

# Complaints Policy

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<b>Document control:</b>		
<b>Date:</b>	<b>Version Number:</b>	<b>Section and Description of Change</b>
July 2022	V1	New Policy Adopted by the ICB
19 April 2024	V2	Policy reviewed and updated to reflect updated guidance, scope of the policy and approach to how complaints are handled and staff training.

***This policy can only be considered valid when viewed via the ICB website or ICB staff intranet. If this document is printed into hard copy or saved to another location, you must check that the version number on your copy matches that of the one published.***

## **Table of Contents**

1. Introduction .....	4
2. Purpose and scope .....	4
3. NHS complaints procedure and process .....	4
4. Who can complain? .....	5
5. Support for people making a complaint. ....	5
6. Verbal complaints .....	5
7. Time limit. ....	5
8. Complaints not covered by this policy .....	6
9. Written complaints .....	6
10. Complaints Handled by the ICB.....	6
11. Investigation .....	7
12. Response .....	7
13. Complaints received about NHS providers .....	7
14. Handling Complaints about more than one organisation.....	8
15. Staff support during the complaints process .....	8
16. Equality and diversity.....	8
17. Disciplinary procedures .....	8
18. Patient Safety incidents and complaints .....	8
19. Anonymous Complaints.....	9
20. Withdrawing Your Complaint.....	9

21. Learning from Complaints .....9

22. Recording of complaints .....9

23. Access to your personal information .....9

24. Unreasonable behaviour .....9

25. Training ..... 10

26. Publishing, Monitoring and Review ..... 10

27. Equality and Health Inequalities Impact and Risk Assessment (EHIRAs) ..... 10

28. References and Bibliography ..... 11

29. Associated Documents ..... 11

Appendix One – Duties and Responsibilities ..... 12

## **1. Introduction**

1.1 This policy describes how NHS Lancashire and South Cumbria (LSC) Integrated Care Board (ICB) handles complaints. We are committed to high quality patient care for all our residents, and we encourage a culture that seeks and uses people's experiences of care to improve local services. We welcome complaints as an opportunity to learn and improve. We are accountable to residents and will use their valuable insight.

1.2 We take all complaints seriously and make sure they are thoroughly investigated and fully responded to. We will deal with complaints fairly and proportionately for both the complainant and complained about. Current and future care will not be adversely impacted because of a complaint.

1.3 We will meet the legal requirements of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and will act in accordance with the NHS Constitution and the Parliamentary and Health Service Ombudsman (PHSO) National Complaint Standards.

1.4 We will make sure that everyone who uses our services knows how they can make a complaint about the ICB and NHS services in LSC. This policy will be published on the ICB website together with our contact details and details of how to complain to us.

## **2. Purpose and scope**

2.1 A complaint is an expression of dissatisfaction, either spoken or written, that requires a response. It can be about:

- an act, omission or decision made by the ICB, or a service we commission.
- the standard of care or services provided or commissioned by the ICB.

2.2 This policy outlines our approach to receiving, handling, investigating, and resolving complaints. It explains how this will be implemented locally and must be followed by all staff employed or hosted by the ICB.

## **3. NHS complaints procedure and process**

3.1 Our Patient Experience Team will try to resolve complaints at the earliest opportunity. We will take action to address the concerns raised and put things right you. This may mean a quick explanation or apology. Other ICB colleagues who are better placed may be asked to help resolve the problem. Where this is not possible, we will follow our policy and the NHS complaints procedure. This has two stages:

- Stage One: Local resolution of complaint through investigation and response by the ICB or another NHS organisation.
- Stage Two: Independent Review of complaint by the PHSO.

## **4. Who can complain?**

4.1 Anyone who is receiving, or has received, NHS treatment or services or who is affected or is likely to be affected by an action, omission or decision can complain. This includes services provided by independent providers or the Voluntary, Community and Faith Sector (VCFS) as part of NHS funded care.

4.2 If you do not want to complain yourself then someone else, usually a relative, friend or other representative, can complain on your behalf with written consent. If a complaint is about a child, we must be satisfied that you are legitimately acting on the child's behalf. We may seek written consent from children over 13.

