

COMPLAINTS POLICY

Summary	This document sets out the guidance and process of handling complaints at NCL Training Hub	
Version No.	1.0	
Accountable Director	Chief Executive Officer	
Groups/Individuals that were consulted	Programmes Managers 🗵	
and have approved	Borough Programmes Managers 🗵	
	Joint Operational Group 🗵	
Equality Impact Analysis Completed	This policy has been written in accordance with	
	the provisions of the Equality Act 2010 (EA 2010)	
Related Documents	Complaints Handling Process	
Approving Body	Joint Operational Group	
Date Approved	29/03/2023	
Disseminated to	All staff	
Next Review Date	31/03/24. To be reviewed annually.	

Version	Date	Changes/Reason	Name
1.1	27/02/2023	Document Creator	Marian Orafu
1.2			
1.3			
1.4			
1.5			





Table of Contents

Compla	ints Handling Process	3
1.0 Intro	duction	4
1.1	Purpose	4
1.2	Definitions	4
1.3	Policy Statement	4
1.4	Training and Support	
2.0 Sco	pe	4
2.1	Who the policy applies to	4
3.0 Role	es and Responsibilities	4
3.1	Responsible Person	4
4.0 Com	nplaints Procedure	5
4.1	How to make a complaint	5
4.2	Who can make a complaint?	5
4.4	Advocacy Services	5
4.5	Time limits to make a complaint	5
4.6	Acknowledgement	6
4.7	Investigating Complaints	6
5.0 Thir	d Parties	7
6.0 Con	fidentiality and Consent	8
7.0 Exc	eptions to the Policy	9
8.0 Equ	ality and Diversity Impact Assessment	9
9.0 Mon	itoring and Review	9
Append	ices	10
Append	ix (i) Complaint Review Form	10
Append	ix (ii) Online Complaint Form	12



Complaints Handling Process

A complaint is received

PMO Lead to log the complaint

Agree a local resolution

PMO Lead, acknowledges complaint within 3 working days

PMO Lead liaise with complainant (agree timescales, preferred outcome, response method)

Programme Manager investigates, get statements from involved parties

PMO Lead maintains regular communication with the complainant or representative

Programme Manager concludes investigation, document findings and learning – is it upheld?

Programme Manager writes an initial response including apology, what happened, learning

The initial response is sent to the PMO Team for review

Programme Director to review and approve final complaint response

Executive Lead and/or Clinical Lead to sign off the final complaint response

PMO team retains all documentation and records outcome on complaints register

PMO team sends written final formal response to complainant (or feedback as agreed)

* It may be necessary to liaise with external third parties such as commissioners in order to gather additional information or to formulate a joint response. Where this is the case the complainant or their representative must be advised accordingly.

All communications with the complainant, investigations, document findings and learning should be shared with the PMO Team.



1.0 Introduction

1.1 Purpose

The role of NCL Training Hub is to enhance training, education, and workforce development programmes in the NCL ICS (Integrated Care System)– with specific focus on enhancing the recruitment of new, and retention of current, staff. All programmes include working with the 5 NCL boroughs, Barnet, Camden, Enfield, Haringey, and Islington.

The purpose of this policy it to outline the NCL Training Hub's commitment to handling complaints raised about our services, and to ensure that all staff are aware of the complaints procedure thereby affording stakeholders or their representatives the opportunity to make a complaint about the service/s they have received.

1.2 Definitions

A complaint or concern is an expression of dissatisfaction about an act, omission, or decision, either verbal or written, and whether justified or not, which requires a response. There is no difference between a 'formal' and an 'informal' complaint. Both are expressions of dissatisfaction.

1.3 Policy Statement

The NCL Training Hub is committed to supporting a just and learning culture and taking seriously any complaints raised about a service we deliver. We will seek to ensure the satisfactory resolution of each complaint and aim to learn to improve our services. As an organisation that delivers NHS services, the NCL Training Hub is subject to the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (the Regulations). This policy also reflects the Parliamentary and Health Service Ombudsman's Principles of Good Complaints Handling. The policy also considers the following regulations and guidance:

- Parliamentary & Health Service Ombudsman's Principles of Good Complaints Handling 2009
- My Expectations 2014
- The NHS Constitution

1.4 Training and Support

The NCL Training Hub will provide guidance and support to help those to whom this policy applies, understand their rights and responsibilities under this policy. Additional support will be provided to managers, service leads and supervisors to enable them to deal more effectively with matters arising from this policy.

