NHS
Cornwall and
Isles of Scilly

Complaints and compliments policy

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1. Introduction

This policy sets out the way in which NHS Cornwall and Isles of Scilly Integrated Care Board (NHS CIOS) handles complaints and compliments made regarding the decisions it makes and the actions taken by staff. This is in line with the 2009 NHS complaints regulations.

2. Purpose

The purpose of the policy is to inform people how NHS CIOS will deal with complaints made to the organisation and to inform staff of the complaints policy and processes to be adhered to.

The policy will help to ensure the organisation is compliant with statutory complaints regulations.

3. Responsibilities

It is the responsibility of NHS CIOS to ensure complaints are dealt with efficiently, are properly investigated and complainants understand how to make a complaint and are treated with respect throughout the process.

All staff are responsible for passing complaints to the complaints team. They are also responsible for responding to requests for information from investigating officers and ensuring they are aware of this policy.

All managers are required to cooperate fully with the complaints manager in relation to the investigation of complaints and to ensure that all staff are aware of the complaints policy and procedures, and for maintaining a culture whereby individuals feel confident in complaining without fear of jeopardising their care.

Directors are responsible for delegating any investigation requirements to their team and for approving complaints responses related to their directorate. They are also responsible for ensuring identified learning from complaints is implemented.

The complaints manager has overall responsibility for the day-to-day conduct and control of all complaints and the associated process. The complaints manager will report to the appropriate internal committee to ensure they are made aware of any themes regarding complaints raised against the organisation. The complaints manager will also update the policy as appropriate and in line with any changes in practice or regulation.

The accountable officer retains overall accountability for complaints within NHS CIOS, but the day-to-day management has been delegated to the complaints manager.

4. Aims and objectives

The main objective of the policy is to ensure that complaints are dealt with as quickly, appropriately, and as close to the source of the problem as possible.

The policy aims to ensure:

- ease of access to the complaints process
- a flexible, person-centred approach to problem solving
- a high profile for complaints within the organisation
- a means of providing information to the organisation so services or decision making can be improved
- compliance with statutory requirements and national standards

5. Definition of a complaint

The NHS complaints procedure, as set out in the regulations, is for people who are users of services and is not for staff grievances or organisational concerns.

It is not intended that every minor concern will warrant a full-scale complaints investigation. Rather, the spirit of the complaints procedure is that staff are empowered to resolve minor problems immediately and informally. The organisation will therefore seek to distinguish between requests for assistance in resolving a perceived problem and an actual complaint. The former will be dealt with in a flexible manner which is appropriate to their nature and the latter will be dealt with in accordance with the complaints regulations and this policy.

A complaint investigation is a ‘learning from experience’ process and not a disciplinary or compensation process. If there are immediate health issues or concerns for an individual, then these must be addressed in the first instance. The member of staff receiving the concerns will seek to support and prioritise this with the consent of the individual.

If the informal resolution of a complaint takes more than 24 hours, legislation requires that the complaint be recorded formally. In this case, staff must inform the complaints manager.

Feedback, which is not in the form of a complaint, but which gives the organisation cause for concern may be the subject of investigation and response of the same quality as a formal complaint, whether the informant has indicated a desire to have the matter dealt with as such. This will be explained to the individual and the reasons for investigation provided.

6. Who can complain?

A complaint can be made by any person who is receiving, or has received, NHS treatment or services. A person can complain if they, or a person they are acting on behalf of, are, or may have been, affected by an action, omission, or decision of NHS CIOS.

Complainants can include:

- carers and other representatives of NHS patients with the correct consent of the patient
- children and young people
- a person raising a complaint on behalf of a child, who has the legal ability to do so
- a person raising a complaint on behalf of NHS patients who are experiencing mental health problems, have a learning disability or a physical disability and lack capacity to make a complaint themselves or require support. Appropriate consent will be required
- a person raising a complaint on behalf of a deceased person if they demonstrate that they have written confirmation of being appointed as a representative or equivalent

7. Consent

Any person wishing to make a complaint on behalf of another must have written consent to do so from the person concerned. In some cases, it may be appropriate to obtain consent from a child if that child can understand the situation and can give informed consent. If an individual is unable to provide written consent, then proof of authority such as power of attorney is acceptable.

