

POLICY DOCUMENT

# Complaints Handling Policy

## Policy Review Schedule

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Policy Owner: Senior Governance, IT & Facilities Manager

## Amendment Overview

Version	Date	Pages	Comments	Actioned
2005 – 1.0	September 2005		Policy produced and agreed by SMT	Roisin Campbell
2009 – 2.0	11 June 2009		Revisions made to take account of the new DHSSPS guidance on Managing HSC Complaints and updated to reflect NIMDTA Policy template	Margot Roberts
2009 – 2.0	18/06/2009		Presented to NIMDTA Board	
2009 – 2.0	04/08/2009		Re-issued to staff	
2011 – 3.0	05/09/2011	17	Periodic refresh of Policy. Complaints co-ordinator changed. General revisions and put into new template.	Mark McCarey
2011 – 3.1	08/11/2011	17	Amendments made following Board & Governance Committee consultation	Mark McCarey
2011 – 3.2	14/11/2013	17	Updated to include the 'Role of NIMDTA', NIMDTA mission statement and revised version coding	Linda Craig
2014 – 4.0	11/02/2014		Reviewed and updated with revised 'Role of NIMDTA'. No new guidance received to invoke a change to this policy.	Mark McCarey
			Presented to SMT for approval.  <b>Approved.</b>	
2014 – 4.1	18/02/2014		Amended to reflect discussion at SMT. Sentence that states that this policy applies to recruitment procedures removed.	Mark McCarey

2014 – 4.1	25/02/2014	18	Presented to G&R Committee for approval. <b>Approved</b> subject to minor changes.	
2014 – 4.2	27/02/2014	18	Presented to NIMDTA Board for approval.	
2014 – 4.2	11/03/2014	18	Presented to Extra-Ordinary meeting of NIMDTA Board for approval. <b>Approved</b> subject to minor changes.	
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2018 – 5.1	8/3/18	23	Localised to NIMDTA processes and references. Will be submitted to SMC on 12 March 2018, and G&R and NIMDTA Board on 22 March 2018. Approved subject to amendment of Role of NIMDTA section.	Mark McCarey
2018 – 5.2	12/04/2018		Formatting amended.	Mark McCarey
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2025 – 6.0	21/05/2025		Reviewed and updated document in line with DoH's Guidance in Relation to the Health and Social Care Complaints Procedure (April 2023)	Meredith Gregge
2025 – 6.1	8/10/25		Updated following feedback from NIPSO	Corporate Services
	04/11/2025		Presented to Governance, Resources and Performance Committee. <b>Approved.</b>	
	25/11/2025		Ratified by Board.	

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## Introduction

### Role of the Northern Ireland Medical and Dental Training Agency

The Role of NIMDTA can be accessed via this [NIMDTA website](#).

## Policy Statement

NIMDTA is committed to listening to our service users, understanding their experiences, and responding to their concerns in an effective way.

NIMDTA's Complaints Policy follows the 6 principles of good complaint handling:

- Fix it early
- Focus on what matters
- Be fair
- Be honest
- Learn and improve
- Start off right.

## Policy Impact

This policy may have an impact on the following:

- NIMDTA Assurance Framework
- Corporate & Departmental Risk Registers
- NIMDTA Reporting and Management of Incidents Policy
- NIMDTA Raising Concerns (Whistleblowing) Policy
- NIMDTA Regional Disciplinary Policy and Procedure
- NIMDTA Grievance Policy
- NIMDTA service operations, policies or procedures

## Policy Influence

The policy is aligned with the standards set out in Northern Ireland Public Services Ombudsman's (NIPSO) The Health and Social Care Model Complaints Handling Procedure (MCHP) (01 July 2025).

# Section 1

## 1.1. Defining a complaint

NIMDTA defines a complaint as:

*An expression of dissatisfaction by one or more members of the public about an organisation's action or lack of action, or about the standard of service provided by or on behalf of an organisation.*

We recognise that an individual may not always use the word 'complaint' and that any comment or suggestion that meets the definition of a complaint will be handled as such. Complaints often originate from:

- failure or refusal to provide a service
- inadequate quality or standard of service, or an unreasonable delay in providing a service
- failure to properly implement or follow policy, procedures and standards
- failure to properly apply the law, procedure or guidance when delivering services
- failure to follow the appropriate administrative process associated with the provision of HSC services
- the conduct, attitude or behaviour of a member of staff
- a concern about the actions or service provided by an organisation who is delivering or acting on behalf of the organisation
- disagreement with a decision (except where there is a statutory procedure for challenging that decision, or an established appeals process e.g., child protection, safeguarding and mental capacity)
- dissatisfaction with how an element of a decision was administered
- the provision of health or social care which is not in accordance with good practice

Some issues are not suitable for handling through the complaint's handling procedure and should be addressed by another route. Appendix 1 provides guidance on the most appropriate route for addressing such concerns.

Furthermore, listed below are matters which are generally not considered to fall within the scope of the definition of a complaint. However, dissatisfaction expressed due to inaction in respect of these matters may subsequently meet the definition of a complaint and therefore be required to be processed under the complaint handling process.

- a routine first-time service request
- a fitness to practice issue referred to a professional regulatory body. However, the issue will require careful examination, as there may be elements of the complaint which can proceed under the organisation's complaint handling processes, with any fitness to practice issue regarding an individual being dealt with by the regulator and/or the organisation via its Human Resources (HR) policies.
- a request for a second opinion in respect of care or treatment

- Serious Adverse Incidents (SAI) initiated by the organisation. Where a SAI commences following a complaint the outcome of the SAI may be used to address the specific aspect of the complaint that the SAI addresses. Other aspects of the complaint should proceed while the SAI is being undertaken.
- a legal claim for negligence seeking compensation [see section 1.16 Complaints and legal action].
- where a complaint raises criminal conduct or a criminal investigation is ongoing the complaints process may need to be paused. This should be agreed with the organisation undertaking the criminal investigation and communicated to the service user
- a request for information under the Data Protection or Freedom of Information (Northern Ireland) Acts and requests for reviews of decisions under these statutory regimes where there is an established appeals process applicable to the service
- staff grievance or a grievance relating to employment or staff recruitment (managed under different organisational procedures.) However, staff may complain about the way they have been dealt with as a service user under the complaints procedure
- a concern raised internally by a member of staff which was not about a service they received such as a whistleblowing concern.

