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# Midlothian Integration Joint Board

## Complaints Handling Procedure

### Part 1: Introduction and overview

<i>Version</i>	<i>Description</i>	<i>Date</i>

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## Foreword

The Midlothian Integration Joint Board has been established to improve adult health and social care outcomes in Midlothian and to promote health and wellbeing.

As an Integration Joint Board we are required to have our own complaints handling procedure (separate to those of Midlothian Council and NHS Lothian) to cover our own activities and the decisions we make.

This complaints handling procedure is based on the model developed by the Scottish Public Services Ombudsman (SPSO) in consultation with relevant stakeholders. These Model Complaints Handling Procedures (MCHPs) were revised in 2019 by the SPSO in consultation with all sectors.

Our Complaints Handling Procedure reflects the Midlothian Integration Joint Board's commitment to valuing complaints. It seeks to resolve complaints as thoroughly and quickly as possible and to ensure that any complaints received about the Midlothian Integration Joint Board (Midlothian IJB) are considered in an objective, fair, rigorous and evidence-based manner.

Complaints dealt with under this procedure will be those relating to the organisation and administration of Midlothian IJB, the strategic decisions it makes and the measures it implements to achieve its objectives.

Complaints relating only to the health and social care services provided by staff employed by the partners of Midlothian IJB, or about the functions which support these services, will be dealt with under the relevant NHS Lothian or Midlothian Council complaints procedure.

Whatever the subject matter, complaints provide valuable information that can be used to help us do our job better, improve relationships and enhance the public perception of Midlothian IJB. Complaints can also ensure a proper and transparent explanation of the work we do and how we strive to improve. Learning from complaints supports the transformation of health and social care to enable the people of Midlothian to lead longer and healthier lives with the right support at the right time in the right place.

All IJB Board Members and staff who provide health and social care services in Midlothian must cover this procedure as part of their induction and will be provided with refresher training as required, in order to ensure they are confident in their obligations, in identifying complaints and are familiar with how to apply this procedure (including recording complaints).

Morag Barrow

Chief Officer

Midlothian IJB

[Date]

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## Structure of the Complaints Handling Procedure

1. This Complaints Handling Procedure (CHP) explains to IJB Board Members and relevant staff how to handle complaints. The CHP consists of:
  - Overview and structure (part 1) – this document
  - When to use the procedure (part 2) – guidance on identifying what is and what is not a complaint, handling complex or unusual complaint circumstances, the interaction of complaints and other processes, and what to do if the CHP does not apply
  - The complaints handling process (part 3) – guidance on handling a complaint through stages 1 and 2, and dealing with post-closure contact
  - Governance of the procedure (part 4) – staff roles and responsibilities and guidance on recording, reporting, publicising and learning from complaints
  - The complainant-facing CHP (part 5) – information for persons making a complaint on how we handle complaints
2. When using the CHP, please also refer to the 'SPSO Statement of Complaints Handling Principles' and good practice guidance on complaints handling from the SPSO. [www.spsso.org.uk](http://www.spsso.org.uk)
3. This CHP is designed to be an internal document for us to adopt. The language used reflects its status as an internal document. So 'we' refers to the organisation, not the SPSO. It contains references and links to more detailed guidance from the SPSO where relevant.

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## Overview of the CHP

4. Anyone can make a complaint, either verbally or in writing, including face-to-face, by phone, letter or email.
5. We will try to resolve complaints to the satisfaction of the person making the complaint wherever this is possible. Where this is not possible, we will give the person making the complaint a clear response to each of their points of complaint. We will always try to respond as quickly as we can (and on the spot where possible).
6. Our complaints procedure has two stages. We expect the majority of complaints will be handled at stage 1. If the person making the complaint remains dissatisfied after stage 1, they can request that we look at it again, at stage 2. If the complaint is complex enough to require an investigation, we will put the complaint into stage 2 straight away and skip stage 1.