Every attempt will be made to obtain consent including enlisting help from specialist advocates when appropriate. If the person is not capable of providing consent, then the complaints manager with the support of senior managers will determine whether the complainant had sufficient interest in the person's welfare or is suitable to act as a representative.

If the issue is of a severe nature and consent cannot be obtained, then the complaints manager may request an internal investigation is commenced. This is particularly the case where there is potential for harm to an individual. In such instances, we will not share any personal, confidential or medical details resulting from the process.

8. Types of complaint

NHS CIOS is responsible for:

- complaints about the commissioning decisions that it has made or omitted to make

- complaints about continuing health care funding and process
- complaints about individual cases funding if individuals are dissatisfied
- complaints relating to the referral management service
- commissioned primary care services

9. Complaints about service providers and other NHS organisations commissioned by NHS CIOS

Providers of NHS services are responsible for investigating complaints regarding their services under local resolution, in accordance with the complaint regulations. NHS CIOS will not usually undertake an investigation into a complaint regarding a provider organisation. There are limited exceptions to this, cases of which must be agreed within NHS CIOS. The complainant will be advised to either complain directly to the organisation or NHS CIOS will forward the complaint to the relevant organisation, once consent to do this has been received.

However, NHS CIOS, if requested, will facilitate the complaints process between a provider that it commissions and the complainant should they wish not to communicate directly with the provider. The complaints team will liaise with any complainant who contacts NHS CIOS directly regarding their complaint and provide guidance to the complainant regarding contacting the appropriate organisation. The complainant can ask for a copy of the final response to be sent to the NHS CIOS complaints team for monitoring purposes.

Complaints may sometimes concern NHS CIOS and other local health or social care organisations. NHS CIOS has a duty to cooperate with these complaints and the investigations which may arise. In such situations it is the responsibility of the complaints manager to work with other organisations to ensure the complainant is fully aware of how the process works and to agree who will be the point of contact.

Primary care complaints

In line with the information above NHS CIOS would always encourage an individual to complain directly to the provider of the care. However, we recognise that in the case of primary care providers (GPs, dentists, pharmacy, optometry) some individuals may find this more difficult.

As a commissioner we can facilitate the investigation of such complaints. This will be managed by a southwest NHS hub and all complaints received by NHS CIOS regarding primary care will be sent to the hub for them to manage in line with the processes agreed with them.

The hub will ensure that appropriate consent is obtained and agree with the complainants the nature of the issues to be investigated prior to contacting the primary care provider to request an investigation. Any complaint relating to medical care will be

independently reviewed prior to a final response being approved by NHS CIOS. The ICB retains responsibility for this process and all responses will be signed by either the chief executive or a director with appropriate responsibility.

10. What complaints are NHS CIOS not responsible for?

The complaints policy does not apply, and the complaint will not be dealt with, when:

- The complaint is about private treatment
- The person wishing to complain does not meet the requirements of 'who may complain', and is not acting on behalf of such an individual
- The complaint is made by an employee relating to their employment
- The complaint is made by an organisation which provides health and social care services
- The complaint is regarding actions and decisions which fall outside of NHS CIOS's responsibilities and remit
- The complaint has already been fully considered through the complaints process
- When the issue has been referred to the Parliamentary and Health Service Ombudsman and is being investigated by them
- It relates to a data subject request under the Data Protection Act 2018 or a request for information under the Freedom of Information Act 2000
- Complaints which relate to an active legal case
- Concerns which are not about the individuals personal experience
- The individual refuses to provide their name or contact details
- Complaints made more than 12 months since the individual became aware of the issue

Where NHS CIOS declines to handle a complaint, it will notify the complainant of the decision and the reasons, providing signposting information of other organisations who may be able to support the complainant. The complainant has the right to refer this decision to the health service ombudsman.

