Mental Capacity Act 2005; or because that person wants someone else to represent them); and
- A third party on behalf of a person who is since deceased.

### **9. Who cannot raise a complaint under these arrangements**

Not all complaints can be dealt with under the arrangements detailed within this Protocol, matters excluded are:

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- Where the matter is not within the remit, jurisdiction, or gift of NWSSP to investigate.
- Complaints where a member of staff has an issue with their employment contract. These matters would be dealt with under the organisation's People & Organisational Development (POD) policies and procedures;
- Complaints relating to products or services procured by NWSSP. This should be managed under Procurement Services Procedure PS-CO14, to ensure that quality and patient safety issues are identified, and the appropriate bodies notified;
- Specific complaints procedures apply in regulated areas (e.g. in regards to complaints relating to solicitors within Legal and Risk Services, complainants should follow the Lexcel Complaints Guidance);
- Where the complaint is being, or has been, investigated by the Public Services Ombudsman for Wales;
- Where NWSSP has not complied with the Freedom of Information (FOI) Act (2000), Data Protection Act (2018), or Environmental Information Regulation (2004), such complaints would be dealt with by the Information Commissioner's Office (ICO), after local investigation by the NWSSP Information Governance Manager;
- Disciplinary proceedings identified as a result of the complaints investigation. These would be considered under local People & Organisational Development (POD) processes;
- Where a complainant tries to re-open the same concern or complaint that they have already agreed was dealt with satisfactorily as an "early resolution complaint". Unless NWSSP considers the addition of new information qualifies for further investigation and has been escalated as a complaint.

### **10. Time limits for notification of a concern**

A concern or complaint can be notified no later than 12 months from the date on which it occurred; or if later, 12 months from the date the person raising the concern realised they had a concern.

To investigate a matter after the 12-month deadline, NWSSP will consider whether the person raising the concern had good reason not to notify the concern earlier and whether, given the time lapse, is it still possible to investigate thoroughly and fairly.

The discretion to consider a concern that has been notified outside the 12-month period is subject to the provisions of Regulation 15(3) and is contained within the All-Wales Guidance for Handling Concerns.

### **11. Complaints which involve more than one responsible body**

The vast majority of concerns received are likely to be about services provided by NWSSP. However, there will be occasions where the matter in question involves services provided by more than one responsible body.

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If NWSSP receives a concern or complaint that involves another responsible body, consent should be sought from the person raising the matter to notify the other responsible body that they are involved. This should be achieved **within two (2) working days** of first receipt. NWSSP will advise the second responsible body **within two (2) working days** of receiving the consent from the complainant.

Where a concern or complaint is received by another responsible body but includes questions to be answered by NWSSP, an investigation will then be undertaken, and the reply sent to the other responsible body involved. In such instances, NWSSP's Responsible Officer will request sight of the final response prior to it being sent to the complainant, in line with current practice.

Should another responsible body receive a concern or complaint that relates to services/work undertaken by NWSSP then the Complaints Lead will liaise with the other responsible body to agree the individual roles and responsibilities for the investigation, going forward.

### 12. Welsh Language

It is important to remember that complainant's may wish to communicate and express their concerns and needs effectively, through the medium of Welsh. Upon establishing the need for communicating in Welsh, we will ensure:

- All written communication is provided in Welsh;
- Arrange Welsh interpretation for over the phone or face-to-face meetings; and
- Adopt a proactive approach to language choice and need in Wales by:
  - Ensuring the language needs of Welsh speakers are met;
  - Ensuring Welsh language provision/services for those who need it; and
  - Demonstrating that language plays an important part in the quality of care.

### 13. Vexatious Complaints

Habitual and/or vexatious complaints, whilst few in number, can present real difficulties for NWSSP staff in dealing with these types of complaints. The difficulty in handling such complaints is that they have the potential to place strain on time and resources and can cause undue stress for staff that result in the need for support in handling this type of complaint. Whilst NWSSP staff aim to respond with understanding, patience, and sympathy to the needs of all complainants, there are times when there is nothing further that can be reasonably done to assist or to rectify a real or perceived problem reported to the organisation.

