



Department of Health & Social Care

Reader Information	
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Target Audience	All Department of Health & Social Care (DHSC) employees, volunteers and advisors
Policy Description	This policy sets out the responsibilities of the DHSC concerning complaints made about the Department, and confirms its role in relation to complaints about health and social care services provided by service providers
Policy Changes in this Review	Update for changes to legislation made in 2022 and overall simplification to form the basis of a publishable document.
Cross Reference	Manx Care Act 2021 National Health Services (Complaints) Regulations 2022 Regulation of Care (Care Services) Regulations 2013 Social Services Act 2011 Social Services (Complaints) Regulations 2022 Health and Social Care Ombudsman Body (Constitution, etc) Regulations 2022 Children & Young Persons Act 2001 Social Services for Children (Complaints) Regulations 2022
Superseded Documents	DHSC Complaints Policy and Guidance 2018

1. INTRODUCTION

The Department of Health and Social Care (“**DHSC**”) has strategic level responsibility for the Isle of Man’s health and care services. Its key functions include policy development, system planning, finance and regulation. This policy sets out the responsibilities of the DHSC concerning complaints made about the functions of the DHSC.

2. PURPOSE

The Complaints Policy provides clarity for DHSC employees, volunteers and advisors concerning the arrangements for handling complaints about the DHSC and ensures that patients and service users are directed to the most appropriate agency for a resolution of their concerns about registered providers.

3. SCOPE

The Complaints Policy applies to all DHSC employees, volunteers and advisors.

The DHSC has a role in holding Manx Care to account in relation to implementing the accepted recommendations made by the Health and Social Care Ombudsman Body. This assurance function sits with the Quality and Safety Team and does not fall under this policy.

The DHSC does not provide any health or social care services directly (only through the mandate with Manx Care) and so the National Health Services (Complaints) Regulations 2022 and the Social Services (Complaints) Regulations 2022 do not apply to it as the DHSC does not fall within the definition of service provider.

4. BACKGROUND

Revised Regulations about complaints handling in relation to health and social care services provided by health and social care service providers come into operation on 31 October 2022. These removed the DHSC’s role to provide a review mechanism for considering escalated representations from patients and service users about Manx Care’s procedural arrangements for investigating and resolving complaints about directly provided or commissioned health and social care services.

Any complaints about health or social services should be directed to the organisation that provided the services in the first instance or Manx Care Advice and Liaison Service (MCALS) if the complainant is seeking assistance with making a complaint. Manx Care’s complaints page is [here](#).

Reviews about how complaints about health or social services have been handled are undertaken by the Health and Social Care Ombudsman Body.

As a result, this complaints policy only covers the DHSC’s corporate complaints procedure for handling public dissatisfaction about the DHSC’s discharge of its statutory functions, duties and responsibilities.

5. MAKING A COMPLAINT

People wishing to make a complaint can refer their complaint to the DHSC in the following ways:

- Orally to a member of the Department's staff
- In writing to the relevant staff member, manager, team or service area
- Through email, web forms or other electronic media

Due to confidentiality considerations, people raising matters of complaint via social media platforms will be encouraged to make contact with the DHSC 'offline' to ensure personally identifiable information and data is not placed in the public domain.

Complainant's wishing an Executive Review of their corporate complaint about the DHSC should refer their concerns to the Department's Chief Executive.

For people whose first language is not English, or who have sensory or learning disabilities, the DHSC will make appropriate provision for information about its complaint handling arrangements to be made available. DHSC will also signpost people to advocacy services where independent support to make a complaint is required.

Information about the DHSC's complaints processes will be made available through the DHSC website.

6. DHSC CORPORATE COMPLAINTS PROCEDURE

This procedure should be used in instances where a member of the public wishes to pursue a matter of complaint about the DHSC's discharge of its statutory functions, duties and responsibilities.