Concerns from other organisations

In line with the national regulations, concerns submitted by organisations are not covered by the formal complaints policy. Any such concerns should be dealt with professionally and at the first possible opportunity. Should the complaints team receive these they will notify the appropriate director and ask them and their teams to respond to the issues raised directly.

11. Stage 1 of the complaints process

Local resolution procedure

The first step in the complaints process is local resolution. This gives NHS CIOS the opportunity to receive the concerns and be allowed the opportunity to investigate and respond to the concerns raised and put right any identified failings.

All complaints received by staff should be forwarded immediately to the complaints manager, ideally through scanning and secure emailing. We recognise that some people who complain may have pressing health needs, these are a priority and should be addressed before any matters relating to their complaint are addressed. A person's healthcare must not be negatively affected by their making of a complaint. Therefore, records of complaints must not be stored on any healthcare records held by NHS CIOS, such as continuing healthcare or individual funding requests. NHS CIOS's approach to complaints is non-adversarial, but rather supportive and understanding.

We recognise that raising a complaint for many can be a daunting prospect and the complaints team will support the complainant through the process. The person is supported to make their complaint by giving them information about the health complaints advocacy service if desired. Additionally, the complaints team will enquire as to any reasonable adjustments which may be needed to allow the person to raise their concerns.

Any subsequent action required to address a complaint, including the investigation of the complaint and provision of a draft response, must be treated as a priority task by staff to ensure procedural timescales are met.

Raising the complaint

Complaints can be made in writing or verbally. Verbal complaints will be recorded in writing by the complaints team and the complainant invited to confirm accuracy before investigation. Where appropriate, the complainant will be offered help in making a written statement with the option to do this through the health complaints advocacy service.

Complaints should be raised within 12 months of the event which has given rise to the complaint, or within 12 months of becoming aware that there was cause for complaint. This time limit shall not apply if NHS CIOS is satisfied that the complainant had good reason for not making the complaint within the time limit, and if it is still possible to investigate the complaint effectively and fairly.

Where possible the complaints manager will contact the complainant to discuss and agree a plan for handling the complaint, this may be through investigation or local resolution meeting or a mixture of both approaches. If it is not possible to speak with the complainant when the complaint is made, the acknowledgement letter or email will suggest a plan and invite the complainant to respond if the plan is not acceptable.

The NHS complaints regulations allow up to 6 months to provide a response to a complaint. However, NHS CIOS considers that 25 working days is a reasonable length

of time in which to investigate a complaint, however as primary care complaints are more complex in nature we allow 40 working days for responding. Should we be unable to meet the agreed deadline, a member of the complaints team will discuss the reasons for this with the complainant and discuss a revised timeline. An acknowledgement letter or email will be sent to the complainant within 3 working days of the complaint being received. The acknowledgement will give information about the health complaints advocacy service and on NHS CIOS's complaints procedure.

Investigation

Where an investigation needs to take place, an investigating officer will be identified. This will be either by being designated by a team manager as a subject matter expert, or as someone who has had no prior involvement in the issues to be investigated. They will be sent a full copy of the complaint and have a discussion with the complaints team about the case to be investigated to ensure clarity. It is good practice for the investigating officer to contact the complainant regarding their complaint, this is not always possible and advice and assistance will be given to investigating officers by the complaints team through the course of their investigation.

The complaints manager will ensure that where concerns are raised regarding an individual member of staff, the appropriate line manager will be informed and that they are provided with information to support their member of staff. The line manager will work with the complaints manager to determine the best placed individual to be the investigating officer.

Once all available evidence has been considered the investigating officer will provide the complaints team with the results of the investigation which may be in the form of a letter or report.

If the timescale cannot be met by the investigating officer, the complaints manager must be informed, and an extension agreed with the complainant.

