

# **Procedure for handling complaints about the Care Inspectorate**

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## **Foreword**

The Care Inspectorate is the independent scrutiny and improvement body for care and social work across Scotland. We regulate, inspect and support improvement of care services for the benefit of the people who use them. We aim to ensure that people receive safe, high-quality, compassionate care which meets their needs and promotes their rights.

The Care Inspectorate was established by the Public Services Reform (Scotland) Act 2010. This means we must have a procedure for receiving and investigating complaints, from members of the public or their representatives, about the care services they use. Our procedure must be available even when the service provider has a complaints procedure in place. That procedure is on our website, www.careinspectorate.com.

People can also make a complaint about us, so we have separate procedures for handling these complaints. This document sets out our procedures for handling complaints about the Care Inspectorate.

The procedure introduces a standardised approach to handling complaints, which complies with the Scottish Public Services Ombudsman's (SPSO) guidance on a model complaints handling procedure. A copy of the procedure is available to anyone who requests it.

The Care Inspectorate is committed to working to a high standard and wants to perform well. Occasionally things go wrong and when this happens it is important that we act quickly to resolve the situation. Complaints show us where we are not achieving what people expect of us, and where we are failing to meet our own standards. In other words, they give us a chance to improve our service.

The complaints handling procedure will help us do our job better, improve relationships with those who wish to complain and enhance public perception of the Care Inspectorate. It will help us keep those who complain at the heart of the process, while enabling us to better understand how to improve our work by learning from complaints.

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# What is a complaint?

The Care Inspectorate's definition of a complaint is:

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

A complaint may relate to:

- inadequate standard of service
- how we go about our business, for example if we did not follow our own procedures and/or administrative processes
- treatment by or attitude of a member of staff.

Appendix 1 provides examples of complaints we may receive, and how these may be handled.

We will not consider a complaint against the Care Inspectorate where the complaint is, for example, about:

- a request for compensation only
- issues that are in court or have already been heard by a court or tribunal
- disagreement with a decision where a statutory right of appeal exists
- an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision.

We cannot accept challenges to evaluations made about a care service as part of an inspection or complaint investigation. This is because during and inspection or complaint investigation the care service has the opportunity to provide all of the evidence needed for the inspection or complaint investigation team to carry out its evaluations. If there is a problem during an inspection or complaint investigation, complainants should speak to the Lead Inspector or another member of the inspection or complaint investigation team as it is easier to resolve any issues at this stage.

However, if a complainant feels that we have not followed standard procedures during the course of an inspection or complaint investigation, we would accept and investigate that complaint.

We cannot comment on, resolve or investigate complaints about policies and regulations set by Scottish Government. If an individual has complaint about a policy set by Scottish Government they should contact them directly. Their website is: www.scotland.gov.uk.

Appendix 2 provides examples of what is not a complaint.

If we do not accept a complaint then the reasoning for this should be explained and the complainant directed to the SPSO.

#### **Complaints about joint inspections**

We undertake some inspections jointly with other bodies. If a complaint is about a joint inspection, this procedure will apply. Where the complaint concerns the actions of one or more bodies, we shall liaise with that body in dealing with the complaint. We may pass the complaint to them if it is appropriate for them to respond. If we do this we shall let the complainant know.

# Handling anonymous complaints

We value all complaints. This means we treat all complaints, including anonymous complaints, seriously and will take action to consider them further, wherever this is appropriate. Generally, we will consider anonymous complaints if there is enough information in the complaint to enable us to make further enquiries. If, however, an anonymous complaint does not provide enough information to enable us to take further action, we may decide not to pursue it further. Any decision not to pursue an anonymous complaint must be authorised by an appropriate manager.

If we pursue an anonymous complaint further, we will record the issues as an anonymous complaint on the complaints system. This will help to ensure the completeness of the complaints data we record and allow us to take corrective action where appropriate.

#### What if the individual raising a concern does not want to complain?

If someone has expressed dissatisfaction in line with our definition of a complaint but does not want to complain, we tell them that we consider all expressions of dissatisfaction, and that complaints offer us the opportunity to improve our services especially where things have gone wrong. We would encourage the person to submit their complaint and allow us to deal with it through the complaints handling procedure. This will ensure that the person raising the concern is updated on the action taken and gets a response regarding this.

If, however, the person insists they do not wish to complain, we will record the issue as an anonymous complaint if we consider it is a matter that requires to be addressed in terms of our complaints procedure. Either way, expressions of concern or dissatisfaction will be raised with relevant staff and this will be recorded as appropriate. This will ensure that the person's details are not recorded on the complaints database and that they receive no further contact about the matter. It will

also help to ensure the completeness of the complaints data recorded and will still allow us to fully consider the matter and take corrective action where appropriate.

