



Redress and Remedy in Complaint Resolution Policy

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1.0	07/06/17	Jacqueline Taylor, Patient Relations Manager	A	Approved by TMG
1.1	29/05/19	Jacqueline Taylor, Patient Relations Manager	D	Amended to reflect current professional development and practice and new guidance
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2.1	Dec 2021	Risk Team	A	Approved extension at TMG until Dec 2021
2.2	08/12/21	Jacqueline Taylor, Patient Relations Manager	D	Amended to include additional standard financial remedy amount for damage to doors and to take into account service views
2.3	10/03/22	Jacqueline Taylor, Patient Relations Manager	D	Reviewed by CQDF
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3.1	Jan 2024	Risk Team	A	Clare Ashby approved extension until June 2024
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A = Approved D = Draft				
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Staff Summary

Yorkshire Ambulance Service (YAS) welcomes all feedback about the quality of our services.
YAS approach to handling feedback is outcomes focused and seeks to resolve problems as early and as speedily as possible in the first instance.
Complaints and concerns will be handled in a way that is open, fair and proportionate.
Appropriate and proportionate remedies will be made in line with Parliamentary and Health Service Ombudsman Principles.
Where a complaint has been upheld either fully or in part, YAS will always apologise for what went wrong.
Where a complaint has been upheld either fully or in part, and where substantial loss, distress, or inconvenience has occurred directly as a result, YAS will consider a suitable remedy for the complainant.
Non-financial remedies will always be considered prior to the consideration of financial remedies.

1.0 Introduction

- 1.1 Welcoming and listening to feedback from patients, their families and members of the public is an essential part of YAS quality and risk governance. The effective management of that feedback is necessary to ensure that patients are confident their feedback is acted upon in a consistent, fair and timely manner, that it leads to changes in our service delivery, that we recognise the effect the quality of our services have had upon them and aim to remedy any hardship we may have caused.
- 1.2 YAS must comply with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and associated guidance 'Listening, Responding, Improving' issued by the Department of Health in February 2009. YAS must meet the Care Quality Commission registration requirements as specified in Regulation 19. YAS needs to have regard to and also comply with the Principles of the Parliamentary and Health Service Ombudsman (PHSO). The PHSO Severity of Injustice Scale is attached at Appendix C.
- 1.3 The Parliamentary and Health Service Ombudsman's guidance on financial remedy advises where maladministration or poor service has been found and where this results in injustice or hardship the aim is to restore complainants to "the position they would have been in if the maladministration or poor service had not occurred" and if that is not possible a financial remedy may be appropriate.
- 1.4 This Redress and Remedy in Complaint Resolution Policy is an integral part of the Trust's compliance with the above Regulations and guidance. The Policy should be read in conjunction with the Compliments, Comments, Concerns and Complaints Management Policy.

2.0 Purpose/Scope

- 2.1 The purpose of this document is to:
 - 2.1.1 Set out the principles by which YAS will provide remedies and redress to complainants;
 - 2.1.2 Define the roles and responsibilities for the provision of remedies and redress;

- 2.1.3 Set out the standards, structure and systems via which remedies are made.
- 2.2 This Policy covers remedies and redress arising from complaints relating to any aspect of the services provided by Yorkshire Ambulance Service that fall within the scope of the YAS Policy for Managing Compliments, Comments, Concerns and Complaints.
- 2.3 This Policy does not replace the Trust's Claims Management Policy. All contact from patients, their families and members of the public who do not wish to pursue a concern or complaint but clearly state they wish to make a claim against the Trust only, will lead to the complainant or their representative being signposted to the Legal Services Department to be processed in line with the Trust's Claims Management Policy.
- 2.4 The Policy for Redress and Remedy in Complaint Resolution will not be used for the consideration and remedy of claims for personal injury or harm following a complaint investigation. In these instances, the complaint will be responded to and the complainant will be advised of the limitations of this Policy to consider the remedy they are seeking and how to pursue the matter as a claim.