2.0 Scope

2.1 Who the policy applies to

This policy only applies to the handling of complaints relating to the services delivered by the NCL Training Hub. Complaints from NCL Training Hub staff or members are outside the scope of this policy.

If we receive a complaint that falls outside the scope of this policy, we will provide the complainant sufficient information to enable them to refer the matter to the relevant organisation.



3.1 **Responsible Person**

The Executive Lead has overall accountability for ensuring that the NCL Training Hub meets the statutory requirements as set out in this policy. The Executive Lead and/or Clinical Lead (if medically related) signs off all final complaints' responses. This responsibility may be delegated to another senior manager within the NCL Training Hub.

3.2 Lead investigator / Programme Managers

> Complaints will be managed centrally by the Project Management Office (PMO); however, Programme Managers (within their allocated remits) will collate information relating to the complaint, carry out the necessary investigations and respond to the complaint keeping in line with response deadlines.

3.3 NCL TH PMO Lead / team

> The PMO team will log the complaint on the master complaints spreadsheet, oversee timelines, liaise with those that need to respond, and correspond with the complainant. The team will also send the final response to the complainant and record the response and date on the master complaints record.

4.0 Complaints Procedure

4.1 How to make a complaint?

A complaint can be made by:

Email: nclicb.thcomplaints@nhs.net

Website: https://www.ncltraininghub.org/complaints

More information on how to make a complaint is available on the NCL Training Hub's website.

4.2 Who can make a complaint?

In line with the Regulations, a complaint may be made by "a person who receives or has received services" or "a person who is affected, or likely to be affected, by the action, omission or decision, which is the subject of the complaint".

A complaint may also be made by a representative acting on behalf of a person mentioned above. The NCL Training Hub will need consent given directly from the person concerned to provide information to the representative unless they already have a legal right to act on their behalf.

4.3 **Advocacy Services**

If the person complaining requires independent, confidential assistance with a complaint, they can contact the Independent Health Complaints Advocacy Service (IHCAS). IHCAS can provide them with support and advocacy through POhWER; their contact details are:

Website: www.pohwer.net Email: LondonIHCAS@pohwer.net Telephone: 020 3553 5960 Textphone: Send the word 'pohwer' and then your name and number to 81025 Fax: 01438 846 025

^{4.4} Time limits to make a complaint



A complaint must be made no later than 3 months from the occurrence giving rise to the complaint, or 3 months from the time that a person becomes aware of the matter about which they wish to complain.

If, however, there are good reasons for a complaint not being made within the timescale detailed above, consideration may be afforded to investigating the complaint if it is still feasible to investigate the complaint effectively and fairly. Should any doubt arise, further guidance should be sought from the PMO team by the investigating manager.

4.5 Acknowledgement

Where a complainant has specified the way in which they wish to be addressed, all communication from the acknowledgement stage onwards will follow that request.

An acknowledgement to a complaint:

- Must be within 3 working days of the complaint being received via nclicb.thcomplaints@nhs.net.
- Will be in writing unless the complainant has expressed that they prefer it via another means, where it may be verbal.
- Must include an offer to discuss the handling of the complaint.
- Must include an offer to discuss the timeframe for responding to the complaint.
- Should include a summary of what the complaint is about and, where unclear, offer to discuss the desired outcome.
- Must include information about local NHS Complaint Advocacy Services
- Will address any issues of consent.
- Must include the name and title of the complaints handler/team that will be the point of contact for the complainant throughout the complaints process.