Please refer to the example in Appendix 1 for further guidance

# Who can make a complaint?

Anyone can make a complaint against the Care Inspectorate. Sometimes an individual may be unable or reluctant to make a complaint on their own. We will accept complaints brought by third parties as long as we know the individual has given their personal consent or the third party is acting as a personal advocate, guardian or attorney.

#### The complaints handling process

The Care Inspectorate aims to provide a quick, simple and streamlined process for resolving complaints early and locally by capable, well-trained staff.

The complaints handling procedure sets a time limit of six months from when the complainant first knew of the problem, within which time they may ask us to consider the complaint, unless there are special circumstances for considering complaints beyond this time.

Our complaints process provides two opportunities to resolve complaints internally:

- frontline resolution
- investigation.

#### The complaints handling procedure Investigation Frontline Independent Internal Resolution Review (SPSO) For issues that are For issues that have For issues that have straightforward and not been resolved at not been solved by easily resolved, the frontline the Care Inspectorate. requiring little or no resolution stage, or investigation. that are complex, Complaints progressing to serious or high risk. the Scottish Public Services Ombudsman (SPSO) will have 'On the spot' apology, been thoroughly investigated explanation, or other action A definitive response within by the Care Inspectorate. to resolve the complaint 20 working days following a quickly, in five working days thorough investigation of the or less, unless there are points raised. The SPSO will assess whether exceptional circumstances. there is evidence of organisational failure by the Responses signed off by the Care Inspectorate or Complaints addressed by any appropriate manager. maladministration not member of staff, or identified by the Care alternatively referred to the Inspectorate. appropriate point for Senior management have an frontline resolution. active interest in complaints and use information gathered to improve work of Complaint details, outcome the Care Inspectorate. and action taken are recorded and used for organisational learning and development.

For clarity, the term 'frontline resolution' refers to the first stage of the complaints process. It does not reflect any job description within the Care Inspectorate but means seeking to resolve complaints at the initial point of contact where possible.

# Stage one: frontline resolution

Frontline resolution aims to quickly resolve straightforward complaints that require little or no investigation. Any member of staff may deal with complaints at this stage.

The main principle is to seek early resolution, resolving complaints at the earliest opportunity and as close to the point of where the issue occurred as possible. This may mean an appropriate member of Care Inspectorate staff having a face-to-face discussion with the complainant or asking an appropriate member of staff to deal directly with the complainant.

Appendix 1 gives examples of the types of complaint we may consider at this stage, with suggestions on how to resolve them.

In practice, frontline resolution means resolving the complaint at the first point of contact with the person raising the concern, either by the member of staff receiving the complaint or other identified staff.

In either case, we may settle the complaint by providing an on-the-spot apology where appropriate, or explaining why the issue occurred and, where relevant, what will be done to stop this happening again. We may also explain that, as an organisation that values complaints, we may use the information given when we review our standard of work in the future.

A complaint can be made in writing, in person, by telephone, by email or online, or by having someone complain on the individual's behalf. We will always consider frontline resolution, regardless of how we have received the complaint.

#### What happens when we receive a complaint

- On receiving a complaint, we will first decide whether the issue can indeed be defined as a complaint. The complainant may express dissatisfaction about more than one issue. This may mean we treat one issue as a complaint, while directing the complainant to pursue another issue through an alternative route.
- 2. When we have received and identified a complaint, we will record the details on our complaints system.
- 3. It will be decided whether or not the complaint is suitable for frontline resolution. Some complaints will need to be fully investigated before we can give the complainant a suitable response. We will escalate these complaints immediately to the investigation stage.
- 4. Where we think frontline resolution is appropriate, we will consider four key questions:

- what exactly is the person's complaint (or complaints)?
- what does the person want to achieve by complaining?
- can we achieve this, or explain why not?
- if the member of staff receiving the complaint cannot resolve this, who can help with frontline resolution?

# What exactly is the person's complaint (or complaints)?

It is important to be clear about exactly what the person is complaining. We may need to ask the complainant supplementary questions to get a full picture. This may be carried out by the Complaints Co-ordinator in the first instance, or by a manager.

## What does the person want to achieve by complaining?

At the outset, we will clarify the outcome the complainant wants. The complainant may not be clear about this, so we may need to probe further to find out what they expect and whether they can be satisfied.

## Can we achieve this, or explain why not?

If we can achieve the expected outcome by providing an on-the-spot apology or explain why we cannot achieve it, we will do so. If we consider an apology is suitable we will provide an apology.