3.0 Process

3.1 Consideration of redress and remedies

- 3.1.1 Appropriate redress and remedies will be considered following complaint investigation where a complaint has been either partially or fully upheld. YAS will always offer an apology in such cases, and in most cases an apology will be considered to be an appropriate remedy. Attempts to remedy complaints will always initially focus upon the stated outcomes sought by the complainant.
- 3.1.2 An apology is an appropriate remedy where minor distress, inconvenience or hurt feelings have been caused by the action or inaction of our services or delays in providing a service.
- 3.1.3 Where a complaint has been partially or fully upheld and the investigation has found that the complainant (or person on whose behalf the complaint is being made) has experienced a loss (of opportunity or financial), incurred extra expenses as a direct result, experienced substantial distress or inconvenience, and/or has been put to considerable effort to pursue their complaint, consideration may be given to additional redress or remedy.
- 3.1.4 In line with the PHSO guidance, YAS will always seek to put the person back in the position they would have been in had the service have been delivered in the way it should have been. Remedies in kind will always be considered and only where this is not possible will financial remedies be offered.

3.2 Financial remedies

- 3.2.1 Where a financial loss or additional expense has occurred, the actual financial amount can be quantified and any remedy offered will be based on the exact amount. The complaint investigation must have proven that this expense or loss was incurred as a direct result of the service deficiencies found.

- 3.2.2 Where the additional expense incurred relates to the replacement of an external door, due to the significant variance in the associated costs of replacement doors, a standard amount will be offered. The standard amount has been set based on research conducted on the reasonable costs for the provision of a uPVC external door provision and fitting. This amount will be reviewed annually. Complainants may pursue a claim against the Trust should they feel they have incurred expenses in excess of the standard amount offered which will be processed under the Trust's Claims Management Policy.
- 3.2.3 Where there is no quantifiable amount, the level of distress or inconvenience may be considered, and an appropriate financial remedy calculated with reference to the PHSO Severity of Injustice Scale. In arriving at an appropriate amount consideration will be given to:-
- the effects of the complainant's own actions;
 - the severity of the distress or inconvenience;
 - the length of time involved;
 - the vulnerability of the individual(s);
 - the number of people affected.
- 3.2.4 Financial redress for effort in pursuing a complaint will take into account the extent of contact the complainant has had to make to achieve a resolution, the length of time taken and the degree of inadequacy of YAS responses.
- 3.2.5 It may be appropriate to offer a financial remedy which contains multiple components as defined in paragraphs 3.2.1 to 3.2.4 above.

3.3 Financial remedy decisions

- 3.3.1 Individual services, when involved in resolving concerns at service level, may apply appropriate financial remedies which will resolve a concern where additional expenses have been incurred or financial loss has occurred which is clearly directly as a result of a service deficiency. This can be approved by Managers within the Service up to £100.
- 3.3.2 All Patient Relations and IUC Clinical Governance and Quality Coordinators may agree appropriate financial remedies where additional expenses have been incurred or financial loss has occurred which is clearly directly as a result of a service deficiency in their handling of concerns or complaints. This can be approved by the Manager or Director who is responsible for the approval of the complaint response up to £100.
- 3.3.3 All other financial remedies must be approved by the Executive Director of Quality, Governance and Performance Assurance and can only be made following the investigation of a complaint.
- 3.3.4 Patient Relations and IUC Clinical Governance and Quality Coordinators must consider whether a financial remedy may be appropriate where the conditions outlined in this Policy are met. Where they consider a financial remedy may be appropriate this will be shared with the relevant Operational Manager and referred to the Patient Relations Manager along with any comments/views expressed by the Operational Manager.
- 3.3.5 The Patient Relations Manager will review the case and explore whether non-financial remedies are more appropriate and will aim to identify a suitable non-financial remedy in the first instance. Where this is not possible, the Patient Relations Manager will review

PHSO Severity of Injustice Scale and will propose a suitable remedy to the Executive Director of Quality, Governance and Performance Assurance.

- 3.3.6 The Executive Director of Quality, Governance and Performance Assurance will consider the proposed remedy and will reject the proposal or will agree a suitable amount. The Executive Director of the service which is the subject of the complaint will be advised by the Patient Relations Manager of this decision.

3.4 Record keeping

- 3.4.1 All proposed remedies considered by the Executive Director of Quality, Governance and Performance Assurance will be recorded on the Datix 4Cs module by the Patient Relations Manager and the outcome and reason for the decision will be recorded.

