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Partnership

Complaints Management Protocol

*To describe the process of effective
Complaints Management*

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Status: **Approved**

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COMPLAINTS MANAGEMENT PROTOCOL

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1. DOCUMENT HISTORY

1.1 Revision History

Date	Version	Author	Revision Summary
October 2015	1	Corporate Governance Manager	Approved version 2015
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

1.2 Reviewers

This document requires the following reviews:

Date	Version	Name	Position
25 May 2017	3	Senior Management Team	Approver
24 May 2018	4	Senior Management Team	Awaiting Approval

1.3 Authorisation

Signing of this document indicates acceptance of its contents.

Author's Name:	Roxann Davies		
Role:	Compliance Officer		
Signature:			Date:

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

1.4 Document Location

Type	Location
Electronic	S:\Issues & Complaints\Complaints Protocol
Hard Copy	Held with the Compliance Officer

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EXECUTIVE SUMMARY

Complaints Management Protocol

Overview:	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 NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011), Putting Things Right Arrangements and in accordance with the Velindre NHS Trust Handling Complaints Policy.
Who is the Protocol Intended for:	<p>All Staff, particularly staff nominated in handling complaints.</p> <p>NWSSP has a protocol in order to advise staff and provide a strategy for the handling and investigation of complaints. This document details the specific process by which NWSSP operates the main requirements of the Putting Things Right process.</p>
Key Messages included within the Protocol:	<p>NWSSP is committed to dealing with complaints in an open, accessible and fair manner. The process set up for the investigation and handling of complaints ensures:</p> <ul style="list-style-type: none"> • There is an established single point of entry for the submission of complaints; • Complaints are thoroughly investigated in an open and efficient manner; • Where local issues have been escalated to a complaint, these are handled efficiently; • The person raising the complaint is treated with respect and courtesy at every stage; • Expectations of the person raising the complaint are established and involved within the process as identified; and • The person raising a complaint to NWSSP will receive a timely and appropriate response to their complaint and is kept informed if there is a delay in response.
PLEASE NOTE THIS IS ONLY A SUMMARY OF THE PROTOCOL AND SHOULD BE READ IN CONJUNCTION WITH THE FOLLOWING FULL DOCUMENT	

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2. Introduction

This document sets out the arrangements by which NWSSP will manage complaints in order to meet the requirements of the NHS Concerns, Complaints and Redress Arrangements (Wales) Regulations (2011), Putting Things Right arrangements and in accordance with the Velindre NHS Trust's Handling Complaints Policy.

3. Definitions

Key terms used in the Protocol are defined as follows:

NWSSP – NHS Wales Shared Services Partnership.

Issue - Complaints which are raised and dealt with, to the satisfaction of the complainant within 24 hours, are referred to as having been dealt with "on the spot" and will be recorded as "issues". It is important for staff to check if the complainant is satisfied with the immediate actions taken to resolve the complaint, as if they are not, then they should be advised to raise a concern formally. A flow chart of the process is shown at **Appendix 1**.

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 (and which is not able to be dealt with "on the spot"). A flow chart of the process is shown at **Appendix 2**.

Complainant – A person notifying the NWSSP of a complaint.

Resolution- The solution provided by the NWSSP that is acceptable to the complainant.

Working Day – Monday to Friday (excluding Bank Holidays).

4. Purpose and Scope

The vision as set out by the NHS Wales Shared Services Partnership (NWSSP) is "To be recognised as a world class shared service through the excellence of our people, services and processes". In relation to this, NWSSP's mission statement is 'to enable the delivery of world class Public Services in Wales through customer focus, collaboration and innovation'.

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

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5. Roles and Responsibilities

Responsible Officer - The Managing Director of NWSSP - Has overall responsibility for dealing with complaints relating to NWSSP that comply with the Regulations.

Director of Finance and Corporate Services, Head of Finance and Business Development/Head of Corporate Services – Are 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 Regulations;
- Ensuring arrangements are in place to review the outcome of the investigation of complaints to ensure that any failures in the provision of NWSSP services identified are rectified, improved, monitored and lessons learned are communicated widely; and
- Ensuring that the NWSSP information on complaints is publicised on both the intranet and internet and are on display in public areas in a bilingual format.

NWSSP Complaints Lead: Compliance Officer - Operational responsibility for the management of this Protocol and central management of all incoming communication in relation to complaints.

