

DIGITAL HEALTH AND CARE WALES

HANDLING CONCERNS AND COMPLAINTS

This Policy sets out the process for handling of any concerns or complaints raised with the organisation

Document Version	3
-------------------------	---

Status	Approved
---------------	----------

Document author:	Laura Tolley, Head of Corporate Governance
Approved by:	Chris Darling, Board Secretary
Date approved:	March 2023
Review date:	March 2026

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services
----------------------------	--

WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 9001
If more than one standard applies, please list below:	

HEALTH CARE STANDARD	Safe Care
If more than one standard applies, please list below:	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission:17/03/2021
Yes, applicable	Outcome: Positive
<p>Statement:</p> <p>This policy is predominantly intended as an internal facing policy which describes the staff responsibilities and the organisational structures needed to support the concerns management process.</p> <p>The policy is intended to make the concerns management process as quick and as fair as possible, with concerns being assessed on the basis of facts and in accordance with the Regulations. It is therefore felt that the impact is largely positive.</p>	

APPROVAL/SCRUTINY ROUTE:		
Person/Committee/Group who have received or considered this paper prior to this meeting		
COMMITTEE OR GROUP	DATE	OUTCOME
Management Board	16/09/22	Approved
Local Partnership Forum	04/10/22	Noted
Audit and Assurance Committee	18/10/22	Approved
Board	24/11/22	Approved

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Safe services
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	Links to Putting Things Right
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below
	Potential for shared claims
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

TABLE OF CONTENTS

1	DOCUMENT HISTORY	5
1.1	REVISION HISTORY	5
1.2	REVIEWERS	5
1.3	AUTHORISATION	5
2	DOCUMENT LOCATION	5
3	Policy statement	6
4	Scope	6
5	Purpose	6
6	Complaints included under the policy	7
7	Complaints excluded under the policy	7
8	Roles and responsibilities	8
8.1	Chief Executive	8
8.2	Responsible officer – Head of Corporate Services	8
8.3	Director role	9
8.4	Investigating Officer	9
8.5	All staff	9
9	Process for handling a Concern	9
10	Process for handling an Informal Complaint	10
11	Principles for handling a Formal Complaint	10
12	Consent	11
13	Two Stage Investigation process for a Formal Complaint	11
14	Making a Formal Complaint	12
15	Staff support	12
16	Quality assurance	13
17	Reporting mechanism monitoring the process	13
18	Investigations undertaken by the Public Services Ombudsman for Wales	13
19	Equality and Welsh Language	14
20	Storage and Management of Complaints Files	14
21	GETTING HELP WITH THIS POLICY	14



1 DOCUMENT HISTORY

1.1 REVISION HISTORY

Date	Version	Author	Revision Summary
01/04/2022	2	Julie Ash, Head of Corporate Services	Review to reflect enhanced methods of communicating concerns/complaints
March 2023	3	Laura Tolley, Head of Corporate Governance	Review to reflect DHCW being recognised as a public body under Putting Things Right Guidance from 1 April 2023.


1.2 REVIEWERS


This document requires the following reviews:

Date	Version	Name	Position
01/04/2022	2	Sophie Fuller Chris Darling	Corporate Governance and Assurance Manager Board Secretary
March 2023	3	Julie Ash	Head of Corporate Services

1.3 AUTHORISATION

Signing of this document indicates acceptance of its contents.

Author's Name:	Laura Tolley
Role:	Head of Corporate Governance
Signature:	 Recoverable Signature X Laura Tolley _____ Laura Tolley Corporate Governance Manager Signed by: Laura Tolley (la228267)

Approver's Name:	Chris Darling
Role:	Board Secretary
Signature:	 Recoverable Signature X Chris Darling _____ Chris Darling Board Secretary Signed by: Andrea Harris (An286780)

2 DOCUMENT LOCATION

Type	Location
Electronic	Integrated Management System / iPassport

3 POLICY STATEMENT

Digital Health & Care Wales (DHCW) is a national organisation focused on building and designing digital services for health and care in Wales.

However hard we try to deliver high quality systems and services, we do recognise that, on occasion, it could be possible for our service may fall short of expectations and give rise to Concerns or Complaints.

We deliver our functions by working in close cooperation with partners such as Welsh Government NHS Health Boards, NHS Trusts and Social Care. It is important that in considering any Concerns or Complaints we are cognisant of their role and contribution. The difference between a Concern and a Complaint

Concern. DHCW regards a Concern as an expression of worry or doubt over an issue considered to be important for which reassurance is sought.

DHCW will aim to resolve Concerns at the earliest opportunity. The process for handling a Concern is outlined in Section 9.