The complainant may expect more than we can provide. If the complainant's expectations appear to exceed what the Care Inspectorate can reasonably provide, we will tell them as soon as possible in order to manage expectations about possible outcomes.

We are likely to have to convey the decision face to face or on the telephone. If we do so face to face, by telephone or by email, we may not write to the complainant as well, although we may choose to do so. We will, however, keep a full and accurate record of the decision reached and passed to the complainant.

#### If I can't resolve this, who can help with frontline resolution?

If the member of staff receiving the complaint cannot deal with the complaint because, for example, they are unfamiliar with the issues or if the complaint is about another colleague, they will pass details of the complaint to the Complaints Coordinator.

#### **Timelines**

A frontline resolution will be completed within five working days, although in practice we would often expect to resolve the complaint much sooner.

We may need to get more information from other Care Inspectorate staff to resolve the complaint at this stage. However we will respond to the complainant within five working days, either resolving the matter or explaining that the Care Inspectorate will investigate their complaint.

#### Extension to the timeline

In exceptional circumstances, where there are clear and justifiable reasons for doing so, we will agree an extension of no more than five working days with the complainant for the frontline resolution stage. This will only happen when an extension will make it more likely that the complaint will be resolved at the frontline resolution stage.

An extension will be authorised by an appropriate manager, who will decide whether an extension is needed to effectively resolve the complaint. An example of when this may be appropriate includes staff being temporarily unavailable. If, however, the issues are so complex that they cannot be resolved in five days, it may be more appropriate to escalate the complaint straight to the investigation stage. We will tell the complainant about the reasons for the delay, and when they can expect our response.

If the complainant does not agree to an extension but it is unavoidable and reasonable, a senior manager must decide on the extension. We will then tell the complainant about the delay and explain the reason for the decision to grant the extension. Any Care Inspectorate staff involved will also be informed of extensions.

The timeline at the frontline resolution stage will be extended only rarely. All attempts to resolve the complaint at this stage must take no longer than ten working days from the date we receive the complaint.

The proportion of complaints that exceed the five-day limit will be evident from reported statistics. These statistics will go to our senior management team on a quarterly basis.

Appendix 3 provides further information on timelines.

#### Mediation

Some complex complaints, or complaints where customers and other interested parties have become entrenched in their position, may require a different approach

to resolving the complaint. Where appropriate, we may consider using services such as mediation or conciliation using suitably trained and qualified mediators to try to resolve the matter and to reduce the risk of the complaint escalating further.

Mediation will help both parties to understand what has caused the complaint, and so is more likely to lead to mutually satisfactory solutions.

If the Care Inspectorate and the complainant agree to mediation, revised timescales will need to be agreed.

#### Closing the complaint at the frontline resolution stage

When we have verbally informed the complainant of the outcome we may write to them informing them of the outcome. We will ensure that our response to the complaint addresses all areas that we are responsible for and explains the reasons for our decision. It is also important to keep a full and accurate record of the decision reached and given to the complainant. The complaint should then be closed and the complaints system updated accordingly.

#### When to escalate to the investigation stage

We will escalate a complaint to the investigation stage when:

- we have tried frontline resolution but the complainant remains dissatisfied and requests an investigation; this may happen immediately when we communicate the decision at the end of stage 1, or some time later
- the complainant refuses to take part in frontline resolution
- the issues raised are complex and require detailed investigation
- the complaint relates to serious, high-risk or high-profile issues.

When a previously closed complaint is escalated from the frontline resolution stage, the complaint should be reopened on the complaints system.

We will take particular care to identify complaints that might be considered serious, high-risk or high-profile, as these may require particular action or raise critical issues that need senior management's direct input. Potential high-risk or high-profile complaints can be defined as those that may:

- generate significant and on-going media interest
- pose a serious risk to the Care Inspectorate's operations
- pose a serious risk to public confidence or reputation of the Care Inspectorate
- present issues of a highly sensitive nature, for example concerning the practice of an individual staff member.

# Stage two: investigation

Not all complaints are suitable for frontline resolution. These complaints may already have been considered at the frontline resolution stage, or they may have been identified from the start as needing immediate investigation.

An investigation aims to establish all the facts relevant to the points made in the complaint and to give the complainant a full, objective and proportionate response that represents our final position.

#### What happens when we receive a complaint for investigation

It is important to be clear from the start of the investigation stage exactly what we are investigating, and to ensure that both the complainant and the Care Inspectorate understand the scope of the investigation.

It may be helpful to discuss and confirm these points with the complainant at the outset, to establish why they are dissatisfied and whether the outcome they are looking for is realistic. In discussing the complaint, three key questions will be considered:

- what specifically is the complaint or complaints?
- what does the person want to achieve by making a complaint?
- are the complainant's expectations realistic and achievable?