All accepted complaints require an investigation, proportionate to the potential significance of the complaint, and all complainants require a response.

There may be times when a complaint process has to be paused to allow another process to be completed. If this is the case we will record the reason, and both update and keep the service user fully informed. Where it is appropriate to do so those elements that can continue to be progressed will be.

When a matter cannot be progressed or needs to be delayed sufficient information will be provided to explain either why the matter cannot be dealt with under the complaints handling procedure and signposting to the appropriate route, or why a complaint needs to be paused while another process takes place.

We will support and advise staff members dealing with complaints to assist them in managing issues that fall outside the scope of the complaints handling procedure.

Some complaints may provide a greater degree of challenge for the organisation to manage. This can include complaints which relate to the actions of senior staff. Complaints which are considered to provide a greater degree of challenge will be identified and support sought from the Chief Executive and Board in progressing the complaint in line with the complaints handling policy. Further advice will be sought when necessary from BSO Shared Services.

## 1.2 Who can make a complaint?

Anyone who receives, requests or is directly affected by or comes into contact with NIMDTA can make a complaint. This includes service users, family members or representatives acting on their behalf where they have been given authority to do so, and may also include visitors, neighbours or other people affected by the service.

This policy covers:

- complaints about the way NIMDTA has acted, or failed to act in the execute of its statutory duties
- complaints about the way NIMDTA or a NIMDTA staff member has acted in the exercise of their duties, for example:
  - the manner in which an individual has been treated by NIMDTA or its staff, such as unfair treatment or decision-making
  - the general or observed behaviour and competence of individuals employed by NIMDTA. The policy also covers recent former employees and those working on behalf of NIMDTA who are not technically NIMDTA employees (e.g. facilitators, education supervisors);
- complaints from the public about the content (including accuracy and objectivity) of a published NIMDTA report
- complaints about allocation of goods or services to trainees (for example training opportunities, flexible training, overseas training, study leave) which may fall outside other NIMDTA policies
- an appropriately authorised person acting on behalf of a service or facilities user.

Further information on managing complaints made by representatives of service users is provided in section 1.6 Consent and Capacity.

### 1.3 Supporting the service user

NIMDTA recognise there may be barriers for individuals when seeking to raise a complaint. These may include physical, sensory, communication or language barriers, but can also include cognitive impairments/memory loss, or their own personal anxieties and concerns. Individuals may fear that complaining will affect their care or relationships with staff.

NIMDTA is committed to embedding and maintaining an accessible, robust and effective complaints policy and process to ensure learning opportunities are acted upon both specifically and corporately, improvements are implemented promptly, and individuals who experience failings and raise complaints are listened to and treated fairly and properly. NIMDTA is committed to promote equality of opportunity, good and harmonious working relations and the prevention of unlawful discrimination. Further guidance on NIMDTA's approach can be found in the NIMDTA Equality, Diversity and Inclusion policy.

In taking steps to remove barriers to complaining, NIMDTA will offer adjustments to an individual when appropriate. This may include

- proactively checking whether the individual who wishes to complain requires support to do so
- offering alternatives to writing a complaint and assisting individuals to record their complaint where this a barrier

- providing accessible information about the complaints process in a range of languages and different formats suitable for those with a visual impairment
- providing interpretation and/or translation services for those who need them, to promote the availability of this service and highlight that it is free of charge for the service user
- to help the service user to access independent advocacy relevant to the issues being raised in the complaint.

We recognise factors may impact on a person's access to the complaints handling process and we will ensure vulnerable groups and individuals have access to this policy. NIMDTA staff are advised through training of the need to support vulnerable individuals and groups through a complaint process. We will ask for the assistance from the Equality Unit in BSO to assist with these instances.

## 1.4 Expected behaviours

Information and mandatory training is provided to staff to make the clear the importance of candour, openness and honesty when dealing with and investigating complaints. We expect staff when dealing with and investigating complaints to

- take a non-defensive approach
- have a willingness to listen
- respond to concerns and challenges about services and/or service delivery
- build trust with service users who have raised a complaint
- promote the HSC values
- comply with the Model Complaints Handling Procedure.

Furthermore, we expect staff when dealing with and investigating complaints to model the following behaviours

- treat all service users with courtesy, respect and dignity
- remain calm and professional when responding to complaints
- show understanding of how confusion, distress or illness may affect how someone raises a complaint.

During a complaint process we will request individuals raising a complaint to:

- provide details of their key issues of concern including provision of supporting information which they may wish to submit
- work with NIMDTA staff to ensure there is an agreed understanding of the issues of complaint
- respond to reasonable requests for information
- behave in a courteous manner.

### 1.4.1 Unexpected or unacceptable behaviour

NIMDTA recognise that people may act out of character in times of trouble and distress. This may result in an individual raising a complaint to display unacceptable behaviours. NIMDTA's mandatory training provides information and training to staff to assist them in managing such situations with empathy and compassion.

We recognise that regardless of their behaviour, an individual may still have a legitimate grievance and all complaints will be taken seriously, addressed and the individual issued with a response. If an individual is seen not to behave in a courteous manner and action is thought necessary, we will provide prior warning to the individual of the intention to apply any restriction unless doing so would create an unreasonable risk. We will ensure any restriction on the individual's access to the complaints policy is proportionate and proactively reviewed to ensure it is still necessary. We will allow the individual to have the decision reviewed should they not agree to it, and we will advise them if/when any restrictive measure has been removed.

## 1.5 Maintaining Confidentiality and Data Protection

NIMDTA recognise the need for maintaining the confidentiality of the individual raising a complaint and confidentiality in relation to information about staff members or other stakeholders involved in the complaint. NIMDTA will be clear when sharing information why the information is being shared and the expectations on how the recipient will use the information. We will ensure a want for confidentiality does not prevent the organisation from being open and as transparent as possible in managing complaints and we will not allow confidentiality to prevent legitimate comment by an individual about their complaint.

We will abide by data protection legislation as well as the NIMDTA Data Protection and Information Governance policies.

