



Hartlepool
Borough Council

**ANNUAL REPORT OF
PUBLIC HEALTH SERVICES
COMPLAINTS
2025-2026**

1. Introduction

In accordance with the NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012, this annual report covers the complaints received about public health services during the period 1 April 2025 to 31 March 2026.

The statutory complaints procedure sets out that complaints about public health functions include:

- The Council's public health services which the Director of Public Health has responsibility for; and
- The provision of services by a service provider for its public health functions.

2. What is a complaint?

A complaint is an expression of dissatisfaction about any aspect of public health services that is being delivered, or the failure to deliver a service. The Council defines a complaint as:

'An expression of dissatisfaction, however made, about the standard of service, action or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual or group of individuals.'

3. Who can make a complaint about public health services?

A complaint can be made by:

- A person who receives or has received a service;
- A person who has been refused a service for which they think they are eligible for;
- A person who is, or is likely to be, affected by the action, decision or omission of the service which is the subject of the complaint; or
- Someone acting on the person's behalf (including acting on behalf of a child)



4. How can someone make a complaint about public health services?

There are several ways someone can make a complaint. A complaint can be made:

- Verbally, in person or by telephone;
- In writing, by letter;
- Electronically, by email or by filling in the online complaint form through the Council's website.

Every effort is made to assist a person in making a complaint and any member of staff can take a complaint.

5. Public Health Services Statutory Complaints Procedure

The public health services complaint function sits within the Quality and Review Team under the management of the Head of Service (Quality and Review). This has remained the same following the transfer of public health services from the former Children's and Joint Commissioning Services to the recently formed Adult Services and Public Health during 2025/26.

Good complaint handling involves:

- Keeping the complainant informed and central to the complaint process;
- Being open, accountable and transparent;
- Responding to complaints in a way that is fair and reasonable;
- Being committed to try and get things right when they have gone wrong; and
- Seeking to continually improve services.

Staff and service providers acting on behalf of the Council will always try to resolve problems or concerns early before they escalate into complaints and this ensures that, wherever possible, complaints are kept to a minimum.

The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012.



- Sets a 12-month time limit from when the subject matter being complained about occurred or came to the attention of the person making the complaint, to when a complaint may be made. After this time, a complaint will not normally be considered although there is discretion to accept a complaint after the 12 month time limit if the Council is satisfied that the complainant had good reason(s) for not making the complaint within the time limit and it is still possible to investigate the complaint effectively and fairly.
- Places a duty on the Council's public health services and NHS bodies to coordinate the handling of complaints received across their respective jurisdictions and provide a joint response.
- Allows for a service provider to respond to a complaint on behalf of the Council under these regulations.
- Sets a mandatory timescale of 3 working days to acknowledge receipt of a complaint; and
- Allows for a maximum 6-month timescale to investigate and respond to a complaint.

Some complaints can take considerably longer to investigate than others and the statutory timescale provides a flexible approach to complaint response times depending upon the nature and complexity of the complaint. The person allocated to investigate a complaint usually seeks to provide the complainant with an indication of the timescale for responding to the complaint wherever possible. There are a range of factors that can impact upon a timescale such as whether the complaint spans more than one body, the number of points of complaint for investigation, the availability of key people and conducting interviews, reading material relevant to the complaint, consideration of all available information and writing a report or proportionate response.

If, at the end of the public health complaints procedure, the complainant remains dissatisfied with the outcome or in the way which their complaint has been handled, they may refer their complaint to the Local Government and Social Care Ombudsman, the independent body who looks into complaints about Councils.



Learning from complaints is shared and discussed within relevant management forums to ensure that the improvements identified are cascaded throughout the workforce.

6. Complaints received about public health services in 2025/26

There were no complaints received during 2025/26 about the Council's public health services. Although it is unusual not to have received any complaints during the reporting period, this represents a decrease of 4 complaints when compared to the previous year.

7. Complaints referred to the Local Government and Social Care Ombudsman about public health services in 2025/26

The Local Government and Social Care Ombudsman is the independent body who investigates complaints about Councils. The Council received no contact or enquiry from the Ombudsman about its public health services during 2025/26.

8. Conclusion

Public Health services will continue to promote the Feedback and Complaints Policy and make every complaint count as a learning opportunity to improve the quality of our public health services.