It may be that the complainant expects more than we can provide. For example, we may be limited in the information we provide about confidential or staff disciplinary matters. If so, we will make this clear to them as soon as possible.

We will also try and clarify any additional information we will need to investigate the complaint. The complainant may need to provide more evidence to help us reach a decision.

Details of the complaint will be recorded on the system for recording complaints. Where appropriate, this will be done as a continuation of frontline resolution. The details will be updated when the investigation ends.

If the investigation stage follows attempted frontline resolution, we will hand over all case notes and associated information to the member of staff responsible for the investigation, and record that this has been done.

#### **Timelines**

The following timescales will apply to cases at the investigation stage:

- we will acknowledge complaints within three working days
- we will aim to provide a full response to the complainant as soon as possible but not later than 20 working days from the time we have received the complaint for investigation (i.e. at stage 2).

#### **Extension to the timeline**

Not all investigations will be able to meet this deadline. For example, some complaints are so complex that they require careful consideration and detailed investigation beyond the 20-day limit. However, these are be the exception and we will always try to deliver a final response to a complaint within 20 working days.

If there are clear and justifiable reasons for extending the timescale, management will set time limits on any extended investigation, with the agreement of the complainant. We will keep the complainant updated on the reason for the delay and give them a revised timescale for completion. If the complainant does not agree to an extension but it is unavoidable and reasonable, then senior management will consider and confirm the extension. The reasons for an extension might include the following:

- essential records or statements, crucial to establishing the circumstances of the case, are needed from staff or others but they cannot help because of long-term sickness or leave
- we cannot obtain further essential information within normal timescales.
- operations are disrupted by unforeseen or unavoidable operational circumstances, for example industrial action or severe weather conditions.

These are only a few examples. The matter will be judged in relation to each complaint. The Care Inspectorate will always try to deliver a final response to the complaint within 20 working days.

As with complaints considered at the frontline resolution stage, the proportion of complaints that exceed the 20-day limit will be evident from reported statistics. These statistics will go to our senior management team on a quarterly basis.

Appendix 3 provides further information on timelines.

# Closing the complaint at the investigation stage

We will let the complainant know the outcome of the investigation, in writing or by their preferred method of contact. Our response to the complaint will address all areas that we are responsible for and explain the reasons for our decision. We will record the decision, and details of how it was communicated to the complainant, on our system for recording complaints. We will also make clear to the complainant:

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

#### Outcomes

There are two possible outcomes of complaints investigations.

<u>Upheld</u> - used where the facts giving rise to an allegation have been established in investigation. Complaints about staff will only be upheld when on the balance of probability there is evidence of a breach of Care Inspectorate procedures or misconduct.

Not Upheld - used where the facts giving rise to an allegation have not been established in the investigation.

Where we have upheld a complaint, and it is appropriate to do so, we will inform the complainant what we have done or intend to do to make any recommended improvements.

#### Independent external review

Once the investigation stage has been completed and an outcome provided, the complainant has the right to approach the SPSO if they remain dissatisfied.

The SPSO considers complaints from people who remain dissatisfied at the conclusion of our complaints procedure. The SPSO looks at issues such as service failures and maladministration (administrative fault), as well as the way we have handled the complaint.

#### Information about the SPSO

The Scottish Public Services Ombudsman (SPSO) is the final stage for complaints about public services in Scotland. This includes complaints about the Scottish Government, NDPBs, agencies and other government sponsored organisations. If you remain dissatisfied with an organisation after its complaints process, you can ask the SPSO to look at your complaint.

The SPSO cannot normally look at complaints:

- where you have not gone all the way through the organisation's complaints handling procedure
- more than 12 months after you became aware of the matter you want to complain about, or

• that have been or are being considered in court.

The SPSO's contact details are:

SPSO

Bridgeside House 99 McDonald Road

Edinburgh EH7 4NS

Freepost SPSO

This is all you need to write on the envelope, and you don't need to use a stamp.

Freephone: 0800 377 7330

Online contact <a href="https://www.spso.org.uk/contact-us">www.spso.org.uk/contact-us</a>

Website: www.spso.org.uk

Mobile site: <a href="http://m.spso.org.uk">http://m.spso.org.uk</a>

## Governance of the complaints handling procedure

#### The Chief Executive

Overall responsibility and accountability for the management of complaints lies with the Chief Executive.

