



Business Services
Organisation

Complaints Policy

And associated Procedure

Produced by the Human Resources and Corporate Services Directorate
Business Services Organisation
2 Franklin Street, Belfast, BT2 8DQ

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| Links to other Policies: | Guidance In Relation To The Health And Social Care Complaints Procedure (Revised April 2019) | | |
| | DoH Guidelines - Health and Social Care Regional Template and Guidance for incident Investigation / review reports 2007 | | |
| | DoH Guidelines - How to classify adverse incidents and risk 2006 | | |
| | BSO Disciplinary Procedure | | |
| | BSO Grievance Policy | | |
| | BSO Data Protection & Confidentiality Policy | | |
| | BSO Zero Tolerance to Abuse Policy | | |

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Complaints Policy - Section A

1.1 Introduction

Improvement and customer satisfaction are common priorities across all the service areas the Business Services Organisation (BSO) encompasses. Complaints, and the learning opportunities they provide, have an important role to play in achieving those priorities.

BSO is committed to embedding and maintaining an accessible, transparent, robust and effective complaints policy and process to ensure learning opportunities are acted upon both specifically and corporately, improvements are implemented promptly to reduce the risk of recurrence, and service users who experience failings and raise complaints are listened to and treated fairly and properly.

This policy will set out the process that BSO staff will follow when dealing with complaints, identify the associated responsibilities, detail the timescales we will endeavour to work to, and identify contacts for further assistance where this is necessary.

1.2 Scope

All employees of BSO are required to adhere to this policy and procedure.

This policy is intended to explain the standard operation of the complaints procedure within BSO. For instances or occurrences outside the guidance of this policy, for example out of area complaints or joint complaints, please refer directly to the Department of Health (DoH) Guidelines¹.

1.3 Policy Statement

BSO is committed to listening to our service users, understanding their experiences, and responding to their concerns in an effective way.

All Complainants will be taken seriously, have their complaint dealt with promptly in line with DoH guidelines, and receive a response. This response will include details of any remedial or developmental work we will undertake as a result of the complaint and where appropriate will include an apology.

All BSO staff are required to familiarise themselves with this policy and in doing so should recognise the need to prioritise the investigation and resolution of complaints, and the importance of expediting the implementation of identified service improvements.

¹ <https://www.health-ni.gov.uk/publications/hsc-complaints-standards-and-guidelines>

BSO's complaints policy is based on the following 4 principles:

- a. **Accessibility and Openness** – flexible options for pursuing a complaint and effective support for those wishing to do so;
- b. **Responsiveness** – providing an appropriate, timely, and proportionate response;
- c. **Fairness and independence** – emphasising early resolution in order to minimise strain and distress for all; and
- d. **Learning and improvement** – embracing complaints as a positive opportunity to learn and improve services.

1.4 Defining a Complaint

DoH guidance defines a complaint as:

“An expression of dissatisfaction that requires a response”

It is recognised that complainants may not always use the word “complaint”. They may offer a comment or suggestion that can be extremely helpful. It is important to recognise those comments that are actually complaints and therefore need to be handled as such.

Complaints are ordinarily received from service users, or their representatives. Sections 2.1 and 2.2 provide further detail about who can complain using this policy and who should access alternative means to raise their issue.

Those eligible to make a complaint are referred to as a Complainant and it is helpful to note that complaints usually originate from:

- an action or lack of action; and/or
- the standard of service provided; and/or
- A staff members conduct (or other person acting on our behalf)

Complainants and their complaints must be dealt with using the procedure in section B of this document. Therefore it is essential that staff, dealing with service users who are experiencing issues, are alert to determine when a complaint is occurring to ensure it is dealt with appropriately.

Please note that some complaints may be excluded in accordance with appendix 1.

All allowable complaints require an investigation, proportionate to the potential significance of the complaint, and all complainants require a response.

1.5 Responsibilities

All staff and officers within BSO are required to deal with Complainants in a courteous, professional, and prompt manner. The responsibilities within BSO are summarised below:

BSO Board – is responsible for ensuring that there is an effective Complaints Policy in place and is required to approve any amendments or revisions to the policy. The Board is also responsible for monitoring the effectiveness of the policy and holding the Chief Executive to account for its implementation.