Complainants (and/or anyone acting on their behalf) may be deemed to be habitual or vexatious complainants where previous or current contact with them

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shows that they meet **TWO OR MORE** of the following criteria. This is where a complainant:

- Persists in pursuing a complaint when the NHS Complaints Procedure has been fully and properly implemented and exhausted (including where investigation has been denied as "out of time").
- Seeks to prolong contact by raising further concerns or questions upon receipt of a response. It is worth noting that care must be taken not to discard new issues which are identified as significantly different from the original complaint. These might need to be addressed as separate complaints.
- Is unwilling to accept documented evidence of treatment given as being factual or denies receipt of an adequate response in spite of correspondence specifically answering their questions or does not accept that facts can sometimes be difficult to verify when a long period of time has elapsed.
- Does not clearly identify the precise issues which they wish to be investigated, despite reasonable efforts of NWSSP staff and, where appropriate, Independent Complaints Advocacy Service (ICAS) to help them specify their concerns, and/or where the concerns identified are not within the remit of NWSSP to investigate.
- Focuses on a trivial matter to an extent which is out of proportion to its significance and continue to focus on this point. It is recognised that determining what is a 'trivial' matter can be subjective and careful judgement must be used in applying these criteria.
- Has had, in the course of addressing the complaint, an excessive number of contacts with NWSSP, placing unreasonable demands on staff time or resources. A contact may be in person or by telephone, letter, email, or fax. Judgement must be used in determining what is an "excessive number" of contacts and this will be based on the specific circumstances of each individual case.
- Has harassed, been personally abusive or verbally aggressive on more than one occasion towards NWSSP staff dealing with their complaint, their families, or associates. However, staff must recognise that complainants may sometimes act out of character at times of stress, anxiety, or illness.
- Has recorded meetings or face-to-face/telephone conversations without informing the NWSSP staff involved in dealing with their complaint and gaining their consent before recording such communications.
- Communicates and displays unreasonable demands or expectations on NWSSP staff and fails to accept that these requests may be unreasonable (e.g. demands that a response to a complaint is provided urgently in a timescale that is unreasonable or outside normally recognised practice).

When complainants have been identified as vexatious or habitual by a consensus within NWSSP Corporate Services and in consultation with the appropriate Director or Head of Service (those who may have been involved in vexatious complaints), and in accordance with the above criteria, the Responsible Officer will decide what action to take. The Responsible Officer will implement such action and notify complainants promptly and in writing the

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reason why they have been classified as vexatious or habitual and the action that will be taken.

The notification must be copied promptly to supply those individuals already involved in the investigation with the necessary information. A record must be kept, for future reference, of the reasons why a complainant has been classified as vexatious or habitual and the actions taken.

The Responsible Officer may decide to deal with habitual or vexatious complainants in one of the following ways:

- Once it is clear that a complainant meets any of the criteria above, it may be appropriate to inform them in writing that they are at risk of being classified as habitual or vexatious.
- A copy of this guidance note should be sent to them and they should be advised to take into account the criteria outlined when dealing with NWSSP in the future. In some cases, it may be appropriate to copy this notification to others involved in the complaint. It may also be suggested that complainants seek advice in taking their complaint further (e.g. the Independent Complaints Advocacy Service - ICAS).
- Try to resolve matters before invoking this procedure, and/or the sanctions detailed within it, by drawing up a Signed Agreement with the complainant. This arrangement should set out an agreed "Code of Behaviour" for all the parties involved to allow NWSSP to continue dealing with the complaint. If this agreement is breached consideration would then be given to implementing other actions as outlined below:
  - Decline further contact with the complainant either in person, by telephone, fax, letter or electronically, or any combination of these, provided that one form of contact is maintained. Alternatively, further contact could be restricted to liaison through a nominated third party.
  - Inform complainants that in extreme circumstances, NWSSP reserves the right to refer unreasonable or vexatious complaints to the organisation's legal team and/or, if appropriate, the Police.
  - Temporarily suspend all contact with the complainant(s), or the investigation of a complaint, whilst seeking legal advice or guidance from another NHS body, the NHS Executive Authority, the Department of Health, or other relevant agencies as identified.

### 14. Withdrawal of a Complaint

A complaint may be withdrawn at any time by the person who reported it. The withdrawal of the complaint can be made:

- in writing;
- electronically;
- verbally in person; or
- by telephone.

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If a complaint is withdrawn verbally, the NWSSP will write to the person as soon as possible to confirm their decision. However, even if the complaint has been withdrawn, if it is felt that the investigation of the complaint is still appropriate, NWSSP will continue this.

### 15. Acknowledging Complaints

All complaints are dealt with following the process described below and in the flowchart at **Appendix 1**.

An acknowledgement of receipt of the complaint and an offer of the opportunity to discuss the matter is sent to the complainant by NWSSP no later than **two (2) working days** after receipt. The acknowledgment may be written or electronic, dependant on how the complaint is notified.

Verbal complaints may be received anywhere in the organisation. The person taking the telephone call should take a brief description of the complaint and contact details that include the:

- Name;
- Landline or mobile telephone number;
- Email address;
- Times available to receive a call back; and
- Time call received.

Immediately after receiving the call, details of the complaint must be passed to the Complaints Lead in Corporate Services. NWSSP must acknowledge receipt of the complaint in writing within two **(2) working days** of receipt.