Mandatory training in Information Governance is provided to all NIMDTA staff. Should a situation arise where full disclosure of information regarding the management of a complaint is not possible staff may seek further guidance from the Complaints Manager and/or BSO Shared Services: BSO HR and BSO Data Protection Officer.

Where investigation of a complaint raised regarding the actions of a staff member indicates that a disciplinary investigation may be necessary further guidance can be found in the NIMDTA Regional Disciplinary Policy and Procedure.

## 1.6 Consent and Capacity

NIMDTA recognise a service user may be unable or reluctant to make a complaint on their own. Guidance on consent and capacity is provided to staff within training for handling a complaint.

Where someone other than the person to whom the complaint relates, or their authorised representative (including MLAs, MPs and local Councillors), wishes to make a complaint on behalf of a person, NIMDTA will ensure the complaint is handled in accordance with

confidentiality and data protection legislation and NIMDTA Data Protection and Information Governance policies.

In such circumstances we will check whether consent has been received from the person for the complaint to be made on their behalf. If consent has not been received, this will be taken into account when handling and responding to the complaint. We recognise this may limit the information which can be included within the investigation and we will ensure the individual to whom the complaint relates is aware that their personal information may be shared as part of the complaints handling process. Should limitations apply we will ensure the individual who submitted the complaint is aware of the effect this may have on the scope of the response.

We will endeavour to keep the person to whom the complaint relates informed of the progress of any investigation into the complaint, where it is in their best interests.

In circumstances where the person does not have the capacity to consent to the complaint being made on their behalf, we will seek assurance that any person making the complaint on the person's behalf has a legitimate interest in the person's welfare and no conflict of interest.

Should a complaint be made where the subject of the complaint is a child/young person, we will gain guidance from BSO Shared Services in relation to obtaining consent and adhere to relevant legislature.

## 1.7 How complaints may be made

Complaints may be made verbally or in writing, including face-to-face, by telephone, letter or email.

Where a complaint is made verbally, we will expect staff to make a record of the key issues raised in the complaint.

NIMDTA do not respond to complaints on social media. Where a complaint is raised via a digital channel managed and controlled by NIMDTA, the administrator will explain that NIMDTA does not accept complaints made on social media and direct the individual to contact the NIMDTA Complaints Manager [see details in Appendix 2].

## 1.8 Time limit for making complaints

NIMDTA permits complaints to be raised up to 6 months after the event occurred or the individual becoming aware of the issue. Where issues such as bereavement, poor health, communication difficulties or limited support have delayed the complaint, or the person has only recently become aware of the issues of concern, NIMDTA will not apply the time limit rigidly and guidance will be given by the Complaints Manager.

NIMDTA will allow up to 30 days for an individual on receipt of a Stage One response to request that the complaint is progressed to Stage Two of the complaints handling process

[see section 2.2 for information on the two stages of the complaints handling process]. We will not apply this rigidly to the detriment of the service user. Requests outside of this timescale will be considered, with guidance from the Complaints Manager.

The following factors will be considered when determining whether to apply discretion outside of these time limits:

- health or bereavement issues
- the seriousness of the issues
- the availability of relevant records and/or the staff involved
- how long ago the events occurred
- the likelihood that an investigation will lead to a practical outcome for the service user or useful learning for NIMDTA.

At the conclusion of the complaints handling process the service user has the right to bring their complaint to NIPSO. The time limit for this is usually within six months of completion of the NIMDTA complaints procedure. Section 2.7 sets out the role of NIPSO and the requirement for staff to signpost service users to NIPSO at the end of the complaint's handling process.

## Particular circumstances

### 1.9 Anonymous complaints

NIMDTA value all complaints and we commit to investigating anonymous complaints where it is appropriate to do so. Consideration of an anonymous complaint will include whether there is enough information in the complaint to enable further enquiries. Any decision not to pursue an anonymous complaint must be authorised by the Complaints Manager and the rationale for not investigating will be recorded.

If an anonymous complaint raises serious issues, these will be dealt with in a timely manner under relevant procedures (be it the Complaints Policy, Raising a Concern Policy, Regional Disciplinary Policy & Procedure or other).

### 1.10 What if the service user does not want to complain?

Where an individual has expressed dissatisfaction in line with the definition of a complaint but does not want to complain, NIMDTA expect staff to explain to the individual the benefits of raising a complaint in improving services, in ensuring that the individual is updated on the action taken and that they will receive a response to their complaint.

Where the individual insists that they do not wish to complain, NIMDTA will record the issue as an anonymous complaint and address the issue as outlined in section 1.9. Through the recording of all complaints, we will identify trends and themes in complaints and allow further investigation if required.

## 1.11 Complaints involving more than one area or organisation

Where a complaint involves more than one area or other organisations we will ensure good communication between service areas and co-ordinate communication to the individual raising a complaint, setting out what they can expect to receive and from whom.

Where a complaint is received about the service of another organisation we will assist in signposting the individual to who can help in dealing with their complaint.

Where a complaint involves other organisations in addition to NIMDTA we will endeavour to appoint a lead organisation who will be responsible for updating the individual raising the complaint. If this is not possible, we will respond to the individual on all issues which relate to NIMDTA services.

## 1.12 Complaints about commissioned services

### Service provider (contractor)

Any complaint relating to a commissioned service provided by NIMDTA, where NIMDTA are the service provider will be addressed through NIMDTA's complaints handling process. Any complaint relating to a service delivered on behalf of NIMDTA through a contract or commissioning service should be addressed by that contractor via a complaints handling process, in alignment with the NIPSO MCHP.

Where NIMDTA have exhausted the complaints handling procedure the service user will be signposted to NIPSO (as detailed in section 2.7).

### Commissioner

Where NIMDTA receive a complaint about a contractor providing a service on our behalf, the complaint will be forwarded to the service provider for handling through their complaints handling procedure. Similarly, we will process any complaint in relation to NIMDTA received via our commissioner.

Should we receive a complaint that has already been processed by a contractor through their complaints handling procedure, we will signpost the service user to NIPSO.