The investigator's response will include:

- a letter or report into the complaint
- recommendations following investigation
- suggested actions to be taken because of the complaint

All complaint investigation information must be returned to the complaints manager to ensure compliance with data protection regulations.

The complaints manager will then draft a written response on behalf of the appropriate director which will include:

- an apology where appropriate
- an explanation of events

- details of any remedial action
- an invitation for further local resolution if complainant not satisfied
- the option to ask for a further explanation if the initial response is unclear
- information about the second stage of the NHS complaints procedure

This response will be agreed and approved by the appropriate director or the accountable officer prior to being sent. If the organisation does not send the complainant a response within 6 months of the complaint being received, the complainant will be notified, explaining the reason why. Any complaints reaching the 6-month timeframe will be highlighted to the senior management team by the complaints manager.

12. Risk assessment

The complaints manager will be mindful of the potential level of risk which a new complaint suggests and will ensure the local resolution process produces a method of resolution or investigation which reflects this, for example, investigation from outside of the department involved.

If information from complaints or evidence from other sources, including that provided by other staff, indicates that service users or staff could be at risk, the complaints manager will have the discretion to discuss the matter with the appropriate senior staff within the organisation and be guided by them as to the most appropriate action to be taken. This could include the matter being referred:

- under the disciplinary procedures
- to a professional body
- through the serious incident procedure
- to the police
- to the counter fraud officer
- through safeguarding procedures

The complaints manager will notify the head of corporate governance or deputy director for corporate governance if they have concerns about the risk associated with the complaints received.

13. Organisational learning and change from complaints

Following an investigation, the manager of the complained about service is responsible for ensuring that actions are taken when identified. Actions may provide remedy for the individual complainant and/or reduce the risk of any identified failure recurring.

The team or service manager is responsible for providing evidence of the completion of the actions. This evidence will be forwarded to the complaints manager.

Managers should use the issues raised in individual complaints to explore and, where appropriate, initiate service improvements. Issues arising from complaints, problems and other user feedback should be a standard item for discussion at team meetings. Where necessary the complaints manager will complete an action learning grid with the team or service manager following a complaint investigation.

The complaints manager will identify any themes which emerge from complaints, this will be reported to senior managers or the appropriate committee depending on the urgency of the concerns.

14. Stage 2 of the complaints process

Independent review

Once the local resolution procedure has been exhausted and should the complainant remain dissatisfied, they have the right to contact the Parliamentary Health Service Ombudsman (PHSO). This is the second stage of the complaints process.

NHS CIOS will provide all complainants with the contact details of the PHSO when dealing with their complaint in the first stage of the process. NHS CIOS will co-operate fully with the PHSO when requests for information are received. All staff involved in the handling of the original investigation may be requested to provide additional information and are required to co-operate with an investigation carried out by the PHSO.

The PHSO will determine if a full investigation is required and if it is they will investigate and then release a draft report, this will be shared with those involved in the complaint to ensure accuracy and give the opportunity to provide feedback. Once the final report is issued, any recommendations will be set out in an action plan and passed to the relevant director and accountable officer for their awareness and to ensure action is taken. A copy will also be passed to those involved in the original investigation. It is the responsibility of managers involved in a PHSO investigation to ensure that required actions are implemented in good time.

15. Reporting

An annual report will be submitted to the appropriate committee and published on NHS CIOS's website.

This will include:

- the number and subject matter of complaints received
- the number of complaints upheld
- actions taken as a result
- complaints referred to the ombudsman
- commentary on emerging themes

The complaints manager will report twice a year to the appropriate committee to advise of organisational complaints and any current themes or trends causing concern.

Complaints data will be uploaded when required to NHS Digital; this contains numbers only and no personal data will be transferred.

16. Duty of confidentiality

Care must be always taken throughout the complaints process to ensure that any information disclosed about the individual or complainant is confined to those who have a demonstrable need to know for the purpose of investigating the complaint or ensuring that the complaints procedure is followed.

It is good practice to explain to the complainant that information from their records may need to be disclosed to staff involved in managing the complaint and any independent review. If the complainant objects to this, then the impact on the investigation will be explained.

