

Complaints Handling Policy & Procedure

1. Purpose

This procedure:

- Outlines NHS Business Services Authority's (NHSBSA) complaints handling policy
- Describes the process for dealing with informal and formal complaints
- Defines responsibilities for responding to complaints

2. Scope

The NHSBSA's policy is that complaints should be resolved locally, quickly and informally wherever possible. In the event that complaints cannot be locally resolved, this procedure aims to ensure there is consistency across the NHSBSA for the handling of formal complaints.

The responsibilities for specific aspects of the formal complaints procedure are outlined where appropriate throughout this document.

This policy applies to all staff of the NHSBSA and those suppliers handling customers on our behalf, except where the supplier has a different process stipulated within contractual arrangements. Also, to ensure compliance with the Pensions Act, the Pensions Service may handle stages of this complaints process differently. Many of these differences are highlighted within this document however there may be further changes of which complainants will be made aware at the appropriate part of the process.

This policy does not apply to complaints specifically excluded from the NHS Complaints Procedure such as complaints made by an NHS body in relation to the work of another NHS body. For example, this policy does not apply to complaints by pharmacists against NHSBSA Prescription Services.

This policy will support complaints made against most of the services provided by the NHS Business Services Authority. However, on occasions this policy may not be appropriate. In such circumstances, a complaint should be directed in writing to the NHSBSA's Corporate Secretary.

3. Policy

It is the responsibility of each member of staff to provide good customer service and to try and resolve customer concerns as quickly, fairly and thoroughly as possible.

The NHSBSA views complaints as an opportunity to learn how we can continue to improve the services we provide to our customers. Where applicable, action is taken to ensure that the problem does not occur again.

The principles underpinning the NHSBSA complaints process are that it is:

- Easy to access and understand
- Speedy, with time limits for action, keeping people informed at all stages of the process
- Informative so that feedback from complaints can be used to review our practices
- Effective, ensuring all points raised are addressed positively and suitable remedies are provided
- Regularly monitored
- Fair to complainants and staff alike.

4. Definition of a Complaint

The NHSBSA definition of a complaint is:

“An expression of dissatisfaction that requires a response”

This includes dissatisfaction about the service provided, including the conduct of staff, or the process involved in deciding what action to take (or not to take).

The following are examples of things that are treated as complaints:

- Claims of unfair treatment
- Dissatisfaction about how we have dealt with a situation, for example, timeliness, clarity of information, confidentiality
- Claims that a poor standard of service has been provided (for example, losing documents, resulting in time delays and extra effort for the complainant)
- Claims that staff have been unhelpful or rude
- Dissatisfaction with the outcome of a decision that has been properly made.

5. Procedure

Stage 1 – Local Resolution (or informal complaints)

One of the underlying principles of the NHSBSA’s complaints process is that complaints are resolved at the earliest opportunity without escalating to the formal procedure.

In deciding whether a complaint should be formalised, the NHSBSA applies the following criteria:

- Can the complaint be easily resolved, either at the point of contact or via referral through service management within 10 working days or less?
- Can resolution be reached amicably?

If local resolution can be achieved, this constitutes an informal complaint.

It should be noted that any informal complaint can escalate to become a formal complaint.

An informal complaint should be resolved in no longer than 10 working days, other than in exceptional circumstances when the complainant should be kept informed of progress.

If an informal complaint cannot be resolved very quickly (i.e. within 2 working days), then an acknowledgement letter or email (emails should not contain any personal sensitive information) together with a brief summary of the complaint will be issued by the service complaints lead within 3 working days of receiving the complaint.

Consideration should be given to any improvement opportunities identified as a result of informal complaints, and reported for further investigation to the service's complaints lead.

All locally resolved complaints will be recorded for reporting and learning purposes.

Stage 2 – Formal Complaint

Where attempts at local resolution have been exhausted or where not possible, the complainant may choose to make a formal complaint. In such cases, a response is provided by the Managing Director of the Service involved.

