GIG CYMRU NHS WALES

Llywodraeth Cymru
Welsh Government

# Listening to People

## The NHS Wales Complaints, Incidents and Redress Process

## - People's Guidance

**2026**

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Mae'r ddogfen hon ar gael yn Gymraeg hefyd / This document is also available in Welsh
Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg / We welcome correspondence and telephone calls in Welsh

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This guidance is aimed at Patients, Service Users, their families and carers and is based upon the Listening to People: The NHS Wales Complaints, Incidents and Redress Process – Guidance (2026) The National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 (S.I. 2011/704 (W.108)) as amended by the National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) (Amendment) Regulations 2023 and 2025.

## Foreword by Jeremy Miles MS, Cabinet Secretary for Health and Social Care



I am pleased to introduce this guide to Wales' updated system for making a complaint about NHS services – *Listening to People: NHS Wales Complaints, Incidents and Redress process*. It provides you with information about the process and what to expect from NHS Wales at every stage.

Raising a concern if something goes wrong with your care is not just your right, it helps the health service to learn and improve. *Listening to People* has been developed with the help of patients, families, NHS staff, and other organisations. It builds on the *Putting Things Right* process, which was place for 15 years to ensure that you are listened to when raising a concern about healthcare. I want to thank everyone who has contributed by sharing their experiences with us.

*Listening to People* is designed to make the often-daunting process of raising a concern simpler and easier by prioritising clear and compassionate communication. You will be listened to and respected; support will be offered throughout the process, and any complex legal or medical terms are properly explained.

Our NHS is based on the key principle that people must be at the heart of everything we do. Listening to the experience of people who have raised concerns about their care helps us to drive positive change, strengthens accountability, and contributes to building an NHS that is safer and fairer for everyone. An NHS that is always listening, learning and improving.

## Foreword by Sue Tranka, Chief Nursing Officer for Wales.



I am pleased to introduce *Listening to People*, Wales' national approach to handling NHS concerns, complaints, incidents and redress. This guidance has been shaped with a single purpose in mind: ensuring that every person who raises a concern about their care is treated with dignity, fairness, compassion and respect. Putting into practice the principle that *every voice matters*.

Across Wales, patients, families and carers have told us that raising a concern can be daunting. Many people only come forward at moments of distress, uncertainty or loss. Others worry they will not be taken seriously, or that speaking up might affect their future care. I want to reassure you that raising a concern is not only your right -

it is an essential part of how we make our NHS safer, fairer and better for everyone. You will not be treated differently for speaking up. Instead, your voice will help us improve the care we provide.

*Listening to People* strengthens and simplifies the way concerns are handled across all NHS-funded services in Wales. It introduces clear standards, a single point of access, and a consistent commitment to openness, timely communication and compassionate support. Central to this is the *Listening Discussion* - a dedicated opportunity for you to explain what happened, what matters most to you, and what you need to feel heard and supported. We recognise that retelling difficult experiences can be emotional, so organisations must offer support, advocacy, reasonable adjustments and sensitive communication every step of the way.

This strengthened approach also ensures that people receive meaningful answers. Whether your concern is resolved early or requires a detailed investigation, you should expect a clear explanation, an apology where things have gone wrong, and information on the actions that will be taken to prevent the same issue happening again and minimise harm to patients. When harm is identified, Welsh NHS bodies must consider redress, which may include further care, remedial action or financial compensation.

This guidance forms part of a wider approach to understanding and improving people's experiences of NHS care in Wales, ensuring that feedback, concerns and lived experiences are consistently used alongside other sources of insight to shape safer, kinder and more responsive services.

Importantly, *Listening to People* strengthens accountability. NHS organisations must learn from concerns, report openly on what has changed as a result, and demonstrate how they will improve services for the future.

Thank you to every individual, family member, carer and staff member who contributed to the development of this new guidance. Your experiences and insights have shaped a system that puts people first. I hope this guidance gives you confidence that, whenever you need to raise a concern, you will be listened to, supported and treated with kindness and empathy.