Chief Executive – Holds overall responsibility for the handling and resolution of complaints about BSO. He/she will have lead responsibility for managing complaints against Directors supported where necessary by the Chair.

BSO Chairperson – Where a complaint is made against the Chief Executive the Chairperson will oversee the process liaising as necessary with the Department of Health and its Permanent Secretary. In addition, he/she may be required to support the Chief Executive in dealing with any complaints about a Director.

Director of Human Resources and Corporate Services (DHRCS) – Holds delegated responsibility for the implementation and operation of the Complaints Policy and Procedure.

Directors – Are responsible for the prompt handling of complaints pertaining to their Directorate/s including the implementation and sharing of learning. Directors have a responsibility to nominate a suitable Manager to undertake investigations.

Non-Executive Directors – Are required to participate in Review Panels where a Complainant states they are not satisfied with BSO's response.

Managers – Are responsible for handling complaints and adopting an approach that facilitates early resolution where possible. Managers will also be responsible to act as investigating officers and comply fully with this policy. This will include supporting staff who are the subject of complaints. Managers are also responsible for ensuring that learning is embedded within their area of control.

Head of Corporate Services – Is responsible for managing and co-ordinating the complaints process. Provision of access to appropriate training and awareness promotion are other important aspects of this responsibility.

All Staff – Are responsible for ensuring they are familiar with this policy and procedure to enable them to identify when a complaint has occurred and to understand who to contact and what steps to take. Staff also have a responsibility to assist in the early resolution of complaints whenever possible. Staff should be aware of their legal and ethical duty to protect the confidentiality of the service user's information.

It is appropriate to note that **complainants also have responsibilities** under this policy, namely:

- To state as clearly and fully as possible the nature of their complaint, including the redress they are seeking;
- To respond promptly to communications from appropriate BSO officers to help BSO ensure that complaints are progressed promptly; and
- To treat BSO staff members in a courteous manner. It should be noted that abuse or harassment of staff, in any form, will not be tolerated and may result in BSO's refusal to enter into any further correspondence.

1.6 Policy Monitoring and Review

This policy will be monitored on an ongoing basis by the Head of Corporate Services. Suggested amendments will be reported through line management to the Chief Executive. Proposed amendments will be put to the Board for approval.

A formal review of the policy will occur at least every 2 years or as required by DoH directive.

1.7 Training and Awareness

Corporate Services will ensure appropriate training is made available to staff in relation to the complaints policy and procedure.

Corporate Services, with the co-operation of managers, will promote awareness of this policy across BSO.

This policy is available on the BSO intranet and internet.

1.8 Equality Screening

This policy has been equality screened and was classified as having a neutral equality impact. Therefore an Equality impact assessment was not required.

Where required BSO will support members of Section 75 groups to make complaints in their native language and/or other formats such as Braille.

Complaints Procedure – Section B

2.0 General Information

2.1 Who May Complain?

- A person who uses the services of BSO
- A visitor to or user of BSO facilities.
- An appropriately authorised person acting on behalf of a service or facilities user.
- A person experiencing issues with The Pension Service. Complainants in this regard may also have the right to access the services of the Pension Ombudsman.
- A person who uses Family Practitioner Services. Complainants may also have the right to access the services of the Patient and Client Council.
- Practitioners who may be subject to investigation under Counter Fraud and Probity arrangements may be able to use the complaints procedure subject to other legal considerations and only about the administration of an investigation.
- Practitioners who may wish to complain about decisions of prior approval processes may complain only after the exhaustion of all appropriate process and solely about the administration processes.

2.2 Who Can't Access the Complaints Policy?

- **Staff** – Staff should ordinarily deal with issues through line management processes or through the Staff Grievance Procedure.
- **Client Organisations** – Performance issues should ordinarily be dealt with through normal business processes.
- **Litigants / Legal Action** – In accordance with DoH guidance BSO will not consider complaints where a Complainant states that they intend to take legal action against BSO.

Please note that some further complaints may be excluded in accordance with Appendix 1.

2.3 Methods of Complaint

Complaints are either spoken or written and staff should accept complaints via any delivery method. Face to face conversations, telephone calls, postal letters, and emails constitute the most usual methods. Should a verbal complaint be made, the complainant should be asked to formalise their complaint in writing. If the complainant is unable to do so, then staff should provide assistance where possible.

