

# Here

# Here Complaints Policy

## Document History and Control

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<b>Policy Awareness</b>	
People who need to know this policy in detail and know where to find it	Executive Team, MSK Patient Director, MSK Community Service Lead, Clinical Lead, Wellbeing Operational Manager, Service Managers, Integrated Care Managers, Assistant Integrated Care Managers, Sussex MSK Partnership Central Quality and Improvement Officer, Wellbeing Service Governance Coordinator, Wellbeing Administration Coordinators, and Senior Patient Care Advisors
People who need to have a broad understanding of this policy and know where to find it	Non-Executive Directors and Patient Care Advisors, Wellbeing Business and Information Analyst, Wellbeing Administrators, MSK Primary Care Lead
People who need to be aware this policy exists and know where to find it	All other members of staff

<b>Training Requirements</b>	
People who need to be trained in detail on the contents of this policy	Individually identified staff
People who we would recommend should carry out basic level training of this policy	N/A

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## 1. Introduction

Here considers good complaints management a valuable and integral tool for developing and improving the service provided to patients and other health professionals.

Here has therefore developed a well-defined process for receiving, investigating and resolving complaints to support an organisational culture that values complaints and meets the requirements of the law and national guidance.

The objectives are to ensure the efficient handling of complaints and to resolve the complaint impartially, and without unlawful discrimination or prejudice, in a way that satisfies the complainant whilst being fair to staff. Here will identify good practice, remedy any faults found and capture learning to continually develop the services it provides.

This document describes the policy for managing complaints within Here, and should be read in conjunction with the Here Complaints Procedure.

The electronic copy of the Complaints Policy is located in [S:\BICS Operations\Policies\BICS Policies\Governance\Complaints Policy](#) if for any reason you are unable to access this file please inform the Quality Coach or other appropriate individual in order to rectify.

## 2. Policy Statement and Aim

This document is designed to be a guide to how Here handles complaints for patients, carers and Here staff. It is designed to be easily accessible and useable and to ensure complaints are dealt with promptly and sensitively, taking into account individual circumstances and needs.

The aims of the policy are to:

- Act in accordance with the law and relevant guidance, with regard to the rights of those concerned
- Encourage an organisational culture which values complaints
- Have clear governance arrangements which set out roles and responsibilities
- Ensure staff are equipped and empowered to act decisively to resolve complaints
- Have clear and simple procedures, including how to complain and how and when to take complaints further
- Be easily accessible for complainants
- Deal with complainants promptly and sensitively, bearing in mind their individual circumstances
- Be able to respond flexibly, including coordinated responses with other bodies involved

- Ensure complainants are treated impartially, and without unlawful discrimination or prejudice
- Act fairly towards staff complained about as well as towards complainants
- Acknowledge mistakes and apologise where appropriate
- Use all feedback and lessons learnt from complaints to improve service design and delivery
- To ensure patients know they have been listened to, their concerns addressed and there are now measures that will ensure they are not repeated where necessary

### **3. Scope**

This policy shall apply to all staff employed by Here or contracted to Here and shall include triagers, agency staff, students on placements and volunteers. It must be used for all complaints that affect patients, clients, staff, external contractors or visitors.

### **4. Associated Policies and Procedures**

The policy has been developed in the context of other Here policies and these should be referred to when relevant. This includes:

- Complaints Procedure
- Quality Policy
- Incident Policy and Procedure
- Information Governance Policy
- Clinical Triage Policy
- Managing Abusive and Distressed People Policy and Procedure

### **5. Roles and Responsibilities**

Please refer to the Complaints Procedure for details of responsibilities.

### **6. Legislative/National Context**

This policy is based on the following statutory documents:

- NHS England Complaints Policy (26 March 2015)
- 1993 *Good Administrative Practice* Issued 1993 by The commission for Local Administration in England (re-issued 1995)
- 2004 No. 1768 *The National Health Service (Complaints) Regulations* issued in July 2004 by the Department Of Health (DH)
- 2006 No. 2084 *The National Health Service (Complaints) Amendment Regulations* issued in September 2006 by DH
- 2009 No. 309 *The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009* – issued 27<sup>th</sup> February 2009 by DH

- *2009 Principles of Good Complaint Handling* – issued 10<sup>th</sup> February 2009 by the Parliamentary and Health Service Ombudsman

It is also informed by guidance governing Personal Medical Services (PMS) contracts.