NIMDTA are committed to ensuring that all complaints are properly investigated and that recording and reporting arrangements are in place. Should the service provider refuse to investigate the complaint we will engage with BSO Shared Services who manage the contract on our behalf to ensure next steps are followed.

## 1.13 Complaints about senior staff

We recognise that there may be a conflict or perceived conflict of interest for the staff investigating a complaint involving decisions or actions involving senior staff. Should a complaint be raised which involves senior staff we will ensure the investigation is conducted

by an individual who is independent of the situation to avoid any perceived conflict of interest and enlist support from Chief Executive, Board Chair and BSO Shared Services as required.

## 1.14 Complaints and disciplinary or raising concerns

We recognise that there may be occasion whereby a complaints process overlaps with a disciplinary or raising concerns process. Training is provided to staff to ensure complaints are managed appropriately and ensuring no breach of confidentiality.

While a parallel process may not prevent some aspects of a complaint being investigated and responded to, it may be that some information cannot be disclosed to the individual raising a complaint and we will advise them accordingly should this occur.

## 1.15 Contact from MLAs, MPs or Councillors

We recognise that a Councillor, MLA or MP may make a complaint in their capacity as an elected member in support of their constituents or as an individual. In both circumstances the complaints handling procedure will be followed.

Should additional guidance be required on seeking third party consent relating to such complaints we will seek advice from the Information Commissioners Office.

## 1.16 Complaints and legal action

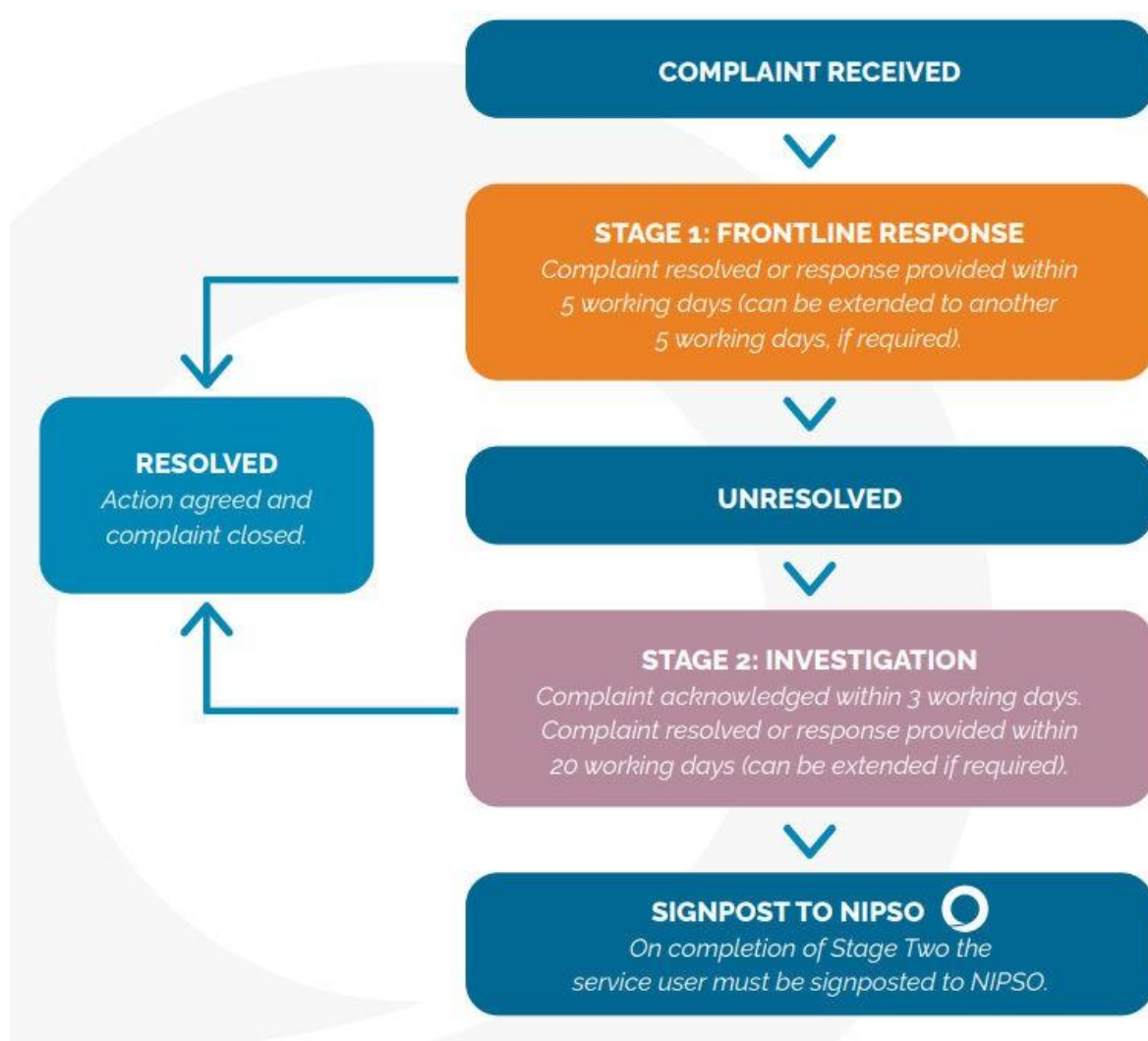
Mandatory training provides guidance to staff when managing complaints that involve legal action or proposed legal action. We will continue to investigate aspects of a complaint via the complaints handling procedure which do not fall within the scope of the legal action. In these circumstances, investigation will only be taken forward if it does not, or will not, compromise or prejudice the matter being investigated under any other process.

## Section 2

### 2.1 The definition of a complaint

The definition of a complaint is detailed in section 1.1.

### 2.2 The complaints handling process



We aim to provide a simple, accessible and compassionate process for responding to complaints by capable, well-trained staff. Where appropriate we will aim to resolve the complaint to the satisfaction of the individual raising a complaint through an early response at Stage One. Where it is not possible to resolve and/or the individual remains dissatisfied with our response at Stage One, then the complaint moves to Stage Two (investigation). Following investigation, we will provide the individual with a clear and reasoned response to their complaint. Complaints will be managed in an open and transparent way which builds trust in our complaints handling process.