## Introduction

Patients, service users, their loved ones and carers have the right to raise concerns about the care they receive under the NHS in Wales. This can be done through the Listening to People NHS Wales Complaints, Incidents, and Redress process.

Raising a concern can be difficult and distressing. People often come forward because something has had a real impact on them or their loved ones. This guidance explains what support you can expect and what will happen when you raise a concern.

A concern can include a complaint, patient-safety incident or any other issue relating to an organisation's health services.

Responsible bodies, which are organisations that are legally responsible for your care, have a duty to listen to, act on, investigate and respond to concerns, and to learn from them to improve care and reduce the risk of harm re-occurring in the future.

Responsible bodies can be an NHS organisation, a GP practice, dental practice or an Independent Provider delivering NHS funded care.

Raising a concern often follows upsetting or traumatic experiences and NHS organisations in Wales aim to respond in ways that are compassionate, respectful and sensitive to the impact on you and your loved ones.

## The People's Pledge on NHS Wales Concerns

The People's Pledge sets out a clear, public promise about how people can expect their concerns to be listened to, taken seriously, and responded to across NHS Wales. It explains, in plain language, the values of fairness, respect, openness and timeliness that underpin the handling of concerns, and the rights people have when raising them.

The Pledge is supported by the Principles (Annex 1) and Standards (Annex 2) and provides practical guidance and consistent standards responsible bodies, and staff should follow in their day-to-day practice, ensuring the promise made to the public is delivered in a clear, accountable and consistent way across all services.

1. Easy Access, Support and Early Resolution

Our promise to you

- You can raise a concern easily through a single, clear point of access.
- You will be offered advocacy support from the start.
- We will make reasonable adjustments and respect your language choice (Welsh, English or other).
- We will actively consider resolving your concern early, where appropriate, while making sure this does not prevent or delay a formal investigation, if one is needed.

2. Respect, Compassion and a Person-Centred Approach

Our promise to you

- You will be treated with respect, dignity and compassion at every stage.
- We will listen to what matters to you and will involve you in how your concern is managed.
- You will be offered a listening discussion, so your concerns, wishes and expectations are clearly understood.
- We will be open, honest and accountable in our approach.

3. Clear Information, Communication and Updates

Our promise to you

- We will explain how the concerns process works, the options available, and what to expect.
- You will be given a named contact who is responsible for your dealing with your concern.
- We will tell you how long things are likely to take and keep you informed if timescales change.
- Your privacy and confidentiality will be respected, and we will explain if information needs to be shared, with whom and why.

4. Timely, Fair and Evidence-Based Handling

Our promise to you

- Your concern will be assessed carefully and handled proportionately, without unnecessary delay.
- If there is a serious risk of future harm, we will act and escalate appropriately.
- We will consider your concern fairly and without bias, based on the evidence.
- Where appropriate, we may jointly instruct an independent medical expert.
- Any decision to limit how a concern is handled because it is considered vexatious or frivolous will be exceptional, justified, recorded and explained to you.

5. Clear Outcomes, Meaningful Responses and Redress

Our promise to you

- We will say sorry when things have gone wrong and explain what will be done to address and resolve the issues identified.
- You will receive a clear written response that addresses each issue you raised.
- We will offer an outcome meeting to explain what we found and how decisions were reached.

- If redress is being considered, we will signpost you to funded legal support, where appropriate.

6. Learning, Improvement and Independent Scrutiny

Our promise to you

- We will use your concern to learn and improve services, helping to reduce future harm.
- We will explain what has been learned and what has changed, as a result of your concern. We will consider whether independent medical or other advice is needed as part of an investigation into moderate or severe harm or death. We will record clearly our reasons if it is not needed.

7. Accountability, Transparency and Your Right to Review

Our promise to you

- NHS organisations will be accountable for how your concern is handled.
- Accurate records will be kept, and learning will be shared openly through annual reporting.
- If you remain unhappy, we will clearly explain how to seek further review, including your right to approach the Public Services Ombudsman for Wales.