4.6 Investigating Complaints

The NCL Training Hub will ensure that complaints are investigated effectively and in accordance with existing legislation and guidance. The NCL Training Hub will follow ten standards when addressing complaints:

- 1. The complainant has a single point of contact in the organisation and is placed at the centre of the process. The nature of their complaint and the outcome they are seeking is established at the outset.
- 2. The complaint undergoes initial assessment, and any necessary immediate action is taken. A lead investigator is identified.
- 3. Investigations are thorough, where appropriate, obtain independent evidence and opinion, and are carried out in accordance with local procedures, national guidance and within legal frameworks.
- 4. The investigator reviews, organises and evaluates the investigative findings.
- 5. The judgement reached by the decision maker is transparent, reasonable, and based on the evidence available.
- 6. The complaint documentation is accurate and complete. The investigation is formally recorded, the level of detail appropriate to the nature and seriousness of the complaint.
- 7. Both the complainant and those complained about are responded to adequately. The Programme Director will review and approve this response prior to completion.
- 8. Complaint response to receive final sign off by the Executive Lead and/or Clinical Lead.



- 9. The investigation of the complaint is complete, impartial, and fair.
- 10. Learning is identified as part of the complaint investigation process which is disseminated for wider learning where appropriate.

4.7 Response Times

The complainant has a right to be regularly updated regarding the progress of their complaint. The PMO team will provide:

- An initial response to acknowledge the complaint within three working days after the complaint is received.
- Resolution of the complaint within 25 working days (unless the complaint is complex in which case the length of time to respond will be negotiated with the complainant).
- If the investigation is likely to be protracted the complainant will receive updates during the investigation.

The PMO team will negotiate complaints plan with the complainant or their representative which will detail the agreed timescales for investigation. In many cases a prompt response, including an explanation and an apology, will suffice and prevent the complaint from escalating (an apology does not constitute an admission of organisational weakness).

4.8 Final Formal Response

Upon completion of the investigation, a formal written response will be sent to the complainant and will include the following information:

- An explanation of how the complaint was considered.
- An apology where appropriate.
- An explanation based on facts.
- Whether the complaint is fully, partly upheld or not upheld.
- The conclusions reached in relation to the complaint, including any remedial action that the organisation considers to be appropriate.
- Confirmation that the organisation is satisfied that any action has been or will be actioned.
- Where possible and if necessary, to use any lessons learnt to update processes and procedures.
- Information about what to do if the complainant is not satisfied with the outcome of the investigation.
- Contact details of the Parliamentary and Health Service Ombudsman as a further stage of the NHS complaints process.

4.9 Dissatisfied Complainants

If a complainant is dissatisfied with the response, the investigation can be re-instated in cases where new information comes to light.

The complainant will be offered the option to meet NCL Training Hub representatives in a face-toface meeting if they would like to discuss the complaint in more detail.

- 5.0 **Third Parties** (a responsible person or company outside the remit of NCL Training Hub e.g., delivery partners, sponsors)
 - Complaints relating to third parties may be received via email or our online form.



- Complaints relating to third parties will receive an initial acknowledgment within three working days confirming receipt of the complaint.
- A review will take place within ten working days.
- Once review has taken place communication will be sent to either advise:
 - That the complaint is outside the NCL Training Hub's remit and offer advice and guidance as to who may be able to help with the complaint.
 or
 - To confirm the complaint will be investigated by NCL Training Hub with an update to follow within 25 working days. This acknowledgement will clearly breakdown the areas which will be investigated as part of the complaint and make clear any areas which are outside the NCL Training Hub's remit and will not be investigated.
- An investigator will be assigned and will undertake the investigation:
 - Contacting the person raising the complaint to seek any additional information as required.
 - Contacting the relevant third party where the complaint relates to e.g. delivery partner, to seek further information and ascertain if they are aware of the complaint and what actions are being taken.
 - The nature of the complaint may be sensitive, or it may be of a whistleblowing nature therefore the investigator will ensure confidentiality of the individual making the complaint is maintained, unless explicit consent to reveal their identity is received.
- The investigator reviews, organises and evaluates the investigative findings.
- The judgement reached by the decision maker is transparent, reasonable, and based on the evidence available.
- The complaint documentation is accurate and complete. The investigation is formally recorded, the level of detail appropriate to the nature and seriousness of the complaint.
- Both the complainant and those complained about are responded to adequately. The Programme Director will review and approve response prior to completion.
- Complaint response to receive final sign off by the Executive Lead and/or Clinical Lead.
- The investigator will contact the relevant third party, where possible, prior to the release of any response to the complainant detailing the outcome of the investigation and any required action by the third party.
- The investigation of the complaint is complete, impartial, and fair.
- Learning is identified as part of the complaint investigation process which is disseminated for wider learning where appropriate.