This may include complaints about its strategic role and remit for health and social care policy development, system planning, finance and regulation. Such complaints may relate to matters of DHSC policy or service delivery on the part of DHSC teams and individual members of staff.

The procedure is an outcome focused two-step process that emphasises early resolution wherever possible, but which provides for a complaint to be escalated for executive consideration where necessary.

6.1 Complaint Definition

A complaint is an expression of dissatisfaction about the way the DHSC has carried out or failed to carry out its role for which the complainant requires a response.

6.2 Who Can Complain?

Given the strategic responsibility of the DHSC for the Isle of Man's health and social care system, a broad and inclusive approach to eligibility will be applied to persons making a complaint under this procedure.

The procedure cannot be used by DHSC staff to pursue their dissatisfaction about matters associated with their employment terms and conditions, or to disclose concerns about the conduct, behaviour and professional practise of their colleagues. Concerns of this nature should be raised through the Government's grievance or whistleblowing procedures respectively.

Complaints referred to DHSC that identify the possibility of safeguarding concerns should be considered in line with the DHSC's safeguarding policy¹ for appropriate action and response.

Complaints about the DHSC's assurance of Manx Care's services can only be considered in relation to how the DHSC has carried out or failed to carry out its role. Individual complaints about the DHSC not holding Manx Care to account in relation to specific service delivery will not be considered under the policy as Manx Care operates independently in relation to service delivery.

Information provided may however be useful intelligence in relation to the quality and safety of that service overall. The Department's assurance framework for evaluating the performance of the health and social system is informed by aggregated data highlighting trends and patterns in complaints. This intelligence will be contextualised through reference to other elements of the assurance framework to provide an holistic assessment of how the system is working.

6.3 Local Resolution

When a complaint is made to the DHSC, the Corporate Services Team will log this on the complaints register², determine whether it is a complaint that can be investigated under the policy and, if so, direct it to the correct team for an investigator to be appointed.

The Corporate Services Team will acknowledge receipt of the complaint on behalf of the DHSC. All complaints should be acknowledged within **2 working days** and a link provided to the complaints process on the DHSC website.

Complaints concerning the conduct, behaviour or performance of staff should be investigated and responded to by the line manager of the relevant team or service area. Where a complaint relates to a line manager, the matter will be considered by an Executive Director.

Complaints about policy or service delivery matters should in the first instance be considered by the most relevant team or service area.

Complaints about the Health Services Consultative Committee will be referred to the Chairperson in the first instance. If a complainant is unhappy with the Committee's response to their complaint then the matter will be investigated by the Department in line with this policy.

As a matter of general principle, the DHSC advocates the early resolution of complaints through proactive action that resolves the complainant's concerns in the

¹ Saved \\ballacleator\dhss shared data\$\New DHSC\1 Team Library\Internal policies

² Saved \\ballacleator\dhss shared data\$\New DHSC\Corporate Division\Complaints

shortest possible timeframe. This may involve the provision of general information, the answering of specific questions, or the taking of a particular course of action. In such circumstances, correspondence confirming the steps taken to address the complainant's concerns can be brief and light touch. However, where the matters raised are more complex and require careful consideration, a more formal investigation may be required.

Investigations should be proportionate to the matter of complaint, i.e. the inquiries undertaken should be sufficient to reach a judgment on the issues of complaint raised and should not stray into irrelevant areas or immaterial matters. The focus of all investigations should be upon the following key considerations in order to avoid investigative 'creep' and ensure that the eventual response addresses the matters of importance to the complainant:

- **The complainant's desired outcomes:** it is essential to understand what would resolve matters for the complaint, and this may include an explanation of events; the provision of an apology; changes to departmental service delivery or policy, or financial remedies for quantifiable losses.
- **The complainants defined complaints:** most complaint referrals contain a number of 'heads of complaint', i.e. a number of specific matters about which the complainant is dissatisfied. The investigation should ensure it addresses each legitimate area of complaint.