Complaint. DHCW regards a Complaint to be any expression of dissatisfaction about a DHCW action, or lack of action, or about the standard of service provided by us or on our behalf.

DHCW will aim to resolve a Complaint at the earliest opportunity.

The process for handling a Complaint informally (Informal Complaint) is outlined in Section 10 below.

Where an individual wishes to raise their Complaint formally (Formal Complaint) they may do so through raising a Complaint in accordance with Section 11 below.

4 SCOPE

A Concern or Complaint can be made under this policy by anyone. A DHCW employee can raise a Concern or a Complaint under this policy where the issue does not come under the All Wales Disciplinary, All Wales Respect and Resolution Policy or NHS Wales Raising Concerns Policy.

Whoever raises a Concern or makes a Complaint will suffer no detriment as a consequence of doing so.

5 PURPOSE

This document details DHCW's process for dealing with Complaints and Concerns and outlines how this should be managed.

The DHCW Special Health Authority is recognised as a body under the Putting Things Right (PTR) Regulations from 1 April 2023 and will operate in line with the PTR Guidance, in addition to working with Welsh NHS bodies in any investigation they carry out which the SHA has an indirect involvement.

Through the effective management of the process DHCW will aim, where possible and appropriate, to put things right. Where it is not possible to resolve matters to the satisfaction of the complaining party, we will explain why this is not possible and advise that they may raise the matter with the Public Service Ombudsman for Wales.

The DHCW Board supports organisational learning, which is then shared locally throughout DHCW. A key requirement is therefore the sharing of lessons learned arising from Complaints with the staff involved and, where relevant, the wider organisation and external stakeholders in order to share good practice and bring about real improvements.

DHCW welcomes the comments of service users, both positive and negative as these help us to improve our service.

This policy should also be read in conjunction with the Health and Social Care (Quality and Engagement Act) (Wales) 2020 and in particular Part 3 of the Act which covers the Duty of Candour.

6 COMPLAINTS INCLUDED UNDER THE POLICY

The Paragraphs below anticipate the areas that will be considered under our Complaints Handling Policy (this is not an exhaustive list).

It is anticipated that matters will be raised by staff or members of the public in respect of the following areas:

- a failure to provide or an adequate level of service;
- a lack of information and clarity;
- a difficulty in contacting DHCW;
- the treatment by or the attitude of a member of our staff;
- environmental issues;
- domestic issues;
- operational and procedural issues;
- a failure by us to follow the appropriate process; and
- dissatisfaction with the Complaints Handling Policy.

A Complaint by a member of DHCW staff that cannot be raised under the All-Wales Disciplinary Policy,

All Wales Respect and Resolution Policy or NHS Wales Raising Concerns Policy can be dealt with under this Policy.

7 COMPLAINTS EXCLUDED UNDER THE POLICY

The following are matters which we cannot deal with under our Complaints Handling Policy:

- the subject matter can be raised by a member of staff under the All-Wales Disciplinary Policy, All Wales Grievance Policy, or NHS Wales Raising Concerns Policy.
- a Complaint that has been investigated by the Public Services Ombudsman for Wales;
- a Complaint which arises out of an alleged failure of the Organisation to respond to a Freedom of Organisation request or Data Subject Access Request;
- matters relating to services not provided by or funded by DHCW;
- a Complaint where the complainant has already commenced legal proceedings, or has clearly indicated and intent to do so, rather than pursue the matter under this Complaints Handling Policy;
- a previously concluded Complaint or a request to have a Complaint reconsidered where DHCW has already given our final decision;
- a Complaint covered by Policies of other organisations;
- to patient treatment and care as DHCW does not treat patients directly (however see section 5);
- to disciplinary proceedings that DHCW is taking or proposing to take, arising from the investigation of a Complaint notified and dealt with in accordance with this Policy. In such circumstances these would be via DHCW's workforce procedures.

8 ROLES AND RESPONSIBILITIES

8.1 Chief Executive

The Chief Executive has overall responsibility for dealing with Complaints. This responsibility has been delegated on a day-to-day basis in accordance with the remaining provisions of this section 8.

8.2 Responsible officer – Head of Corporate Services

DHCW has designated the Head of Corporate Services to act as the responsible officer to oversee the day-to-day management of these arrangements.

The responsible officer ensures arrangements are in place to:

- manage and consider Complaints;
- ensure that Complaints are dealt with in compliance with this Policy;
- ensure arrangements are in place to review the outcome of all investigated Complaints to ensure that any failure in provision of service identified during the investigation are acted upon, improved and monitored in order to prevent recurrence;

- ensuring that an annual report is prepared summarising the organisation's activities in respect of Complaints.
- ensuring that arrangements for dealing with Complaints are published and that a copy of the arrangements is given free of charge to any person who requests it, in the format requested.

