

# **Complaints Standards Authority – Wales**

Guidance for Public Service Providers on  
Implementing the Concerns and Complaints Policy



## Preface

This Guidance is designed to help public service providers to implement the Concerns and Complaints Policy ('the Policy'), via their own complaints processes.

Public service providers should have regard to this guidance when developing arrangements for the delivery of the concerns and complaints handling service within their organisation. Variations can be introduced to take account of the size or operational requirements of organisations, but must not impact on people's experience of a common approach in complaint handling by public service providers.

[Please note that NHS bodies in Wales must adhere to the National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011, known as 'Putting Things Right'.

Also, the Social Services Complaints Regulations (Wales) 2014 outline the procedure for handling complaints about Social Care issues in Wales.]


How complaints are managed internally is a matter for each organisation to determine, subject to statutory guidance e.g. in social care complaints. However, the requirements of the Policy, relating to timescales, number of stages and information gathered on complaint forms, for example, should not be altered, unless the organisation chooses to work to **shorter** timescales.

## Section 1 – Introduction

### Purpose of the Model Concerns and Complaints Policy

- 1.1 Complaints systems can make an important contribution to the improvement of public services.
- 1.2 The purpose of this Policy for handling concerns and complaints is to establish across the spectrum of public service providers:
  - Common principles for the effective handling of concerns and complaints.
  - A common model for dealing with concerns and complaints.
- 1.3 In addition, it is intended that this guidance will also enable:
  - Common data collection procedures.
  - Common methods for learning from concerns and complaints.
  - A common means to identify and disseminate good practice.

**Note:** Whenever reference is made to a “concern” or “complaint”, it refers to both “concern and complaint”.



This guidance recognises that organisations will need to interpret it in a way which is appropriate to their own circumstances. However, the arrangements for managing complaints behind the scenes must not detract from the service user's perception of a common approach, so elements such as the form, the timescales and the number of stages should be consistent for all.

## **Statutory Basis and Scope of the Policy and Guidance**

- 1.4** The Policy and this Guidance are issued under the powers contained within Section 36 of the Public Services Ombudsman (Wales) Act 2019 which created the Complaints Standards Authority for Wales. They apply to public service providers in Wales.
- 1.5** They are compatible with the health service statutory procedure set out in the National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011. The Regulations apply to complaints about NHS services and guidance on implementing the regulations is provided by the NHS in Wales.
- 1.6** The Social Services Complaints Regulations (Wales) 2014 outline the two stage procedure for handling complaints about Social Services issues.
- 1.7** Public service providers will need to ensure that their

complaints processes comply fully with their Welsh language duties and that complainants should not be disadvantaged when they complain through the medium of Welsh.

- 1.8** All bodies subject to the Policy and this Guidance will be notified and advised when the final versions of each have been agreed.



## What is a complaint?

2.1 A complaint is:

- An expression of dissatisfaction or concern.
- Written or spoken or made by any other communication method.
- Made by one or more members of the public (someone or a group in receipt of or denied a service to which they are entitled by the service provider).
- About a public service provider's action or lack of action or the standard of service provided.
- Something which requires a response.

It can be about the public service provider itself, a person, body or trader acting on its behalf, or a partnership of public service providers.

2.2 A complaint is not:

- An initial request for a service, such as reporting a faulty street light.
- An appeal against a 'properly made' decision by a public body.
- A means to seek change to legislation or a 'properly made' decision (when laws or policies have been correctly applied, e.g. the setting of rent payments).

- A means for lobbying groups/organisations to seek to promote a cause.

## Six principles for dealing with complaints

2.3 The following principles always apply when handling complaints. The process should be:


- a) Complainant Focused
- b) Simple
- c) Fair & Objective
- d) Timely & Effective
- e) Accountable
- f) Committed to Continuous Improvement

### a) Complainant Focused

- The complainant should always be at the centre of the complaints process.
- Service providers need to be flexible when responding to complainants' differing needs.

### b) Simple

- Complaints processes should be well-publicised, have easy-to-follow instructions and have no more than two stages.
- Information on advocacy services and support should be available.
- Complaints responses should set out clearly the next stage and the right to approach the Ombudsman.



response to their concerns.

- Complainants and staff complained about should be treated equally and with dignity.