The investigator will need to access all the available evidence in order to produce a credible report detailing their findings, conclusions and recommendations. Such evidence may include (but not exclusively):

- Documentary evidence in the form of legislation, regulations, policies, procedures, practice guidance, reports, emails and other data as relevant to the complaint.
- Oral submissions and supporting statements gathered from interviews of persons named in, or relevant to the complaint (where required).
- Electronic media including audio-visual recordings and web based data.

The investigator will produce a report of their investigation which detailed their findings, conclusions and recommendations:

- **Findings:** the factual matters identified in the course of the investigation, e.g. contextual evidence concerning matters such as dates and times, and explanatory evidence such as the reasons for any acts of commission or omission (things done or not done).
- **Conclusions:** the investigator's decision concerning the merits of the complaint (based on the civil law standard of the balance of probability) and drawn from the factual findings of the investigation.
- **Recommendations:** the investigator's suggested courses of action to be taken in order to remedy matters

The report should also clearly identify matters of fact and opinion (provable evidence as opposed to subjective personal views) and weight evidence accordingly (i.e. the first-hand account of someone who directly witnessed a certain event is more persuasive than a hearsay statement from someone several times removed).

The report should then be subject to adjudication (decision making) by a senior officer (an Executive Director or the Head of Corporate Governance) who will consider the investigator's findings, conclusions and recommendations and come to a judgment concerning whether the complaint is upheld or not.

The response will be issued by the Head of Corporate Governance unless there is a conflict identified (for example, the complaint was about that person's conduct). A full response should be provided to the complainant **within 10 working days** of receiving the complaint.

If the complaint investigation cannot be completed within 10 working days, the complainant should be kept informed of progress and given a revised date by which they can expect a response.

At this stage, the complaints register will be updated with the date that the response was issued.

6.4 Executive Review

In circumstances where it has not been possible to resolve the complaint under Local Resolution arrangements, the complainant can request a review of their concerns by an Executive Director or the Chief Officer.

This review will consider the way in which the complaint was handled, and whether or not the decision on the substantive matter of complaint is supported by the available evidence. A response to the complainant will be provided **within 20 working days** of receiving the request for a review. The response will, where relevant, confirm any further available rights of appeal.

7. RESPONSES TO COMPLAINANTS

The quality and standard of responses to complainants is a critical factor in securing closure in matters of complaint. Good grammatical construction and presentation are essential in order to ensure that the response is accessible, easy to navigate and readable. Furthermore, the content of the response should comprehensively address the matters raised by the complainant and provide a clear indication of whether the complaint has been upheld or not upheld.

The following matters should be addressed in the response to the complainant:

- The correspondence and any associated investigation report should be factually accurate and fully address the complainant's defined complaints and desired outcomes.
- Avoid the use of unnecessary jargon wherever possible and provide a clear explanation for any technical or medical terms used.

- Provide a full explanation for any identified failings and unequivocal apologies for any consequential detriment caused.
- Confirmation of any action being taken by DHSC to remedy matters with a clear timeline for implementation.
- An expression of appreciation for having brought the matter to the Department's attention with a reassurance that the matter has been taken seriously.
- Advice on any further rights of appeal, e.g. the right to complain to the Tynwald Ombudsman within 6 months (Information on how to complain to the [Tynwald Ombudsman](#)).

8. BEST PRACTICE IN COMPLAINT HANDLING

The DHSC is committed to best practice in complaint handling and supports the adoption by its staff of the 'Principles of Good Complaint Handling' advocated by the Parliamentary & Health Service Ombudsman (PHSO) and endorsed by the Ombudsman's Association. These principles provide a benchmark for measuring our performance. The PHSO Principles for Good Complaint Handling can be found under **Annexe 1** to this Policy.

The DHSC and its staff will also ensure that people are not treated differently or negatively as a consequence of having made a complaint and provide reassurance that complaints are positively encouraged and welcomed by the Department.

If the complaint is about behaviour by a registered health or social care professional, employed or contracted by the Department, that has caused harm to a service user then the appropriate regulatory body will be notified.

