

Putting Things Right- Handling Concerns Policy

Policy Statement

Public Health Wales recognises the value in the effective management of concerns and the subsequent organisational learning that supports the development and improvement of services.

The Putting Things Right – Handling Concerns Policy is the overarching policy for the Putting Things Right management of concerns, and the management of redress. This document sets out the arrangements under Putting Things Right by which Public Health Wales will manage, investigate and respond to concerns (complaints, claims and patient safety incidents) in order to meet the requirements of the [NHS \(Concerns, Complaints and Redress Arrangements\) \(Wales\) Regulations 2011](#).

The aim of the policy is to ensure that the appropriate structures and reporting mechanisms are in place to enable concerns to be investigated in a proactive and timely manner.

This policy should be adhered to when a concern (complaint, claim or reported patient safety incident) is received. It does not replace policies such as, the Incident Reporting Policy, Claims Management Policy or the [All Wales Procedure for NHS Staff to Raise a Concern](#) etc.

If members of staff are unsure whether to report a concern under the Putting Things Right policy, they should contact the Governance and General Manager, Quality, Safety and Allied Health Professionals for advice.

N.B. This policy should be read in conjunction with the Welsh Government's Putting Things Right guidance.

Policy Commitment

The Welsh Government legislation the National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011), sets out the arrangements that Trusts and Health Boards must undertake for the handling and investigation of concerns.

Public Health Wales will adopt a common and standardised approach to deal with concerns in line with the requirements of the [NHS \(Concerns, Complaints and Redress Arrangements\) \(Wales\) Regulations 2011](#).

The Putting Things Right Policy provides clear assurance to the Board and external bodies about the commitment of Public Health Wales to implement the legislation in line with the being open principles.

This policy also helps to ensure that Public Health Wales fulfils the requirements of the Health and Care Standards (2015).

Supporting Procedures and Written Control Documents

- [Claims Management Policy](#) and [Procedure](#)
- [Incident Reporting Policy](#) and [Procedure](#) (including Serious Incidents)
- [Consent Policy](#)
- Safeguarding Policy and Procedures

Other related documents are:

The policy links and may need to be considered in conjunction with the following policy documents:

- National Patient Safety Policy on Being Open (2009)
- All Wales Child Protection Procedures
- Access to Health Records Act 1990
- Public Service Ombudsman for Wales Act
- The Code of Openness (1995),
- Human Rights Act 1998,
- Freedom of Information Act (2000)
- Welsh Language Act 1993
- Equality Act 2010

Scope

The policy has been produced for the management of concerns and is applicable to all staff who may be involved in investigation of a concern.

Equality and Health Impact Assessment	Please refer to completed EHIA.
Approved by	Public Health Wales Board
Approval Date	27 September 2018
Review Date	27 September 2021
Date of Publication:	26 October 2018
Group with authority to approve supporting procedures	Business Executive Team
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Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or [Corporate Governance](#).

Summary of reviews/amendments				
Version number	Date of Review	Date of Approval	Date published	Summary of Amendments
2	08/2018	29/09/2018	26/10/2018	Flow chart added as an appendix
1	-	06/2012	06/2012	

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1 Introduction

This document sets out the arrangements under Putting Things Right by which Public Health Wales will manage and respond to complaints and concerns in order to meet the requirements of the [NHS \(Concerns, Complaints and Redress Arrangements\) \(Wales\) Regulations 2011](#), which came into force on 1 April 2011. Public Health Wales follows the [All Wales Policy Guidance for Putting Things Right](#) which should be read in conjunction with this policy.

2 Purpose and objective

Public Health Wales is required to have in place and operational policy and procedures for the handling and investigation of concerns, (complaints, patient safety incidents or claims) received in relation to patient safety. This document details the specific process by which Public Health Wales operates the main requirements of Putting Things Right in practice.

The policy is therefore the overarching policy for the Putting Things Right management of concerns, (patient incidents, complaints and claims) and redress and applies to all staff, both permanent and temporary.