#### **d) Timely & Effective**

- Complaints should be resolved promptly, when possible.
- Investigations should be thorough, yet prompt.
- Complainants should be kept informed throughout of the progress of a lengthy investigation.

#### **e) Accountable**

- Complainants should receive an honest and clear explanation of the findings of an investigation.
- Service providers should explain to complainants what changes will be made if their complaint is upheld, whenever possible.

#### **f) Committed to Continuous Improvement**

- Information from complaints should be collated and analysed.
- Data should be shared with the organisation's senior leaders and the Ombudsman to support improvement in complaint handling and in service delivery.
- Decision makers should regularly review the information gathered from complaints when planning service delivery.




## Section 3 – Complaint Handling Arrangements

- 3.1 Complaints processes should be simple, flexible and focus on achieving the most appropriate outcomes for individuals and services. Public service providers should take a proactive approach to dealing with concerns, by focusing on individuals' needs and not the complaints process itself.
- 3.2 If all public services use the same complaints process, it will be easier to deal with concerns that relate to more than one service provider.
- 3.3 References in this section to 'complaints processes' do not apply to Social Services complaints, which should be considered in accordance with the statutory Social Services Complaints Regulations.

### Who may put forward a concern

- 3.4 Any member of the public, including a child, who has received, or was entitled to receive, a service from the public service provider may make a complaint. The same applies if they have suffered due to the inappropriate action or lack of action by the public service provider.
- 3.5 Where a concern is notified by a young person or child, the responsible body must provide them with such assistance that they may reasonably require in order to



pursue the concern. This should include making the young person or child aware of the help that could be provided by the Children’s Commissioner for Wales.

**3.6** A concern can also be put forward by someone on behalf of another person, as follows:

- Someone who is unwell or has died
- A child
- Those who lack the capacity (as defined by the Mental Capacity Act 2005)
- They have been asked to do so by the person affected

Public service providers must satisfy themselves, as far as the circumstances of the person affected allow for it, that the representative is acting with the authority of that person and, if possible, obtain their signature to confirm this.

**3.7** This Policy does not apply to members of staff raising employment issues. There are other internal mechanisms for these types of concerns, for example, whistleblowing, bullying, or grievance procedures.

## **Complaint handling roles**

**3.8** **The Board/Cabinet** of the public service provider should ensure that the Policy is adopted and in place. It is not appropriate for the Board/Cabinet to be involved in the

investigation of individual complaints. However, it should receive reports on the number and type of complaints received, their outcomes and any remedial action taken as a consequence. It is for the Board/Cabinet to determine how frequently it should receive such reports, however, this should be at least twice a year. Organisations with such arrangements in place may, in addition, want to include the consideration of complaints reports to be included within the remit of a scrutiny or similar type committee.

- 3.9 Responsible Officer** – Each organisation should appoint an officer (e.g. chief executive, director, clerk) with responsibility for ensuring the Policy is adopted and the guidance is followed.
- 3.10 The Person/Team co-ordinating complaints** – The public service provider should have an individual or team responsible for co-ordinating responses to all complaints which are not resolved at the informal stage. For example, in a small organisation such as a community council, this is likely to be the clerk, whereas some large organisations may have a central complaints team for this purpose. For ease of reference throughout this document, this role is described as the “central complaints handler”. Organisations may also use this individual or team to help ensure consistent, high quality responses are given to complainants.



## Resources

- 3.11** The public service provider should ensure that the necessary resources are made available to enable delivery of the Policy, including:
- Staffing (including administrative support, if necessary)
  - Training
  - Complaint handling administration systems.

## Accessibility and publicising complaints processes

- 3.12** Complaints processes must be accessible to all and publicity is key in ensuring awareness of them.
- 3.13** Complaints processes should be widely publicised by:
- Promoting the existence of the process, together with appropriate contact details, on a regular basis in any newsletters or other publications for service users.
  - Producing a bilingual complaints information leaflet.
  - Ensuring the leaflet is available at all public reception areas and common areas where service users may frequent and made widely available to the organisation's staff.
  - Circulating the leaflets to local offices of relevant advice and advocacy organisations operating in the service provider's area.

- Publishing the complaints process at a prominent and easily accessed area of the organisation's website (ideally via a link on the home page).

