

# Lancashire and South Cumbria Integrated Care Board

## Complaints Policy

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## POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approving Body	Approval Date	Date Published on Website
1.0	Corporate Governance	Revised version	The Board	1/7/2022	1/7/2022

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## **1. Introduction**

NHS Lancashire and South Cumbria Integrated Care Board (ICB) believes it is essential to provide an easy to understand and accessible system for patients, carers, and members of the public to raise concerns and complaints about the ICB and the services we commission. This policy sets out our approach.

It provides a framework for how we will handle, respond to, and learn from complaints and how this will influence future commissioning of services.

## **2. Aims**

We are committed to high quality patient care for all our residents. We encourage a culture that seeks and uses people's experiences of care to improve our commissioned services. We are accountable to residents for our commissioning decisions and will use their valuable insight.

We take all complaints seriously and make sure they are properly investigated and responded to in an unbiased, non-judgmental, appropriate, and timely way. We aim to deal with complaints fairly for both the complainant and complained about. Where we can resolve complaints quickly and informally, we will.

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 in line with best practice. Our work will be underpinned by the NHS Constitution including the 'Duty of Candour'.

## **3. Scope of the Policy**

The policy covers complaints about both the ICB and the services we commission. It also covers correspondence from Members of Parliament (MPs) where it is treated as a complaint.

You can complain if you:

- Receive or have received NHS treatment or services, provided, or commissioned by the ICB.
- Are a relative or friend of a patient and have their consent.
- Have been affected by an action, omission, or decision of the ICB.

You should complain within 12 months of the date:

- Of the event that led to your complaint.
- The event came to your attention.

Where a complaint is received after the time limit, we will decide whether to investigate. This will be based on the reason the complaint was not made sooner and whether it can still be fairly investigated.

The ICB has a duty to make sure that providers co-operate, and the complaint is handled in a timely and user-centred way.

Some types of complaints are outside the scope of this policy. They include complaints:

- About privately funded healthcare.
- Which are also part of a current police investigation or legal action and could compromise police or legal action.
- That have already been investigated under the complaint regulations.
- Which are being or have been investigated by the Parliamentary and Health Service Ombudsman (PHSO).
- About failure to comply with a data subject request under the Data Protection Act 2018.
- Concerning failure to comply with a request for information under the Freedom of Information Act 2000.
- Raised under the Public Interest Disclosure Act 1998 (whistle blowing)
- Described as 'Service to service' where a health organisation or local authority makes a complaint about another health organisation or local authority
- From ICB staff about their employment or contract.

If these apply, we will contact you and explain the reasons for not dealing with the complaint.

Complaints about care or services provided by GPs, dentists, pharmacists, optometrists, and prison healthcare providers are outside the scope of this policy. They are handled by services directly or by NHS England.

This Policy is not designed to blame staff, but to investigate complaints and provide a satisfactory outcome for the complainant, to learn any lessons and make improvements. If a complaint indicates a need for disciplinary action this will be managed separately.

## Definition of Terms and Glossary

- A **complaint** is an expression of dissatisfaction that requires a formal response. It is usually a problem which has not yet been resolved, or about past treatment. It can be made face to face, over the telephone, by letter or e-mail.
- **Local Resolution** is the investigation and response to complaints under the

first stage of the NHS complaints procedure. It includes everything we do locally, before a complaint is considered by an Ombudsman.

- The **Ombudsman** refers to the Parliamentary and Health Service Ombudsman (PHSO) who are the second stage of the NHS complaints procedure. If the ICB cannot resolve a complaint, you can approach the Ombudsman for a review. They will assess if we have acted fairly and adequately addressed the complaint.
- Local **advocacy** services are available to act on a patient's behalf throughout the complaint process including dealing with the Ombudsman.
- **Patient Advice and Liaison Service (PALS)** offer advice and support, including signposting on health-related matters.
- The **Local Authority Social Services and National Health Service Complaints (England) Regulations 2009** is the legislation which covers managing complaints in the NHS.
- **Ulysses** is the ICB's risk management system which is used for the recording and reporting of Complaints, PALS, and MP letters.

## Principles of Handling Concerns and Complaints

We will make sure that complaints are considered in accordance with the law and this policy. There are several documents and publications that give us helpful guidance in how to deal with complaints and concerns.

PHSO 2009 guidance setting out '**Principles of Good Administration, Principles of Good Complaints Handling and Principles for Remedy.**' These give us the approach to deliver good administration and customer service, and how to respond when things go wrong. The same six themes apply to each of the three principles documents. They are:

- Getting it right.
- Being customer focused.
- Being open and accountable.
- Acting fairly and proportionately.
- Putting things right.
- Seeking continuous improvement.