Ensures arrangements are in place to:

- Deal with complaints in line with this Protocol and Putting Things Right arrangements;
- Ensure that the principles of this Protocol are followed including Putting Things Right arrangements;
- Provide for complaints to be dealt with under a single governance arrangement;
- Follow a standardised approach to complaints;
- Develop an integrated investigation framework for NWSSP to standardise its approach to complaints;
- Ensure systems are in place to evaluate the quality and timeliness of investigations;
- Administration and recording of complaints using an established system to ensure quality and timeliness of investigations;
- Ensuring an Annual Report is prepared summarising all 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 Head of Finance and Business Development/Head of Corporate Services for release; and

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

NWSSP Directors of Service – Local responsibility for addressing 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 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 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 complaints to ensure a satisfactory resolution is reached to a complaint and implements necessary identified remedial actions that are implemented and monitored;
- Feedback given to the NWSSP Complaints Lead and Head of Finance and Business Development/Head of Corporate Services as to lessons learned from complaints being investigated; and
- Provision of investigation outcomes or reasons to the NWSSP Complaints Lead in order for them to formally draft a response for approval 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 complaints if they are received within their directorate.

6. Training

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

7. Principles for Handling and Investigation of Complaints

NWSSP is committed to dealing with 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 complaints;
- 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;

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- 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 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 complaint unless technical expertise is sought from a more suitable member of staff (for example – 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 regulations and Velindre NHS Trust Handling Complaints Policy:

- Acknowledgement of a complaint is to be made **within 2 working days** to the complainant; and
- A 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.

8. Dealing with Receipt of Complaints

Complaints are to be received by the Corporate Services Team 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

Telephone: 01443 848585

Email: NWSSPComplaints@wales.nhs.uk

Twitter: @NWSSP

If complaints are received directly to a directorate within NWSSP, the communication is to be sent to Corporate Services Complaints, before an investigation is to take place, at the following email addresses:

NWSSPComplaints@wales.nhs.uk; or
Roxann.Davies@wales.nhs.uk

This is to ensure that the complaint is managed according to this Protocol and in accordance with Velindre 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

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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 spreadsheet in order to keep track of complaints received thus ensuring accurate reporting for the Annual Governance Statement and to inform specific Committees and Forums.

9. Who Can Raise a Complaint?

Almost anyone can raise a complaint and 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;
- A third party acting on behalf of a person who is unable to raise a complaint (e.g. a young child or someone who lacks capacity to act on their own behalf; or because that person wants someone else to represent them); and
- A third party on behalf of a person who has since deceased.

10. People 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:

- Complaints where a member of staff has an issue with their employment contract. These matters would be dealt with under the Trust's Workforce & Organisational Development (WF&OD) 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 (1998), 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;

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- Disciplinary proceedings identified as a result of the complaints investigation. These would be considered under local Workforce & Organisational Development (WF&OD) processes;
- Complaints or queries that have been raised and resolved within 24 hours, that have been dealt with on the spot and classed as an "issue"; and
- Where a complainant tries to re-open the same complaint that they have already agreed was dealt with satisfactorily as an "issue". Unless NWSSP considers the addition of new information qualifies for further investigation and has been escalated as a complaint.

11. Complaints which involve more than one responsible body

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

If NWSSP receives a complaint that involves another responsible body, consent should be sought from the person raising the complaint to notify the other responsible body that they are involved in the complaint. 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 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 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 of the complaint going forward.

12. 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 results 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.

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

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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 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 Department of Health or other relevant agencies as identified.

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13. 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.

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.

14. Acknowledging Complaints

All complaints are dealt with following the process described below and in the flowchart at **Appendix 2**.

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 letter 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.

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15. 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);
- 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. The standard template for recording complaints and issues is found at **Appendix 3**.

16. 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 Workforce and Organisational Development (WF&OD) policies as to whether a staff member may need more proactive support, such as counselling or legal advice.

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17. 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;
- 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/Head of Corporate Services, before release.

Should the complainant be dissatisfied with the process followed and the response provided, they should contact the Managing Director of NWSSP (Neil.Frow@wales.nhs.uk or by telephone on 01443 848585), within 28 days of the date of the final response issued, to request an independent review.

18. Time Limit

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.

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19. 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 Management Team.

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.

Lessons learned and outcomes are recorded, via the Complaints Recording Form at **Appendix 3**.

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;
- 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.

20. Annual Report

An Annual Report will be produced for the Shared Services Partnership Committee (SSPC), Audit Committee and Senior Management Team 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.

21. 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/Head of

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Corporate Services 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.