A flexible approach to accepting complaints is important to ensure accessibility. Staff should assist those wishing to make a complaint and fully explain the options they have available to them. This would include signposting this policy and associated literature.

Automatically directing complainants to write to The Corporate Services Team should not be the default position. The default position should be to engage with the complainant, establish how they wish to proceed with their complaint, and to seek an early resolution where possible.

2.4 What should be included in a complaint

A complaint need not be long or detailed, but it should include:

- contact details;
- who or what is being complained about, including the names of staff if known;
- where and when the events of the complaint happened; and
- where possible, what remedy is being sought – e.g. an apology or an explanation or changes to services.

2.5 Timescales relating to complaints

BSO encourages Complainants to make their complaints as soon as practically possible following the event giving rise to it as Investigations will inevitably be more effective when memories and events are recent and corrective action can be implemented sooner.

Complainants must normally make a complaint within 6 months of them becoming aware of it but no later than 12 months following the date of the event.

Complaints made outside these timescales will only be considered at the discretion of the DHRCS where:

- it would be unreasonable in the circumstances of a particular case for the complaint to have been made earlier, and where it is still possible to investigate the facts of the case; and/or
- there is a risk to public or patient safety

Complainants that have their complaints refused due to an excessive delay in raising it will be advised that they may request the Ombudsman to consider it.

In terms of timescales complainants can expect from BSO:

- A written acknowledgement of receipt of their complaint within 2 working days.
- A complaint response issued within 20 working days of the complaint receipt.
- A review response issued within 25 working days of the review request.
- Advisement and explanation should a delay in a complaint or review

response be likely.

2.6 Communication of Responses

Responses to complaints will generally be made in writing (with the exception of spoken complaints that are resolved early and where the complainant does not require a written response).

Where the complainant's preferred method of correspondence is via email and where we hold a verified email address, the Corporate Services Team will correspond via that method.

Where particularly sensitive information is involved, the Corporate Services Team will issue the response in accordance with BSO's suite of Information Governance policies.

2.7 Risk and Prioritisation

The proper and thorough treatment of all complaints is important but inevitably complaints do vary in terms of severity and risk to the organisation, its staff and its service users. It is essential that the risk associated with a complaint is assessed to ensure that serious complaints, such as those involving unsafe practice, are quickly identified and treated accordingly.

Those complaints that are able to be handled under the Early Response Procedure (see Section 3.4.1) by definition are of a less significant nature and are resolved quickly.

Those complaints handled under formal resolution procedures have the potential to be more complex or severe and are therefore subject to a risk assessment during the initial stages of handling. The application of this approach will ensure that a timely, appropriate and proportionate response can be achieved.

The key principles of BSO's risk assessment processes will be used to ensure that each complaint is considered in regard to its impact and likelihood of recurrence if the complaint is not resolved.

The assigned Director, or designated manager, is responsible for ensuring an appropriate risk assessment is undertaken to inform the scale and scope of the investigation. The risk assessment details should be included in the investigation file.

2.8 Investigation

Each Director will identify key managers within each business area to undertake complaint investigations.

The purpose of a complaints investigation is to:

- Ascertain what happened;
- Establish the Facts;
- Detect misconduct or poor practice; and
- Learn and improve services.

The Health and Social Care Regional Template and Guidance for Incident Investigation/review Reports provides a useful basis to help ensure reports are complete and consistent.

On conclusion of the investigation the investigating officer should prepare a draft report and response. The investigating officer should also ensure all relevant documents, evidence, statements, etc. are contained within the investigation file before lodging it with the Corporate Services Team.

2.9 Complainant and Staff Support

The Corporate Service Team is available to support complainants during each stage of the complaints process. This support ranges from assistance drafting a complaint, to assistance with any aspect of the Complaints Policy, to signposting independent advice.

The Corporate Services Team operates from Monday to Friday from 9am to 5pm and can be contacted via email or phone:

Complaints.bso@hscni.net or 02895363555

The Corporate Services Team also provides support to staff involved in the complaints process as required.

