

AGENDA ITEM

2.1.5

QUALITY & SAFETY COMMITTEE

POLICY FOR HANDLING PERSISTENT AND SERIAL COMPLAINTS

Date of meeting

16/03/2021

FOI Status

Open/Public

If closed please indicate reason

Not Applicable - Public Report

Prepared by

Sharon O'Brien, Assistant Director of Nursing & People's Experience

Presented by

Greg Dix, Executive Director of Nursing

Approving Executive Sponsor

Executive Director of Nursing

Report purpose

FOR APPROVAL

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals

Date

Outcome

Legal and Risk Shared Services

(02/02/2021)

SUPPORTED

Clinical Policy Sub Group via Chairs Action

02/03/2021

SUPPORTED

ACRONYMS

1. SITUATION/BACKGROUND

All complainants have the right to be heard, understood and respected, as do Health Board staff. We therefore expect complainants to be polite and courteous in their dealings with the Health Board. The Health Board will not

tolerate aggressive or abusive behaviour, unreasonable demands or unreasonable persistence.

The Health Board will make every effort to achieve a satisfactory outcome for each complainant. However, it is recognised that a small number of complainants will remain dissatisfied despite every effort to resolve their complaint and will absorb a disproportionate and unreasonable amount of NHS resources in dealing with their complaints.

Currently there is not a policy available within CTMUHB that provides the Health Board with guidance on how it can manage fairly persistent complainants.

This policy sets out the Cwm Taf Morgannwg University Health Board's (CTMUHB) approach to the relatively few complainants whose actions or behaviour are considered unacceptable. The term complainant includes anyone who contacts the CTMUHB in connection with a concern.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

The Health Board acknowledges that it is important (as part of the investigation into the concern raised) to identify and manage the expectations of the person raising the concern. It should be made clear to all complainants, both at initial contact and throughout their dealings with the Health Board, what CTMUHB can or cannot do in relation to their concern. In doing so, the aim is to be open and not raise hopes or expectations that cannot be met.

Should situations be identified where a person pursuing a concern might be considered to be making unreasonable demands, or is behaving in an unacceptable manner, this document suggests ways staff should respond to these situations. This ensures equity to both staff and the person raising the concern. In particular, in such situations the Health Board may need to change how it responds to the concern, or restrict or modify the complainant's access to its staff members.

This policy should only be used as a last resort and after all reasonable measures have been taken to try to resolve concerns under the Putting Things Right Guidance (2013).

The purpose of this document is to set out the Health Board's Policy for dealing with persons who act in an unreasonable and persistent way in continuing to complain despite their grievances having already been addressed proportionally by the Health Board.

The principle of this policy is that the Health Board will not tolerate unreasonable or inappropriately persistent behaviour and will take all necessary steps to protect staff from nuisance, verbal abuse, threatened or actual harm or harassment.

Complainants will be treated equitably, fairly and with dignity and respect whilst bringing their repeated endeavours to reopen their case or seek continual contact with the Health Board and its staff to an end.

It must also be acknowledged that the grieving process can produce anger and resentment which may be inappropriately directed towards the Health Board or an individual member of staff. In such situations the Health Board should consider what bereavement counselling services could be made available. Any offer of counselling will need to be handled carefully and sensitively and in a way that does not devalue the concern.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

An equality and impact assessment has been undertaken to ensure that our population and staff are treated fairly without discrimination in relation to this policy.

Legal and Risk Shared Services have reviewed the policy and have stated that they have no concerns with the content.

This is a new process which will have an impact on a very small minority of our population within CTMUHB, however this may cause further changes in behaviour within these minority groups and could lead to inappropriate responses which may include their decision to share with the wider media.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
Related Health and Care standard(s)	Effective Care
	If more than one Healthcare Standard applies please list below:
Equality impact assessment completed	Yes and is available upon request.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.



	Legal and Risk Department have reviewed this policy
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Ensure sustainability in all that we do, economically, environmentally and socially

5. RECOMMENDATION

Comments received by the Committee members prior to this date have been included in this version being presented for approval

The Committee is asked to **APPROVE** this policy.