9. MULTI-AGENCY COMPLAINTS

In instances where a complaint involving two or more agencies is made (for example a matter jointly involving DHSC and Manx Care) a decision will need to be made about the lead responsibility for investigating the complainant's concerns. This will depend on the substance of the complaint and will need to be considered on a case by case basis. Due to the nature of the relationship between DHSC and Manx Care, such decisions will require careful consideration so as not to compromise the strategic and regulatory functions of the DHSC.

10. CONFIDENTIALITY AND CONSENT

The personally identifiable data of people referring matters of complaint to the DHSC is subject to the provisions of the General Data Protection Regulation (GDPR) and the Data Protection Act 2018. In general terms, the common law duty of confidentiality applies (i.e. information given in circumstances where an expected duty of confidence applies cannot normally be disclosed without the information provider's consent).

However, for the purposes of DHSC complaint handling responsibilities, the making of a complaint is taken as implicit authority on the part of the author of the

complaint for their personal data to be accessed for the purposes of providing a full and comprehensive response. The exception to this presumption is circumstances where a third party is making a complaint on behalf of another person, and that person's explicit consent is required for the third party to act on their behalf. Where necessary, specialist advice should be sought from the DHSC's Data Protection Officer or Caldicott Guardian.

11. COMPLAINTS IN RESPECT OF THE USE OF POWERS UNDER THE MENTAL HEALTH ACT 1998

Where a patient is complaining about their detention under the Mental Health Act 1998, the patient must be advised to make an application to the Mental Health Review Tribunal. Further advice regarding this process can be obtained from the Mental Health Act Administrator.

12. DHSC REGISTRATION & INSPECTION TEAM

The Registration & Inspection ("R&I") Team are part of the Department's wider regulatory functions and have direct responsibility for DHSC responsibilities under the following legislation and statutory regulations:

- Regulation of Care Act 2013
- Regulation of Care (Registration) Regulations 2013
- Regulation of Care (Care Services) Regulations 2013

The R&I Team are responsible for the registration of care services and their subsequent inspection to ensure compliance with the provisions of the 2013 Act, the accompanying Regulations, and the associated service specific minimum standards. Where evidence of non-compliance is found, R&I has the power to issue requirements and where necessary take appropriate enforcement action.

The Regulations place the legal responsibility for the investigation of complaints about registered care services on the providers of such services. They are required to have a complaints procedure and investigate complaints as necessary. The R&I Team will consider the quality and effectiveness of these complaints systems and processes in determining the compliance of the care provider with the relevant regulatory framework.

The DHSC, and the R&I Team specifically, has no statutory duty to investigate complaints about registered care services. Its responsibility is to use its regulatory powers to determine whether a complaint brought to its attention suggests a possible breach of the Regulations. Consequently, the R&I Team does not 'investigate' complaints in the manner of an ombudsman, arbitrator or adjudicator, but rather it uses its powers of inspection to ensure the safety and wellbeing of all service users resident in the establishment subject to complaint.

The undertaking of such inspection activity is entirely discretionary and decisions are based on the nature and substance of the concerns raised, and the quality of any previous complaints response on the part of registered care providers. Where no complaint has previously been made to the care provider, the complainant will be referred to the establishment in question for a response to their concerns.

Safeguarding matters will be referred to the DHSC's safeguarding policy for appropriate action and response.

Complaints about the R&I Team's service delivery (e.g. matters including its performance and conduct) can be pursued through the Department's Corporate Complaints Procedure. However, this procedure cannot be used to challenge its regulatory judgments or to appeal against regulatory decisions (e.g. enforcement and deregistration).