The policy is supported by the

- Putting Things Right - Handling Concerns Procedure
- Incident Reporting Policy and Procedure
- Claims Management Policy and Procedure.
- Safeguarding Policy and Procedures

Through the effective management of concerns Public Health Wales aims to:

- Apply common principles to the management of concerns raised regarding services provided by the organisation
- A common model for dealing with concerns within the organisation and jointly
- Apply common data collection procedures
- Identify and disseminate good practice and learning throughout the organisation

The Board and its Committees support organisational learning, which is then shared locally through Divisions and throughout Public Health Wales.

A key requirement is therefore the sharing of lessons learned arising from concerns with the staff involved and, where relevant, the wider organisation and external stakeholders in order to bring about real improvements. Further information in relation to the process for learning

and promoting improvements is detailed within section 9 of the Putting Things Right – Handling Concerns Procedure

The Putting Things Right Policy provides assurance to the Board and external bodies about the organisation’s commitment to comply with the legislation in line with the being open principles.

3 Definitions

Concern	Complaint, claim or reported patient safety incident about NHS treatment or services
Complaint	Any expression of dissatisfaction
On the spot complaint	These are concerns which are raised and dealt with, to the satisfaction of the complainant no later than 48 hours after the concern has been raised. These concerns generally relate to relatively easy to address issues and the person raising the concern must be satisfied with the action agreed in order to remedy the concern raised.
Working day	Monday to Friday (excluding bank holidays)
Qualifying liability	A liability in tort owed as a consequent of a personal injury or loss arising out of or in connection with a breach of duty of care owed to any person in connection with the diagnosis of illness, or in the care or treatment of any patient in consequence of any act or omission by a health care professional and which arises in connection with the provision of qualifying services
Compliment	An expression of appreciation for a service received. Although the Regulation refers to concerns, Public Health Wales values compliments and takes the view that concerns should be balanced with compliments. Compliments tell the story of a positive experience and provide an opportunity to learn from best practice.

Concerns which are excluded for consideration under these arrangements (Regulation 14)

The following are matters which do not fall within the remit of this policy:

- A concern notified by a member of staff relating to their contract of employment
- A concern that has been investigated by the Public Services Ombudsman for Wales
- A concern which arises out of an alleged failure of the Organisation to respond to a Freedom of Information request

- Disciplinary action that the Organisation intends to take as a result of the investigation of a concern (in line with this policy)
- An informal concern (made verbally) which is resolved within 48 hours
- A concern that has previously been investigated which the Organisation does not consider reasonable to reopen.

4 Roles and responsibilities

4.1 Chief Executive

The Chief Executive has overall responsibility for dealing with concerns. This responsibility has been delegated on a day-to-day basis in the following manner.

4.2 Non officer lead

The delegated non officer for Public Health Wales is a Non Executive Director who is responsible for maintaining a strategic overview of the Putting Things Right arrangements and their operation. In particular the Non Executive Director is responsible for:

- Ensuring that concerns are dealt with in compliance with the regulations
- Ensuring arrangements are in place to review the outcome of all investigated concerns to ensure that any failure in provision of service identified during the investigation are acted upon, improved and monitored in order to prevent recurrence
- Ensuring that an annual report is prepared summarising the organisation's activities
- Ensuring that arrangements for dealing with concerns are published in a variety of media, formats and languages and that a copy of the arrangements is given free of charge to any person who requests it, in the format requested.

4.3 Responsible officer

Public Health Wales has designated the Executive Director, Quality, Nursing and Allied Health Professionals (AHP) to act as the responsible officer to oversee the day to day management of these arrangements.

The responsible officer ensures arrangements are in place to:

- Manage concerns in line with the regulations
- Allow for the consideration of qualifying liabilities

- Provide for concerns (patient safety incidents, complaints and claims) to be dealt with under a single governance arrangement.

The Executive Director, Quality, Nursing and Allied Health Professionals (AHP) can delegate responsibilities for Putting Things Right to an authorised person but remains the accountable person in any situation.