These documents also give you specific rights. They include:

- Having your complaint acknowledged and properly investigated.
- Discussing how the complaint will be handled and when you can expect a reply.
- Being kept informed of progress and promptly told the outcome.
- Accessing further redress through the PHSO, the Information Commissioners Office or legal channels including Judicial Review.

The PHSO also issued '**My Expectations for Raising Concerns and Complaints**' which articulates a user led vision for raising complaints and concerns based around a

series of 'I' statements across the life cycle of a complaint. For example, when someone is considering making a complaint, they should be able to say, 'I felt confident to speak up' and they would know they had a right to complain, they knew how to complain, they could receive support to complain, and their future care would be unaffected. A summary of the 'I' statements is below:

Stage of Complaint	I Statement
Considering a complaint	I feel confident to speak up
Making a complaint	I felt that making my complaint was simple
Staying informed	I felt listened to and understood
Receiving outcomes	I felt my complaint made a difference
Reflecting on the experience	I would feel confident making a complaint in future

The '**Good Practice Standards for NHS Complaints Handling**' published by the Patients Association in September 2013. The standards can be summarised as:

- Openness and transparency, including well publicised and accessible information that is understood by all parties to the complaint.
- A consistent approach, centered on evidence based and complainant led investigations and responses.
- A logical and rational approach.
- Providing opportunities to give feedback on the complaints service.
- Offering support and guidance throughout the complaint process.
- Providing a level of detail which is proportionate to the complaint.
- Identifying the cause of the complaint and taking action to prevent recurrence.
- Using lessons learned to make changes and improvements.
- Ensure that ongoing care is not affected by having complained.

A new 'Complaint Standards Framework' will be implemented in 2022/23 and we will review our processes and ways of working considering the new guidance.

Our complaint system will enable you to make your views known, without fear of discrimination and will ensure that lessons learned are widely disseminated.

We will promote equality of access to the complaint service and will make any adjustments, so all people and groups are able to make a complaint. We will work positively and constructively with advocates. Our PALS service will be an important point of contact, or referral, to facilitate this.

We will adhere to the principles of the Mental Capacity Act 2005 and the Data Protection Act 2018 the requirements of General Data Protection Regulation (GDPR). Confidential patient information will not be shared without valid consent. We will assume a person has capacity to make their own decisions and support them to do so. If we assess that

a person cannot give consent, we will seek evidence that the person complaining has the authority to do so.

## **Roles and Responsibilities**

We have several roles in the management, resolution, and investigation of complaints, these are:

- Thorough investigation of complaints received by the ICB.
- Co-operating with other NHS and Social Care bodies to co-ordinate complaint investigations.
- Monitoring whether commissioned providers adhere to the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
- Requesting and using information about complaints from healthcare providers when monitoring the quality of commissioned services.
- Using complaints information, to inform the commissioning process and meet the healthcare needs of the local population.

We will make sure complaints are handled effectively, and that services are improved as a result of the lessons learned. We will produce an Annual Complaints Report.

The Chief Executive is ultimately responsible for ensuring there is an effective process for the management, investigation and resolution of complaints that we comply with the regulations. The Chief Executive or an appropriate Deputy sign all complaint responses we send.

The Director of Nursing and Quality will identify any concerns with the process, investigation and outcome of complaints responded to by the ICB or commissioned providers. They will raise concerns with the appropriate officer so that that action is taken. The ICB will receive reports on:

- Numbers of complaints received and their outcomes.
- Themes and trends.
- Actions taken because of complaint investigations including lessons learned.
- Time taken to respond to complaints by the ICB and main commissioned providers.
- Ombudsman investigations and action plans.

The complaints process is managed by the ICB Complaints and PALS Service. They make sure the system works effectively and efficiently and deadlines are met. The team is responsible for ensuring investigations are completed, drafting a response to the complainant, and keeping a log of lessons learned. The Service will produce a quarterly report.



We will be accessible to the public and to all staff for advice and support. Cover arrangements will be in place for periods of absence from work. The function will also provide a PALS service to act as an accessible advice and information point about health services, as well as working to resolve informal concerns about commissioning decisions and commissioned services.

All staff must be aware of the correct process to follow if anyone wants to complain. If you want to complain but are unable or unwilling to put it in writing the person who receives the complaint should contact the Complaints Service. In addition, staff must provide information reasonably required of them during complaint investigations.

## 4. Complaints Process

Each phase of the complaint and the associated actions are in the table below.