## Raising a concern about your care or someone else's care

It is vitally important that if you have a concern about your care or that of another, you raise this concern at the earliest opportunity. This should be with a member of staff who belongs to the organisation, to ensure that every opportunity is given to resolve this safely and satisfactorily. This is especially important where you consider harm has or may be occurring. You will not be treated differently for raising a concern. Support and advocacy are available at every stage.

Staff will try to resolve your concerns immediately. If this does not help, or you do not want to speak to the staff, you can contact the Health Board or Trust's concerns team.

Each Health Board or Trust has their own concerns team. To find details for your Health Board or NHS Trust visit www.nhs.wales/hpb/local-services/

If you have a concern about services that you have received from your General Practitioner (GP), Dentist, Pharmacist or Optician you should normally ask the practice to look into it for you, but if you prefer, you can ask your Health Board to do so.

## Who can raise a concern

Almost anyone can raise a concern and the organisation providing the care will be under a duty to consider how it can be investigated. However, it might not always be possible to share the full details of the investigation with the person raising the concern. This may be the case, if they are not the patient or not their next of kin and where this would otherwise contravene the UK GDPR (Data Sharing laws).

Concerns can be raised by patients or service-users receiving care, or by representatives acting on their behalf (such as for young children, individuals lacking capacity, or those who have passed away). You may raise a concern with any staff member within the organisation.

## What does Listening to People cover?

Concerns, complaints, or patient safety incidents can be raised about any matter connected to the organisation carrying out its duties, such as delays in treatment, miscommunication between staff, or the omission of necessary care.

This includes all NHS-funded care, whether provided directly by the NHS, by primary care providers, or by independent providers on behalf of the NHS, including services provided in prisons or forensic settings. Concerns may relate to the care itself or how it was delivered, such as delays in treatment, communication issues, or omissions in care and should normally be raised within 12 months. If a longer time has passed and there are good reasons for the delay, the concerns team may still be able to look into it.

## What it does not cover

Not all concerns can be addressed through the Listening to People arrangements. The legislation governing the Listening to People process specifies which matters are excluded. These include:

- Any concern resolved to the satisfaction of the person who reported it, by the end of the early resolution stage, unless an organisation considers it needs to look into the issue again. It must then follow the process for handling and investigation of concerns.

- Concerns that are the subject of civil proceedings: If court proceedings are issued when a concern is already under investigation, any further investigation of the concern must be paused until civil proceedings have concluded.

- Where a concern relates to an individual patient funding treatment request (IPFR), that is, requests for funding of services not usually provided on the NHS in Wales. These concerns will be dealt with under a separate all-Wales process for decision and review.

- Where the concern is being or has been investigated by the Public Services Ombudsman for Wales (PSOW); except where the PSOW recommends, following their investigation, that a responsible body considers the concern for redress.

- Concerns raised by a primary care provider regarding their contract or the arrangements for delivering primary care services are addressed through alternative processes. These issues are managed under the regulatory framework that governs primary care.

- Concerns where a member of staff has an issue with their employment contract. These matters would be dealt with under the organisation's HR policies and procedures.

- Where the responsible body has not complied with the Freedom of Information (FOI) Act 2000. Such concerns would be dealt with by the Information Commissioner's Office (ICO).

- Disciplinary proceedings identified because of an investigation. These would be managed under local HR processes and remain confidential to the member of staff involved.

- Where the responsible body is Health Education and Improvement Wales (HEIW), a concern which does not relate to the provision of health care by that body.

- When a concern is deemed "vexatious". This is a legal term used in the legislation. It means a concern that has no clear basis or is raised in a way that repeatedly prevents us from being able to deal with it fairly. It does not mean that someone is being difficult on purpose, and it does not apply to people who are upset, anxious or frustrated. It is only used in very rare situations, and only after careful consideration. Responsible bodies recognise that people may often have strong emotions, such as frustration, anger and upset. These emotions are acceptable, and do not, in themselves, constitute reasons for exclusion.

If your concern cannot be handled under the Listening to People process, the organisation should explain why and direct you to the right process.