## 7. Definition of a Complaint

A complaint is defined as an expression of dissatisfaction (written or verbal), whether justified or not, about a Here function, decision or service that requires a response. Examples of complaints include:

- Concerns about the following of procedures and good practice
- The quality of service provided
- The behaviour of a member of staff

Here staff will be able to advise patients, carers and staff colleagues what is, and what is not, a complaint, how to complain, and how and when to take complaints further.

## 8. Who May Make Complaints to Here?

A person or organisation who wishes to raise a complaint is known as a Complainant. Complainants can include:

- A person who is affected, or likely to be affected by, the action, omission or decision of Here and/or the NHS which is the subject of the complaint
- Members of the public
- GP practices and referring primary and community care professionals
- A representative acting on behalf of a person who:
  - has died
  - is a child
  - is unable to make the complaint themselves due to physical difficulties or mental health issues (within the meaning of the Mental Capacity Act 2005)
  - has requested the representative to act on their behalf

In such cases there must be assurance that the representative has the legal right to act as such, or there is clear consent from the person on whose behalf they are acting, and satisfaction that they are acting in that persons best interests.

If Here does not feel assured, the representative will be notified in writing, stating the reason for its decision.

Complainants can raise complaints about all aspects of their NHS care. However, Here can only investigate directly respond to complaints about the range of NHS work for which it has a direct responsibility. This essentially means the management of:

- A. clinical referrals to secondary care or alternative care pathways, or
- B. provision of Here clinical services



Where partner organisations oversee part of the patients same treatment pathway (in which they wish to raise their concerns) complaints can be dealt with collaboratively to ensure a coherent response where possible.

It is possible that complaints may be made about Here to NHS Brighton and Hove Clinical Commissioning Group. These will be dealt with through the CCG complaints process and specifically through PALS, LINK, HealthWatch and ICAS (Independent Complaints Advocacy Service) in close cooperation with Here.

It is possible that a GP, or other referring professional, may disagree with the clinical decision made by the Here Gateway Management Service. This will initially be dealt with through a procedure within the Clinical Triage Policy although this does not negate recourse to this policy if a satisfactory resolution is not achieved.

## **9. Information about how to Complain**

It is important that Here service users know how to raise a complaint or give feedback on services.

- Service user information (such as patient leaflets) will contain information about how to complain
- All Here staff will be familiar with this policy and able to advise complainants
- The Here website will have information about how to complain and comment on services

## **10. Complaints to Here which are managed outside this Policy**

Under Department of Health (DH) guidance Here cannot handle the following types of complaints:

- A complaint made by an NHS body about the functions of Here
- A complaint made by any employee or secondee about any matter relating to NHS employment issues
- A complaint which has been investigated by the NHS Ombudsman
- A complaint that falls within the responsibility of Independent Contractors (GP practices, Pharmacies, NHS Dentists and Opticians)
- A complaint arising out of the alleged failure to comply with a Freedom of Information Act 2000 request
- NHS staff pensions or injuries. There are already complaints procedures in place for those affected under the NHS Pensions scheme under the Superannuation Act 1972. Therefore the NHS Complaints Procedure excludes complaints about them
- A complaint which is made orally and resolved to the complainant's satisfaction no later than the next working day
- A complainant has stated in writing intent to take legal proceedings in relation to the substance of the complaint where it will prejudice the proceedings (please see the section on "Legal Action During or Following a Complaint")
- NHS England has been notified that criminal proceedings have been commenced in relation to the substance of the complaint where it will prejudice the proceedings

- A complaint which has been investigated previously under these or previous complaints regulations about the same issue – regulations state that a complaint can only be investigated once\*

\* *Where a complaint specified above is part of, or is connected with, another complaint not specified above, nothing in the regulations prevents that other complaint being handled in accordance with this policy.*

Independent contractors have a responsibility to manage complaints at a local level in line with current guidance. Advice and support is available from all Managers as appropriate at Here, if required. Should a person contact Here and wish to make a complaint about an independent contractor, they should be referred in the first instance to the independent contractor/practitioner involved to address their complaint.

### **11. Within What Timescale Should Complaints be Submitted to Here?**

Complaints should normally be submitted to Here within twelve months of the date of the situation arising or of the matter coming to the attention of the person complaining.

Here may consider complaints after this time if it is felt there are good reasons for the delay, or, despite the delay, it is still possible to investigate the complaint effectively and fairly.