13. LEARNING FROM COMPLAINTS

Complaints are a rich source of information and intelligence and can be instrumental in shaping future policy and service delivery. Complaints can reveal patterns and trends in customer satisfaction and highlight areas of particular concern or dissatisfaction. The DHSC is therefore committed to using this feedback to improve health and social care services on the Isle of Man, and indeed its own performance as the system's custodian. This will be done in the following ways:

- Learning obtained from complaints made about the DHSC under this procedure will be captured through regular reports to the Executive Board as part of the action tracker. This provides a senior level forum for scrutiny and decision making to ensure that any lessons learnt are acted upon and necessary improvements made.
- The Department's assurance framework for evaluating the performance of the health and social system will be informed by aggregated data highlighting trends and patterns in complaints. This intelligence will be contextualised through reference to other elements of the assurance framework to provide an holistic assessment of how the system is working.

14. VEXATIOUS COMPLAINTS

It is important to distinguish between being vexatious and being persistent in situations where a complainant is repeatedly challenging the DHSC about an issue of importance to them.

In general terms, a vexatious complaint occurs where a matter has been previously raised by the complainant and robustly investigated by DHSC, but the complainant is unwilling to accept the outcome. Persistence on the other hand includes situations where the DHSC has failed to properly understand the issues raised by the complainant and they are unavoidably required to pursue their concerns in order to obtain a full and comprehensive response.

Each situation must be considered on its merits and with regard to the known facts. The Government has a policy on vexatious complaints which should be referred to: <https://hr.gov.im/media/1168/vexpolfinal.pdf> If it is concluded that the complaint is vexatious in nature, then a single point of contact within DHSC should be provided to facilitate communication regarding any new and unrelated matters of concern.

15. COMPLAINTS AND THE MEDIA

Where a complainant has contacted the media, the Department's Communication Lead should be notified and a strategy for further engagement agreed and acted upon.

16. COMPLAINTS AND LEGAL REPRESENTATION OR ACTION

Complainants may on occasions commission someone to advocate on their behalf in a matter of complaint. This is distinctly different from situations where a complainant decides to pursue legal action (e.g. a negligence claim). In instances where it is confirmed that legal action is indeed being taken, the general position is that any existing complaint investigation about the same or similar matters should be suspended pending the outcome of the legal challenge. Where a legal representative is acting on behalf of a complainant in a matter of complaint not subject to legal challenge, the process should continue unfettered. It should be noted that some complainants will use the complaints process to obtain an investigation report into the matters of concern to them and use this as baseline evidence for a subsequent legal action. Consequently, it is important that investigations are of a quality and standard sufficient to withstand legal rigour.

17. ANNEXES

Annexe 1	The Parliamentary & Health Service Ombudsman (PHSO) Principles of Good Complaint Handling
Annexe 2	Flowchart: DHSC Corporate Complaints Procedure
Annexe 3	Summary of procedure to publish on the DHSC website

THE PARLIAMENTARY & HEALTH SERVICE OMBUDSMAN'S PRINCIPLES OF GOOD COMPLAINT HANDLING

Everyone has the right to expect a good service from public bodies and to have things put right if they go wrong. Complaints are a valuable source of feedback; they provide an audit trail and can be an early warning of failures in service delivery. When handled well, complaints provide an opportunity for public bodies to improve their service and reputation. Prompt and efficient complaint handling can save public bodies time and money by preventing a complaint from escalating unnecessarily. Learning from complaints can reduce the number of complaints in the future.

Good complaint handling should be led from the top, focused on outcomes, fair and proportionate, and sensitive to complainants' needs. The process should be clear and straightforward, and readily accessible to customers. It should be well managed throughout so that decisions are taken quickly, things put right where necessary and lessons learnt for service improvement. The Principles set out here are intended to promote a shared understanding of what is meant by good complaint handling and to help public bodies deliver first-class complaint handling to all their customers.

GETTING IT RIGHT...