2.10 Complaint Monitoring

Investigating officers who resolve complaints under the Early Resolution Procedure should advise The Corporate Services Team of this via email. Details should include:

- Nature of the complaint
- Action taken to resolve
- Remedial actions / learning put in place as a result

Investigating Officers who resolve complaints under the Formal Resolution Procedure should on conclusion collate a draft response and lodge it with the Corporate Services Team who will update the complaints file. A report should also accompany this for complaints that are assessed as significant.

The Corporate Services Team will maintain a log for the purposes of tracking complaints to ensure their prompt and effective resolution and with a view to

collating and presenting complaints performance information. This information will also be used to examine complaint data for trends or further learning.

The Board/SMT will be provided with a quarterly report which will detail:

- The incidence of complaints in the previous quarter by business unit/directorate
- An overview of the nature/type of complaints
- An overview of the resolution of the complaints
- An assessment of trends emerging in relation to complaints.
- An assessment of actions needed by BSO to redress general areas of service provision – based on the report (e.g. revise risk score of particular area in relation to the organisational risk register).

In addition, an annual report on complaints will be compiled for the Board in quarter 1 of each financial year.

To assess the effectiveness of our complaints handling processes Corporate Services will also conduct an annual survey of complainants to understand their experience and identify areas requiring development or improvement.

3.0 Complaint Procedure

3.1 Complaint Stages

BSO adopts a multi-staged approach to the handling of complaints. The default position is to facilitate the early resolution of complaints where possible.

A flow diagram is displayed in Appendix 2 and the steps are summarised below:

- Complaint Identification
- Early Resolution
- Formal Resolution
- Internal Independent Review
- External Review

3.2 Stage 0 – Customer Service

People generally don't complain when they receive a good service. Complaints generally arise due to non-performance, poor performance or unacceptable staff conduct. Every staff member should endeavour to provide a level of service that satisfies a reasonable service user and in doing so thereby avoid complaints. Where complaints are upheld and learning is implemented, all staff are responsible for improving processes and/or behaviours in order to satisfy service users and prevent complaint recurrence. A customer orientated approach is an important first step in managing complaints.

3.3 Stage 1 - Complaint Identification

During the course of our work we all resolve issues on a daily basis and clearly not all service user contacts raising minor issues are complaints. It is important for staff to identify when the nature of any contact becomes more than a business as usual activity.

Issues that impact the service user significantly, repeated errors, or unacceptable delays can indicate that your contact is no longer business as usual but has actually become a complaint. The attitude, tone and language of the service user can also help to signal if a complaint is being made.

It is also important to note that a complainant will not always use the word 'complaint'. If a member of staff suspects a complaint is being made but are unsure, it is acceptable to ask the service user if they wish for their issue to be treated as a complaint. Conversely, if it is clear that the issue being raised is a complaint, even if the person raising the issue is too polite to label it as such, it should be treated as a complaint.

When a complaint is identified it is important to ask the complainant how they wish to proceed. Complainants have 3 main options to raise their complaint:

- Speaking to or writing to an appropriate staff member; or

- Speaking to or writing to an appropriate manager; or
- Speaking to or writing to the Corporate Services Team.

It is good practice to share a copy of the Complaints Policy with anyone who raises a complaint or is thinking about raising a complaint. This Complaints Policy can be found on the Complaints section of the BSO website.

As previously highlighted it is not acceptable to immediately direct all Complainants to the Corporate Services Team as this might be off putting to some complainants and also reduces the possibility of early resolution.

During the initial engagement with the complainant it is important to establish if the complaint can be resolved quickly as this will determine the procedure staff members will be required to follow.

When a spoken or written complaint is received directly by an appropriate staff member or manager the first step is to establish if the complaint can be resolved within 2 working days.

If this is likely staff members should follow the Early Resolution Procedure (3.4.1). Where early resolution is not possible staff should follow the Formal Resolution Procedure (3.4.2).

All complaints received directly by the Corporate Services Team will be handled under the Formal Resolution Procedure.

3.4 Stage 2 – Complaint Resolution

3.4.1 – Early Resolution

Early resolution (also referred to as ‘local resolution’) of any complaint is a priority for BSO as it provides clear benefits for BSO and the complainant. All staff receiving a complaint should establish if an early resolution is feasible through discussion and negotiation.