### **12. How Complaints May be Received**

Complaints may be received in any format, including telephone, email, fax, letter, face to face or patient surveys. Complaints made by any of these methods will be given equal status and will be handled in the same way. The only exception to this rule is when a verbal informal complaint is resolved within 24 hours; an incident report should be raised for shared learning instead.

Here policy is to ensure that persons should not be prevented from making a complaint on the grounds of language or disability. In some instances it may be necessary for the complaint to be handled by use of an interpreter, Typetalk (or similar), or through an advocate.

### **13. Maintaining Confidentiality for Complainants**

Here is bound by and works to the Data Protection Act (1998) and the Caldicott Guardian recommendations regarding the storage and sharing of data. As such, any information disclosed must be confined to that which is relevant to the resolution of the complaint and only disclosed to those with a demonstrable need to know it.

Personal Identifiable Data will be handled in accordance with the Here Information Governance Policy and associated appendixes:

- Transferring Personal Information Policy
- South East Coast Information Sharing Protocol (between the NHS and other organisations)
- Personal Computing Policy
- Records Management Policy and Procedure
- Subject Access Requests Procedure

Consent is always sought from complainants for Here to instigate an investigation internally and with external bodies. Consent to share details of a complaint can be given verbally or in writing. This must be confirmed with the external party before any transfer of information can be made and a note of consent should be made on the complaints database. If a third party is making a complaint, authorisation will be obtained from the complainant both for the complaint to be investigated and for any release of clinical records.

#### **14. Managing Complaints Regarding Here Contractors**

Here will ensure that all NHS providers and any private providers with whom it has a Contract or Service Level Agreement have robust arrangements in place for handling complaints made about the services they provide. These will work as if Here Complaints Policy applied to their services.

These contractors will be asked to report regularly on the number and nature of complaints being received.

#### **15. Managing Complaints Regarding Here Staff**

Complaints made against individual members of staff will be taken as seriously as other complaints. Complaints against staff will be managed through the Complaints Policy. If necessary, complaints of this nature will subsequently be managed through Here Human Resources policies, including disciplinary action if required.

#### **16. Support for Complainants**

Here will refer complainants to the following for support or information:

- The Patient's local Clinical Commissioning Group (CCG) or other relevant party i.e. PALS, LINK, HealthWatch and ICAS
- SEAP
- Other relevant, specialist or general advisory services available
- Relevant, specialist or general community and voluntary sector organisations

#### **17. The Role of the SEAP in Helping Complainants**

SEAP ((Support, Empower, Advocate, Promote) which is an independent complaints advocacy service) is a body which will advocate, free of charge, on behalf of a complainant (or their representative) to ensure that the complaint is handled appropriately for the complainant. This could include writing the letters, attending meetings with the complainant and monitoring the progress of the complaint.

#### **18. Support for Here Staff when Feedback is received via a Complaint**

In the first instance, complaints against specific members of staff should be treated as feedback for the staff member concerned, and will be managed through the supervision process by the member of staff's line manager. Where the investigation finds that the staff member acted in line with Here policies and procedures and appropriately they shall not be disadvantaged by the complaint that was brought against them.

If the complaint requires further management through Here Human Resources Policies, (including where disciplinary action is required), staff will receive support as identified through the relevant HR process.

## 19. Ensuring Equity and Fairness for Complainants

Making a complaint does not mean that a patient/complainant will receive less help or care, or that things will be made difficult for them. Everyone can expect to be treated fairly and equally regardless of age, disability, race, culture, faith, nationality, gender and sexual orientation.

Everyone must also have their human rights respected at all times. No aspect of the handling of any complaint should prejudice their human rights.

For those people needing language or signed interpreting or other forms of communication these will be made available throughout the complaints process.

## 20. Getting Redress and Remedy When a Complaint is Upheld

Redress and remedy following acknowledgement of a grievance can include:

- An apology
- Reassessment of a need
- Provision of a service
- Change of procedure to prevent recurrence (the complainant should be advised)
- Occasionally a “time and trouble” ex gratia payment. (This is not normally possible in the case of complaints against an NHS practitioner apart from where clinical negligence is involved)

Appealing to the Ombudsman and seeking a legal remedy are other options.

## 21. Legal Action During or Following a Complaint

If the complainant explicitly states an intention to take legal action or indicates that formal legal action has been initiated, the Here complaints procedure should normally cease and the complainant and those complained against should be advised in writing.