The Chief Executive provides leadership and direction in ways that guide and enable us to perform effectively across the Care Inspectorate. This includes ensuring that there is an effective complaints handling procedure, with a robust investigation process that demonstrates how we learn from the complaints we receive. The Chief Executive may take a personal interest in all or some complaints, or may delegate responsibility or the complaint handling procedure to senior staff. Regular management reports assure the Chief Executive of the quality of complaints performance.

The Chief Executive may delegate day-to-day responsibility for the management of complaints to the Depute Chief Executive.

Our final position on the complaint must be signed off by an appropriate senior manager and we will confirm that this is our final response. This ensures that our senior management own and are accountable for the decision. It also reassures the complainant that their concerns have been taken seriously.

#### **Executive directors**

On behalf of the chief executive, executive directors may be responsible for:

- managing complaints and the way we learn from them
- overseeing the implementation of actions required as a result of a complaint
- investigating complaints
- deputising for the chief executive on occasion.

However, executive directors 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, executive directors will retain ownership and accountability for the management and reporting of complaints. They may also be responsible for preparing and signing decision letters to complainants, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint.

#### Chief inspectors and heads of service

Chief inspectors and heads of service may be involved in the operational investigation and management of complaints handling. As senior managers they may be responsible for preparing and signing decision letters to complainants, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint.

## Complaints investigator

The complaints investigator is responsible and accountable for the management of the investigation. They may work in an operational team or as part of our corporate team, and will be involved in the investigation and in co-ordinating all aspects of the response to the complainant. This may include preparing a comprehensive written report, including details of any procedural changes in service delivery that could result in wider opportunities for learning across the Care Inspectorate. They may also be responsible for preparing and signing decision letters to complainants, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint.

#### All staff

A complaint may be made to any member of staff in the Care Inspectorate. So all staff will be aware of the complaints handling procedure and how to handle and record complaints at the informal stage. They will also be aware of who to refer a complaint to, in case they are not able to personally handle the matter. We encourage all staff to try to resolve complaints early, as close to the point of service delivery as possible, and quickly to prevent escalation.

# Complaints co-ordinator

The complaints co-ordinator will be responsible for ensuring complaints are referred to the appropriate manager for relevant action. The complaints co-ordinator will also ensure that all complaints received both prior to the initial frontline resolution stage and those which proceed to formal investigation are recorded confidentially on the database.

#### Other responsibilities include:

- liaising with the manager responsible for the allocation of a complaint
- liaising with the manager allocated to investigate the complaint
- monitoring the timescale of the investigation
- liaising with the SPSO as and when appropriate,

#### Complaints about senior staff

Complaints about senior staff, that is heads of service and above, can be difficult to handle, as there may be a conflict of interest for the staff investigating the complaint. When serious complaints are raised against senior staff, it is particularly important that the investigation is conducted by an individual who is independent of the situation. The Complaints Coordinator will consult the Chief Executive or, Head of Registration, Complaints & Legal Services, to determine who the relevant individual person should be to handle such a complaint. In the case of a complaint about the Chief Executive, the Chair of the Care Inspectorate's Board will be consulted.

### Recording, reporting, learning and publicising

Complaints provide us with valuable feedback. One of the aims of the complaints handling procedure is to identify opportunities to improve the work we do across the Care Inspectorate. We will record all complaints in a systematic way so that we can use the complaints data for analysis and management reporting. By recording and using complaints information in this way, we can identify and address the causes of complaints and, where appropriate, identify training opportunities and introduce improvements.

#### **Recording complaints**

We have structured systems for recording complaints, their outcomes and any resulting action. Our records will include:

- the complainant's name and address
- the date the complaint was received

- the nature of the complaint
- how the complaint was received
- the issue the complaint refers to
- the date the complaint was closed at the informal resolution stage (where appropriate)
- the date the complaint was escalated to the investigation stage (where appropriate)
- action taken at the investigation stage (where appropriate)
- the date the complaint was closed at the investigation stage (where appropriate)
- the outcome of the complaint at each stage
- the underlying cause of the complaint and any remedial action taken.

# **Reporting of complaints**

Complaints are analysed for trend information to ensure we identify organisational failures and take appropriate action. Regularly reporting the analysis of complaints information helps to inform management of where the Care Inspectorate needs to improve.

We publish the outcome of complaints on a quarterly basis and the actions we have taken in response. This demonstrates the improvements resulting from complaints and shows that complaints can influence the work of the Care Inspectorate. It should also help to ensure transparency in our complaints handling service and will help to inform people that we value their complaints.

#### We will:

- publicise on a quarterly basis complaints outcomes, trends and actions taken
- use case studies and examples to demonstrate how complaints have helped improve the work of the Care Inspectorate.

This information will be reported regularly (and at least quarterly) to our senior management team.