- The Medical Examiner Service (MES) and primary care providers (for example GP, dental, pharmacy and optometry services), independent providers, and some cross-border or externally commissioned services must still listen to concerns, investigate what happened, explain their findings,

apologise where appropriate and learn from concerns — but they cannot offer NHS redress through the Listening to People process.

## How to raise a concern

You can raise concerns in a variety of ways to any member of staff employed by the organisation in the provision of health care services either verbally by telephone or in-person or in writing (by letter, on a concern form or electronically).

All responsible bodies are to clearly advertise the single point of access for all concerns and complaints, however any member of staff approached should be able to explain how you can raise a concern. Information will be shared with you, in a form that is accessible and appropriate to your needs. This information is also available on the Welsh Government's Listening to People webpage.

You can also raise a concern directly with Llais (the independent citizens' voice body) at **www.llaiswales.org**, or with Healthcare Inspectorate Wales (HIW) at **www.hiw.org.uk**. You may also choose to contact your local Member of the Senedd via **www.senedd.wales**

If you raise a concern verbally, then a member of the organisation must record this concern, and a written record must be shared with you. This must be provided in an accessible version.

We recommend you make notes of key points to the concern or complaint and keep any supporting evidence including names, dates and times as far as possible. Support and advice of how to do this, can be accessed through https://www.llaiswales.org/ or on tel:02920235558 or enquiries@llaiscymru.org.

When you raise a concern, you can expect to receive an acknowledgement no later than 5 working days after the day on which the organisation receives the concern.

## The Listening Discussion

On receipt of a concern, the organisation must offer the person who has raised the concern the opportunity for an In-Person[1] 'Listening discussion'.

This is your opportunity to explain what happened and what matters most to you. We understand that retelling experiences can be distressing. You only need to share what you feel able to. Staff should work sensitively with you to avoid unnecessary repetition.

You may:

[1] In-person meeting refers to telephone conversation or a face-to-face meeting via video link or physically meeting.

- bring a friend, family member or advocate
- ask for reasonable adjustments or language support
- take breaks or pause the discussion if needed

Some people find it important to have support from a friend, family member, loved-one or a professional advocate.

The organisation should check their records to see if you have indicated a preferred method of communication or where Welsh (or any other language) is your preferred language. If no record exists, an enquiry must be made during the listening discussion of your preferred method for ongoing communication. This information should be recorded on file.

The offer to meet with you, at an agreed time, is to provide an opportunity to discuss more fully the nature of their concern or complaint and for the organisation's representative to clarify any facts or points raised in the concern.

The offer for a listening discussion should also include the establishment of any advocacy or accessibility adjustments required such as using a language line or signposting to Llais support. A representative from Llais may join the listening discussion, or alternatively a family member, friend or other representative if desired.

During the listening discussion the member of staff must:

- Allow you to explain the concern they have and keep records of these details.
- Seek clarity from you what your desired resolution to the concern is.
- Provide an explanation of the options for resolution which may include early resolution or via an investigation stage, and what these entail.
- Provide you with the choice to select either early resolution or investigation through the investigation stage.
- Gain consent from you to attempt early resolution, if indicated as the desired approach.
- Consider and agree the desired approach and record this.
- If the investigation stage is selected then the manner and time in which the investigation of the concern will be handled should be communicated, including consent to the use of medical records.
- Ensure you are aware of the availability of advocacy and support services which may be of assistance.
- Outline the expected period within which the investigation of the concern is likely to be completed and the likely timeframe that a response will be sent to you.
- Explain that the organisation should inform you that an assessment for qualifying liability will be undertaken, if the investigation demonstrates harm has occurred. An explanation of this must be provided if the investigation stage is your preferred option. You must be made aware that considerations for redress cannot be undertaken in the early resolution stage, as they require detailed investigation.
- If you choose not to take part in a listening discussion, the organisation will write to you to clarify how you would like your concern handled.

- If you do not accept the offer of a listening discussion the organisation must write to you asking you to consider these things and make a decision upon what matters to you to resolve the concern.

## Stage 1 - Early Resolution

Early resolution must always be considered and offered, where appropriate before moving to the second stage (which is an investigation stage).