The Board Secretary can delegate responsibilities for Complaints to an authorised person but remains the accountable person in any situation.

8.3 Director role

It is the responsibility of the appropriate Director to undertake the investigation of a Complaint, appoint the Investigating Officer and to support their managers in conducting investigations within a timely manner to achieve the response targets. They are also responsible for undertaking quality assurance reviews of Complaint responses before they are submitted to the Chief Executive and Board Secretary. Directors are required to address any issues in relation to the quality of the investigation within their areas and to ensure lessons are being learnt and shared across the organisation, as appropriate, to improve services and prevent reoccurrence.

In certain circumstances it may not be deemed to be appropriate for a Director to undertake responsibility for an investigation arising from a Complaint in respect of their Directorate. This may arise where a Director is, for example, conflicted or too closely associated with the subject matter of the Complaint. In such circumstances a Director may be appointed from a different area of the organisation to ensure objectivity.

8.4 Investigating Officer

Complaints should be investigated by the most appropriate manager from the service area, function or programme appointed by the relevant Director. Investigating Officers will possess subject expertise to apply to the investigation and will work with a range of other managers and staff throughout the organisation to assist investigations. Where deemed appropriate an Investigating Officer may be appointed from a different area of the organisation to ensure objectivity. The Investigating Officer will receive appropriate training, this shall include wider training around cultural competencies and biases.

8.5 All staff

All staff must be aware of the organisational policies and procedures to ensure they know how to:

- deal with Complaints;
- learn from Complaints;
- cooperate fully and openly in the investigation of Complaints.

If a member of staff is involved at any level with a Complaint that involves a conflict of interest, they must declare an interest. Any Investigating Officer or person signing off a Complaint must not have any conflict of interest with either the complainant or the person about whom the Complaint is made.

9 PROCESS FOR HANDLING A CONCERN

A Concern may be raised by e-mail, in writing or by telephone.

Concerns will be resolved informally, without the need to use DHCW's formal Complaints process. DHCW will always try to deal with a Concern quickly and seek a swift resolution where possible.

Concerns should be logged through forwarding an email headed 'Concern' via the Feedback Form on the DHCW Internet Site. The email shall contain a brief description of the Concern.

Concerns may also be raised in writing to:

Chief Executive
Digital Health & Care Wales
Ty Glan-yr-Afon
21 Cowbridge Road East
Cardiff
CF11 9AD

If someone wishes to talk through their concern on the telephone, they should call 029 2050 0500 and state that they wish to raise a concern. The Receptionist will take details and arrange for an appropriate person to call them back on the same day.

The Concern must be made within three months of the event that has raised the concern.

10 PROCESS FOR HANDLING AN INFORMAL COMPLAINT

An Informal Complaint may be raised by e-mail, in writing or by telephone.

Many Complaints will be resolved informally without the need to use DHCW's formal Complaints process. DHCW will always try to deal with an Informal Complaint quickly and seek a swift resolution where possible.

All Complaints which are resolved informally should be logged through forwarding an email headed 'Informal Complaint' via the Feedback Form on the DHCW Internet Site. The email shall contain a brief description of the Informal Complaint.

Informal Complaints may also be raised in writing to:

Chief Executive
Digital Health & Care Wales
Ty Glan-yr-Afon
21 Cowbridge Road East
Cardiff
CF11 9AD

If someone wishes to talk through their informal complaint on the telephone, they should call 029 2050 0500 and state that they wish to raise an informal complaint. The Receptionist will take details and arrange for an appropriate person to call them back on the same day.

The Informal Complaint must be made within three months of the event that is being complained about.

11 PRINCIPLES FOR HANDLING A FORMAL COMPLAINT

DHCW is committed to dealing with Complaints in an open, accessible, and fair manner. The process set up for the investigation and handling of Formal Complaints will ensure:

- there is a single point of entry for the submission of Complaints;
- Complaints are properly investigated in an open and efficient manner;
- the complainant is treated with respect and courtesy;
- the complainant's expectations are established and their involvement in the process sought;
- the Complainant is advised of a named person who will act as their contact throughout the handling of their Complaint;
- the complainant is advised of the availability of assistance to enable them to pursue their Complaint;
- the complainant receives a timely and appropriate response to their Complaint and is kept informed if there is a delay;
- the complainant is informed of the outcome of the investigation;
- the complainant is assured that if the Complaint is upheld, appropriate action has been/will be taken as a result of their raising a Complaint to prevent similar cases arising.