#### **Learning from complaints**

At the earliest opportunity after the closure of the complaint, the complaint investigator should always make sure that the complainant and Care Inspectorate staff involved understand the findings of the investigation and any recommendations made.

Senior management will review the information gathered from complaints regularly and consider whether the Care Inspectorate could be improved or internal policies and procedures updated.

As a minimum, we will:

- use complaints data to identify the root cause of complaints
- take action to reduce the risk of recurrence
- · record the details of corrective action in the complaints file, and
- systematically review complaints performance reports to improve the work of the Care Inspectorate.

Where we have identified the need for organisational improvement:

- the action needed to improve our operational work must be authorised
- a member of staff (or team) should be designated the 'owner' of the issue, with responsibility for ensuring the action is taken
- a target date must be set for the action to be taken
- the designated individual must follow up to ensure that the action is taken within the agreed timescale
- where appropriate, performance in the operational area should be monitored to ensure that the issue has been resolved
- we must ensure that staff learn from complaints.

# **Publicising complaints performance information**

We also report on our performance in handling complaints annually in line with SPSO requirements. This includes performance statistics showing the volumes and types of complaints and key performance details, for example on the time taken and the stage at which complaints were resolved.

#### **Maintaining confidentiality**

Confidentiality is important in complaints handling. It includes maintaining the complainant's confidentiality and explaining to them the importance of confidentiality generally. We must always bear in mind legal requirements, for example, data protection legislation, as well as internal policies on confidentiality and the use of complainants' information.

#### Managing unacceptable behaviour

People may act out of character in times of trouble or distress. The circumstances leading to a complaint may result in the complainant acting in an unacceptable way. Complainants who have a history of challenging or inappropriate behaviour, or have difficulty expressing themselves, may still have a legitimate grievance.

A complainant's reasons for complaining may contribute to the way in which they present their complaint. Regardless of this, we must treat all complaints seriously and properly assess them. However, we also recognise that the actions of complainants who are angry, demanding or persistent may result in unreasonable demands on time and resources or unacceptable behaviour towards our staff. We will, therefore, apply our policies and procedures to protect staff from unacceptable behaviour such as unreasonable persistence, threats or offensive behaviour from complainants. Where we decide to restrict access to a complainant under the terms of an unacceptable actions policy, we have a procedure in place to communicate that decision, notify the complainant of a right of appeal, and review any decision to restrict contact with us. This will allow the complainant to demonstrate a more reasonable approach later.

# Supporting the complainant

Everyone have the right to equal access to our complaints handling procedure. Complainants who do not have English as a first language may need help with interpretation and translation services, and other complainants may have specific needs that we will seek to address to ensure easy access to the complaints handling procedure.

We must always take into account our commitment and responsibilities to equality. This includes making reasonable adjustments to help the complainant where appropriate.

Several support and advocacy groups are available to support complainants in pursuing a complaint and complainants will be signposted to these as appropriate.

#### Time limit for making complaints

This complaint handling procedure sets a time limit of six months from when the complainant first knew of the problem, within which time they may ask us to consider the complaint, unless there are special circumstances for considering complaints beyond this time.

We will apply this time limit with discretion. In decision making we will take account of the Scottish Public Services Ombudsman Act 2002 (Section 10(1)), which sets out the time limit within which a member of the public can normally ask the SPSO to consider complaints. The limit is one year from when the person first knew of the problem they are complaining about, unless there are special circumstances for considering complaints beyond this time.

If it is clear that a decision not to investigate a complaint will lead to a request for external review of the matter, we may decide that this satisfies the special

circumstances criteria. This will enable us to consider the complaint and try to resolve it.						

# **Appendix 1: complaints**

Below are specific examples of complaints that may be considered at the frontline resolution stage, and suggested possible actions to achieve resolution.

Complaint	Possible actions to achieve resolution
The complainant is concerned that a procedure has not been followed	Consult identified staff member – if confirmed offer apology and rectify
Complainant concerned they were spoken to in a disrespectful manner on the phone	<ul> <li>Matter referred to line manager of named staff member</li> <li>Line manager discusses with staff and with complainant</li> <li>Agreement reached with complainant that matter is being addressed with staff</li> </ul>
Concern that an inspection has not taken place	<ul> <li>Offer explanation about inspection procedures in relation to frequency of inspection</li> <li>Find out when next inspection is due</li> <li>Provide relevant information</li> </ul>
A person expresses dissatisfaction in line with the definition of a complaint, but says they do not want to complain – just want to tell us about the matter.	Tell the person that we value complaints because they help to improve services. Encourage them to submit the complaint. In terms of improving our operational work and learning from mistakes, it is important that customer feedback, such as this, is recorded, evaluated and acted upon. Therefore, if the person still insists that they do not want to complain, we may record the matter as an anonymous complaint. This will avoid breaching the complaints handling procedure. Reassure the person that they will not be contacted again about the matter.  The matter should be raised with the relevant operational staff and outcome recorded.