You will be asked during the listening discussion, the offer of which is mandated, as to whether you consent to early resolution being attempted. You are able to accept or decline the offer. Early resolution is often a much swifter process and enables staff to act on the issues raised in the listening discussion and resolve them in a timely manner.

Early resolution consists of fact and records checking, to understand what has happened or what the causes may be in relation to the concern raised. It is important that the focus is on the implementation of solutions and actions to meet the specified desired outcome and resolution expressed by you during the listening meeting. Consideration should always include a sincere apology for any distress or harm caused.

It is essential that the organisation reports back to you on the outcomes and verifies with you if the resolution has been achieved satisfactorily. Accurate documentation of the outcome must be kept, including actions taken and the reported resolution being satisfactorily met or not. This can be done verbally but the organisation must write to you to confirm the closure of the complaint was agreed.

In the event that the outcome is not achieved satisfactorily, the concern should move to stage 2. The time allocated to achieve early resolution is no longer than 10 working days from the date the concern is acknowledged.

## Stage 2 - Investigation phase including the consideration of redress.

Stage 2 or the investigation stage is usually reached when stage 1 or early resolution has been explored and has been unsuccessful or if you preferred not to use early resolution. Sometimes we may also decide from the start that early resolution isn't the best option for your concern. At this stage, we take a closer, more detailed look to understand what happened and how we can help resolve your concern.

This stage is informed by the content of the listening discussion or, where the offer of a listening discussion was not accepted, the content of the concern and any subsequent correspondence providing further details.

It is important to recognise that the level of investigation being undertaken in this stage is often much more detailed and therefore the time taken to undertake this stage will be much longer.

You should be given an estimated length of time for the initial investigation to be concluded and when you can expect the initial response summarising the findings, actions to be taken and next steps.

Once the initial investigation has been completed and the initial response has been written, the organisation must share this with you. They must also offer the opportunity for a listening meeting to go over the contents of the report.

Where personal injury or loss has occurred or is alleged to have occurred, the legislation requires the organisation to assess if the standard of care provided was below the accepted standard of care and if this is the case, whether that then directly caused the harm or injury to occur. This would lead to consideration of whether an offer of redress would be made to you if you have suffered personal injury or loss. Redress can be in the form of further or alternative treatment or care, an offer of financial compensation or another appropriate measure.

Occasionally additional independent medical advice from an expert is required to help assess whether the standard of care provided was below the expected level and/or whether the harm or injury sustained was caused by the care provided. In these circumstances the organisation is required to instruct an expert jointly with you.

In these circumstances the organisation should choose, with your input, an external expert in the field from the list of approved (appropriately trained and experienced) experts. It is expected that the organisation communicates this information to you.

The final outcome summarised in the response sent to you will then include, a sincere letter of apology, the outcome of the investigation, any relevant medical or care records, any external or independent expert report, actions that have been undertaken by the organisation to prevent the same issue causing harm to patients in the future and the learning that has been achieved.

These are often very complex and confusing documents and organisations are expected to use accessible language and explain complex legal or medical terminology to overcome this. The offer of the in-person meeting to go through the findings is, therefore, seen as essential to ensure that questions can be answered, and explanations can be given, as well as a reiteration of the sincerity of the apology.

The Listening to People process applies to all NHS-funded care in Wales, including care provided by NHS organisations, GP practices, dental practices, pharmacies, optometrists, independent providers and services commissioned from outside Wales.

However, not all NHS-funded services are able to offer NHS redress. Under the law in Wales, only Welsh NHS bodies (such as local health boards and NHS trusts) can consider and offer NHS redress, including financial compensation.

## If you are dissatisfied with the response

It is sometimes the case that, even after an investigation has concluded and a response has been provided, you may still feel worried, upset or feel that your concerns have not been fully addressed. If this happens, there are further steps you can take. Support and advocacy remain available to you throughout.