For a complaint to be treated as an early resolution complaint, it must be capable of being resolved to the complainant’s satisfaction within 2 working days of it being raised. Therefore staff should consider the complexity and breadth of the complaint and the resource required to perform a thorough yet proportionate investigation in a short space of time.

Staff should also conduct a proportionate risk assessment to establish if there are any significant risks for BSO. Reputational or legal risks should always be considered.

Where resolution in 2 days is not possible, or where significant issues or risks exist, staff should follow the formal resolution procedure. The Corporate Services Team is always available to assist staff.

If a complaint treated under the early resolution procedure becomes delayed, the Corporate Services Team should be notified immediately and the complaint taken forward under the formal resolution procedure.

The staff member dealing with a complaint capable of early resolution should:

- **Establish** clearly the nature of the complaint and what is required to resolve the matter with the Complainant.
- **Assess** if early resolution is possible and perform a proportionate risk assessment. Where appropriate you should notify your line manager of the complaint.
- **Notify** the Corporate Services Team via email (complaints.bso@hscni.net) that a complaint is being handled under the Stage 1 - Early Resolution procedure.
- **Investigate** the complaint
- **Resolve** the complaint to the satisfaction of the Complainant.
- **Write** to the Complainant confirming the complaint investigated, the outcome of the investigation, any action that will be taken, and where appropriate an apology. (Verbal complaints only require a written response where requested by the complainant. A template complaint response is included in Appendix 3).
- Alternatively, facilitating a meeting with the complainant may also serve to provide a resolution. Where meetings do take place they should be recorded and that record shared with the complainant for comment.
- **Implement** and share any learning.

Please note that recording all complaints, including those that are received orally or resolved early, is a DoH requirement and is important to ensure that learning opportunities are identified and shared.

3.4.2 – Formal Resolution

This is the default position where early resolution is not feasible or where the complainant writes directly to the Corporate Services Team.

Staff receiving written complaints, where early resolution is not possible, should forward them immediately to the Corporate Services Team using the email address: complaints.bso@hscni.net.

Staff receiving spoken complaints, where early resolution is not possible, should immediately forward the complaint to the Corporate Services Team.

The Corporate Services Team will acknowledge receipt of the complaint with the complainant within 2 working days and identify sources of support for the complainant.

Each Director will have identified key managers ('Investigating Officers') within each business area to undertake complaint investigations. The Investigating Officer will undertake a risk assessment to enable serious complaints to be immediately identified.

The Investigating Officer will lead and co-ordinate the investigation. This may include liaising with BSO staff and management, the complainant and the Corporate Services Team.

The Investigating Officer will send a report of the outcome of the investigation, along with the risk assessment, to the Corporate Services Team within 10 working days following receipt of the complaint. The Corporate Services Team will monitor and report on the timeliness of investigation reports.

The Corporate Services Team will also liaise with the Complainant if it becomes evident that a delay may occur. This correspondence will explain the reasons for the delay and provide a revised response date estimate.

The Corporate Services Team will compose a draft response and forward to the Director prior to submission to the Chief Executive or if appropriate the Chairperson.

The Chief Executive will review and issue, via the Corporate Services Team, the final response to the complainant within 20 working days following receipt of the original complaint. The outcome of the complaint will also be made available to affected staff.

In the circumstance of a complaint made against the Chief Executive the Chairman of the Board supported as necessary by non-executives will deal with the complaint.

Where appropriate, BSO should consider alternative methods of responding to complaints (for example through an immediate response from staff, a meeting, or direct action by the Chief Executive or senior person).

3.5 Stage 3 – Internal Independent Review

If following a complaint resolution a complainant remains unsatisfied, they have the right to request an internal independent review. The purpose of such a review is:

- To examine the process of investigation and resolution; and
- To consider if the findings and response were fair, reasonable and proportionate.

The review panel will not consider additional complaints not previously raised.

Requests for review must be made in writing within 10 working days following the issue of the complaint response. Where meeting these requirements poses a problem for the complainant, they should speak with the Corporate Services Team for assistance.

When making a request for a review it is important that the complainant clearly states the areas or issues causing dissatisfaction and the resolution they seek. The Corporate Services Team will acknowledge the review request within 2 working days of receipt.