4.3 If a patient is unable to act, for instance due to physical incapacity or lack of capacity within the meaning of the *Mental Capacity Act (2005)* their authorisation is not required. A consent form should be completed by the complainant showing the reason why the patient is not able to complain, and we must be satisfied the complainant has the authority to act.

4.4 If you raise a complaint about a patient who has died, this must be made by a suitable representative, for example their closest relative or person who holds legal authority to act on their behalf. Where the ICB is not satisfied that the complainant is a suitable representative, we may reject the complaint or recommend that someone else acts on behalf of the deceased patient.

4.5 If we believe at any time that a representative is not acting in the best interests of the person affected, the ICB will assess whether to stop handling the complaint. If this happens, we will explain this to the representative and advise that they can approach the PHSO.

## **5. Support for people making a complaint.**

5.1 LSC ICB promotes the use of advocacy services and will work with advocates when managing complaints. Our acknowledgement letters contain details of NHS Complaints Advocacy providers, and this is also published on our website.

## **6. Verbal complaints**

6.1 You can complain verbally to the ICB Patient Experience team. We will then produce a written summary which will be shared for you to agree.

6.2 You can contact us by ringing 0300 373 3550.

## **7. Time limit.**

7.1 You should make a complaint within 12 months of the date the problem occurred, or you became aware of it. The ICB has the discretion to accept complaints beyond this if there is a good reason and it is still practical to investigate. Where we decide a complaint is out of time, we will tell you and advise that you can approach PHSO.

## **8. Complaints not covered by this policy.**

- Complaints made by other organisations such as other NHS bodies such as contractual or financial disputes. These will be responded to but outside this policy.
- Complaints about privately funded treatment.
- Complaints which are made verbally and resolved to the satisfaction of the complainant no later than the end of next working day after the complaint was made.
- Complaints regarding an alleged failure to comply with a request for information under the Freedom of Information Act (2000) or complaints about Access to Health Records Act 1990 requests and Subject Access Requests.
- A complaint made by an employee about their employment.
- Complaints where the 'subject matter' has already been investigated and responded to under the complaint regulations by an NHS body or the PHSO.

8.2 If we decide the complaint is not covered by the policy, we will tell you and give reasons. Where another process may be better suited to delivering the desired outcome, we will explain this. We will also signpost to sources of independent advice.

8.3 If you are already pursuing another course of action but wish to continue your complaint, we will unless:

- You ask us to delay.
- there is a formal request for a pause in the complaint process from the Police, a Coroner, or a Judge.

## **9. Written complaints**

9.1 Complaints received by ICB staff must be forwarded within one working day to the Patient Experience Team generic email account.

9.2 For complaints about care or services from a provider commissioned by the ICB, we will decide whether we will handle the complaint, or it would be more appropriate to pass it to the provider for them to investigate and respond directly. This applies to both primary and secondary care.

9.3 You can send written complaints by email to [lscicb-fw.patientexperience@nhs.net](mailto:lscicb-fw.patientexperience@nhs.net) or by post to Level 3, Christ Church Precinct, County Hall, Fishergate Hill, Preston, PR1 8XB.

## **10. Complaints Handled by the ICB**

10.1 All complaints will be acknowledged within three working days. Usually, we will offer to discuss your complaint and agree the points you would like to complain about, the outcome you are seeking and the likely timescale. We will also tell you about your local NHS advocacy service and get your consent to share your complaint if we need to.

10.2 Letters received from local MPs which meet the definition of complaint are handled in accordance with this policy.

## **11. Investigation**

11.1 The Patient Experience Team will forward the complaint to the investigating officer and will keep you up to date with progress including any delays. When investigation findings or provider responses are received, they will be reviewed to ensure they are complete and accurate.

## **12. Response**

12.1 The written response will be drafted by the ICB Patient Experience Team and will:

- Be written in Plain English
- Address all the complaints raised.
- Provide explanations and apologies, where appropriate.
- Indicate lessons learned from the complaint.
- Provide details of PHSO.