17. Support for staff

NHS CIOS appreciates the negative associations of complaints – that they happen when something has gone wrong or is perceived to have gone wrong – and it will, as far as possible, resist apportioning blame. The complaints manager will inform the appropriate line manager when a complaint has been made regarding a member of their team. Line managers will inform the staff of the details of any complaint made against them and their expectations of the member of staff during the process. For example, this may mean that there is a change in case load or duties to allow for investigation. Additionally, the line manager will make known the support available to the member of staff.

The investigating officer will contact the member of staff at the earliest opportunity to give them the opportunity to answer the complaint, and they will be kept informed of the progress of the complaint and its outcome.

NHS CIOS will support staff through the complaints process and does not expect staff to tolerate abuse from individuals at any point, including during a complaint investigation. Staff investigating complaints will be given support and guidance by the complaints manager on an as and when required basis.

18. Acceptable behaviour

Whilst it is understood that raising a complaint can be distressing and difficult for the individual, it should also be recognised that NHS CIOS has a duty to protect its employees and as such abusive or inappropriate behaviour will not be tolerated.

NHS CIOS operates an acceptable behaviour policy should complainants' behaviour become unacceptable during the course of or following a complaint, the complaints manager will refer them to the policy.

The policy defines unacceptable behaviour as any behaviour, including actions, words (written or verbal), physical gestures or tone of voice which could reasonably be perceived to cause distress or discomfort. It is not limited to face-to-face contact and can be through written, telephone, email, or social media communication.

19. Safeguarding

Safeguarding is a core responsibility of all staff, volunteers and organisations that provide care and support to adults and children at risk. If concerns are raised regarding suspected or actual harm of an individual through a formal complaint, it will be responded to in line with the appropriate safeguarding policies. This may delay the complaints process but will be explained to the complainant where possible.

20. Equality and diversity

NHS CIOS recognises that some groups and individuals may experience difficulties using the complaints process. NHS CIOS will ensure that complainants have the necessary support to have full access to and involvement in the complaints procedure. This includes accessible communication in line with the NHS Accessible Information Standard. These arrangements will be made on an individual case-by-case basis after discussion with the complainant or their representative. Similarly, the complaints manager and investigators will bear in mind how protected characteristics may have impacted on the complainant's experience of service provision.

Discrimination

NHS CIOS will not tolerate discrimination against a complainant that might occur because of their having complained. If the investigator, or any member of staff, believes that a complainant or their representative's care is adversely affected by having complained, they must contact the complaints manager. The complaints manager will bring this to the attention of the relevant director. If any allegations of discrimination are upheld, these will be dealt with under the organisation's disciplinary procedure. Equally NHS CIOS will not tolerate discrimination towards staff from those raising a complaint; this will be challenged by the complaints manager and reported appropriately.

21. Disciplinary procedures

The complaints procedure, being concerned only with resolving complaints and not with investigating disciplinary matters, is separate from the disciplinary procedure. With

regards to complaints about NHS CIOS employees, if a complaint investigation indicates a need for any of the following to be instigated:

- an investigation under the internal disciplinary procedure
- a professional regulatory body
- an independent inquiry into a serious incident under Section 84 of the NHS Act 1977
- an investigation of a criminal offence

The person in receipt of the complaint or investigation must pass the relevant information at once to the complaints manager, who will in turn ensure it is passed on to the person designated by NHS CIOS to take responsibility for deciding whether to initiate investigative action. Such a referral may be made at any stage of the complaints procedure. Paperwork relating to the complaints investigation may be used in any disciplinary or criminal investigation and will be retained by the complaints team.

The outcome of any investigatory action is a confidential matter between employer and employee. The organisation will need to take a decision on what to disclose to the complainant, whilst maintaining such confidentiality. The organisation will owe a duty of care to its staff member but also a duty to be open and honest with the complainant. The organisation will decide how much information is given. The people and organisational development team will be consulted for more definitive advice on a case-by-case basis.