## 2.3 Resolving the complaint

We will try to resolve complaints wherever possible, by listening with empathy and building a trusting relationship with the service user. We recognise that a complaint is resolved when both NIMDTA and the individual agree what action (if any) will be taken to provide full and final resolution of the complaint. A complaint may be resolved at any point in the complaints handling process, that is, during stages one or two. We encourage staff to use complaint resolution approaches when trying to resolve a complaint.

Where we have resolved a complaint at Stage One, we do not deem it necessary to provide a written response to the service user unless this has been specifically requested by the complainant. We will record how the complaint was resolved, what action was agreed and the service user's agreement to the final outcome. Where we have not resolved a complaint at Stage One, a written response will be issued. This will include details of how the service user can escalate the complaint to stage 2.

Where we have resolved a complaint at Stage Two we will issue a written response to the service user setting out the agreed resolution.

Where a complaint has not been resolved at the end of Stage Two we will signpost the service user to NIPSO [see details in section 2.7]

Please see section 3.2.1 Recording complaints for details on how all outcomes are logged.

## 2.4 What to do when you receive a complaint?

Upon receiving a complaint, staff will use the following four questions to either resolve the complaint or respond to the complaint quickly (at Stage One):

- i. What exactly is the service user's complaint (or complaints)?
  - It is important to be clear about exactly what the service user is complaining about. Staff may need to ask the service user for more information and explore the issue to get a full understanding.
  - Staff will need to decide whether the issue can be defined as a complaint and whether there are circumstances that may limit the ability to respond to the service user (such as the time limit for making complaints, confidentiality, anonymity or the need for consent).
  - If the matter is not suitable for handling as a complaint, staff must explain this to the service user and signpost them to the relevant procedure or other organisations for further advice. If the service user is dissatisfied that their complaint is not being accepted by the organisation, they must be directed to escalate their complaint to Stage Two. NIMDTA will then review their decision not to accept the complaint and respond accordingly, to include signposting to NIPSO.
- ii. What does the service user want to achieve by complaining?

- At the outset, staff must clarify the outcome the service user wants. Sometimes, the service user may not be clear about this, and staff will need to explore further to find out what they expect, and whether this can be achieved through the complaint handling procedure.
- iii. Is it achievable?
- Organisations must ensure that staff dealing with complaints have sufficient training and understand their level of authority. This can help complaint resolutions to be achieved in a timely manner or explanations to be provided where an immediate remedy is not achievable. It is always better to be clear with service users about what may be achievable or not achievable as soon as possible in the process.
- iv. If a response cannot be provided, who can help?
- Where staff receive a complaint and feel they do not have the appropriate skills and experience (for example, they are unfamiliar with the issues or area of service involved), they should forward the complaint to someone who can better deal with the issues (who may be within their team), and/or seek the advice of the Complaints Manager. It is important that the transfer of complaints between staff does not result in a reduction in service to the service user, including the opportunity to resolve the issue early in the process.

## 2.5 Stage 1: Point of contact response

At Stage One we will aim to respond to complaints quickly within 5 working days.

NIMDTA provide mandatory training to all staff to allow them to deal with complaints at this stage, using the behaviours set out in section 1.4, so that concerns can be responded to quickly, reassurance given and any arising situation deescalated.

Staff will identify the level of authority needed to resolve or respond to a complaint and are empowered to seek support from a line manager, colleague or the Complaints Manager when needed.

When appropriate we will provide an on-the-spot apology or explain why the issue occurred and, where possible, what will be done to stop the issue happening again.

If a complaint is raised in relation to another staff member we will where possible share the complaint with that staff member before responding. However, this is not to delay the response to the individual raising a complaint.

### 2.5.1 Stage 1: Timelines

We will issue the Stage One response within 5 working days, or as soon as possible. The date of receipt is considered to be the day the complaint is received unless it is received after

normal business hours, during a weekend or bank holiday when it will be considered the date of the next working day.

## 2.5.2 Stage 1: Extension to the timeline

In exceptional, unforeseen circumstances we will allow a short extension of up to 5 working days for the Stage One response to be issued. That is a total of 10 working days. Timelines will be monitored through reporting to ensure this does not become a norm. If an extension is utilised, the individual raising a complaint will be advised of the extension, the reason for it and when they may expect to receive a response.

Should the individual making a complaint not receive the response within ten working days and there is no clear date as to when they can expect to receive this, the individual may request that the complaint be escalated to Stage Two.

## 2.5.3 Stage 1: Responding to the complaint

We will communicate the outcome of Stage One to the individual raising a complaint. The outcome may be conveyed through a face-to-face discussion, telephone call, or in writing (email, letter or direct message). We will determine the individual's preferred method of contact and use this where possible throughout the complaints handling process.

Where resolution of the complaint has not been possible, we will provide the individual with a written response explaining:

- the reason for the decision
- that they can escalate the complaint to Stage Two if they remain dissatisfied. We will explain the timescale and how to do so.

As set out in Section 1.8 we will not apply time limits rigidly but take account of personal circumstances.

Where a resolution has been possible, we will log a full and accurate record of the resolution agreed with the service user in the complaints register.

Where it has not been possible to contact the individual raising a complaint by telephone or to speak with them in person, or where they have requested it, we will provide a written response detailing the proposed or agreed resolution.

All identified learning will be recorded within the complaints log as detailed in section 3.2.1 Reporting complaints.

## 2.6 Stage 2: Investigation

When a complaint has not been resolved at Stage One and the individual has requested further consideration be given to the complaint, we will progress to Stage Two of the complaints handling process. In exceptional circumstances and in agreement with the

individual we may progress complex complaints to Stage Two without a response at Stage One.

At the outset staff will consider whether complaint resolution approaches other than investigation which may be appropriate. This is detailed in section 2.6.5. At Stage Two we aim to provide the service user with a full, objective and evidence-based response that represents NIMDTA's final conclusion. This will entail further exploration of the complaint.

All details of the complaint will be recorded and available to those investigating and responding to the complaint.

### 2.6.1 Stage 2: Investigation - Acknowledging the complaint

We will acknowledge within 3 working days receipt of the complaint at Stage Two. The date of receipt is considered to be the day the complaint is received unless it is received on a weekend or bank holiday in which case the date of receipt is the next working day.