The acknowledgement offers an opportunity to discuss the complaint and details of:

- The manner in which the investigation will be handled; and
- The period within which:
  - the investigation of the complaint is likely to be completed; and
  - when a response is likely to be sent to that person.

### 16. Recording

Part of the management of complaints in line with this protocol is to ensure that any communication received by the NWSSP is recorded correctly. This ensures that each case is issued a unique reference number, along with the following fields:

- Type of Concern (complaint);
- Service (directorate);
- Complainant name;
- Description of concern (main body of complaint);
- Type of communication (i.e. email, letter, telephone call);

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- Date concern received;
- Date concern acknowledged;
- Deadline for response;
- Date response sent; and
- Days taken to comply.

Currently, a detailed spreadsheet containing the fields above is used to effectively manage the complaints database, to record all incidents received that can be easily referenced and reported upon as required.

### **17. Investigation of Complaints**

The delegated investigator within each directorate will be responsible for:

- The carrying out of an initial assessment to establish the facts and the parameters of the investigation required;
- The level and type of support required by any member or members of NWSSP staff involved in the matters raised by the complainant; and
- The making of decisions about the root cause of the matters, giving rise to the notification of the complaint.

NWSSP will have arrangements in place to ensure that the person who notified the organisation of the complaint is kept updated in a timely manner about the investigation in a format that meets any needs that have already been identified during initial contact.

When a complaint is raised, whether by a service user, or through a report from a member of staff, the details will be shared with the staff member named, wherever appropriate. This will be done supportively, and staff may request for a member of their professional association or Trade Union representative to be present in any subsequent meetings. Consideration will also be given under the People and Organisational Development (POD) policies as to whether a staff member may need more proactive support, such as counselling or legal advice.

### **18. Response**

The delegated investigator from the relevant directorate will prepare a written report and draft a response to the complaint under investigation for sending to the Complaints Lead that will assist in:

- Summarising the nature and substance of the matter or matters raised in the complaint; and
- Describing the investigation that had taken place.

This will also include:

- Copies of any expert opinions that the person investigating the complaint has received during the investigation;
- An apology, if required;

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- Identification on what action will be taken in light of the outcome of the investigation; and
- An offer for the complainant to discuss the contents of the response.

The response will be reviewed by the Complaints Lead and passed for signature to NWSSP's Director of Finance and Corporate Services and Head of Finance and Business Development before release.

### 19. Time Limit for Response

The Complaints Lead, must take all reasonable steps to send an approved response to the complainant within **thirty (30) working days**, that commences on the day upon which the NWSSP received notification of the complaint.

If the responsible officer is unable to provide a response within **thirty (30) working days**, they must:

- Notify the complainant accordingly explaining the reason for the delay in response; and
- Send the response as soon as reasonably practicable and **within six (6) months** of receipt.

If exceptional circumstances mean that the six-month period cannot be adhered to, the complainant must be advised of the reasons for the delay and when a response may be expected.

### 20. Monitoring

All complaints are monitored to ensure that each one has been adequately investigated and addressed, remedial actions have been put in place and lessons have been learned.

The Corporate Services department will undertake an annual review of the Complaints Handling Procedure, the results of which will be outlined in the Annual Report relating to the work around Complaints that is submitted to the Senior Leadership Group. A monthly update on the number of complaints and the timeliness of response is also submitted to the SLG.

This is to ensure that any lessons learned are highlighted, identified, and disseminated throughout the organisation, in order to improve the services provided and seek to avoid such complaints reoccurring.

For the purposes of monitoring the operation of the arrangements for dealing with complaints, NWSSP must maintain a record of the following matters:

- Each complaint notified to it;
- The outcome of each complaint;

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- The timeliness of investigating the complaint in accordance with the targets set; and
- The reasons for why any investigation has exceeded the thirty (30) day time period.

### 21. Annual Report

An Annual Report will be produced for the Shared Services Partnership Committee (SSPC), Audit Committee and Senior Leadership Group that will detail:

- An overview of arrangements in place for dealing with complaints;
- Effectiveness of the arrangements and how this may have impacted on service users and staff;
- Complaints statistics;
- Themes, trends, and key issues;
- Lessons learnt; and
- Conclusion and priorities for improvement.

### 22. Implementation and Compliance

On an ongoing basis, NWSSP will actively promote awareness and understanding of this Protocol. Directors or Heads of Service will implement this Protocol within their directorate and will ensure local procedures exist to support this Protocol. The Head of Finance and Business Development will advise and oversee the development of local procedures to ensure compliance with the Regulations.

Additionally, there will be intranet articles, newsletters, alerts, poster campaigns and dedicated awareness/training programmes as required.