4.4 Senior investigation manager (SIM)

Public Health Wales has designated the Governance and General Manager for the Directorate of Quality, Nursing and AHP with responsibility for the handling and consideration of concerns under the regulation. This includes

- implementing a system across the Trust to ensure compliance with the regulations
- ensuring systems are in place to evaluate the quality and timeliness of investigations

This role is supported by lead investigations managers, senior managers from the various programme/team/service areas.

4.5 Heads of programmes, services and functions (Lead investigation managers)

The responsibility of the appropriate Head of Programme, Service or Function is the actual handling and investigation of concerns and to support their managers in conducting investigations within a timely manner to achieve the 30 day response target. They are also responsible for undertaking quality assurance reviews of concern responses before they are submitted to the relevant Divisional Director. Heads of Programmes, Services and Functions are required to address any issues in relation to the quality of the investigation within their areas and to ensure lessons are being learnt and shared across the organisation, as appropriate, to improve services and prevent reoccurrence

4.6 Claims manager

The Public Health Wales Claims Manager supports Putting Things Right in the latter stages of redress case management.

The post holder reports directly to the Executive Director, Quality, Nursing and Allied Health Professionals for matters relating to claims

4.7 Divisional directors

Directors are responsible for establishing structures to ensure that concerns are appropriately investigated within the Division. This includes establishing reporting and monitoring arrangements with a focus on lessons learnt.

4.8 Investigation officers

Concerns should be investigated by the most appropriate manager from the service area, function or programme. Investigation officers will possess subject expertise to apply to the investigation and will work with a range of other managers and staff throughout the organisation to assist investigations.

4.9 All staff

Public Health Wales is committed to encouraging staff to report concerns. All staff must therefore be aware of the organisational policies and procedures to ensure they know how to:

- deal with concerns
- learn from concerns
- cooperate fully and openly in the investigation of concerns.

If a member of staff is involved at any level with a concern that involves a family member, they must declare an interest. Any investigating officer or person signing off a concern must not have any family relationship with either the complainant or the person about whom the concern is made. This ensures that the integrity of the process is assured without compromising the rights of any individual involved.

This policy may be used by members of staff who wish to report that something has gone wrong with care or treatment provided to a service user(s), with a view to learning lessons. This is not the same as reporting concerns about another member of staff in terms of suspected wrongdoing, criminal activity or unprofessional behaviour which need to be dealt with under the [All Wales Procedure for NHS Staff to Raise a Concern](#).

5 Putting Things Right principles

Public Health Wales is committed to dealing with concerns in an open, accessible and fair manner. The process set up for the investigation and handling of concerns ensures:

- There is a single point of entry for the submission of concerns.

- Concerns are properly investigated in an open and efficient manner
- The complainant is treated with respect and courtesy
- The complainant's expectations are established and their involvement in the process sought
- The complainant is advised of a named person who will act as their contact throughout the handling of their concern
- The complainant is advised of:
 - the availability of assistance to enable them to pursue their concern
 - where such assistance, if required, can be obtained, for example the Community Health Council
- The complainant receives a timely and appropriate response to their concern and is kept informed if there is a delay
- The complainant is informed of the outcome of the investigation
- The complainant is assured that if the complaint is upheld, appropriate action has been/will be taken as a result of their raising a concern to prevent similar cases arising
- Concerns are managed and investigated in line with any future guidance issued by Welsh Ministers.

6 Consent

Anyone can raise a concern and Public Health Wales has a duty to consider whether it can be investigated. The investigation may need access to the person raising the concerns records, including medical records.

6.1 Implied consent

Where the service user raises the concern regarding him or herself, then in doing so it can be deemed as implied consent to undertake an investigation. However, for the individual to be clear in the knowledge that their records may need to be accessed this should be explained in the acknowledgement letter, as this provides them with an opportunity to indicate that they do not wish their records to be accessed.

6.2 Required Consent

Where a third party raises a concern on behalf of someone else then the service user or their representative must be asked to provide written consent to conduct the investigation and access their records. Where there is no representative a best interest decision must be made.