All public bodies must comply with the law and have regard for the rights of those concerned. They should act according to their statutory powers and duties, and any other rules governing the service they provide. They should follow their own policy and procedural guidance on complaint handling, whether published or internal. Good complaint handling requires strong and effective leadership. Those at the top of the public body should take the lead in ensuring good complaint handling, both practice and culture. Senior managers should:

- set the complaint handling policy, and own both the policy and the process
- give priority and importance to good complaint handling, to set the tone and act as an example for all staff
- develop a culture that values and welcomes complaints as a way of putting things right and improving service
- be responsible and accountable for complaint handling
- ensure that effective governance arrangements underpin and support good complaint handling
- ensure the policy is delivered through a clear and accountable complaint handling process
- ensure learning from complaints is used to improve service.

Public bodies should consider the policy and practice of complaint handling as an integral part of the service they provide to customers. Staff should be properly equipped and empowered to put things right promptly where something has gone wrong. They should be supported by

clear lines of authority and decision making that are flexible enough to respond to complaints effectively and authoritatively.

Complaint handling should focus on outcomes for the complainant and others affected. Public bodies should put in place policies and procedures to ensure complainants are treated fairly, to aid decision making and to ensure fair outcomes. Those policies and procedures should allow staff the flexibility to resolve complaints promptly and in the most appropriate way while still learning from complaints.

Public bodies should make it clear to complainants when they have provided their final response to a complaint. At that stage, public bodies should provide clear and accurate information about the next stage of the complaint process so the complainant is clear about what to do next if they remain dissatisfied. If the complaints procedure is not the most appropriate way for a customer to take forward their concern, public bodies should also clearly direct them to the most appropriate way, for example through appeals mechanisms.

BEING CUSTOMER FOCUSED : Public bodies should do the following...

- Ensure their complaints procedure is simple and clear, involving as few steps as possible. Having too many complaint handling stages may unnecessarily complicate the process and deter complainants from pursuing their concerns.
- Ensure that their complaint handling arrangements are easily accessible to their customers.
- Let their customers know about any help or advice that may be available to them if they are considering making a complaint.
- Deal with complaints promptly, avoiding unnecessary delay, and in line with published service standards where appropriate. Resolving problems and complaints as soon as possible is best for both complainants and public bodies.
- Acknowledge the complaint and tell the complainant how long they can expect to wait to receive a reply. Public bodies should keep the complainant regularly informed about progress and the reasons for any delay and provide a point of contact throughout the course of the complaint.
- Treat complainants sensitively and in a way that takes account of their needs.
- Use language that is easy to understand and communicate with the complainant in a way that is appropriate to them and their circumstances. For example, public bodies should make arrangements for complainants with special needs or those whose first language is not English.
- Listen to and consider the complainant's views, asking them to clarify where necessary, to make sure the public body understands clearly what the complaint is about and the outcome the complainant wants.
- Respond flexibly to the circumstances of the case. This means considering how the public body may need to adjust its normal approach to handling a complaint in the particular circumstances.

- Ensure, where complaints raise issues about services provided by more than one public body, that the complaint is dealt with in a co-ordinated way with other providers and referred onwards where necessary.

BEING OPEN AND ACCOUNTABLE : Public bodies should do the following...

- Ensure that information about how to complain is easily available. They should provide clear, accurate and complete information to their customers about the scope of complaints the organisation can consider; what customers can and cannot expect from the complaint handling arrangements, including timescales and likely remedies; and how, when and where to take things further.
- Be open and honest when accounting for their decisions and actions. They should give clear, evidence-based explanations, and reasons for their decisions. When things have gone wrong, public bodies should explain fully and say what they will do to put matters right as quickly as possible.
- Create and maintain reliable and usable records as evidence of their activities. These records should include the evidence considered and the reasons for decisions. Public bodies should manage complaint records in line with recognised standards to ensure they are kept and can be retrieved for as long as there is a statutory duty.
- Handle and process information properly and appropriately, in line with the law and relevant guidance. While policies and procedures should be transparent, they should also respect the privacy of personal and confidential information as the law requires.
- Take responsibility for the actions of their staff and those acting on behalf of the body.