Following a review request a Review Panel will be convened comprising of a Non-Executive Director and a Director or Senior Manager who have not previously been involved in the complaint. Where the complaint is against the Chief Executive the review will be undertaken by non-executives only.

The Review Panel will ordinarily meet within 10 working days of the request, to review all relevant information relating to the complaint and response. This information will be issued by the Corporate Services Team. The panel will also consider the areas of dissatisfaction stated by the complainant and the resolution being sought.

The complexity of a complaint may require a subsequent Review Panel meeting and/or further contact with the complainant, investigating officer or staff.

The Review Panel will provide its conclusions and any recommendations to the Complainant and relevant management, via the Corporate Services Team, within 20 working days from the review request. The response will advise the complainant of their right, where appropriate, to refer their complaint to the Northern Ireland Public Services Ombudsman (NIPSO) should they remain dissatisfied with the review outcome.

The outcome of the complaint review will also be made available to affected staff.

3.6 Stage 4 - Further Recourse / the Ombudsman

The Northern Ireland Public Services Ombudsman (NIPSO) investigates complaints about possible maladministration in the delivery of public services. The Ombudsman's role is to ensure that the people of Northern Ireland are served by a fair and efficient public administration that is committed to accountability, openness, and quality service.

The Pensions Ombudsman is an independent organisation set up by law to investigate complaints about pension administration.

Complainants therefore have the right to refer their complaint, if appropriate, to the relevant Ombudsman. This right will be advised to all Complainants in our response to a complaint and in any subsequent response to a review.