Appeals are not allowed. The outcome of the investigation is final unless any new information, not raised as part of the initial investigation, is brought to the attention of the NCL Training Hub.

6.0 Confidentiality and Consent

The NCL Training Hub has a legal duty to maintain the confidentiality of personal information. NCL Training Hub staff will not access or share information pertaining to complaints without following existing policy or procedures.

Every complaint will be investigated with the utmost confidence. Complaint confidentiality will be maintained, ensuring only managers and staff who are involved in the investigation know the particulars of the complaint.



Where the NCL Training Hub must share details of a complaint in order to resolve it, consent will be sought from the complainant first.

All complaint details, any associated investigative information and responses will be securely stored electronically on the NCL Training Hub's shared drive. Limited access will be granted to this file, ensuring only senior NCL Training Hub managers have access to the complaints for which they are responsible.

7.0 Exceptions to the Policy

7.1 Fraud

Any allegations of fraud or financial misconduct should be referred to the Fraud, bribery, and corruption procedures.

7.2 Safeguarding

There may be circumstances in which information disclosure is in the best interest of the complainant, or the protection, safety or wellbeing of a child or adult at risk. In these circumstances, a complaint will be escalated as necessary in line with the NCL Training Hub's safeguarding policy and procedure.

8.0 Equality and Diversity Impact Assessment

This document forms part of the NCL Training Hub's commitment to create a positive culture of respect for all staff and all stakeholders. The intention is to identify, remove or minimise discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice and value the diversity of all individuals and communities.

As part of its development this document and its impact on equality has been analysed and no detriment had been identified.

9.0 Monitoring and Review

Compliance with this policy will be monitored by the PMO team, and, where necessary, through an independent periodic review by internal audit. The policy will be monitored as follows:

- Regular review and reporting of complaints by the PMO team, identifying any complaints whose handling did not follow the policy.
- An annual review of persistent complaints themes, and evidence of lessons learnt.
- Annual review and update of this policy, by the PMO team, to ensure it is still relevant and is line with existing official guidance. A review may be carried out sooner if the need arises.



Appendices

Appendix (i)– Complaint Review Form

Introduction

The purpose of the complaint review form is to enable NCL Training Hub to conduct a detailed analysis of every complaint received with a view to making recommendations for improvements to services and enhancing experience within the practice.

Any key points will be used to populate the Annual Complaints Review, identifying trends, and learning points for further development in the handling of complaints and routines within the practice.

Usage

This form can be used by the investigator and any other parties involved in the management of complaints at NCL Training Hub. Where the complaint involves more than one NHS organisation, discussions will take place between the bodies concerned about the most appropriate body to take the lead in coordinating the complaint and communicating with the complainant.

Complaint Review Form is shown below.



Complaint Review Form - NCL Training Hub

Complaint Ref	Full Name	Service/ Hub site	Date of review
Name of Third Party	if applicable)		

Summary of complaint:		

Summary of learning points (explain how this will be communicated to the team):

Action points:	To be completed by whom:	Date to be completed by:
1.	1.	1.
2.	2.	2.
3.	3.	3.

Date meeting held to discuss complaint (detail those present):

Review date (detail when the complaint was reviewed to ensure actions completed):

Investigating Manager Signature:	
Investigating Manager Signature:	
Date:	

Senior Manager Signature:	
Senior Manager Signature:	
Date:	



Appendix (ii) – Online Complaint Form

First Name	Surname
Job Title	Organisation Name
Email	Phone Number
Date of Occurrence Time of Occu	urrence Location of Occurrence

Reason for Complaint