#### **Appendix 2: what is not a complaint**

A concern may not necessarily be a complaint. It is not possible to detail an exhaustive list but here are some examples,

**Example 1:** A member of the public might make a routine enquiry about an inspection that was carried out. This is not a complaint, but the issue may escalate into a complaint if it is not handled effectively and the member of the public has to keep on asking for information.

**Example 2:** A provider may be concerned about factual inaccuracies in an inspection report. The provider would be directed to the error response procedure for proposing factual inaccuracies in a report, which would then be addressed by the inspector for the service.

**Example 3:** Someone contacts the Care Inspectorate to express a concern that a member of Care Inspectorate staff behaved in an inappropriate manner outwith their employment. Where it concerns a staff member who must be registered with a professional body, we would redirect the complainant to the appropriate professional regulatory body.

#### **Appendix 3: timelines**

References to timelines throughout the complaints handling procedure relate to working days. When measuring performance against the required timelines, we do not count non-working days, for example weekends, public holidays and days of industrial action where our service has been interrupted.

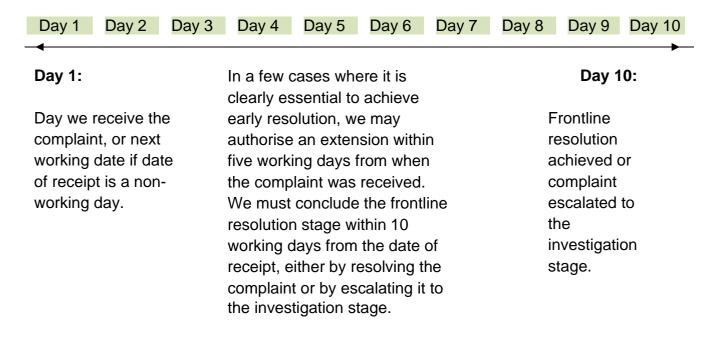
#### <u>Timelines at frontline resolution</u>

We will aim to achieve frontline resolution within five working days. The day we receive the complaint is day 1. Where we receive it on a non-working day, for example at the weekend or on a public holiday, day 1 will be the next working day.

Day 1	Day 2	Day 3	Day 4	Day 5	
Day 1:  Day we receive to complaint, or new date if date of received non-working day	t working ceipt is a			Day 5: Frontline resolution achieved or complaint escalated to the investigation stage.	

## Extension to the five-day timeline

If we have extended the timeline at the frontline resolution stage in line with the procedure, the revised timetable for the response must take no longer than 10 working days from the date of receiving the complaint.



#### Transferring cases from frontline resolution to investigation

If it is clear that frontline resolution has not resolved the matter, or the complainant wants to escalate the complaint to the investigation stage, the case must be passed for investigation without delay. In practice this will mean on the same day that the complainant is told this will happen.

### Timelines at investigation

We may consider a complaint at the investigation stage either:

- after attempted frontline resolution, or
- immediately on receipt if we believe the matter to be sufficiently complex, serious or appropriate to merit a full investigation from the outset.

#### <u>Acknowledgement</u>

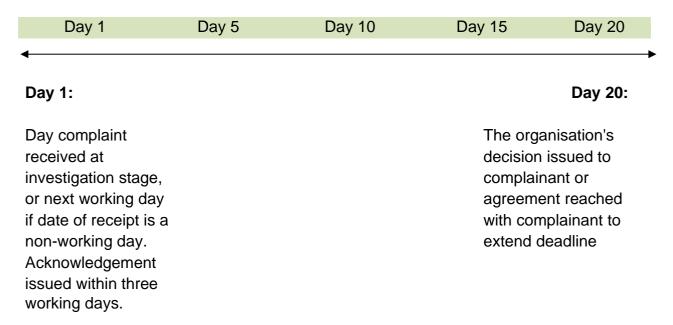
All complaints considered at the investigation stage will be acknowledged within three working days of receipt. The date of receipt is:

- the day the case is transferred from the frontline resolution stage to the investigation stage, where it is clear that the case requires investigation, or
- the day the complainant asks for an investigation after a decision at the frontline resolution stage, noting that a complainant may not choose to ask for an investigation immediately after attempts at informal resolution, or
- the date we receive the complaint, if we think it sufficiently complex, serious or appropriate to merit a full investigation from the outset.