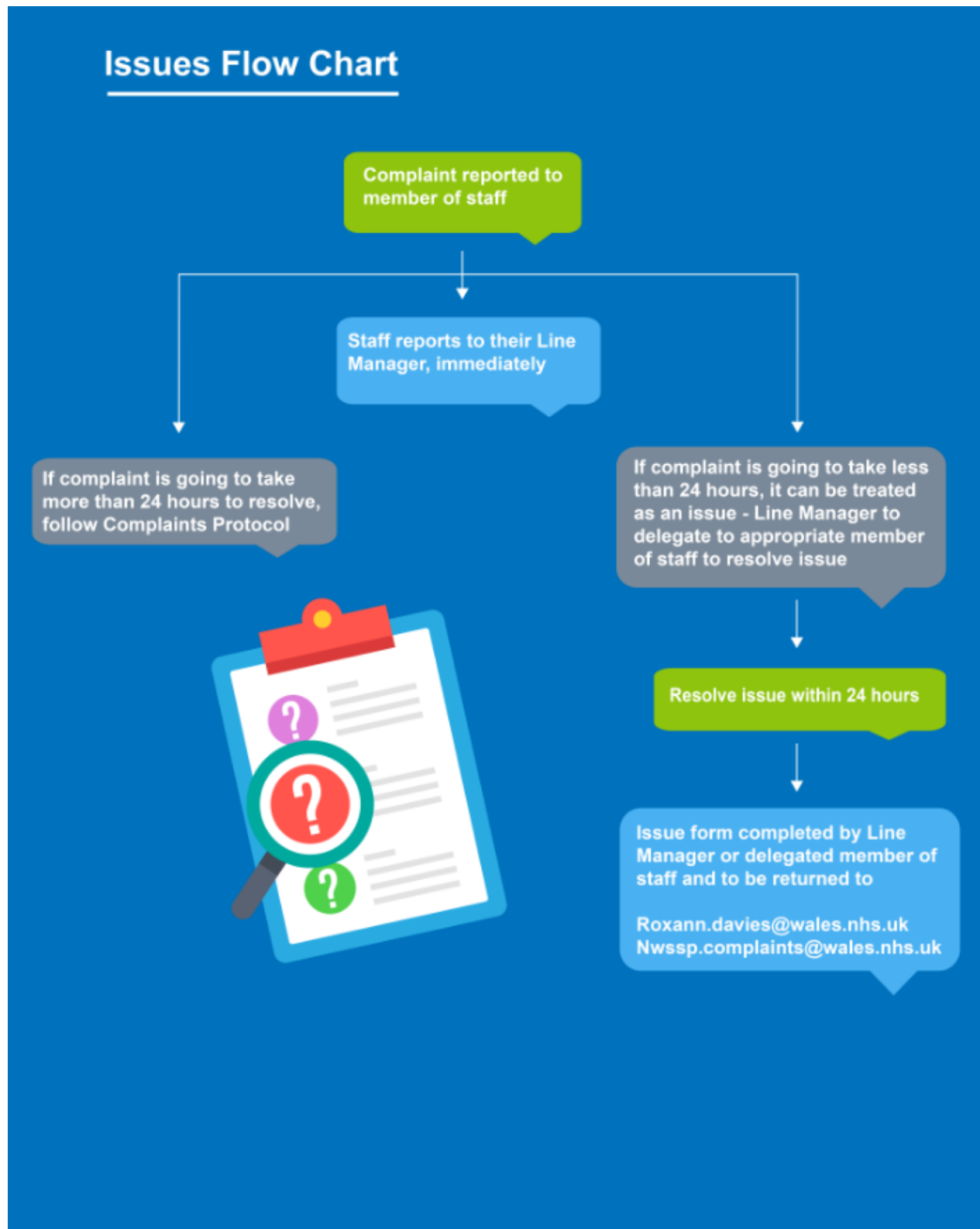
22. References

- Putting Things Right – Guidance on dealing with Concerns about the NHS from 1 April 2011, Welsh Government
- National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations (2011)
- Velindre NHS Trust's Handling Concerns Policy:
<http://howis.wales.nhs.uk/sitesplus/972/pendoc/306552>
- NWSSP's Complaints website page:
<http://www.wales.nhs.uk/sitesplus/955/page/65716>