12.2 We can provide your response in another format such as a different language, braille, large print, audio or through an interpreter. We can also access British Sign Language interpreters.

12.3 If the response is delayed for any reason, we will contact you to explain and provide another target date. Our response letter will be reviewed by the ICB Chief Nurse or their delegate and will be signed by the Chief Executive. At this point, the complaint will be closed. If we received further contact as you remain unsatisfied, we will consider reopening the complaint. Where we decide not to, we will explain that local resolution has been concluded and signpost to PHSO.

12.4 ICB staff who are involved in complaints management or investigation will have the appropriate: training, resources, support, and protected time to respond to and investigate complaints effectively.

## **13. Complaints received about NHS providers**

13.1 You can choose to make a complaint directly to the provider of NHS services or to the commissioner. When the ICB receives a complaint about a provider, we will decide whether we should handle the complaint ourselves or whether it would be more appropriate to pass the complaint to the provider for them to manage. We will consider the nature of the complaint and your wishes.

13.2 If we choose to pass your complaint to the provider organisation we will acknowledge your complaint and ask for your consent to forward it. The provider will then handle the complaint in accordance with the NHS complaints procedure. We will ask that a copy of the provider response is sent to us when complete.

13.3 When we choose to handle the complaint ourselves, we will notify the provider and ask them to investigate and send their response to us. This will then be reviewed by the ICB and sent out to you with our covering letter and comments.

13.4 The ICB will routinely monitor complaints received by NHS organisations we hold a contract with.

#### **14. Handling Complaints about more than one organisation**

14.1 Where a complaint is received that spans a number of organisations, they will work together to produce a single, coordinated response that addresses all the complaints within the scope of this policy and the Complaint Regulations. The agencies involved will appoint a lead who will be the point of contact for you and ensure that you receive a full response. This applies to NHS organisations, local authorities responsible for Adult Social Care and the organisations they fund.

#### **15. Staff support during the complaints process**

15.1 We are committed to the wellbeing of our employees, and we recognise how difficult it is to be complained about. We will share your complaint with staff with people who are named and will make sure support is available to them. We will give them an opportunity to respond and provide their views. Our staff will be honest, transparent, and open when we investigate complaints.

#### **16. Equality and diversity**

16.1 You will be treated fairly and not discriminated against due to any of the characteristics protected by the Equality Act 2010. Our staff are trained in Equality, Diversity and Inclusion and will work with you to make sure we communicate in the most appropriate way. Please tell us if there is anything we can do to make our service more accessible to you. Our commitment to providing a response in other formats is in section 12 of this policy. The care you receive will not be affected because you have complained.

#### **17. Disciplinary procedures**

17.1 Staff disciplinary matters are outside the scope of this policy, but a complaint may reveal the need for a disciplinary investigation. This will be conducted in accordance with our disciplinary policy. Similarly, something which gives rise to a complaint could be reported to a health professional regulator by you or by us. They will follow their own procedures and it should not affect how we respond to your complaint.

#### **18. Patient Safety incidents and complaints**

18.1 Patient Safety incidents are not part of this policy and are dealt with through the Patient Safety Incident Response Framework (PSIRF). Often, the same event may lead to both an incident investigation and a complaint investigation. The incident investigation is likely to take



precedence and the findings can be used to respond to the complaint. You will still receive a full response to your complaint addressing all the points you raised.

## **19. Anonymous Complaints**

19.1 We will investigate anonymous complaints if we have enough information. We will capture any learning and identify service improvements.

## **20. Withdrawing Your Complaint**

20.1 You can withdraw your complaint at any time and we will not issue a response. We will tell any staff who had been complained about and we may still take action based on what you told us.

## **21. Learning from Complaints**

21.1 We welcome complaints as an opportunity to learn and improve both the ICB and other health and care organisations in LSC. We will identify learning through handling individual complaints. We will use this intelligence to develop greater understanding of your experiences and better insight into our local provision to enable us to improve the quality of services.

21.2 Complaints will be reported through our Committee structure to the ICB Board. We will also produce an annual report which complies with the Complaint Regulations.