22. Complaints and litigation

Even if the complainant's initial communication with NHS CIOS is via a solicitor's letter, it should not necessarily be inferred that the complainant has decided to take legal action in respect of the complaint. A hostile or defensive reaction to the complaint is more likely to encourage the complainant to seek information and a remedy through the courts. An open and sympathetic approach may satisfy the complainant. Where legal action has been started or an explicit intention to take legal action has been expressed, NHS CIOS's complaints manager will notify the head of corporate governance for advice on inclusion on the risk register and will take advice on whether any complaints investigation would prejudice the case.

Where the police are involved in any aspect of the complaint investigation, the NHS complaint handling would cease if the police investigators believed that to continue the NHS enquiry would endanger or hinder a criminal investigation and/or pervert the cause of justice. The complaint can then be recommenced when the police indicate it is appropriate to proceed.
Taking legal action does not prohibit use of the complaints procedure. The regulations state that complaints of this nature need to be handled in accordance with the regulations alongside any legal claims or action that is proceeding elsewhere.

23. Redress

Redress for complainants can take different forms. Remedies offered will vary according to the needs of the complainant, the findings of the investigation and any hardship that the individual has encountered. NHS CIOS will keep any commitments to provide remedies, provide an apology and explanation where relevant, acknowledge when things have gone wrong, accept responsibility where appropriate, and learn from any maladministration or poor service.

Although financial redress or compensation would normally need to be sought through legal channels, NHS CIOS has discretion to provide financial reimbursement of expenses or losses where fault has been found, for example, reimbursement of the cost of lost property.

24. Complaints about Freedom of Information Act

Complaints about Freedom of Information (FOI) are outside of the scope of the NHS complaints process. See the Freedom of Information Policy and Procedures. Any complaints of this nature will be forwarded to the FOI Officer.

25. Complaints about the Data Protection Act

Concerns relating to the Data Protection Act are not covered by the NHS complaints regulations and as such will be forwarded to the information governance manager for handling through the relevant procedures. Examples include the unauthorised disclosure of data to a third party without the consent of the individual about whom the record is held.

Complaints about data protection which would typically be considered under the NHS complaints procedure include unauthorised disclosure of complaints information, loss of files or refusal to access the files.

26. Training

Guidance and training on complaints management and investigation techniques will be provided on an individual basis, where appropriate. General training in complaints will be offered to all teams by the complaints manager on an annual basis. Team managers should determine if this is something required by their team and contact the complaints manager.

27. Unusual complaints

Unusual complaints may require the complaints process to be adaptive or responsive to the needs of the circumstances, they could involve, but are not limited to the following elements:

- cross internal or international borders
- repeat complaints with same elements
- regularly making totally new complaints
- from elected representatives
- those affected by their communications skills
- complainants who want disciplinary action against members of staff
- complainants who want to know the names of staff and other personal details
- when a complainant put limits on who can be interviewed about the complaint
- complainants who contact the organisation by phoning and writing to several people in the organisation (scatter gun approach)
- where a person is requesting an inappropriate form of redress to their issues

All complaints will be considered on their own merits and an open form of dialogue maintained with the complainant.

28. Compliments

Positive feedback such as letters of thanks, comments and suggestions should be passed to the complaints manager, along with any detail on how feedback is being used. This will be shared with the appropriate director.

Positive feedback will be included in the complaints annual report, together with any actions or developments arising from it.

29. Update and review

The policy will be updated on a three yearly basis, unless any changes occur in the meantime, at which point the complaints manager will update the policy.

30. Policies referred to in this document

2009 NHS complaints regulations
Acceptable behaviour policy
Data protection policy
Freedom of information policy

Appendix 1: Equality impact assessment

An equality impact assessment is used to establish how a policy or similar document may impact on individuals, communities, or equality groups to identify and minimise or remove any disproportionate impact.