### Step 1 – Speak to the organisation again

If anything in the response is unclear or you feel something has been missed, you can contact your named concerns contact to:

- ask questions about the findings
- request clarification or further explanation
- discuss whether any additional review is appropriate

Sometimes concerns can be resolved at this stage through further discussion or explanation. You do not have to do this before going to the Ombudsman, but many people find it helpful.

If independent expert advice was not used and you believe it may help clarify what happened, you can ask the organisation to reconsider this option.

### Step 2 – Public Services Ombudsman for Wales

If you remain unhappy after the organisation has completed its investigation, you have the right to ask the **Public Services Ombudsman for Wales (PSOW)** to independently review your concern.

The Ombudsman is independent of the NHS.

The PSOW will usually expect that:

- you have given the organisation the opportunity to investigate first, and
- you contact them within the Ombudsman's time limits (normally within 12 months of becoming aware of the issue).

The Ombudsman can:

- review how your concern was handled
- decide whether the response was reasonable
- recommend further action if appropriate

The organisation is required to provide you with PSOW contact details in its final response.

### Step 3 – Considering legal advice or a redress claim

If your concern involves possible harm, injury or financial loss, you may wish to seek independent legal advice.

Under the Listening to People process, organisations must assess whether the standard of care fell below what was reasonably expected and whether this caused harm. Where appropriate, they will consider an offer of redress.

Redress may include:

- further treatment or care
- remedial actions
- financial compensation (within the NHS redress arrangements)

If redress is being considered, the organisation will signpost you to funded legal support, where this applies.

You are free to seek independent legal advice at any time. However, please note:

- if formal civil court proceedings begin, the Listening to People investigation must stop
- taking legal action is separate from the Ombudsman process

If you are unsure which route is right for you, advocacy services such as Llais can help you understand your options

## Glossary

**Acknowledgement**
The confirmation you will receive within 5 working days of the concern being received by the organisation.

**Duty of Candour**
A legal duty requiring NHS organisations to be open and honest with patients when care has caused, or may have caused, significant harm or death.

**Qualifying Liability**
The legal test the NHS uses to decide whether care fell below the expected standard and caused harm, which may lead to an offer of redress.

**Learning from concerns**
The requirement for NHS organisations to use concerns to improve services and reduce the risk of similar problems happening again.

**Advocacy**
Free, independent support to help you raise or understand a concern. Advocacy services can help you communicate your views and understand your options.

**Concerns**
A general term used in NHS Wales that includes complaints, patient safety incidents and, where appropriate, requests for redress.

**Early Resolution (Stage 1)**
The first stage of the Listening to People process. It focuses on understanding what happened and trying to resolve issues quickly where appropriate.

**Independent expert advice**
Advice from a qualified professional who was not involved in your care. This may be used during investigations to help assess what happened.

**Listening Discussion**
An optional meeting (in person, by phone or video) where you can explain your concerns in detail and discuss what outcome you are hoping for.

**Llais**
The independent citizen voice body in Wales that provides free advocacy and support to people using health and social care services.

**Public Services Ombudsman for Wales (PSOW)**
An independent organisation that can review complaints about public services in Wales, including the NHS, if you remain dissatisfied after the NHS investigation.

**Redress**
Actions taken by the NHS to put things right when care has fallen below the expected standard and caused harm. This may include further treatment, remedial actions or financial compensation within NHS arrangements.

**Responsible Body**
The NHS organisation, primary care provider or independent provider responsible for the care that is the subject of your concern.

**Stage 2 Investigation**
The detailed investigation stage of the Listening to People process, used when early resolution is not appropriate or has not resolved the concern.

**Trauma informed approach**
An approach that recognises people may have experienced distress or trauma and aims to respond in a compassionate, sensitive and supportive way.

**Welsh language standards**
Legal requirements that ensure people can access NHS services and information in Welsh where they choose to do so.

## Annex 1 -The four principles of Listening to People

It is important to people raising concerns about NHS funded care that the process for raising a concern is through a single simplified accessible point e.g. email address, phone number, postal address or through face-to-face representation. People can raise concerns in a variety of ways (see reg 11(1) (a) in writing; (b) electronically; or (c) verbally, either by telephone or in person, to any member of the staff of the responsible body, the exercise of whose functions is the subject of the concern), and they are able to select the method that is most suitable to them. The responsibility for making this available and effectively communicated resides with the responsible body where there is a clear expectation to consider the accessibility needs of the entire population they serve, including those who are digitally excluded.