Acknowledgement will be in a format which is accessible to the individual and take into account their preferred method of contact.

We will set out the issues of complaint and expected outcomes. The individual will be requested to contact NIMDTA if they consider the issues are not understood or agreed.

### 2.6.2 Stage 2 Investigation – Confirming the issues of complaint and outcome sought

If the issues of complaint and outcome sought are not clear, we will contact the individual to confirm these early at Stage Two. This can take place by telephone, face-to-face or virtually. If it is the preference of the service user, or it is not possible to contact them by other means, we may clarify the issues of complaint and expected outcome in writing. We seek to ensure there is a shared understanding of the complaint and a clear record of

- the issues of complaint to be investigated
- confirmation of any issues of complaint that cannot be considered
- the outcome sought by the service user and if these are achievable.

### 2.6.3. Stage 2: Investigation – Updating staff members involved

If the complaint is about the actions of a particular member of staff, NIMDTA will update the staff member(s) involved that the complaint has been escalated to Stage Two. We will encourage involvement and co-operation of staff but not at the risk of an unreasonable delay in the process. NIMDTA will:

- share the complaint information with the staff member (unless there is a compelling reason not to);
- advise them how the complaint will be handled, how they will be updated and how we will share the complaint response with them;

- discuss their willingness to engage with complaint resolution approaches (where applicable); and
- signpost staff members to a point of contact who can provide support and information on what to expect from the complaint process. This will not be the person investigating or signing off the complaint response.

If the staff member identifies a possible disciplinary issue or the need for a disciplinary investigation they should refer to the NIMDTA Regional Disciplinary Policy and Procedure.

#### 2.6.4 Stage 2: Investigation – Investigating the complaint

Mandatory training provides guidance on investigation planning to ensure successful and timely completion of investigations.

#### 2.6.5 Stage 2: Investigation – Complaint resolution approaches

Staff will continue to consider complaint resolution approaches throughout Stage Two. Approaches may include:

- complaint resolution discussions,
- mediation
- conciliation.

Where mediation is attempted, a suitably trained and qualified mediator will be identified. These approaches may be used to resolve the complaint entirely, or to support one part of the process, such as understanding the complaint, exploring the individual's desired outcome or resolving one of the issues. Where the organisation, an individual (and any staff member/s involved) agree to using complaint resolution approaches, an extension to the timeline will be agreed.

#### 2.6.6 Stage 2: Investigation - Meeting with the individual during the investigation

To effectively investigate a complaint, it may be necessary to arrange a meeting with the individual. If this is required, it will take place as soon as possible following receipt of the request to escalate the complaint to Stage Two. The need for a meeting will not be at risk of delay to issuing a response to the individual. Similarly, the availability of staff must not delay having a meeting unless the presence of that staff member is essential.

Meetings with a large number of staff will be kept to a minimum and only those strictly necessary to address the complaint are invited to attend. Where it is not possible to meet and provide a final response to the complaint within 20 working days we may extend the timescale for responding to the individual. This will be discussed with the individual. A written record of a meeting will be completed, and a record of the meeting will be provided to the individual. Alternative formats to this may be considered as part of a reasonable adjustment.

## 2.6.7 Stage 2: Investigation - Timelines and extension to timelines

The following timelines apply to Stage Two investigations:

- Complaints must be acknowledged within 3 working days
- a final response to the complaint must be provided as soon as possible but not later than 20 working days from the time the complaint was received at Stage Two.

We expect that the majority of complaints will receive a final response within 20 working days. However, we may extend the timescale if necessary to complete the investigation and provide a comprehensive response. Where the timescale is extended the individual will be advised and provided with the reason for the extension as well as the expected response date. Others involved in the complaint will also be advised of the extension to the timescale.

In the event that an extension is required, guidance will be sought from the Complaints Manager. A clear rationale will be recorded on each occasion including a record of what action has been taken to progress the complaint during the extension timeframe before a further extension is approved. An individual and any member/s of staff complained about will be contacted at least once every 20 working days to update them on the progress of the investigation. Extensions will be the exception and long delays due to the absence of a member of staff will not be a sufficient reason to delay an investigation.

## 2.6.8 Stage 2: Investigation - Closing the complaint

We will issue the final response to a complaint in writing or in such other form taking account of any reasonable adjustments made to meet the needs of the individual raising a complaint. We will provide contact details should the individual wish to clarify any aspect of the response they do not understand.

Our response will be

- clear and easy to understand
- written in a way that is person-centred and non-confrontational
- avoid technical terms, but where these must be used, an explanation of the term will be provided
- address all the issues raised and demonstrate that each element has been fully and fairly investigated
- include an apology where things have gone wrong
- highlight any area of disagreement and explain why no further action can be taken
- indicate that a named member of staff is available to clarify any aspect of the letter

In the same correspondence, or within two weeks of the day the complaints procedure is exhausted/completed, we will advise the individual that:

- they have exhausted/completed the complaints procedure
- if they remain dissatisfied, they may bring their complaint to NIPSO [see section 2.7 Signposting to NIPSO].

Where a complaint is about the actions of particular staff member/s, we will share with them any part of the complaint response which relates to them, unless there are compelling reasons not to. Where this is appropriate the relevant staff must always have regard to the timescales within which the decision must be issued. A record of the decision, and details of how it was communicated to the individual, will be recorded as detailed in section 3.2.1. Before the closure of the complaint, the staff member handling the complaint will consider whether any learning has been identified. Where learning has been identified, this will be recorded to enable reporting and sharing. The complaint will then be closed and records updated accordingly.

## 2.7 Signposting to NIPSO

Once the investigation stage has been completed, the individual has the right to come to NIPSO if they remain dissatisfied. NIMDTA will make clear to the service user:

- their right to ask NIPSO to consider the complaint
- the time limit for doing so
- how to contact NIPSO.

## 2.8 Post-closure contact

Where a service user contacts NIMDTA for clarification following receipt of a final response, it is permissible to have further discussion with the service user to clarify a response and answer their questions. This may be a further opportunity to demonstrate the NIMDTA's commitment to improvement and learning. This will not be used to reopen the complaint or ask for a new investigation. If the individual is dissatisfied with NIMDTA's response or does not accept the investigation findings, then we will explain that it has already given its final response on the matter and signpost them to NIPSO. It is important that the clarification of our response does not go on for a long period and unnecessarily prolong the process for the service user.