In cases where a concern has been raised with one organisation but a secondary issue has been raised regarding another NHS organisation, the first organisation is required to contact the person making the concern within 2 working days of receipt to advise them that another NHS organisation is involved in the concern. Consent should be sought from

the person raising the concern to contact and notify the other NHS organisation that they are involved in the concern.

Within 2 working days of receiving written consent the other NHS organisation must be informed of the concern.

Please refer to the Putting Things Right Procedure for additional consent information.

7 Redress

Under the legislation Public Health Wales is required to consider when investigating a concern whether there is a qualifying liability in tort i.e. whether there has been a breach of our duty of care and whether that breach of duty is causative of any harm or loss to that person. Where it is indicated there is a qualifying liability in tort consideration of an offer of redress is necessary. Redress can take the form:

- An Apology
- Remedial Action
- Investigation and explanation
- Financial compensation up to £25,000

When an investigation identifies a breach or duty has occurred and the potential for redress the Executive Team will act as the Redress Panel. The case will need to be presented to Redress Panel for consideration and to determine the level of compensation. There may be a need to seek legal advice from Legal and Risk Services.

Redress is not available in relation to a liability that is or has been subject of civil proceeding. If such civil proceedings are issued during the course of the Trust's consideration of redress, the consideration must cease and the Trust must advise the complainant accordingly.

8 Staff support

Information about the investigation must be given to the staff involved in a truthful and open manner although if imparting this information may jeopardise the investigation, then it is advised not to inform the member of staff.

The line manager of a member of staff who is a subject of a concern needs to consider what level of support they may need, as the member of staff may feel anxious, need reassurance and support as the investigation progresses.

In collaboration with the member of staff referral to appropriate staff support services should be considered as required. Healthcare professionals may also seek support from their relevant professional bodies such as the General Medical Council, Nursing Midwifery Council, Royal Colleges, the Medical Defence Union etc.

9 Quality assurance

The organisations quality assurance process includes a review of investigations and response letters by the Head of Service, Programme or Function prior to forwarding to the relevant Divisional Director, SIM, Executive Director and Responsible Officer.

It is the organisations policy that, with the exception of acknowledgement, consent and holding letters, no response letters should be sent by Managers directly to the person raising the concern. All final response letters must be approved and sent from the Chief Executive or nominated deputy.

10 Reporting mechanism monitoring the process

All concerns are monitored to ensure the concern has been adequately investigated, remedial action taken and that lessons have been learnt. Public Health Wales Quality, Safety and Improvement Committee and Executive Team will consider quarterly concerns activity reports and make recommendations as appropriate.

All serious concerns raised will be reported to the Executive Team and Quality, Safety and Improvement Committee. Details of the subject and nature of the concern, together with the outcome of the investigation must be recorded on Datix.

Compliance with the stated time periods for response are monitored and reported. The Board are made aware of concerns which may adversely affect the reputation of the Board by the Chair of the Quality Safety and Improvement Committee and the Executive Director for Quality, Nursing and Allied Health Professionals.

An annual report will be provided to the Quality, Safety and Improvement Committee. The report will include the number of concerns notified, the number of concerns referred to the Ombudsman for Wales and the number of matters referred to redress.

This Policy will be monitored by the Executive Team and Quality Safety and Improvement Committee and will be subject to review every three years or in light of new guidance, legislation or organisational change.

10.1 Learning from concerns

The Service User Experience and Learning Panel has corporate responsibility for providing assurance to the Executive Team and Quality, Safety and Improvement Committee that lessons learnt through the investigation of concerns are implemented and disseminated as appropriate.

11 Safeguarding

When a person raises a concern on behalf of a child or an adult at risk, the organisation must be satisfied that:

- There are reasonable grounds for concern being notified by a representative and not by the individual themselves (Reg 12 (3) (a)); and
- When the child or adult at risk raises a concern themselves the organisation must ensure that they are given reasonable assistance in order to pursue the concern
- Where a concern indicates that a child or an adult at risk may have been abused, then the PHW safeguarding policy should be followed. Where Safeguarding issues are identified during the investigation of a concern, then a discussion should take place at the earliest opportunity with the Responsible Officer and the Corporate Safeguarding Lead. The concern must be considered for any possible Safeguarding issues and action taken as outlined in organisational Safeguarding Policies and Procedures
- If a Safeguarding issue has arisen then the Safeguarding Policy should be followed.