The **first principle** is that people raising concerns are actively listened to; are treated with respect, courtesy and in a compassionate manner, and have their rights and options explained to them in a way that they can understand and that is accessible to their specific needs.

These rights and options include the right to appropriate advocacy and support throughout the process and that this is actively considered and offered and is free at the point of access. In addition, people are made aware they can clearly state their desired outcome and where appropriate, are offered this solution via a timely early resolution.

The **second principle** is that concerns will be effectively investigated in a proportionate manner and the timeframe for this to be completed will be discussed and communicated at the start of the process keeping people informed on progress and any delays and involving them in the investigation process where practicable. The results of this investigation must be clearly communicated to the person who raised the concern in writing, and using a language that can be easily understood, including explanations of any complex medical or legal terms used.

The **third principle** is that organisations are under a duty to learn from these concerns and report back. They must develop effective actions to prevent reoccurrence. These actions must be shared with the people raising a concern.

The **fourth principle** is that the leaders of organisations must provide assurance that the way in which the organisation handles every concern meets these regulatory requirements effectively and provides evidence of the learning undertaken. It also demonstrates that actions are taken to strengthen the quality and safety of care following the Listening to People process.

## Annex 2 -As a provider of NHS funded Health care in Wales these are our standards

### 1. Access, Support and Early Resolution

Responsible bodies must provide clear and accessible routes for raising concerns with a single point of access. They must actively offer advocacy from the start of the process and reasonable adjustments and language choice (Welsh/English/other). Responsible bodies are required to demonstrate that where appropriate to the concern, Early Resolution has been actively considered as the initial approach, while ensuring that this does not restrict or delay access to a formal investigation when necessary.

### 2. Respectful, Compassionate and a Person-Centred Approach

Responsible bodies must handle concerns in a respectful, compassionate way at all stages, with the emphasis on person-centred communication and a culture of openness and accountability. People involved in raising concerns are expected to be respectful in their behaviour to staff listening to and investigating their concern. Responsible bodies must offer people the opportunity of a listening discussion to ensure that their concerns and wishes are considered throughout the process.

### 3. Clear Information, Communication and Updates

Responsible bodies must clearly explain the concerns process and options available, provide a named contact, communicate likely timescales, and give progress updates if these change. Confidentiality and privacy must be maintained, and individuals should be informed of any information-sharing requirements.

### 4. Timely, Fair and Evidence-Based Approach

Responsible bodies must assess and grade concerns accurately and manage them proportionately within expected timescales. They must escalate matters where there is serious risk of harm occurring. Responsible bodies must investigate concerns fairly, without bias, ensuring decisions are evidence-based and where appropriate, to jointly instruct a medical expert. The responsible body must ensure that any exclusion of a concern on the grounds that it considers it to be vexatious or frivolous is justified, proportionate and recorded.

### 5. Clear Outcomes, Meaningful Responses and Redress

Responsible bodies must provide a clear written response addressing each issue raised, and offer an outcome meeting, explaining the findings and decisions. They must offer apologies where appropriate and explain any remedial action to be taken. If redress is being considered, signposting to funded legal support must be provided.

### 6. Learning, Improvement and Independent Scrutiny

Responsible bodies must identify learning from concerns and take action to improve services in order to reduce future harm. They must report on themes and outcomes and share these with the person raising the concern. A responsible body must consider whether independent medical advice is needed during investigations and where it determines that such advice is not needed in relation to a concern involving the death of, or moderate or severe harm to a patient, the responsible body must record its reasons for that determination.

## 7. Accountability, Transparency and Right to Review

Responsible bodies must be accountable for how concerns are handled and maintain accurate records that comply with new requirements for annual reporting and shared learning duties. Responsible bodies must clearly explain escalation and review routes to the Public Services Ombudsman for Wales (PSOW).