**To ensure accessibility:**

- Make complaints information available in alternative formats such as on CD, in large print, Braille, etc.
- Make complaints information available in other languages commonly used in the organisation's area and publicise its existence.
- Accept oral complaints.
- Be able to call upon translation/interpretation services (including British Sign Language).

**3.14** Public service providers should keep a comprehensive list of relevant advice and advocacy organisations in their locality. Advice should be provided to complainants who require/request such support as to which organisation is likely to be the most suitable to help them, in relation to their circumstances.

**3.15** Smaller service providers should go as far as they can to ensure there is equality of access for all service users.



## The complaints information leaflet/complaint form


- 3.16 Use the words from the complaints process when drafting forms and leaflets.
- 3.17 You can encourage complainants to complete a complaint form (on paper or on the website). However, people may prefer to present their complaint by telephone, email, or in person (or other method). In doing so, staff dealing with the complaint should ensure that they have gathered the same information as that being sought on the complaint form and ensure it is recorded appropriately.

## The complaints process

### Stage 1 - Informal Resolution

- 3.18 This stage offers the opportunity for informal engagement at the point of service delivery to seek to resolve complaints either at the time the concern arises or very shortly thereafter. This stage should be part and parcel of front line service delivery and not viewed as separate from it. This first step will normally aim to be an explanation or other appropriate remedial action by frontline staff to remedy the complaint.
- Staff should be empowered and trained to deal with complaints as they arise with the aim of resolving issues on the spot. This training can be provided during their induction period, with ongoing development.

- Staff should be trained to recognise the seriousness of a complaint and understand when it should be referred to more senior staff.
- Staff may receive complaints that do not involve their own service, but that of another department. It may be difficult for those in large organisations to know to whom the complainant should be referred but, at the very least, all staff should be able to direct the complainant to the organisation's central complaints team, who will then be able to advise the complainant appropriately.
- Staff may receive a complaint that not only involves their own service, but also another section/ department. It is recommended that, in such instances – since it is unlikely that the staff member will have the necessary authority to resolve a complaint on behalf of another service area – the complainant should be referred directly to the central complaints team.
- Staff must advise complainants how to progress their complaint to the formal investigation stage, if they are not satisfied with the outcome of the end of the informal stage.
- Complainants may wish their complaint to be 'fast tracked' straight through to the next stage (Stage 2). This should be discouraged, wherever possible. If the request stems from a breakdown in the relationship



between the complainant and the service area staff, however, it may be wise to proceed directly to Stage 2. If approved by senior staff, this should be facilitated.

- Frontline staff should be trained and encouraged to provide appropriate information on advice and advocacy support at Stage 1 of the complaints process. It is recognised that they may not be aware of all the types of help available, particularly when operating in a specialist field themselves. Nevertheless, they should certainly have knowledge of support that relates to their service area. For example, a housing officer should be able to advise a complainant with a housing complaint about the services of Shelter Cymru.
- The central complaints team should be a source of support for frontline staff in respect of informal resolution.

**3.19** The informal resolution stage should be completed as quickly as possible and certainly take no longer than ten working days. If it is not possible to resolve the concern within the relevant timescale, then the matter should be escalated to the formal investigation stage.

**3.20** Examples of the type of concern that can be resolved at the local resolution stage are:

- An appointment was made for a boiler to be fixed and the tenant complains that no-one turned up on the appointed day.



- Someone complains that their bin hasn't been emptied by the refuse collection service, when the missed collection has already been reported three times.

**3.21** An example of the type of complaint that would not be resolved at the informal stage is:


- A complaint involving a series of different errors in the calculation of allowances applicable to Council Tax payments.

## **Stage 2 - Formal Internal Investigation**

**3.22** “Investigate once, investigate well” is the principle for this stage of the process. Emphasis is placed on one investigation to deal thoroughly with the concerns raised, rather than multiple investigations at different levels in the organisation which can be protracted. However, the Stage 2 element of the complaints process is intended to be flexible to respond appropriately to the complaint. “Investigating well” also means investigating in a manner that is proportionate to the nature and degree of complexity of the complaint. This means that, for more straightforward complaints, the investigation may not need to be so detailed.

**3.23** The following sets out how a complaint should be dealt with at Stage 2.

- Stage 2 complaints should be sent by the complainant



to the central complaints handler of the organisation.