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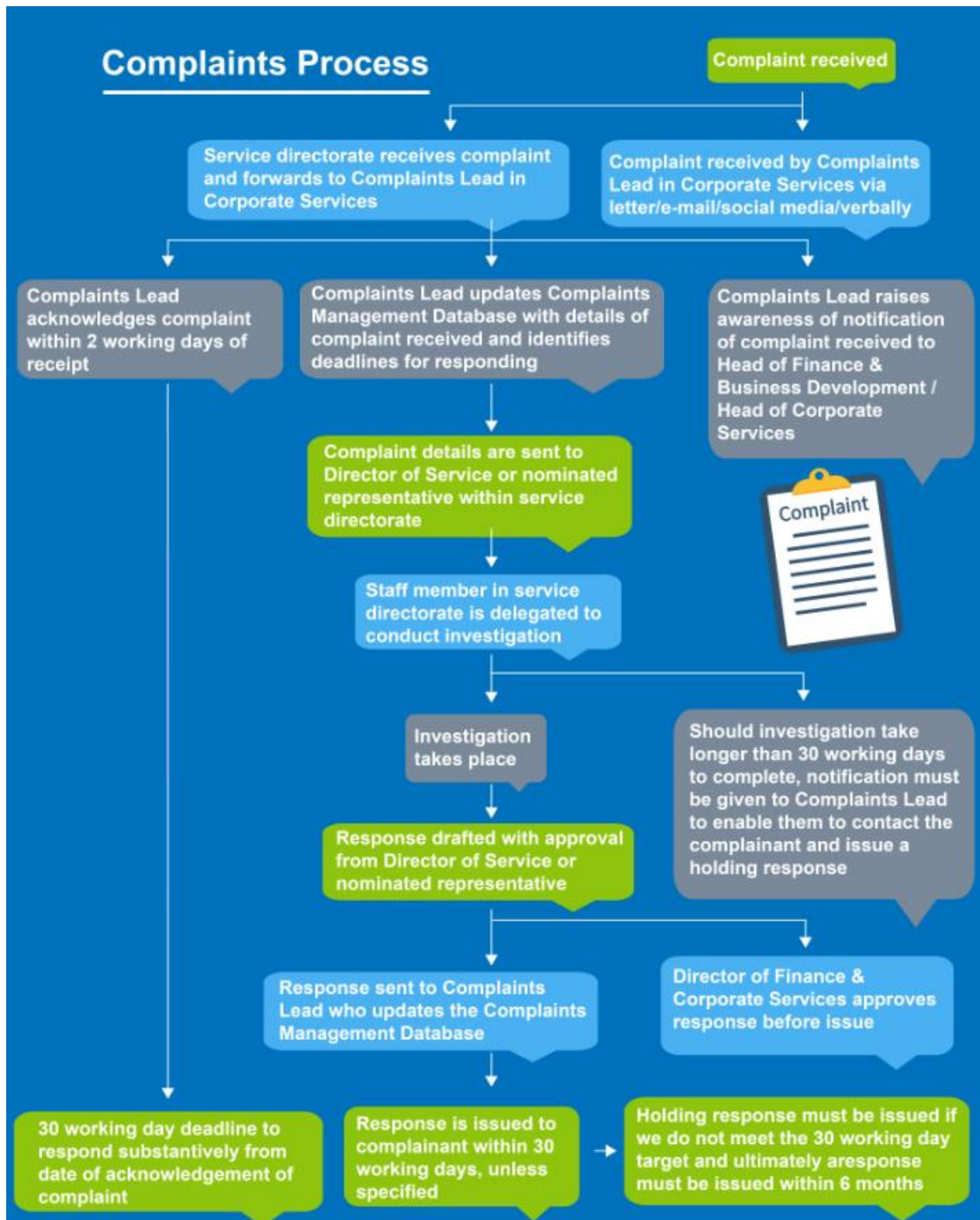
APPENDIX 1 – ISSUES FLOW CHART



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APPENDIX 2 - COMPLAINTS FLOW CHART



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APPENDIX 3 – COMPLAINT RECORDING FORM

Date and time originally received:	
Complainant name/person who reported:	
Complainant relationship (e.g. public/staff):	
Service or directorate which concern relates to:	
Area/Health Board/Trust which concern relates to:	
Date and time escalated to NWSSP Corporate Svs:	
Name and job title of staff handling local investigation:	
Type of concern raised:	
Description of concern raised:	
Consequence of concern/ effect on service user:	
Contributory factors:	
Action taken to resolve:	
Lessons learned:	
Time taken to resolve (if issue, within 24 hours):	
Feedback to complainant (if issue, within 24 hours):	
Signed and dated:	

Please return to Roxann.Davies@wales.nhs.uk or NWSSP.Complaints@wales.nhs.uk

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