ACTING FAIRLY AND PROPORTIONATELY : Public bodies should do the following...

- Understand and respect the diversity of their customers and ensure fair access to services regardless of background or circumstances.
- Investigate complaints thoroughly and fairly, basing their decisions on the available facts and evidence, and avoiding undue delay. Public bodies should deal with complaints objectively, fairly and consistently, so that similar circumstances are handled similarly. Any different decisions about two similar complaints should be justified by the circumstances of the complaint or complainant.
- Seek to ensure, where a complaint relates to an ongoing relationship between the public body and complainant, that staff do not treat the complainant any differently during or after the complaint.
- Avoid taking a rigid, process-driven, 'one-size-fits-all' approach to complaint handling and ensure the response to an individual complaint is proportionate to the circumstances. This means taking into account the seriousness of the issues raised, the effect on the complainant, and whether any others may have suffered injustice or hardship as a result of the same problem.

- Ask a member of staff who was not involved in the events leading to the complaint to review the case. The public body can still put things right quickly for the complainant where appropriate.
- Act fairly towards staff as well as customers. This means ensuring members of staff know they have been complained about and, where appropriate, have an opportunity to respond.
- A minority of complainants can be unreasonably persistent or behave unacceptably in pursuing their complaints. Public bodies should have arrangements for managing unacceptable behaviour.

PUTTING THINGS RIGHT...

Providing fair and proportionate remedies is an integral part of good complaint handling. Where a public body has failed to get it right and this has led to injustice or hardship, it should take steps to put things right. That means, if possible, returning complainants and, where appropriate, others who have suffered the same injustice or hardship as a result of the same maladministration or poor service, to the position they were in before this took place. If that is not possible, it means compensating complainants and such others appropriately.

In many cases, a prompt explanation and an apology will be a sufficient and appropriate response and will prevent the complaint escalating. Apologising is not an invitation to litigate or a sign of organisational weakness. There is a wide range of appropriate responses to a complaint that has been upheld. These include:

- an apology, explanation and acknowledgement of responsibility
- remedial action, which may include reviewing or changing a decision on the service given to an individual complainant; revising published material; revising procedures, policies or guidance to prevent the same thing happening again; training or supervising staff; or any combination of these
- financial compensation for direct or indirect financial loss, loss of opportunity, inconvenience, distress, or any combination of these.

When deciding the level of financial compensation, public bodies should consider:

- the nature of the complaint
- the impact on the complainant
- how long it took to resolve the complaint
- the trouble the complainant was put to in pursuing it.

Remedies may also need to take account of any injustice or hardship that has resulted from pursuing the complaint as well as from the original dispute.

SEEKING CONTINUOUS IMPROVEMENT...

Good complaint handling is not limited to providing an individual remedy to the complainant: public bodies should ensure that all feedback and lessons learnt from complaints contribute to service improvement. Learning from complaints is a powerful way of helping to improve public service, enhancing the reputation of a public body and increasing trust among the people who use its service. Public bodies should have systems to record, analyse and report on the learning from complaints. Public bodies should feed that learning back into the system to improve their performance. It is good practice for public bodies to report publicly on their complaint handling performance. This should include reporting on the number of complaints received and the outcome of those complaints. Where complaints have led to a change in services, policies or procedures, public bodies could report those changes. Reporting on complaint handling performance can help to:

- motivate staff
- promote achievement
- drive improvement in service delivery
- boost public confidence in the complaint process
- encourage potential complainants to access the scheme properly
- enable public bodies to identify patterns in complaints.

Public bodies should ensure they:

- tell the complainant when lessons have been learnt as a result of their complaint
- state any changes they have made to prevent the problem recurring.

PHSO: first published 2009

**DHSC Corporate Complaints Procedure
PROCESS FLOWCHART**

The following flowchart provides a simplified headline overview of the Department's arrangements for handling complaints about the DHSC

a complaint about a DHSC function
(acknowledged within 2 working days)



Escalation route for further review

The [Tynwald Ombudsman](#) has the power to investigate a complaint by a member of the public if a person is claiming to have sustained injustice or hardship as a result of a service failure; or maladministration in connection with any administrative action of the DHSC.