12 Investigations undertaken by the Public Service Ombudsman

If it is not possible to resolve a concern through local resolution the person raising the concern can refer the matter to the Public Service Ombudsman for Wales.

Contact details of this must be provided within the response letter to the person raising the concern.

13 Welsh Language Commissioner

It is important where the Welsh Language forms part of the concern that people are advised that as well as the Public Services Ombudsman for Wales, they can take their concern to the Welsh Language Commissioner if they remain unhappy. This information should be included within the final response letter as appropriate.

Staff should also be sensitive to the requirements of first language Welsh speakers in the handling of their concerns. Arrangements should be put in place to ensure they are able to raise their concerns, discuss them with Welsh speaking members of staff and receive a response in Welsh.

14 Training

Public Health Wales is committed to ensuring that staff at all levels, across all areas of work within the organisation receives appropriate training to enable them to comply with the Putting Things Right – Handling Concerns Regulation 2011.

Putting Things Right Training is mandatory and staff at all levels of the organisation can access on line learning via ESR.

The training is divided into sections and all staff should complete sections 1, 2 and 5. Sections 3 and 4 are applicable to Managers, Divisional and Directorate leads and Board members

Staff must be informed about and receive appropriate training in respect of the operation of arrangements for the reporting and handling of concerns. Staff should also consider training in related areas such as:

- Customer Care
- Safeguarding
- Records Management
- Root Cause Analysis
- Equality, Diversity and Human Rights
- Legal training / awareness
- Welsh Language Awareness.

15 Storage and Management of Concerns Files

The Datix system should contain all information concerning the investigation and correspondence with the person raising the concern.

The Datix concerns file must be kept for a period of 10 years. Records relating children should be retained until they attain the age of 25 (with the minimum 10 year provision).

This file is the responsibility of the Lead Investigator for the complaint / investigation and must be provided if requested by the SIM / Claims Manager. It is the responsibility of the Head of Programme, Service or Function to ensure that when closing the concern the file is complete, accurate and holds no contentious remarks as the information is disclosable.

If a concern becomes a claim then the file is combined into the litigation File.

16 Key performance indicators

Acknowledgment: All concerns raised by users of our services must be acknowledged within 2 working days of first receipt.

Final response: Regulation 24: Responses to formal concerns that do not qualify for Redress should be issued by Public Health Wales within 30 working days from receipt of the concern. If this is not possible the person raising the concern must be informed of the reason for the delay and provided with a holding letter. The response must then be sent as soon as possible and within 6 months of the date the concern was received.

Interim response: Regulation 26: Where Public Health Wales considers there is or may be a qualifying liability which would attract financial compensation of £25,000 or less, an interim report under Regulation 26 needs to be issued within 30 working days of first receipt of the concern from the person or their representative. If this is not possible the person raising the concern must be informed of the reason for the delay. The response must then be sent as soon as possible and within 6 months of the date the concern was received.

If in very exceptional circumstance, the response cannot be issued within 6 months, the person raising the concerns must be informed of the reason for the delay and given an expected response date.

Redress cases: in accordance with Regulation 33, an offer of Redress must be communicated to the person raising the concern or their representative within 12 months of receiving the concern.

The person raising the concern or their representative must be advised they have 6 months to respond to the offer of Redress.