However, complaints can proceed if there are existing parallel investigations relating to the case such as disciplinary processes, police investigations and legal action as long as it does not compromise or prejudice that other investigation.

If a complainant decides to take legal action after a complaint has been deemed to have reached resolution by the Health Service Ombudsman they have a right to do so.

## 22. Withdrawal of a Complaint

If a complainant withdraws a complaint at any stage in the procedure, the complained against should be informed immediately.

## 23. Dealing with Abuse and Assault of Staff as a Result of a Complaint

Abuse and assault of staff will not be acceptable under any circumstances. Here has a policy setting out its stance on such incidents:

- Managing Abusive and Distressed People Policy and Procedure

In cases of persistent/abusive callers Here can call on the City Council Community Safety Team for support and assistance.

Ultimately, Here will support the involvement of the Police where cases become threatening, abusive or violent.

## 24. Vexatious and Habitual Complainants

Definition:

A vexatious or habitual complainant is one who may meet the following criteria:

- Persist in pursuing a complaint where the complaints process has been fully and properly implemented and exhausted
- Changes the substance of a complaint or persistently raises new issues or seeks to prolong contact by unreasonably raising further concerns or questions upon receipt of a response whilst the complaint is being dealt with
- Is unwilling to accept documented evidence of treatment given as being factual
- Focusing on a trivial matter to an extent which is out of proportion to its significance and continue to focus on this point
- Physical violence has been used or threatened against staff (all such incidents should be managed through the Here Incident Policy and Procedure)
- Had an excessive number of contacts with Here when pursuing their complaint
- Been verbally abusive or aggressive against staff (see the Managing Abusive and Distressed People Policy and Procedure for information about how to manage these situations)
- Are known to have electronically recorded meetings or conversations without prior knowledge and consent of the parties involved
- Display unreasonable demand or expectations and fail to accept that these are unreasonable once a clear explanation has been given
- Refuse to communicate respectfully with staff including personal comments about ability or character

As a general rule, a complainant who is considered as potentially habitual or vexatious will be deemed to have met two or more of the above criteria.

- If a complainant has met one of the above criteria it may be prudent to write to them and advise them that they risk being classified as habitual or vexatious
- In some circumstances it will be appropriate to draw up a signed agreement with the complainant drawing up a code of behaviour for the parties involved before the complaint is progressed further. If this agreement is breached then further action outlined below would be taken

### 24.1. Approach to Dealing with Vexatious Complainants:

When a complainant has been identified as habitual or vexatious (in accordance with the above criteria), a Complaints Lead will decide what action to take. This may include:

- The complainant will be notified promptly that they have been classified as habitual or vexatious, setting out the reasons for the decision and the actions to be taken
- This notification will be copied for the information of others already involved with the complaint, such as GP surgeries, hospital trusts, SEAP, PALS, LINK, HealthWatch, ICAS and Members of Parliament, Parliamentary Health Ombudsman
- Further contact with the complainant may be denied provided one form of contact is maintained (which could be through a designated third party). For example, Here may insist that further communication is made by letter

- Inform the complainant that in extreme circumstances Here reserves the right to refer unreasonable or vexatious complaints to the organisations solicitors or to the police
- Temporarily suspend all contact whilst seeking guidance

#### **24.2. Withdrawing Habitual or Vexatious status**

- An Complaints Lead will revoke Habitual or Vexatious status on advice from staff handling the complaint that a more reasonable approach has been demonstrated

#### **25. Complaints Reported in the News Media**

Complaints to Here will be dealt with on a strictly confidential basis (for the complainant and complained against) at all times. It is never the policy of the service to discuss complaints with any outside party and particularly not the media. However, some complaints may come to the attention of the media through the actions of complainants, or unconnected third parties. Responses to any approaches from the media will be managed by the Chief Executive. The complaint will be managed through the normal process. The fact that complainants may have gone to the media locally or nationally does not absolve Here from its responsibility to maintain confidentiality.

#### **26. Monitoring of Complaints**

An annual report for each service goes to the Here Board and is shared with the relevant service partners. These reports include:

- Number and nature of complaints made in that year

Complaints and Incidents are both reviewed at a variety of forums across the organisation for shared learning and escalation. This includes The Patient Safety Group, Middles and more. Individually these have the intention of identifying any themes. These reviews hold the attention to drive changes and improvements to target identified themes.