## **22. Recording of complaints**

22.1 We will maintain accurate and up to date records which we be held in our Complaints Management system and will be retained for 10 years as required by NHS retention and disposal schedules. Your complaints record will be held in a separate file and does not form part of your clinical record.

22.2 Your data will be held confidentially and will not be shared without your consent unless there is a compelling reason to do so such as a safeguarding concern or criminal investigation. Where it is shared with consent, it will be restricted to those people who need to know to make sure the complaint is investigated fully.

## **23. Access to your personal information**

23.1 You have legal rights which govern how your information is used. This includes rights to see information recorded about you. This is dealt with by our Information Governance team. Any requests for access to documents will be responded to fully.

## **24. Unreasonable behaviour**

24.1 There is no one single feature of unreasonable behaviour. Examples may include:

- Persistence in pursuing an issue when the procedures have been exhausted.
- Not clearly identifying the issues you want to be investigated.
- Continually make unreasonable or excessive demands.
- Focusing on a trivial matter to an extent that it is out of proportion to its significance.
- Changing the substance of a complaint by continually raising further complaints.
- Acting in a threatening or abusive way.
- Consume a disproportionate amount of time and resources, for example by ringing or emailing the service excessively.

24.2 Where we identify such behaviour, we will first advise you that this is unacceptable and ask you to stop. If it continues, the ICB will consider contact arrangements and may restrict future access to a nominated individual, a frequency, a time limit, or a channel (such as email only).

24.3 Ultimately, the ICB may have to advise you that correspondence will no longer be acknowledged or responded to. If an offence may have been committed the ICB may take further action. Any arrangements to limit contact will be regularly reviewed.

24.4 We have a duty to take care of our staff and we will not tolerate insulting, aggressive or discriminatory comments either verbally or in writing.

## 25. Training

25.1 Our Patient Experience team delivers training to those ICB staff who are regularly dealing with complaints as part of their job with us.

## 26. Publishing, Monitoring and Review

26.1 This policy will be published on our website. There will be routine monitoring by our Patient Experience function and their reporting through our Board Sub-Committees. It will be reviewed in line with the timescale agreed when the policy is ratified.

## 27. Equality and Health Inequalities Impact and Risk Assessment (EHIRAs)

**Equality, Health Inequality Impact and Risk Assessment**

Integrated Care Board Complaints Policy

Lancashire and South Cumbria HC Partnership

**Current Status**

Stage 1 Approved

**Review Date**

05/03/2024

**Person Responsible**

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Patient Experience

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## 28. References and Bibliography

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 [The Local Authority Social Services and National Health Service Complaints \(England\) Regulations 2009 \(legislation.gov.uk\)](#)

Parliamentary and Health Service Ombudsman: [NHS Complaint Standards NHS Complaint Standards | Parliamentary and Health Service Ombudsman \(PHSO\)](#)

NHS Constitution for England [NHS Constitution for England - GOV.UK \(www.gov.uk\)](#)

## 29. Associated Documents

ICB Public Engagement and Involvement Strategy [NHS England policy template 3 \(healthierlsc.co.uk\)](#)

ICB Freedom to Speak Up Policy [LSCICB HR29 FTSU Policy V2 Feb 24.pdf \(healthierlsc.co.uk\)](#)

## Appendix One – Duties and Responsibilities

<b>ICB Board</b>	<p>The ICB Board is responsible for setting the strategic context.</p>
<b>Chief Nurse</b>	<p>The ICB Chief Nurse has overall responsibility for the strategic direction and operational management of the ICB Complaint Function.</p>
<b>Public Involvement and Engagement Advisory Committee (PIEAC)</b>	<p>PIEAC is the Board Sub-Committee has responsibility for monitoring the themes and trends of complaints.</p>
<b>Patient Experience Team (PET)</b>	<p>The PET is responsible for the day-to-day handling of complaints and supporting staff in investigating and resolving complaints made to the LSC ICB. PET will also maintain complaint records and produce accurate and meaningful reports. This includes the ICB Annual Complaints Report.</p>