Complaint Phase	Action
Assessment	<ul style="list-style-type: none"> <li>Complaint assessed as within scope of our service and acknowledged</li> <li>Advocacy services offered</li> <li>Consider early and informal resolution to look at whether it can be resolved by the end of the next working day</li> </ul>
Summary of complaint	<ul style="list-style-type: none"> <li>Personal contact to agree summary of complaint and desired outcomes</li> <li>Explanation of process and timescales</li> <li>Consent sought</li> </ul>
Investigation	<ul style="list-style-type: none"> <li>Complaint sent for investigation with agreed timescale and desired outcome</li> <li>Investigation response received and accepted</li> </ul>
Complaint Response	<ul style="list-style-type: none"> <li>Co-ordinated response to complaint drafted for sign off</li> <li>Clinical and quality review</li> <li>Response agreed by senior management and sent out to complainant</li> </ul>
Lessons Learned	<ul style="list-style-type: none"> <li>Further actions identified to resolve the individual complaint</li> <li>Wider service improvements identified and implemented</li> </ul>

If necessary, independent clinical reviews will be conducted. Where a complaint involves more than one NHS or social care organisation, we will agree how the complaint will be managed to produce a single, coordinated response.

Serious complaints should be notified to the Director of Nursing and Quality without delay. We aim to provide a final response to complaints within 40 working days from

receipt of consent. Sometimes agreed deadlines cannot be met. Where this happens, we will contact you to explain the reasons and discuss an extension in timescale.

We will request an investigation response in Plain English which provides an honest, clear, and constructive response to all the points raised together with any lessons learned and proposed service improvements. We then draft a response letter which is reviewed for quality and accuracy. We also conduct a clinical review where the complaint has a clinical element. The response will cover how the complaint has been handled, the conclusions reached based on facts and evidence and an explanation of any actions we will take.

All written responses will invite you to contact us if you remain unhappy. We will make a further attempt to address any outstanding concerns. The response letter will always advise of the right to approach the PHSO. Where appropriate, the ICB will offer to meet with complainants where this could achieve local resolution. This could include using a mediation service.

If you remain dissatisfied, you can ask the PHSO to review your complaint.

All complaint files will be retained for a minimum of ten years. All records will be held securely.

### **Patient Advice and Liaison Service (PALS)**

PALS offer information and advice and are also the first point of contact with our Complaints Team. They will contact you within one working day and give a response as quickly as possible. Where a concern will not be resolved by the end of the next working day, this can still be handled through PALS but you will be advised your concerns can be treated as a formal complaint at any time.

Wherever possible, PALS will aim to answer enquiries directly. However, in some cases this will involve referral to a person or service more appropriate for resolving the enquiry promptly and comprehensively. Appropriate consent will be needed. We will give you the option to return to us if you are not satisfied with the response they provide.

PALS will respond to both general enquiries and those about an individual. Enquiries may be made personally or on behalf of someone, but PALS is a confidential service and will not discuss or disclose anything about an individual without their consent unless it relates to an actual or potential criminal offence or safeguarding.

### **Multi Agency Complaints**

Where a complaint involves more than one NHS or Social Care body, they should co-operate and send you a single response. Where we receive a complaint about a service

we cannot investigate we will ask for your consent to forward it without delay.

## **Legal Action**

The complaints process should not stop if you take legal advice. If you start legal action the ICB may seek legal advice to establish whether handling the complaint could adversely impact the legal action. The ICB will follow the legal advice.

## **Coroner's Cases**

Where a death has been referred to the Coroner's office this does not mean complaint investigations need to be suspended. Investigations will continue and a copy of the final response will be sent to the Coroner for information.

## **Unreasonable or Overly Persistent Complainant Behaviour**

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.

Where we identify such behaviour, we will first advise the complainant that their behaviour is unacceptable and ask them 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).

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

## **Patient Safety Incidents and Complaints**

The procedure for investigating Patient Safety Incidents is separate from the complaints procedure and is managed in accordance with a different ICB Policy.

Findings and evidence can inform both processes. Points raised in a complaint may not be the same as those investigated as an incident. A separate response to the complaint

will be required.

## **Safeguarding of Children and Adults at Risk Policy and Complaints**

All staff will follow the Safeguarding Children and Adults Policy. If at any point in the complaint investigation process a member of ICB staff suspect that a vulnerable person is being abused or is at risk of abuse, they should follow the Safeguarding Procedures and report concerns to a Line Manager and the respective Safeguarding Lead.

## **Measuring Satisfaction with the Complaints Service**

The ICB wants to understand the experience and satisfaction of people using the Complaints Service and asks complainants whether their experience was positive and to suggest what could be improved.

## **5. Contact Details and Further Information**

If you wish to make a complaint you should contact our patient experience team:

### **Patient Experience Team**

Jubilee House  
Lancashire Business Park  
Leyland  
PR26 6TR

Freephone: 0800 032 2424

Email: [mlcsu.lscpatientexperience@nhs.net](mailto:mlcsu.lscpatientexperience@nhs.net)

You can find more information at:

<https://www.lancashireandsouthcumbria.icb.nhs.uk/contact-us/customer-care-team>