### 23. References

- Code of Practice on Openness in the NHS (1995)
- NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011)
- Welsh Government Putting Things Right Guidance on Dealing with Concerns about the NHS (Version 3 November 2013)
- Public Services Ombudsman for Wales Act (April 2019)
- Health and Social Care (Quality and Engagement) (Wales) Act 2020 (*particularly Part 2 – Duty of Quality and Part 3 – Duty of Candour*)
- Velindre University NHS Trust Handling Concerns Policy
- Velindre University NHS Trust Handling Concerns Toolkit
- NWSSP's Complaints Web Page

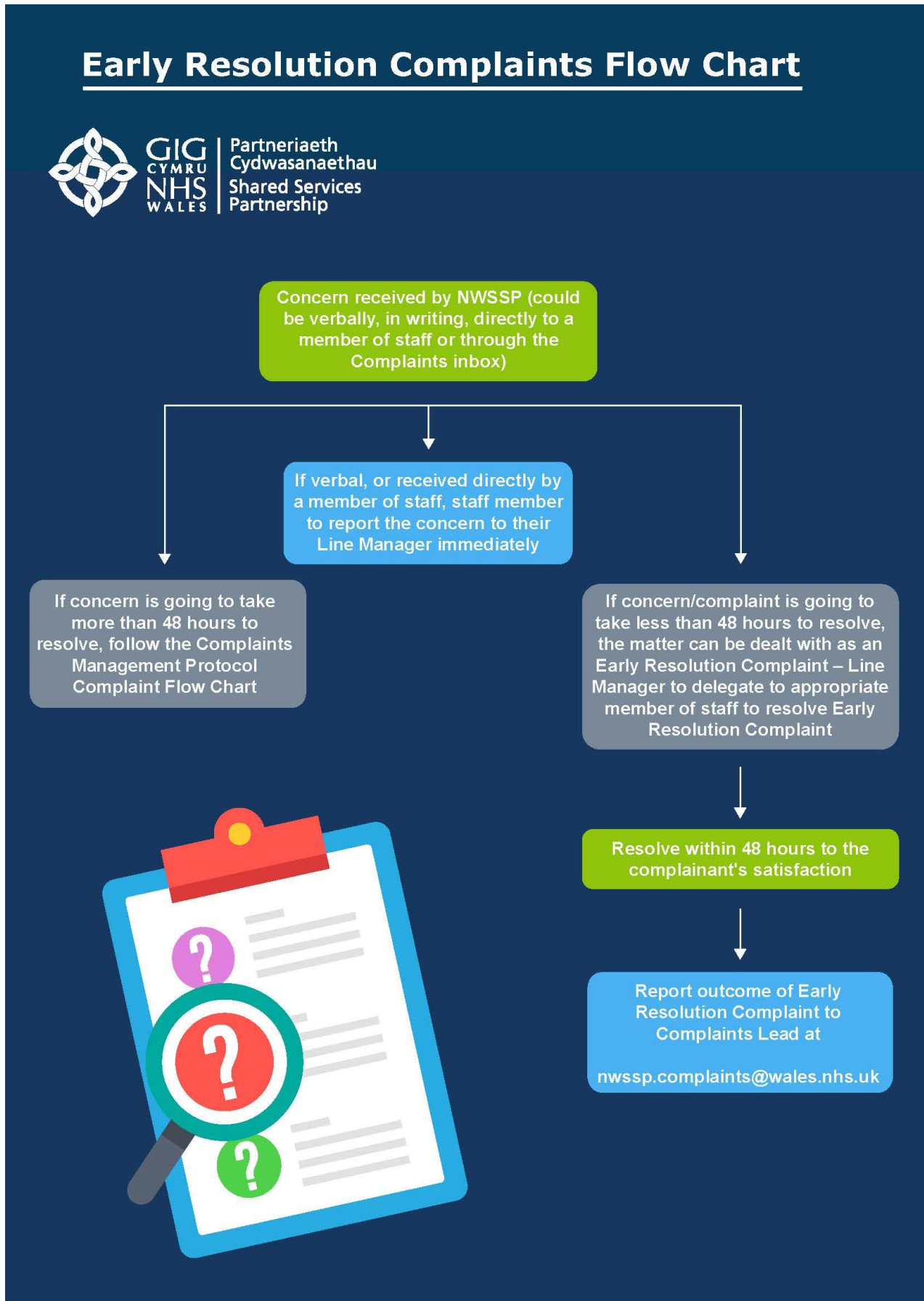
**APPENDIX 1 – CONCERNS AND COMPLAINTS FLOW CHART**



- INTERNAL -

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APPENDIX 2 – EARLY RESOLUTION COMPLAINT FLOW CHART



- INTERNAL -

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