We will develop an understanding of why some members of the community who may wish to raise a Concern might not feel able to do so. This may be due to cultural, social, gender and other reasons, including sensory loss, any of which might result in ineffective communication. Staff should be mindful of the issues which might act as a barrier to people raising a Concern and look for ways to assure people that it is safe for them to raise an issue.

12 CONSENT

Information contained within a Complaint falls within the definition of personal data contained within the Data Protection Act 2018. Anyone can raise a Complaint and DHCW has a duty to consider whether it can be investigated. The investigation may need access to the person raising the Complaint's records.

Implied consent. Where the service user raises the Complaint regarding him or herself, then in doing so it can be deemed as implied consent to undertake an investigation. However, for the individual to be clear in the knowledge that their records may need to be accessed this should be explained in the acknowledgement letter, as this provides them with an opportunity to indicate that they do not wish their records to be accessed.

Required Consent. Where a representative raises a Complaint on behalf of someone else then they must provide proof that they have received such an instruction from the Complainant. A consent form will be made available on our website to support the process.

13 TWO STAGE INVESTIGATION PROCESS FOR A FORMAL COMPLAINT

The process through which an individual should raise a Formal Complaint is outlined in Section 14

below. DHCW will acknowledge a Formal Complaint within two working days of receipt.

An Investigating Officer will be allocated to a Formal Complaint within three days of its receipt.

Stage One: early local resolution DHCW will always try to resolve a Complaint quickly and within ten working days of receipt of the Complaint where possible. Where appropriate, this could mean an on-the-spot apology and an explanation if something has clearly gone wrong, and immediate action to resolve the problem. Where it is not possible to resolve a Complaint through the Stage 1 Process within ten working days DHCW will confirm this in writing through a holding letter which will confirm the additional required time.

Stage Two: Investigation

In the event that the Complaint is not resolved to the satisfaction of all parties through the Stage One process or, DHCW deems the Complaint is more complex requiring more detailed investigation, the Stage Two procedure will be followed.

DHCW will provide its response as soon as possible. This will be no more than 30 working days after the receipt of the Complaint unless there is clearly a good reason for needing more time. Where such additional time is required DHCW will confirm this in writing through a holding letter. Where a Complaint has been escalated from Phase 1 to a Phase 2 the 30 working days shall be measured from the date of escalation.

14 MAKING A FORMAL COMPLAINT

The person making the Formal Complaint, or their representative, should inform the Chief Executive via the Feedback form on our Internet site headed 'Formal Complaint' or in writing to the Chief Executive Officer, at Tŷ Glan-yr-Afon, 21 Cowbridge Road East, Cardiff, CF11 9AD

To assist DHCW to respond to the Complaint as quickly as possible it should contain the following information:

- complainant's full name and address, and email address if this is the preferred method of contact,
- when the event happened;
- where the event happened;
- how the person making the Complaint would like DHCW to resolve the matter.

If the person would rather talk through their complaint on the telephone, they should call 029 2050 0500 and state that they wish to raise a complaint. The Receptionist will take details and arrange for an appropriate person to call them back on the same day.

The Complainant will receive an acknowledgement of their Complaint within two working days of it being received by DHCW.

The Complaint must be made within three months of the event that is being complained about.

DHCW will accept Complaints from the representatives of a person who is making a Complaint. This is subject to us having first received confirmation in writing that the person making the Complaint has appointed a representative to act on their behalf in the matter.

15 STAFF SUPPORT

Information about the investigation must be given to the staff involved in a truthful and open manner although if imparting this information may jeopardise the investigation, then it is advised not to inform the member of staff.

The line manager of a member of staff who is a subject of a Complaint needs to consider what level of support they may need, as the member of staff may feel anxious and need reassurance and support as the investigation progresses.

In collaboration with the member of staff, referral to appropriate staff support services should be considered as required. Staff may also seek support from their relevant professional bodies or representative union.

16 QUALITY ASSURANCE

The organisations quality assurance process includes a review of investigations and response letters by the relevant Director and Head of Corporate Services.

It is the organisations policy that no final response letters should be sent by Managers directly to the person raising the Complaint. All final response letters must be approved and sent from the Chief Executive or nominated deputy.

17 REPORTING MECHANISM MONITORING THE PROCESS

All Complaints are monitored to ensure they have been adequately investigated, remedial action taken and that lessons have been learnt. DHCW's Executive Team will consider Complaint reports and make recommendations as appropriate.

All serious Complaints raised will be reported to the Management Board. Details of the subject and nature of the Complaints, together with the outcome of the investigations must be recorded.