- Having formally received a complaint at Stage 2, an acknowledgement should be sent by the central complaints handler as soon as is possible, but within a maximum of five working days.
- If the complaint is “out of time” – i.e. the issue being complained about is older than six months (from the time that the complainant first became aware of the problem), consideration should be given as to whether there are good reasons as to why it should nevertheless be accepted. For health complaints, there is an absolute cut off time of three years and other bodies may wish to adopt this.
- The central complaints handler should offer to discuss the complaint with the complainant, including:
  - Helping the complainant to understand the process
  - Confirming their preferred method of communication
  - Confirming what they want as an outcome to their complaint
  - Providing advice of relevant advocacy and support services if they need help to make their complaint
- Depending on the nature of the complaint it may be necessary to obtain the complainant’s permission to access their personal file. If the complainant refuses to give permission, it should be explained to them that

this will have an effect on the ability to conduct a thorough investigation.

- If the complainant is complaining on behalf of someone else, their consent will usually be needed before an investigation can begin.

**3.24** When the central complaints handler is satisfied that they understand the complaint, they should:

- If applicable to their organisation, grade the seriousness of the complaint to decide on the appropriate level of investigation.
- Identify an officer within the organisation with sufficient seniority, credibility and independence from the source of the complaint to undertake the investigation:
  - Depending on the nature of the complaint, this may still be someone within the service section/department, but it may require someone independent from the section/department, including possibly the complaint handler themselves.
  - In the case of community/town councils, who may only have one member of staff (the clerk), it is accepted that the clerk will often undertake the role of “frontline, informal resolution” and that the chair/mayor or sub-committee of the council could, where necessary, take on the role of “investigator”.

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- When deciding on an “investigator”, consider whether the investigation will need to span across more than one service and the level of seniority required to investigate across all those areas.
  - Having recorded the complaint on the complaints handling system on receipt, the central complaints handler should keep track of (and record) progress and take responsibility for monitoring the smooth running of the investigation, ensuring that timescales are met. The stage 2 complaints process should normally be concluded within 20 working days (or such shorter timescale as determined by the public service provider). When this is not possible, complainants must be informed of the reasons and be agreeable to any extension. In any event, there should be regular contact with the complainant, updating them on the progress on the case.
  - A complainant may withdraw their concern at any time, however, the public service provider may continue to investigate if it feels that it is necessary to do so.
  - It is recommended that the central complaints handler produces a portfolio of specimen documents/ templates to assist those involved in the complaints process. These could include:
    - A form for frontline staff for logging relevant complaints at the informal stage

- An acknowledgement letter
- A framework for 'update' letters to the complainant
- Interview request letters (e.g. for the investigator when requiring meetings with staff involved)
- A template for investigation reports

## Complaints investigations


**3.25** A complaint investigation should be a fact finding exercise which is impartial, open, transparent and proportionate to the seriousness of the complaint. For serious complaints, a plan needs to be drawn up enabling the complaint to be investigated systematically.

**3.26** However, even when the complaint reaches the Stage 2, there may still be potential for resolving the concern to the complainant's satisfaction through an early resolution and without having to undertake a full and lengthy investigation. Consideration should be given to the possibility of this. The Ombudsman welcomes attempts to resolve matters at all stages of a complaint.

**3.27** Consideration should also be given to whether face to face meetings and/or mediation could be a means to resolving the complaint.

**3.28** Evidence gathering can include:

- Correspondence (letters and emails)
- Notes of telephone conversations

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- Organisational policies and procedures
  - Good practice guidance
  - Records (including those specifically relating to the complaint under consideration and training records of staff involved in the complaint)
  - Legislation
  - Interviews (including detailed notetaking)
  - Site plans and visits
  - Photographic evidence
  - Recordings in various formats (e.g. phone, CCTV)
  - Obtaining professional/expert advice

**3.29** A draft report should be shared with the complainant and those complained about, before a final report is published.


**3.30** Recommendations arising from investigations should be ‘Specific, Measurable, Achievable, Realistic and Timed’ (“SMART”).

**3.31** At the end of an investigation, a written outcome, such as letter or email, should be produced and, in more serious cases, a report.