Name of policy or service to be assessed: Complaints and compliments policy
Department or section: Corporate governance
Date of assessment: April 2025
Person(s) responsible for the assessment: Carmel Dodson-Brown
Is this a new or existing policy? Existing

Aims, objectives and purpose of the policy

Describe the aims, objectives, and purpose of the policy.
This policy sets out the way in which NHS Cornwall and Isles of Scilly Integrated Care Board (NHS CIOS) handles complaints and compliments. This includes responsibilities of staff and investigating officers. It aims to inform complainants and their relatives how NHS CIOS will deal with complaints made to the organisation. To inform staff of the complaints policy and process and to ensure the organisation is compliant with statutory complaints regulations.

Who is intended to benefit from this policy, and in what way?
All employees of NHS CIOS, those involved in the handling of complaints and patients and their relatives in understanding how complaints will be handled and any limitations of complaints handling.

What outcomes are wanted from this policy?
To ensure that all members of staff, service users, patients are clear regarding how complaints will be handled and reported.

What factors or forces could contribute or detract from the outcomes?
Awareness of the policy and the statutory requirements to report and investigate complaints. Willingness of the complaints manager and officer to support staff with complaints.
Negative associations of being named in a complaint.
Reluctance of staff to take on the role of investigating officer due to time pressures or inexperience.

Who are the main stakeholders in relation to the policy?
All staff of NHS CIOS and people in the community.

Who implements the policy, and who is responsible for the policy?
The complaints manager.

Differential impacts

Does this have a positive or negative impact on people who have a black, Asian and minority ethnic (BAME) background? How will any negative impact be mitigated?
Complaints may be received from all sections of society regardless of ethnicity. We are aware that those from BAME backgrounds are less likely to raise complaints, however complaints are welcome from all sections of society.

Does this have a positive or negative impact on people who identify as male, female or intersex? How will any negative impact be mitigated?
This policy should have a positive impact for carers who are more likely to be female. Carers may have cause for concern or raising a complaint.

What is the positive or negative differential impact on people from the perspective of disability? How will any negative impact be mitigated?
The NHS complaints regulations require complaints to be made in writing. In order to meet the needs of those unable to put their complaint in writing, the policy outlines that verbal complaints may be made and agreed with the individual. NHS CIOS has an easy read leaflet to outline the complaints process. As part of the acknowledgement process, all complainants are asked if they have any communication needs that the organisation should be aware of. This is in line with the NHS Accessible Information Standard. It allows us to meet any communication needs of the complainant through making reasonable adjustments. Reasonable adjustments can include, but are not limited to, an easy read response, large print information, information sent by email only. Additionally, there is a free advocacy service for those wishing to raise a complaint and unable to do so for themselves. NHS CIOS will bear in mind how protected characteristics may have impacted on the complainant's experience of service provision.

Does this have a positive or negative impact on people who identify as heterosexual, lesbian, gay, bisexual, pansexual or asexual? How will any negative impact be mitigated?
The complaints policy outlines that discrimination from either staff or complainant will not be tolerated and will be addressed by the complaints manager and referred to the people and organisational development team for advice and action where appropriate.

What is the positive or negative differential impact on people from the perspective of age? How will any negative impact be mitigated?
The complaints team receives a high percentage of complaints from older patients due to the nature of the work undertaken by the continuing healthcare team. This policy welcomes complaints regardless of age. As part of the acknowledgement process, all complainants are asked if they have any communication needs that the organisation should be aware of. This is in line with the NHS Accessible Information Standard. It allows us to meet any communication needs of the complainant through making reasonable adjustments.

What is the positive or negative differential impact on people from the perspective of religion or belief? How will any negative impact be mitigated?
No anticipated impact.

What is the positive or negative differential impact on people from the perspective of marriage and civil partnership? This is particularly relevant for employment policies. How will any negative impact be mitigated?
Not expected as marital status should not prevent an individual raising or investigating a complaint.