3.5 Making the remedy

- 3.5.1 All financial remedies will be payable from the budget of the service which is the subject of the complaint.
- 3.5.2 The complainant will be advised of the payment in the final complaint response. The response must clearly detail the reason the payment is being made and what the payment is for. The Patient Relations Manager will review the response prior to approval.
- 3.5.3 The Coordinator leading on the complaint will request the payment to be made. Care must be taken to ensure the payment is made to the individual who has experienced the loss, distress, inconvenience being remedied. It may be necessary to raise more than one payment to separate individuals.

3.6 Contracted Services

- 3.6.1 All services contracted by YAS and to which the Compliments, Comments, Concerns and Complaints Management Policy applies, will be expected to operate in accordance with this Policy.

3.7 Joint remedies

- 3.7.1 Where service deficiencies leading to financial remedy are found following the investigation of a complaint jointly with another organisation, agreement should be reached as to how the financial redress will be divided. This will take into account the proportionate level of failure by each organisation involved.

4.0 Training expectations for staff

- 4.1 Staff in the Patient Relations team and the IUC Clinical Governance and Quality team must be fully aware of all aspects of this Policy. They will receive specific briefing from the Patient Relations Manager on how to identify appropriate remedies for complaints.
- 4.2 All Managers and Directors who are responsible for the approval of complaint responses must be fully aware of this Policy.
- 4.3 The Patient Relations Manager and the Executive Director of Quality, Governance and Performance Assurance must ensure they remain informed of current PHSO remedies guidance and individual case remedies made.

5.0 Implementation plan

- 5.1 The latest approved version of this Policy will be posted on the Trust Intranet site for all members of staff to view.

6.0 Monitoring compliance with this Policy

- 6.1 A report of financial remedies made under this Policy will be reported to the Finance Committee on a quarterly basis.

7.0 References

Legislation

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 www.legislation.gov.uk

Health Service Commissioners Act 1993 www.legislation.gov.uk

Guidance

'Listening, Responding, Improving' issued by the Department of Health in February 2009
www.dh.gov.uk

Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, February 2013
www.gov.uk

A Review of the NHS Hospitals Complaints System 'Putting Patients Back in the Picture' Right Honourable Ann Clwyd MP and Professor Tricia Hart www.gov.uk

Parliamentary and Health Service Ombudsman – Guidance on Financial Remedy
www.ombudsman.org.uk

8.0 Appendices

- 8.1 This Policy includes the following appendices:

Appendix A – Definitions

Appendix B – Roles and Responsibilities

Appendix A – Definitions

Redress/Remedy	An apology or an act to put right an error made or to financially compensate for injustice incurred.
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Appendix B - Roles & Responsibilities

Trust Board

The Trust Board has responsibility for assuring itself that an appropriate system is in place for remedying injustice as a result of complaints and for monitoring remedies made. The Board will seek assurance via the Quality Committee that these systems are functioning effectively and that YAS complies with the Regulations and guidance.

The designated Board Member responsible for managing complaints remedies and redress is the Executive Director of Quality, Governance and Performance Assurance.

Trust Management Group

The Trust Management Group, led by the Chief Executive, has delegated responsibility for approving this Policy.

Executive Director of Quality, Governance and Performance Assurance

Responsible for ensuring that the duties within this Policy are carried out effectively in practice. Responsible for deciding all financial remedies made over and above the reimbursement of expenses or direct financial losses incurred.

Executive Directors

Approve the financial remedies in responses to complaints (in line with the approval process in the Policy for Managing Compliments, Comments, Concerns and Complaints) which are for the purpose of reimbursing expenses or direct financial losses incurred.

Associate Director of Quality and Safety

To act as deputy for the Executive Director of Quality, Governance and Performance Assurance in relation to this Policy.

Patient Relations Manager

Ensures that this Policy is delivered effectively at an operational level.

Ensures all Coordinators handling complaints are aware of this Policy and able to effectively consider appropriate remedies.

Reviews requests for consideration of financial remedies made by Coordinators and advises accordingly.

Makes recommendations to the Executive Director of Quality, Governance and Performance Assurance for financial remedies.

Keeps a register of all financial remedies considered, outcomes and reasons.

Reviews all complaint responses offering financial remedies prior to approval of response.

YAS Heads of Service

Approve the financial remedies in responses to complaints (in line with the approval process in the Compliments, Comments, Concerns and Complaints Management Policy) which are for the purpose of reimbursing expenses or direct financial losses incurred.