# Section 3: Complaints Governance

## 3.1 Roles and Responsibilities

As part of the complaints handling process, all staff will be made aware of:

- the HSC Model Complaints Handling Procedure
- how to handle and record complaints at Stage One
- who they can refer a complaint to, if they are not able to handle the matter themselves
- the need to try and resolve complaints early and as close to the first point of contact as possible
- their clear authority to attempt to resolve any complaints they may be called upon to deal with

- that introductory training on the complaints policy is part of NIMDTA's induction process for all new staff. More in-depth and refresher training will be provided to particular staff on a regular basis depending on the frequency and complexity of complaints they may be asked to handle

The responsibilities within NIMDTA are summarised below:

NIMDTA Board members:

Their role is to:

- ensure NIMDTA has a complaints procedure which meets the requirements of the MCHP.
- ensure complaints data and trends are analysed and routinely considered as part of leadership information
- provide the necessary challenge and hold senior staff to account for NIMDTA's performance in complaints handling and management
- provide strategic leadership to drive the required culture of openness in organisations where complaints are welcomed and valued.

The strategic oversight and scrutiny role of board members is designed to promote effective organisational learning from complaints. This helps to ensure early warning signs are identified and acted upon so that the need for potential future actions, such as public inquiries into wider and more serious issues, which may originate from complaints, is negated. When board members are undertaking their scrutiny role in relation to complaints they will consider the following questions:

- What were the main issues of complaint received?
- What was the organisational learning from the complaints received?
- What actions were taken as a result of lessons learned from complaints?
- How many complaints were subsequently submitted to NIPSO and upheld?
- What were NIPSO's recommendations and were they complied with (if applicable)?
- How have NIMDTA triangulated complaints data with other measures of performance at an individual, service area or organisational level.

NIMDTA Chair:

Where a complaint is made against the Chief Executive the Chairperson will oversee the process liaising as necessary with the Department of Health and its Permanent Secretary. In addition, he/she may be required to support the Chief Executive in dealing with any complaints about a Senior Manager.

Chief Executive:

The Chief Executive provides leadership and direction in ways that guide and enable an organisation to perform effectively across all services. This includes driving a culture where complaints are welcomed and valued. To ensure the complaints procedure is effective the Chief Executive and senior staff will demonstrate the culture expected. A culture which is

open and values complaints is not focused on either denial or blame. The focus of the Chief Executive will be on ensuring learning, improving services and taking responsibility for NIMDTA's performance in relation to service delivery and complaints. To ensure accountability and build trust the Chief Executive will ensure there are appropriate mechanisms in place for recording of complaints and that there is reporting on complaints and complaints performance at all levels in NIMDTA including to the Board. The Chief Executive may be actively involved in the management of complaints or may delegate responsibility to senior staff. The Chief Executive will receive regular management reports to provide assurance on the operation of the complaints process in NIMDTA.

The Chief Executive is also responsible for ensuring that there are governance and accountability arrangements in place in relation to complaints about contractors/commissioned services. This includes:

- ensuring performance monitoring for complaints is a feature of the service/management agreements between an organisation and contractors/commissioned services
- setting clear objectives in relation to this complaints procedure and putting appropriate monitoring systems in place to provide an overview of how the contractor/commissioned service is meeting its objectives.

Senior staff:

On the Chief Executive's behalf, senior staff are responsible for:

- managing complaints and implementing learning
- reporting complaints quarterly [as a minimum] to the senior management committee
- overseeing the implementation of actions required as a result of a complaint
- overseeing the investigation of complaints
- ensuring all staff receive training appropriate to their role
- preparing and signing off organisational responses where this has been delegated so they must be satisfied that the investigation is complete and their response addresses all aspects of the complaint. However, senior staff may decide to delegate some elements of complaints handling (such as investigations and the drafting of response letters) to other senior staff. Where this happens, the responsible senior staff member must retain ownership and accountability for the management and reporting of complaints.

Complaints investigator:

The complaints investigator is responsible and accountable for the management of the investigation. The complaints investigator role may include:

- maintaining or co-ordinating communication with the service user and any relevant staff, planning the investigation
- collecting and assessing evidence and preparing a comprehensive written report with their findings and conclusion

- identification of service improvements and organisational learning through their investigation.

Staff undertaking investigations will be supported to conduct the investigation independently and provided with access to the information they need when doing so alongside their other routine work tasks.

Senior Governance, IT & Facilities Manager:

Holds delegated responsibility for the implementation and operation of the complaints process, and is referred to as Complaints Manager.

## 3.2 Recording, reporting, publicising and learning from complaints

As part of the complaints procedure NIMDTA aim to identify opportunities to improve services.

### 3.2.1 Recording complaints

All complaints will be recorded.

For each complaint we will record:

- the date the complaint was received
- the service user's name and contact details
- the issue/nature of the complaint
- the service the complaint refers to
- the staff member responsible for handling the complaint
- the action taken and outcome at Stage One response
- any extension authorised at Stage One (if applicable)
- the date Stage One response was issued
- the date request for Stage Two was received (if applicable)
- any extensions authorised at Stage Two (if applicable)
- action taken and outcome at Stage Two (if applicable)
- whether the complaint was resolved, upheld, partially upheld, not upheld
- the date the investigation response was issued at Stage Two (if applicable)
- the underlying cause of the complaint and any remedial action taken
- any organisational learning as a result of the complaint.

Where applicable we will also consider and record the outcome of any NIPSO investigation to inform learning. The retention of information is set out in the HSC disposal schedule Good Management, Good Records. It is expected that when notified of a complaint or an investigation by NIPSO, NIMDTA will take the steps necessary to secure any records.

### 3.2.2 Reporting of complaints

NIMDTA has a process for the internal reporting of complaints information, including analysis of complaints trends.