Wellbeing produce a monthly summary report which is shared with their Clinical Quality Group, the CCG and the partners of the service. This report includes:

- Number and nature of complaints made in that month and the action taken
- The issues they raise
- Follow up of the action taken following previous complaints
- Proposed service improvements arising from complaints received

MSK produce a quarterly Quality Report which is shared with the CCG. This report includes:

- Thematic summary of compliant and incidents
- Recurrent issues
- Issues raised
- Complaints made against subcontractors or partners

- Outlines what the learning the service has taken and steps to try to prevent recurrence
- Proposed service improvements arising from complaints received

A monthly summary is produced on request.

MAS produce a quarterly Quality Report which is shared with the CCG. This report includes:

- Number and nature of incidents made in that month and the action taken
- The issues they raise
- Follow up of the action taken following previous incidents
- Proposed service improvements arising from incidents received

Wellbeing produce a monthly Complaints and Incidents Summary Report which is shared with the CCG. This report includes:

- Thematic summary of compliant and incidents
- Recurrent issues
- Issues raised
- Outlines what the learning the service has taken and steps to try to prevent recurrence
- Proposed service improvements arising from complaints received

**27. Appendix i – Details for Complaint Leads**

<b>Service</b>	<b>Complaints Lead</b>	<b>Job Title</b>	<b>Contact Details</b>
Sussex MSK Partnership	Lee Morgan	Quality Improvement Officer	<a href="mailto:lee.morgan2@nhs.net">lee.morgan2@nhs.net</a>
Memory Assessment Service (MAS)	Jason Willcox	Service Manager	<a href="mailto:jason.willcox@nhs.net">jason.willcox@nhs.net</a>
Wellbeing	Emma-Louise Day	Governance Co-Ordinator	<a href="mailto:emma-louise.day@nhs.net">emma-louise.day@nhs.net</a>
Practice Unbound	Kerry McNabb	Admin & Quality Manager	<a href="mailto:kerry.mcnabb@nhs.net">kerry.mcnabb@nhs.net</a>
Benfield Valley Healthcare Hub	Louise Bridle	Deputy Practice Manager	<a href="mailto:louise.bridle@nhs.net">louise.bridle@nhs.net</a>
Here	Jon Ota Helen Curr	CQC Registered Managers	<a href="mailto:jonota@nhs.net">jonota@nhs.net</a> <a href="mailto:helencurr@nhs.net">helencurr@nhs.net</a>



## 28. Appendix ii- Schedule of Applicable Publications:

Reasonable steps have been taken to ensure that this policy reflects the Care Quality Commission Schedule of Applicable Publications; the following guidelines have been referenced:

- Equality Act 2010 <http://www.legislation.gov.uk/ukpga/2010/15/contents>
- Human Rights Act 1998  
[http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_088970](http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_088970)
- The NHS Constitution <http://www.england.nhs.uk/2013/03/26/nhs-constitution/>
- Health Service Ombudsman <http://www.ombudsman.org.uk/>
- Health Protection Agency <http://www.hpa.org.uk/>
- National Patient Safety Agency <http://npsa.nhs.uk/>
- The Principles of Good Complaint Handling (Parliamentary and Health Service Ombudsman, 2008) <http://www.ombudsman.org.uk/improving-public-service/ombudsmansprinciples/principles-of-good-complaint-handling-full>
- Listening, improving, responding: a guide to better customer care (DH, 2009) [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_095408](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_095408)
- NHS Litigation Authority guidance about complaints  
[http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH\\_5134284](http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_5134284)
- Being open - communicating patient safety incidents with patients and their carers (NPSA, 2009) <http://www.nrls.npsa.nhs.uk/resources/?EntryId45=65077>
- 1993 Good Administrative Practice Issued 1993 by The commission for Local Administration in England (re-issued 1995) <..\source documents\The Commission for Local Administration in England - Good administrative practice 2.pdf>
- 2004 No. 1768 The National Health Service (Complaints) Regulations issued in July 2004 by the Department Of Health (DH)  
<http://www.legislation.gov.uk/uksi/2004/1768/contents/made>
- 2006 No. 2084 The National Health Service (Complaints) Amendment Regulations issued in September 2006 by DH  
<http://www.legislation.gov.uk/uksi/2006/2084/contents/made>
- 2009 No. 309 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 – issued 27<sup>th</sup> February 2009 by DH  
<http://www.legislation.gov.uk/uksi/2009/309/signature/made>
- 2009 *Principles of Good Complaint Handling* – issued 10<sup>th</sup> February 2009 by the Parliamentary and Health Service Ombudsman