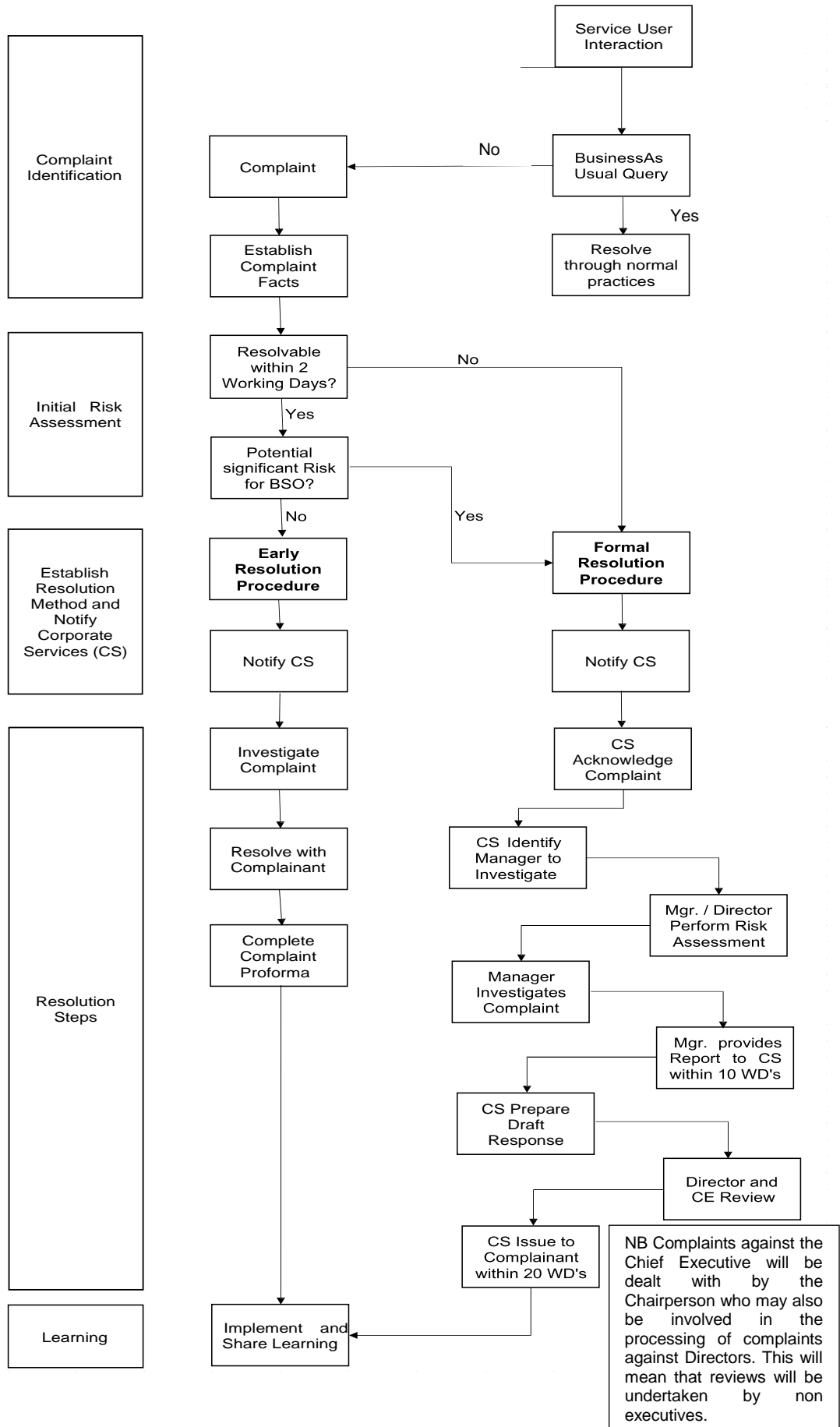
Appendix 1 - Excluded Complaints

The following complaints are excluded from the scope of this policy and procedure:

- a. a complaint made by a HSC body which relates to the exercise of its functions by another HSC body;
- b. a complaint made by an employee about any matter relating to his/her contract of employment as this is provided for under The Grievance Policy;
- c. a complaint made by an independent provider about any matter relating to arrangements made by a HSC body with that independent provider;
- d. a complaint arising out of an HSC body's alleged failure to comply with a data subject under the Data Protection Act 1998 (a) or a request for information under the Freedom of Information Act 2000 (b);
- e. a complaint about which the complainant has stated that he intends to take legal proceedings;
- f. a complaint about which a HSC body is taking or is proposing to take disciplinary proceedings in relation to the substance of the complaint against a person subject to complaint;
- g. a complaint which has led to the protection of vulnerable adults policy or procedures having been activated;
- h. a complaint the subject matter of a Child Protection inquiry;
- i. a complaint which has raised an independent inquiry and/or a criminal investigation and/or an investigation into on-going fraud;
- j. a complaint which has resulted in a referral to a professional regulatory body;
- k. a complaint which activates the Children's Order Representation and Complaints Procedure;
- l. a complaint the subject matter of which has previously been fully investigated under –
 - i. these procedures; or
 - ii. former procedures
- m. a complaint which is being or has been investigated by the NI Commissioner for complaints.
- n. a complaint which is already being or has already been investigated by NIPSO or by the Pensions Ombudsman

Where a complaint falls into any of these categories the Chief Executive or other appropriately designated Director shall notify, in writing, the complainant and inform them that their complaint cannot be considered under this policy and procedure.

Appendix 2 – Flow Diagram of Complaints Procedure



Appendix 3 – Complaint response template

Dear (Insert Title and Surname),

I refer to your complaint received on DD/MM/YYYY relating to (Insert Details).

We have now considered your complaint and can provide you with the following response.

(Insert Detailed Response)

(Include Apology if appropriate)

I hope that the information provided assists you. However, if you are dissatisfied in any way with the handling of your request you have the right to a review which will be carried out by a Non-Executive Director and a Senior Manager not previously involved in your complaint.

In the event that you wish for a review to be undertaken you should do so within 10 days of the date of issue of this letter by writing to:

Complaint Review,
Corporate Services Manager,
2 Franklin Street,
Belfast,
BT2 8DQ,

Yours Sincerely,

Appendix 4 – Contact Details

| | |
|--|---|
| Corporate Services Manager Business Services Organisation | 2 Franklin Street Belfast BT2 8DQ 028 9536 3666 Email: complaints.bso@hscni.net |
| NI Public Services Ombudsman | Progressive House 33 Wellington Place Belfast BT1 6GQ 028 9023 3821 |
| Patient and Client Care Council | Lesley House Wellington Place Belfast BT1 6GQ 028 9032 1230 |
| Pensions Ombudsman | 11 Belgrave Road London SW1V 1RB 020 7630 2200 |