Where a report is produced, it should include, where appropriate:

- The scope of the investigation
- A summary of the investigation:

- Details of key issues, setting out a brief chronology of events leading to the complaint)
- Those who were interviewed (including setting out to what degree the complainant, and if appropriate, any affected relatives, advocates, etc. were involved in the investigation)
- Conclusion
  - If the complaint is found to be justified/upheld
  - How it happened - i.e. what went wrong
  - Why it happened – i.e. the root cause of the problem (e.g. human error, a systemic failure)
  - What impact did it have on the complainant?
  - If a systemic failing has been identified, an explanation of actions taken to put things right, with a view to ensuring the same problem does not occur again
  - If appropriate, an apology
  - If appropriate, an offer of redress
  - If the complaint has not been upheld, there should be an explanation of why this conclusion has been reached, demonstrating that it has been arrived at, based on the evidence gathered.
- Overall the report should demonstrate throughout that the complaint has been taken seriously, that



the investigation undertaken has been fair and, in accordance with the seriousness of the complaint, proportionately thorough.

- Even in cases where an investigation upholds the complaint and offers remedy/redress, it may be that the complainant remains dissatisfied for some reason. Therefore, in all cases, the report should inform the complainant that, if they remain dissatisfied, they have the right to seek independent external consideration of their complaint. Information about making a complaint to the Public Services Ombudsman for Wales and other appropriate complaint handlers, should be provided.

**3.32** Consideration should be given to offering a meeting to a complainant at the time of closing a complaint investigation. Such a meeting may help the complainant to understand how the outcome was reached.

## The final steps

**3.33** The fact that complaints will vary in their degree of seriousness has already been referred to. The organisation should decide at what level decisions on recommendations in the report can be taken and who should sign to conclude the complaint (i.e. who should sign any report or letter). There will be times when it would be appropriate for the central complaints handler to do so, other times the senior manager or director



responsible (larger organisations), and other times the head of the organisation. The public service provider should establish the level of delegation in this regard. Further, the head of the organisation should ideally see a copy of all final correspondence sent out in respect of Stage 2 complaints.

**3.34** When a complaint has been upheld and there is a clear systemic issue, the appropriate Director or Manager should ensure that an action plan is devised, setting out how the recommendations will be implemented and identify who will be responsible for ensuring their implementation. When it affects them, frontline staff should be involved in this process. The plan should also include arrangements for confirming to the complainant that changes have been implemented and make provision for the monitoring and evaluation of new arrangements introduced to assess their impact.

**3.35** On closing a complaint, the central complaints handler should ensure that working documents used during the course of the investigation are retained in an orderly fashion and stored securely and in accordance with the organisation's data retention policy. If the complaint becomes the subject of further external investigation, such as by the Public Services Ombudsman for Wales, these working documents may be needed as the public service provider's evidence.



## **An independent person**


**3.36** It may be that, for some investigations, it is considered appropriate to include the involvement of an independent person in the Stage 2 investigation. It will be the responsibility of the central complaints handler to ensure that the organisation has a pool of suitable people to call upon where necessary.

## **Complaints involving other legal or disciplinary proceedings**

**3.37** Occasionally, complaints received will involve legal or disciplinary proceedings. It may from time to time be necessary to put the investigation of a complaint “on hold” until the conclusion of those other proceedings. However, it should not automatically be assumed that this is necessary in every case. An assessment should be made (with legal advice sought, if appropriate) to identify whether it is possible to address the subject of the complaint, without impacting unfairly on the other proceedings underway. It is important that, if a complainant is in a continued state of disadvantage as a result of likely poor service delivery, every step is taken to conclude this part of their complaint. This will mean that, if the complaint is upheld, it has been demonstrated that the organisation is doing everything it can to return them as soon as possible to the position they would have been in if that failure had not occurred.

## Complaints involving more than one service provider

- 3.38** There are occasions when a complaint received will involve more than one organisation. In this case, the role of the central complaints handler will be slightly different. Having established the elements of the complaint and which organisations are involved, they should contact their counterpart(s) in the other organisation(s) involved. The complaints officers should then decide which of them should lead on co-ordinating the response to the complainant. It would seem sensible that this should be the organisation with the greatest involvement in the complaint. However, it may be appropriate for the organisation with the largest complaints handling resource to undertake this role.
- 3.39** The role of the complaints officer allocated to the complaint in question is to co-ordinate the investigations in each of the service areas involved. The ultimate aim, therefore, is to provide the complainant with a single, comprehensive, joint response on behalf of all of the organisations involved.
- 3.40** There will be complaints where each element is sufficiently distinct and separate so that all that will be required is to set out the details and outcome of each investigation strand and then add an overall conclusion to the response.