Summary of DHSC's Corporate Complaints Procedure (web version)

The Department of Health and Social Care's complaints procedure is outlined below.

What is covered?

The process only covers complaints related to DHSC's role in relation to policy development, system planning, finance, regulation and inspection.

Complaints about the DHSC's assurance of Manx Care can only be considered in relation to how the DHSC has carried out or failed to carry out its role, not the outcome of the service provided by Manx Care.

This process should only be followed if:

- you are not satisfied with the standard of service provided by the Department
- you feel that you have not been treated with respect by the Department, or its Officers

What is not covered?

Please do not use this complaints procedure if your complaint is not in relation to your dealings with the Department.

Complaints about health or social care services should be made directly to the service provider in the first instance. For guidance and advice on making complaints about health or care services please contact the [Manx Care Advice and Liaison Service](#).

Complaints about use of powers under the Mental Health Act 1998 cannot be made under this procedure and should be made to the [Mental Health Review Tribunal](#).

The DHSC does not have a duty to investigate complaints about registered care services. The DHSC's [Registration and Inspections Team](#) is responsible for the registration of care services and their inspection to ensure compliance with the provisions of the Regulation of Care Act 2013, the accompanying Regulations, and the associated service specific minimum standards. Where evidence of non-compliance is found, the Registration and Inspections Team has the power to issue requirements and take appropriate enforcement action.

The responsibility for the investigation of complaints about registered care services is the providers of those services. They are required to have a complaints procedure and investigate complaints as necessary. The Registration and Inspections Team will consider the quality and effectiveness of these complaints systems and processes in determining the compliance of the care provider with the relevant regulatory framework.

The DHSC also has a role in holding Manx Care to account in relation to implementing any accepted recommendations made by the Health and Social Care Ombudsman Body. This function sits with the Quality and Safety Team of the DHSC and does not fall under this procedure.

Complaints Procedure

If you wish to make a complaint about the DHSC you can raise it in the following ways:

- Orally to a member of the Department's staff
- In writing to the relevant staff member, manager, team or service area
- Through email to enquiries.DHSC@gov.im.

For people whose first language is not English, or who have sensory or learning disabilities, the DHSC will make appropriate provision for information about its complaint handling arrangements to be made available. DHSC can also signpost people to advocacy services where independent support to make a complaint is required.

Your complaint will be acknowledged within 2 working days.

The Department has a two-step process for handling complaints:

1. Initially, your complaint will be addressed through local resolution, where we will investigate and respond to the concerns raised. This process emphasises early resolution wherever possible but for more complex cases may involve the DHSC appointing an investigating officer, collecting evidence, and producing a report detailing findings, conclusions, and recommendations.

The response, including any actions taken to remedy the situation, should be provided to you within 10 working days.

If the investigation is not complete within 10 working days, an update will be provided to you with an expected completion date so that you are aware of when you can expect to receive a response.

2. If you feel that the complaint has not been handled satisfactorily or you disagree with the outcome, you can request an Executive Review by an Executive Director within the DHSC. If you want an Executive Review of your complaint, your concerns should be sent to the DHSC general inbox marked for the attention of the Department's Chief Officer. This Executive Review will assess the handling of the complaint and consider the available evidence before providing a further response within 20 working days. It will not be a reconsideration of the substance of the complaint.

[include flow chart from above]

LEARNING FROM COMPLAINTS

Complaints provide valuable information for improving health and social care services on the Isle of Man. The DHSC is committed to using this feedback to shape strategy, policy and service delivery.

The Department's assurance framework for evaluating the performance of the health and social system is informed by aggregated data highlighting trends and patterns in complaints. This information will be considered alongside other parts of the assurance framework to give a complete assessment of how the system is functioning.