Stage 1: Frontline response	Stage 2: Investigation	Independent external review (SPSO or other)
<p>For issues that are straightforward and simple, requiring little or no investigation</p> <p>'On-the-spot' apology, explanation, or other action to put the matter right</p> <p>Complaint resolved or a response provided in <b>five working days</b> or less (unless there are exceptional circumstances)</p> <p>Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline response</p> <p>Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing)</p> <p>We will tell the person making the complaint how to escalate their complaint to stage 2</p>	<p>Where the person making the complaint is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, serious or 'high-risk'</p> <p>Complaint acknowledged within <b>three working days</b></p> <p>We will contact the person making the complaint to clarify the points of complaint and outcome sought (where these are already clear, we will confirm them in the acknowledgement)</p> <p>Complaint resolved or a definitive response provided within <b>20 working days</b> following a thorough investigation of the points raised</p>	<p>Where the person making the complaint is not satisfied with the stage 2 response from the service provider</p> <p>The SPSO will assess whether there is evidence of service failure or maladministration not identified by the service provider</p>

7. For detailed guidance on the process, see [Part 3: The complaints handling process](#).

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## Expected behaviours

8. We expect Board Members and staff to behave in a professional manner and treat person making a complaint with courtesy, respect and dignity. We also ask a person making a complaint to treat our staff with respect. We ask persons making a complaint to engage actively with the complaint handling process by:
  - telling us their key issues of concern and organising any supporting information they want to give us (we understand that some people will require support to do this)
  - working with us to agree the key points of complaint when an investigation is required; and
  - responding to reasonable requests for information.
9. We will work with the NHS Lothian and Midlothian Council to apply the relevant organisational policies and procedures to protect staff from unacceptable behaviour, such as unreasonable persistence, threats or offensive behaviour. We recognise that people may act out of character in times of trouble or distress. Sometimes a health condition or a disability can affect how a person expresses themselves. The circumstances leading to a complaint may also result in the complainant acting in an unacceptable way.
10. People who have a history of challenging or inappropriate actions, or have difficulty expressing themselves, may still have a legitimate grievance, and we will treat all complaints seriously. However, we also recognise that the actions of some complainants may result in unreasonable demands on time and resources or unacceptable behaviour. We will, therefore, apply our policies and procedures to protect Board members and staff from unacceptable actions such as unreasonable persistence, threats or offensive behaviour from complainants. Where we decide to restrict access to a complainant under the terms of our policy, we have a procedure in place to communicate that decision, notify the complainant of their right of appeal, and review any decision to restrict contact with us.
11. If we decide to restrict a complainant's contact, we will be careful to follow the process set out in our policy and to minimise any restrictions on the complainant's access to the complaints process. We will normally continue investigating a complaint even where contact restrictions are in place (for example, limiting communication to letter or to a named staff member). In some cases, it may be possible to continue investigating the complaint without contact from the complainant. Our policy allows us in limited circumstances to restrict access to the complaint process entirely. This would be as a last resort, should be as limited as possible (for a limited time, or about a limited set of subjects) and requires manager approval. Where access to the complaint process is restricted, we must signpost the complainant to the SPSO (see [Part 3: Signposting to the SPSO](#)).
12. The SPSO has [guidance on promoting positive behaviour and managing unacceptable actions](#).

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## Maintaining confidentiality and data protection

13. Confidentiality is important in complaints handling. This includes maintaining the complainant's confidentiality and confidentiality in relation to information about staff members, contractors or any third parties involved in the complaint.
14. This should not prevent us from being open and transparent, as far as possible, in how we handle complaints. This includes sharing as much information with the person making the complaint (and, where appropriate, any affected staff members) as we can. When sharing information, we should be clear about why the information is being shared and our expectations on how the recipient will use the information.
15. We must always bear in mind legal requirements, for example data protection legislation, as well as internal policies on confidentiality and the use of complainant's information
16. In certain situations a response to a complaint may be limited by confidentiality, such as:
  - where a complaint has been raised against a Board or staff member and has been upheld – we will advise the customer that their complaint is upheld, but would not share specific details affecting Board or staff members, particularly where disciplinary action is taken.
  - where someone has raised a concern about a child or an adult's safety and is unhappy about how that has been dealt with – we would look into this to check whether the safety concern had been properly dealt with, but we would not share any details of our findings in relation to the safety concern.