**3.41** However, it is recognised that there will be some cases where the resolution and remedy of a complaint will involve agreement by all involved and that this could lead to tensions and disagreement. Where such disagreements lead to an impasse, it may be necessary to refer the matter to senior management within each of these organisations (depending on the seriousness, possibly the Chief Executives) in order to try to resolve the situation.

**3.42** Where the impasse still cannot be resolved, it may be prudent to refer the matter at this point to a relevant external independent complaint handler (e.g. the Public Services Ombudsman for Wales). However, the complainant should be told of this intention, together with the reason for it, and their agreement should be sought before such a referral takes place.

## **Partnership services**

**3.43** [Note: Whilst not forming part of an individual organisation's complaints handling process, public service providers will need to have regard to the following when forming partnerships with similar and other types of organisations.]

**3.44** The situation in relation to complaints about partnership services is again different, particularly given that not all partners may be subject to this model Policy. Nevertheless, it is good governance practice for every partnership to have in place at the outset a protocol for

dealing with complaints. That protocol should make clear where accountability lies within the partnership for any services delivered – i.e. does responsibility rest with the partnership as an entity, or is each partner accountable for specific aspects of the service delivery?

**3.45** Given that, in most public service provider partnerships, many members will be subject to this Policy, it is recommended that those providers endeavour to agree a protocol with their partners for dealing with complaints in a way that corresponds with this Policy.

**3.46** In particular, it is recommended that:

- Partnerships establish a complaints handling process for services that they as a partnership deliver.
- They identify and publicise a single point of contact for complaints in respect of their activities/services.
- The person/team identified co-ordinates the investigation of the complaint on behalf of the partnership. Depending on the nature of the complaint, if the complaint concerns dissatisfaction with the service delivered by one particular partner, it may be more appropriate to refer the investigation to that particular partner to deal with.
- The partnership ensures that lessons are learned from complaints received and considers whether there are any that should be shared more widely.




**3.47** Even though public service providers may contract out the provision of services to private/voluntary organisations, this does not absolve the public service provider of their responsibility for those functions. Central complaints handlers should therefore ensure that those responsible for drafting contracts are aware of the need to include a provision for complaints handling. This should include the requirement for organisations contracted to provide services to comply with similar complaint handling arrangements (i.e. the two stages), with the outcome report/letter being copied to the public service provider. Such organisations should also inform complainants of their right to complain to the Public Services Ombudsman for Wales. Alternatively, the central complaints handler may choose to co-ordinate the response to the complainant, on behalf of the contractor.

## Section 4 – Learning Lessons

### Learning from complaints/continual improvement

- 4.1 Complaints information should be used to improve an organisation's service delivery and increase its effectiveness.
- 4.2 To support this, organisations should:
- Ensure that the central complaints handler periodically reviews all complaint outcomes and their recommendations to identify whether there are any patterns to complaints/wider lessons to be learned that may not be apparent from individual complaints. When considering the lessons that can be learned from a complaint, an assessment should be made as to whether:
    - These are limited to the section/department in question
    - They have an organisation-wide implication
    - They are ones that should be shared across the sector of the public service or even more widely.
  - Ensure that complaints reports are considered on a regular basis by senior management, including an analysis of the data gathered and information on recommendations that have been made for improving service delivery.

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- Ensure that complaints data is shared with the Ombudsman to support improvement in complaint handling and in service delivery.
  - Ensure that the information received by senior management is used to target any problem areas and consider if there is potential to improve policies, procedures and services.
  - Ensure that the cabinet/executive board receives reports giving an overview of complaints received, setting out what changes have been made as a result of complaints information and, following monitoring of their implementation, what results have been received.
  - Ensure that an annual report on complaints is produced, drawing out lessons learned over this period and demonstrating how they have contributed to improved service delivery.

## **Recording & monitoring complaints**

- 4.3** Effective complaints management includes collecting specific data and identifying recurring or system-wide problems. All feedback and complaints received should be recorded to ensure that a comprehensive evaluation of data can be made.
- 4.4** To support this, organisations should:
- Have a system to collect organisation-wide complaints data.