#### **Investigation**

We aim to respond in full to the complaint within 20 working days of receiving it at the investigation stage.

The 20-working day limit allows time for a thorough, proportionate and consistent investigation to arrive at a decision that is objective, evidence-based and fair. This means we have 20 working days to investigate the complaint, regardless of any time taken to consider it at the frontline resolution stage.

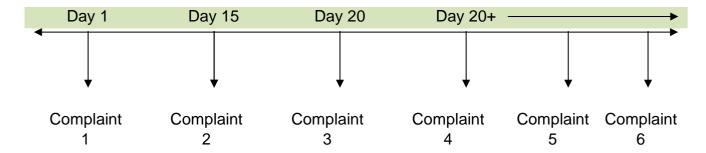


Exceptionally we may need longer than the 20-day limit for a full response. If so, the reasons must be explained to the complainant, and a revised timescale agreed with them.

Day 1	Day 5	Day 10	Day 15	Day 20+	
Day 1:				By Day 20:	By agreed
Day complaint received at investigation stage, or next working day if date of receipt is non-working day Acknowledgeme issued within three working days.	y.			In agreement with the complainant where possible, decide a revised timescale for bringing the investigation to a	date: Issue our final decision on the complaint
days.				conclusion.	

#### Timeline examples

The following illustration provides examples of the point at which we conclude our consideration of a complaint. It is intended to show the different stages and times at which a complaint may be resolved. The circumstances of each complaint are explained below.



#### Complaint 1

Complaint 1 is a straightforward issue that may be resolved by an on-thespot explanation and, where appropriate, an apology. Such a complaint can be resolved on day 1.

#### Complaint 2

Complaint 2 is also a straightforward matter requiring little or no investigation. In this example, resolution is reached at day three of the frontline resolution stage.

#### Complaint 3

Complaint 3 refers to a complaint that we considered appropriate for frontline resolution. We did not resolve it in the required timeline of five working days. However, we authorised an extension on a clear and demonstrable expectation that the complaint would be satisfactorily resolved within a further five days. We resolved the complaint at the frontline resolution stage in a total of eight days.

#### Complaint 4

Complaint 4 was suitably complex or serious enough to pass to the

investigation stage from the outset. We did not try frontline resolution; rather we investigated the case immediately. We issued a final decision to the customer within the 20-day limit.

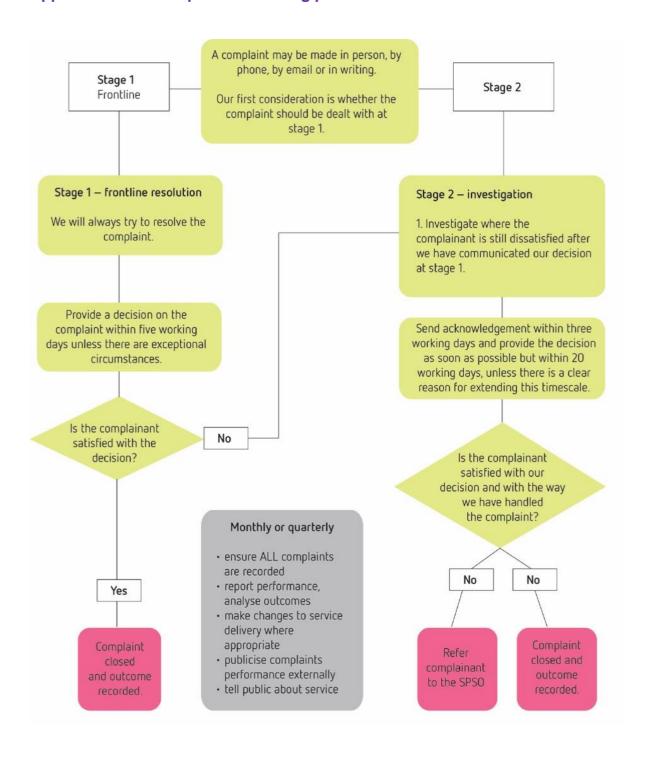
#### Complaint 5

We considered complaint 5 at the frontline resolution stage, where an extension of five days was authorised. At the end of the informal stage the complainant was still dissatisfied. At their request, we conducted an investigation and issued our final response within 20 working days. Although the end-to-end timeline was 30 working days we still met the combined time targets for frontline resolution and investigation.

#### Complaint 6

Complaint 6 was considered at both the frontline resolution stage and the investigation stage. We did not complete the investigation within the 20-day limit, so we agreed a revised timescale with the complainant for concluding the investigation beyond the 20-day limit.

# Appendix 4: the complaints handling procedure



# **Appendix 5: contact details for the Care Inspectorate**

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