17 References

Guide to report writing following Root Cause Analysis of patient safety incidents (National Patient Safety Agency) www.npsa.nhs.uk/nrls

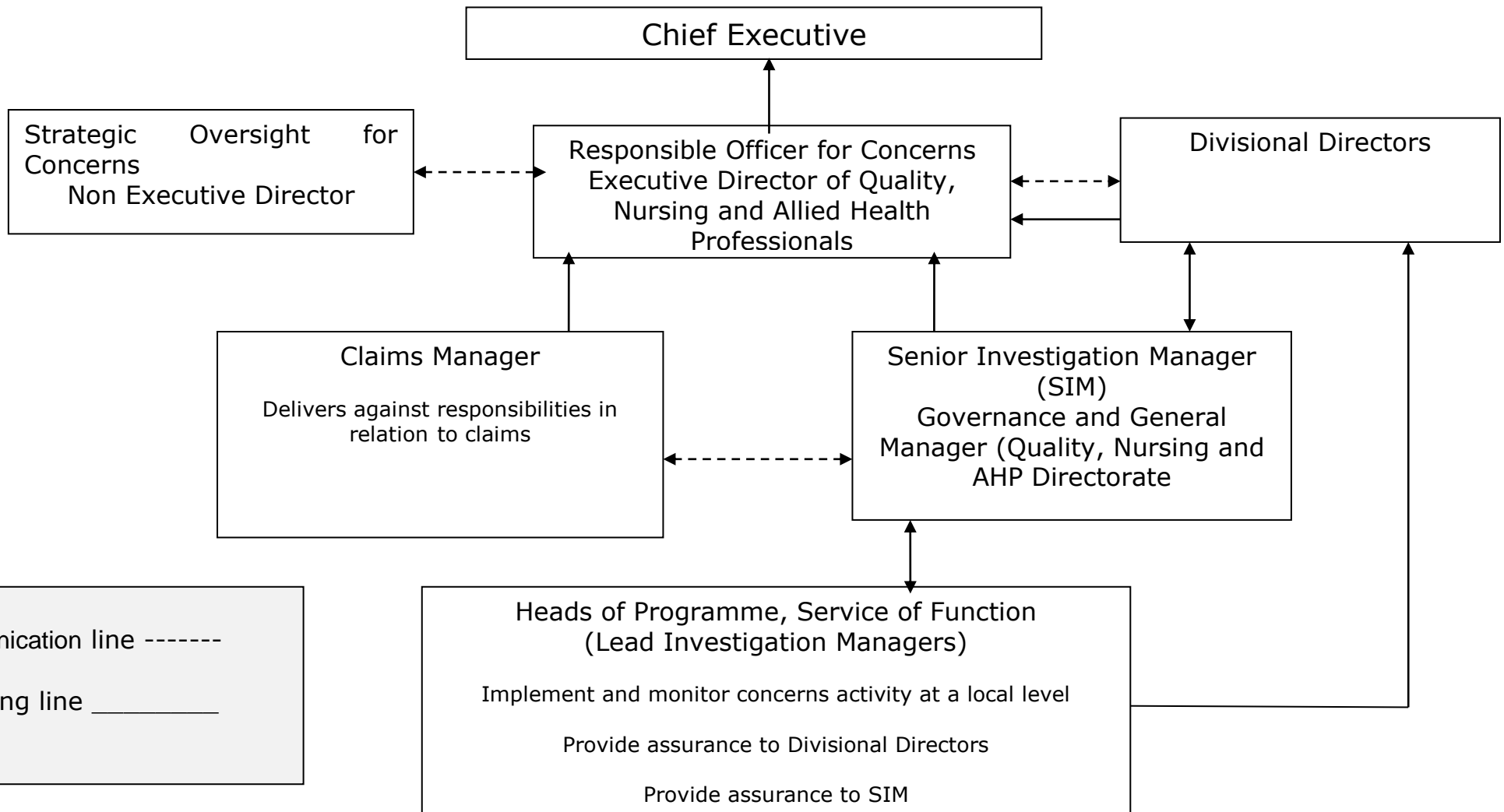
National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011

National Framework for Reporting and Learning from Serious Incidents Requiring Investigation (National Patient Safety Agency) March 2010

Putting Things Right – Guidance on dealing with Concerns about the NHS from 1 April 2011, Welsh Government.

Raising and Acting on Concerns about patient safety (General Medical Council), January 2012 gmc@gmc-uk.org

Appendix 1: Public Health Wales Handling Concerns Structure



Appendix 2 Flowchart for Dealing with Concerns (excluding 'On the Spot Concerns')