Compliance with the stated time periods for response are monitored and reported. The Board will be made aware of Complaints which may adversely affect the reputation of the Board by the Chief Executive supported by the Board Secretary.

DHCW's performance in respect of handling Formal Complaints will be monitored and reported upon through the Governance Section of the Integrated Performance Report.

An annual report will be provided to the Audit and Assurance Committee. The report will include the number of Complaints notified, the number of Complaints referred to the Public Services Ombudsman for Wales and the number of matters referred to redress.

This Policy will be monitored by the Management Board and the Audit and Assurance Committee and will be subject to review in light of new guidance legislation or organisational change.

18 INVESTIGATIONS UNDERTAKEN BY THE PUBLIC SERVICES OMBUDSMAN FOR WALES

If the person raising the Complaint remains dissatisfied following a Stage 2 Process outcome the person raising the Complaint can refer the matter to the Public Service Ombudsman for Wales.

Contact details of the Public Services Ombudsman for Wales must be provided within the response letter to the person raising the Complaint.

19 EQUALITY AND WELSH LANGUAGE

DHCW shall undertake the implementation of this policy in accordance with the Equality Act 2010. Under the Act people are not allowed to discriminate, harass, or victimise another person on the basis of a protected characteristic defined as: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation.

It is important where the Welsh Language forms part of the Complaint that the Complainant is advised that as well as the Public Services Ombudsman for Wales, they can take their Complaint to the Welsh Language Commissioner if they remain unhappy. This information should be included within the final response letter as appropriate.

Staff should also be sensitive to the requirements of Welsh speakers in the handling of their Complaints. Arrangements should be put in place to ensure they are able to raise their Complaints, discuss them with Welsh speaking members of staff and receive a response in Welsh.

20 STORAGE AND MANAGEMENT OF COMPLAINTS FILES

This file is the responsibility of the Investigating Officer. It is the responsibility of the Head of Corporate Services to ensure that when closing the Complaint, the file is complete, accurate and holds no contentious remarks as the information is disclosable.

21 GETTING HELP WITH THIS POLICY

If you require support on any element of this policy please contact the Head of Corporate Services or the DHCW.CorporateGovernance@wales.nhs.uk inbox.

APPENDIX 1

Concerns and Informal Complaint Process	Recording	Resolution
<p>A Concern or Informal Complaint must be raised with three months of the event</p>	<p>Concerns should:</p> <ul style="list-style-type: none"> • be logged by completion of the Feedback Form on the DHCW website, with the title "Concern" in the header; or • be made in writing to DHCW Headquarters; or • be logged with DHCW Corporates Services via the main switchboard number. <p>The submission should contain a brief description of the matter.</p> <p>Informal Complaints should be logged as above with the title "Informal Complaint" in the header</p> <p>The submission should contain a brief description of the matter.</p>	<p>DHCW will aim to resolve matters as soon as possible</p>

APPENDIX 2

Complaints Procedure	Stage One: Early, local resolution	Stage Two: Investigation	The Public Services Ombudsman for Wales
<p>A complainant or their representative can make a Formal Complaint via the Feedback Form located on the DHCW website with “Formal Complaint” in the title or in writing to the Chief Executive at Tŷ Glan-yr-Afon, 21 Cowbridge Road East, Cardiff, CF11 9AD or logged by telephone with DHCW Corporate Services on the main switchboard number</p> <p>The Formal Complaint must be raised within three months of the event.</p> <p>The following information is required to support a Formal Complaint:</p> <ul style="list-style-type: none"> • Complainant’s full name and contact details • When the event happened • Where the event happened • How the person making the Complaint would like DHCW to resolve the matter 	<p>The Stage One Formal Complaint must be acknowledged by DHCW within <u>two</u> working days.</p> <p>An Investigating Officer is to be appointed within <u>three</u> working days.</p> <p>We will try to resolve a Stage One Formal Complaint quickly within <u>ten</u> working days if we can.</p> <p>We will keep the complainant updated on our progress</p>	<p>The Formal Complaint will be reviewed at this stage if the complainant is dissatisfied with our response under Stage One</p> <p>Or,</p> <p>If it is clear that the matter is complex or needs detailed investigation.</p> <p>The Stage Two Formal Complaint must be acknowledged within <u>two</u> working days.</p> <p>An Investigating Officer is to be appointed within <u>three</u> working days.</p> <p>We will aim to reach a decision as soon as possible. This will be after no more than <u>30</u> working days unless there is clearly a good reason for needing more time.</p>	<p>If, after receiving our final decision, the complainant remains dissatisfied with our decision or the way we have handled their Complaint, we will advise they can ask the Public Services Ombudsman for Wales to consider the matter.</p>