Does this have a positive or negative impact on people who identify as trans or transgender, non-binary, or gender fluid? How will any negative impact be mitigated?
The complaints policy outlines that discrimination from either staff or complainant will not be tolerated and will be addressed by the complaints manager and referred to the people and organisational development team for advice and action where appropriate.

Does this have a positive or negative impact on people who are pregnant, breast feeding mothers, or those on maternity leave? How will any negative impact be mitigated?
No anticipated impact.

Are they any other identified groups? How will any negative impact be mitigated?
Negative impact of the complaints process being written will be mitigated for those who require support by asking if individuals have any communication needs and responding to their needs as requested. This impacts not only those with a recognised disability but also those who are unable to communicate due to other restrictions such as access to resources needed to write a letter or email. Possible impacts upon carers are referenced above.

Human rights values

How have the core human rights values of fairness, respect, equality, dignity, and autonomy been considered in the formulation of this policy, service, or strategy?
The complaints regulations are in line with the requirements of the Human Rights Act. This policy outlines how NHS CIOS puts the complaints regulations into practice. The values of fairness, respect, equality, dignity and autonomy underpin the contents of the complaints and compliments policy. These are especially relevant with regard to article 6, right to a fair trial.

Which of the human rights articles does this document impact?

☒ To life
☒ Not to be tortured or treated in an inhuman or degrading way
☒ To liberty and security
☒ To a fair trial

☒ To respect for home and family life, and correspondence
☒ To freedom of thought, conscience, and religion
☒ To freedom of expression
☐ To freedom of assembly and association
☐ To marry and found a family
☒ Not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention
☐ To peaceful enjoyment of possessions

What existing evidence (either presumed or otherwise) do you have for this?
Reference to the Human Rights Statement and Guidance. The principles of article 6, right to a fair trial, should underpin the complaints procedure where complainants must be given every opportunity to express their views and any investigation must be conducted thoroughly, fairly and without bias.

How will you ensure that those responsible for implementing the policy are aware of the human rights implications and equipped to deal with them?
The Human Rights Statement and Guidance accompanies the equality impact assessment guidance and full impact assessment guidance, to provide comprehensive information for staff. This guidance is available for staff and members of the public on the NHS CIOS website and have been proactively disseminated via the staff bulletin.

Public Sector Value Act 2012

NHS COIS is committed and obliged to fulfil the requirements of the Public Sector Social Value Act 2012. This Act requires the organisations to consider how services commissioned or procured might improve the economic, social, and environmental wellbeing of an area.

Please describe how this will support and contribute to the local system, wider system, and community.
The complaints policy details how residents and patients can raise concerns about the local health system and services provided by the system, this allows for feedback and intelligence within the system.

Describe how the policy contributes towards eliminating discrimination, harassment, and victimisation.
This policy outlines what is considered to acceptable behaviour with regard to the complaints process. References to the acceptable behaviour process are made within the policy.

Describe how the policy contributes towards advancing equality of opportunity.
Advancing equality of opportunity between disabled people and non-disabled people includes consideration of the need to make reasonable adjustments. This policy clearly

outlines that NHS CIOS will be mindful that the reasons for perceived difficult behaviour may be of an individual having genuine issues, but due to memory or educational difficulties has difficulties expressing or dealing with these matters. The complaints manager will ensure the process is fair and the individual's needs and interests have been taken into consideration.

Describe how the policy contributes towards promoting good relations between people with protected characteristics.
Not applicable

If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services and or the working environment for that group of people.
By recognising that different groups of people may struggle to access or use the process and providing reasonable adjustments. For example taking a verbal complaint, providing access to advocacy and easy read leaflets.

Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.
Please see above

If the negative impacts identified have been unable to be mitigated through amendment to the policy or other mitigating actions, explain what your next steps are using the following equality impact assessment action plan.
Not applicable

Signed (completing officer): *Carmel Dodson-Brown*

Date: 15.04.2025

Signed (head of department or section): Terry Willows
Date: 15.04.2025

Please ensure that a signed copy of this form is sent to both the corporate governance team with the policy and the equality and diversity lead.