Oral Complaint

Where a formal complaint has been made orally, or the complainant needs help preparing a written formal complaint, this will be facilitated on their behalf by the service's complaints lead.

An acknowledgement letter together with a summary of the complaint will be issued by the service complaints lead within 3 working days of receiving the complaint. This will also give the complainant the opportunity to add any further comments or information they consider to be relevant.

The timescale for investigating a formal complaint will not begin until the details of an oral complaint are confirmed as described above.

In line with pension regulations, all formal complaints regarding pensions have to be made in writing.

Written Complaint, including e-mail

The complaints lead for the service will acknowledge a written complaint within 3 working days of receipt setting out the expected process for resolution. The complainant will also be notified that a substantive reply will be sent by the service Managing Director within 25 working days of receipt of the complaint.

Investigation

The complaints lead for the service will carry out any further investigation required with the appropriate members of staff and prepare a draft response for the service Managing Director.

Response

The Managing Director of the service will review the draft response and the way in which the complaint has been handled and send a written response to the complainant within 25 working days of receipt of the complaint.

The response will address the issues raised and notify the complainant of the appeals process should they remain dissatisfied.

Due to different regulations within the Pension Service, the Case Manager is likely to respond to a pension's complainant at this stage rather than the Managing Director.

Delays

If it is not possible to provide a response within 25 working days, the complainant will be informed of the reason for the delay as soon as possible (but no later than 25 working days) and a revised response date will be set.

Stage 3 – Appeals

If a complainant remains dissatisfied they will have the right of appeal to the Chief Executive (CEO) of the NHSBSA. This appeal process will be made clear to the claimant at the response stage above.

Upon receipt of the complainant's letter of appeal, the CEO will acknowledge receipt of the appeal within 3 working days.

The CEO will allocate the complaint to a senior member of staff, independent of the issue being complained about, who will investigate the complaint, report their findings and provide a draft response for the CEO.

The CEO will respond to the complainant no more than 15 working days from the date of receipt of the appeal. If any extension to this timescale is required, the CEO should notify the complainant of the reason for the delay soon as possible (but no later than 15 working days) and a revised response date will be set.

The letter from the CEO would also detail the options available for further redress to the complainant should they remain dissatisfied (i.e. referral to Health Service Ombudsman).

Pension regulations involve a two stage appeal process before involving the Ombudsman.

Stage 4 – Health Service Ombudsman (or Scotland/Wales equivalent)

When a complaint remains unresolved and progresses to the Health Service Ombudsman, the service complaints lead in conjunction with the relevant service Managing Director will provide any information the Health Service Ombudsman may request in relation to the complaint.

Complaints regarding pensions will progress to the Pensions Ombudsman.

6. Evaluation and Reporting

Evaluation

Complaints evaluation is carried out on a regular basis (monthly or quarterly depending upon numbers) by the service complaints lead and senior management team members to:

- Determine whether recent complaints have been justified or not.
- Consider whether any improvement opportunities have been identified as a result of recent complaints.
- Make recommendations for remedial action to prevent recurrences.

Reporting

The complaints lead within each service will report to the local senior management teams and the NHSBSA's Corporate Secretary on volumes, nature and outcomes of complaints on a quarterly basis.

Complaints reports will categorise each complaint under the following headings:

- Availability of services and information
- Quality of information
- Timeliness of services
- Feedback on staff
- Security of information
- Operational issues
- Compliance
- Other

In addition to the statistical report, the service complaints lead will provide a brief description of any appeals and outcomes together with any other issues they consider need to be brought to the senior management team's attention.

The quarterly report will summarise:

- Category of the complaint
- Details of the complaint
- Action taken
- Any follow up action identified / required
- Response timescales
- Outcome of complaint (whether justified, not justified or partly justified)

A composite end of year report will be produced by the Corporate Secretary for review by the NHSBSA Leadership Team.

Updated July 2009 (amended Oct 09)