<http://www.ombudsman.org.uk/improving-public-service/ombudsmansprinciples/principles-of-good-complaint-handling-full>

- SEAP <http://www.seap.org.uk/>
- LINK <http://www.bhlink.org/>
- PALS [http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-\(PALS\)/bn1/Results/135/-0.145988196134567/50.8531799316406/363/0?distance=25](http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-(PALS)/bn1/Results/135/-0.145988196134567/50.8531799316406/363/0?distance=25)
- Healthwatch <http://www.healthwatch.co.uk/find-local-healthwatch?address=brighton>
- NHS Choices <http://www.nhs.uk/choiceintheNHS/Rightsandpledges/complaints/Pages/NHScomplaints.aspx>
- NHS England Complaints Policy <http://www.england.nhs.uk/wp-content/uploads/2015/01/nhse-complaints-policy.pdf>
- Independent Complaints Advocacy Service (ICAS) <http://www.bh-impetus.org/projects/independent-complaints-advocacy-service-icas/>

**29. Appendix iii – Equality Assessment**

<b>1. Name of Policy</b>	Complaints Policy
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<b>2. Clinical/Governance/HR</b>	Governance
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<b>3. Assessment completed by (Author/Owner/Other)</b>	<b>a) Name</b>	<b>b) Title</b>
Author	Janet Syder	Corporate Services Manager
<b>Date assessment completed:</b>	14 November 2011, 27 January 2014 and 6 October 2015	

<b>4. Does the policy benefit or have an impact on staff and/or the public? (please ✓)</b>						
<b>Staff</b>	Yes	✓	No		Not Sure	
<b>Public</b>	Yes	✓	No		Not Sure	

5. Is there a Differential Impact?					6. Is there concern?		7. Total Scores	
	<b>5a)</b> Is there any information or reason to believe that the operation of this policy would or does affect groups differently?  Answer: Yes/No/NA/Not Sure		<b>5b)</b> How much information or evidence is there?  Answer: NA/ None/Little/Some/Major		Has there been any concern expressed by the public or staff about the operation of this function or policy?  Answer: NA/None/Little/Some/Major		Staff	Public
	Staff	Public	Staff	Public	Staff	Public		
Age	0	0	0	0	0	0	0	0
Disability	0	0	0	0	0	0	0	0
Gender reassignment	0	0	0	0	0	0	0	0
Marriage and civil partnership	0	0	0	0	0	0	0	0
Pregnancy and maternity	0	0	0	0	0	0	0	0
Race	0	0	0	0	0	0	0	0
Religion and belief	0	0	0	0	0	0	0	0
Sex	0	0	0	0	0	0	0	0
Sexual orientation	0	0	0	0	0	0	0	0
<b>Sub Total</b>							0	0
<b>Grand Total</b>							0	
8. Priority								
Grand Total Score		0		Priority (low, medium, high)		Low		

Priority Scoring	
Low	0 – 9
Medium	10 – 29
High	30+

**Low** = A full Equality Analysis is not required, but details of non-applicability must be detailed in 9. below.

**Medium** = A full Equality Analysis must now be completed, ensuring engagement with appropriate internal stakeholders

**High** = A full Equality Analysis must now be completed ensuring engagement with appropriate internal and external stakeholders

9. Reasons for non-applicability	
Equality strand	Reasons
Age	No impact – policy was reviewed and does not have any negative impact to this characteristic
Disability	No impact – policy was reviewed and does not have any negative impact to this characteristic
Gender reassignment	No impact – policy was reviewed and does not have any negative impact to this characteristic
Marriage and civil partnership	No impact – policy was reviewed and does not have any negative impact to this characteristic
Pregnancy and maternity	No impact – policy was reviewed and does not have any negative impact to this characteristic
Race	No impact – policy was reviewed and does not have any negative impact to this characteristic
Religion and belief	No impact – policy was reviewed and does not have any negative impact to this characteristic
Sex	No impact – policy was reviewed and does not have any negative impact to this characteristic
Sexual Orientation	No impact – policy was reviewed and does not have any negative impact to this characteristic

10. Manager Approval	
Signed	Clinical Director
Date	18.06.2019