NIMDTA will report quarterly to the Senior Management Committee and annually to the Governance, Resources and Performance Committee on:

- complaints performance statistics
- analysis of the trends and outcomes of complaints (this will include highlighting where there are areas where few or no complaints are received, which may indicate either good practice or that there are barriers to complaining in that area).

Good practice and learning will be disseminated throughout the organisation via the representative senior staff member attending the Senior Management Committee.

Complaints Performance Statistics:

Reporting on complaints performance statistics will include the following:

Complaints received

- Number of complaints received
- Number of complaints escalated from Stage One to Stage Two

Performance against timescales

- Number of complaints closed in full at Stage One within 5 working days as a percentage of all Stage One complaints closed in full
- Number of complaints closed in full at Stage Two within 20 working days as a percentage of all Stage Two complaints closed in full

Average response times

- Number of working days to respond in full to complaints at stages one, and Stage Two

Complaints resolved, upheld, partially upheld and not upheld

- Number of complaints 'resolved', 'upheld', 'partially upheld' and 'not upheld' at stages one and two

Number of complaints where an extension was authorised

- Number of complaints at stages one and two where an extension was authorised

## Lessons learned from Complaints

- Brief summary of any organisational learning (if identifiable at point of complaint closure)

### 3.2.3 Publishing complaints information

NIMDTA will publish an annual report in relation to complaints information. The annual report will summarise and build on the quarterly reports to senior management. Published information must include:

- complaint performance statistics [as detailed in the section 3.2.2 Reporting of complaints]
- complaint trends and the actions that have been or will be taken to improve services as a result
- lessons learned from complaints.

Published information will be anonymised and compliant with data protection requirements. This information will be accessible on our website and available in alternative formats as requested. In keeping with NIPSO expectations, NIMDTA will contribute as required to annual Complaints Information document for the sector.

### 3.2.4 Acting upon and learning from complaints

NIMDTA will:

- seek to identify the root cause of complaints
- take action to reduce the risk of recurrence
- systematically review complaints performance reports to improve service delivery.

Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data. Where NIMDTA have identified the need for service improvement in response to an individual complaint, we will take appropriate action.

When implementing learning from complaints, NIMDTA will ensure:

- the action needed to improve services is authorised by an appropriate manager
- a staff member(s) (or team) will be designated the 'owner' of the issue, with responsibility for ensuring the action is taken
- a target date is set for the action to be taken
- a senior member of staff follows up to ensure that the action is taken within the agreed timescale
- where appropriate, performance in the service area is monitored to ensure that the issue has been resolved
- any learning points are shared with relevant staff.

Senior management will review the information reported on complaints quarterly as set out in section 3.2.2.

### 3.3 Monitoring compliance and performance compliance

NIMDTA have appropriate self-assessment arrangements in place through annual reporting to the Governance, Resources and Performance Committee and through annual Internal Audit processes, conducted through BSO Internal Audit, to assure themselves that their complaints procedure is operating in accordance with the MCHP and tracks complaints performance. We will comply with any external monitoring requirements by NIPSO.

## Appendix 1 – Complaints outside the scope of this policy

There are matters outside the scope of the complaints handling procedures where they are governed by other legislative processes or have a separate process in place:

- where a complaint has been raised against a Resident Doctors and Dentists in Training (RDDiT) in relation to their professional practice. Such complaints would be investigated under their host organisation's complaints procedure where the RDDiT is fulfilling their role. Where appropriate, complaint investigation outcomes may be signposted to NIMDTA's employment policies.
- staff grievance or a grievance relating to employment or staff recruitment (managed under different organisational procedures.) However, staff may complain about the way they have been dealt with as a service user under the complaints procedure.
- a fitness to practice issue referred to a professional regulatory body. However, the issue will require careful examination, as there may be elements of the complaint which can proceed under the organisation's complaint handling processes, with any fitness to practice issue regarding an individual being dealt with by the regulator and/or the organisation via its Human Resources (HR) policies.
- a request for information under the Data Protection or Freedom of Information (Northern Ireland) Acts and requests for reviews of decisions under these statutory regimes where there is an established appeals process applicable to the service
- an independent inquiry
- an independent investigation
- a legal claim for negligence seeking compensation [see section 1.16 Complaints and legal action]
- an appeal as part of an ongoing established process
- where a complaint raises criminal conduct or a criminal investigation is ongoing the complaints process may need to be paused. This should be agreed with the organisation undertaking the criminal investigation and communicated to the service user

## Appendix 2 – Contact details

NIMDTA Complaints Manager

Northern Ireland Medical and Dental Training Agency  
Beechill House  
42 Beechill Road  
Belfast  
BT8 7RL  
Phone: 028 9040 0000  
Email: [complaints.nimdta@hscni.net](mailto:complaints.nimdta@hscni.net)

NI Public Services Ombudsman

Progressive House 33 Wellington Place Belfast  
BT1 6GQ  
028 9023 3821

Website: [Northern Ireland Public Services Ombudsman | NIPSO](http://Northern Ireland Public Services Ombudsman | NIPSO)

## Appendix 3 – A quick guide to the complaints procedure

### COMPLAINTS PROCEDURE

You can make your complaint in person, by phone, by email or in writing. We have a **2 stage complaints procedure**. We will always try to deal with your complaint quickly. But if it is clear that the matter will need in-depth investigation, we will talk to you about this, agree a way forward and keep you updated on our progress.

### STAGE 1: FRONTLINE RESPONSE

We will always try to respond to your complaint quickly, **within 5 working days** if we can. If you are dissatisfied with our response, you can ask us to consider your complaint at Stage 2.

### STAGE 2: INVESTIGATION

We will look at your complaint at this stage if you are dissatisfied with our response at Stage 1.

We will acknowledge your complaint within **3 working days**. We will confirm the issues of complaint to be investigated and what you want to achieve.

We will investigate the complaint and give you our decision as soon as possible. This will be after no more than 20 working days unless there is clearly a good reason for needing more time.

### NORTHERN IRELAND PUBLIC SERVICES OMBUDSMAN

If, after receiving our final decision on your complaint, you remain dissatisfied with our decision or the way we have handled your complaint, you can ask NIPSO to consider it.

A quick guide to the Complaints Procedure: information for service users, The Health and Social Care Model Complaints Handling Procedure, P47, NIPSO