- Use the system to help track complaints and compliance with timescales..
- Enable the numbers, types, outcomes and trends of complaints to be captured, to facilitate comparisons with previous periods and identify system wide or recurring complaints.
- Enable key points from lessons learned to be captured.
- Write to the complainant detailing the findings of the investigation, providing an apology for any shortfalls and describing what action will be taken to prevent recurrence.
- Inform the Complaints Standards Authority – Wales of the data collated on a quarterly basis.

**4.5** [Note: Frontline staff should report all serious complaints, or those with wider learning points, that they have dealt with informally to the central complaints service, so that these can be recorded on the central complaints handling database. This should be regardless of whether or not the complaint has been resolved on the spot. For those serious complaints not resolved, such action will mean that there will be a record of the incident should the complaint progress to Stage 2 of the complaints process.]

**4.6** Public service providers should not have to implement a new IT system for these recording purposes. Furthermore, for small organisations like community councils, manual



recording may suffice.

**4.7** In order to also identify outcome trends of complaints, the following high level complaints outcome definitions should be used:

- Complaint about service not provided by this body
- Referred to front line staff and resolved
- Investigation not merited
- Quick Fix/Voluntary Settlement
- Investigation Discontinued
- Upheld – Non-systemic issue
- Upheld – Systemic. Action plan required
- Not Upheld
- Withdrawn


## Section 5 - Staff and Training

### Staff Involved in Complaints

**5.1** Whilst it is not uncommon for people to look for someone to blame when things go wrong, staff should be assured that this is not the aim of an investigation. It should be made clear that any interview that may take place is to establish facts as part of the investigation of a complaint, and that it does not form part of a disciplinary

procedure. (However, a separate disciplinary process could take place, if appropriate.)

- 5.2 When requiring staff to attend for interview, they should be told the purpose of the interview, what to expect and what preparation they need to do. They should be advised that they can bring someone (such as a colleague) for support although the position of confidentiality and their role should be made clear. They should also be advised as to what will happen after the interview.
- 5.3 Being the subject of a complaint is in any event a stressful situation and, depending on the circumstances of the complaint and the issues involved, it may be prudent to inform the interviewee of any staff support/ counselling available.
- 5.4 In the same way that it is important to keep complainants informed on progress in the investigation and its outcome, the same is true in respect of staff.
- 5.5 As well as informing staff involved of the outcomes of complaints and any recommendations that arise, there should also be a means (staff newsletters, making the annual report available on the intranet) of disseminating to staff how the way they deal with complaints can contribute to better public services. Organisational culture should see that reporting a complaint and taking action is positive, as it assists organisational learning. If many individuals (perhaps based in many different locations) deal with a similar type of problem



without this information being shared, then what may be a deep-rooted systemic problem within the organisation may not emerge to the surface. If frontline staff inform the complainant of (intended) action, it is likely to have a positive effect in terms of good customer relations.

## Training

- 5.6 The complaints function needs to be adequately resourced by appropriately trained staff.
- 5.7 The central complaints handler should undertake an assessment of the skills and competencies required by all those involved in the complaints process and ensure that there is an appropriate training strategy in place.
- 5.8 The central complaints handler should continually keep under review the number of skilled and trained officers within the organisation to conduct and prepare reports on investigations.
- 5.9 Those likely to be involved in conducting “sensitive” investigations will in all probability need additional “specialist” training.
- 5.10 Ultimately staff training is a matter for individual public service providers to determine.
- 5.11 General training on complaint handling should be included in the induction programme for all staff in the organisation (this includes staff and Board/Cabinet members).

## Unacceptable Actions by complainants

5.12 The model Policy recognises that some people may act out of character in times of trouble or distress. It should be borne in mind that there may have been upsetting or distressing circumstances leading up to a complaint. A complainant's behaviour should not be regarded as unacceptable just because they are forceful or determined. However, the actions of complainants who are angry, demanding or persistent may result in unreasonable demands on an organisation or unacceptable behaviour towards staff. It is these actions that are considered unacceptable. Organisations should therefore have in place an 'unacceptable actions by complainants' policy and ensure that staff receive appropriate associated training. Organisations currently without such a policy, are welcome to use the Public Services Ombudsman for Wales' policy, 'Managing Customer Contact' (available at [www.ombudsman.wales](http://www.ombudsman.wales)) as a basis to develop their own procedure.



## **How to contact us**

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