

## Complaints Committee Annual Report to the Board – 2016/17

**Report to:** Board  
**Date:** 28 September 2017  
**Report by:** Anne Haddow, Convener  
**Report No:** B-16-2017  
**Agenda Item:** 8.3

### **PURPOSE OF REPORT**

This report represents a summary of the work of the Complaints Committee during financial year 2016/17 and gives the Committee's opinion on the assurance that this work provides.

### **RECOMMENDATIONS**

That the Board

1. Notes the work undertaken by the Complaints Committee during 2016/17.

**Consultation Log**

Who	Comment	Response	Changes Made as a Result/Action
Senior Management			
Legal Services			
Corporate and Customer Services Directorate			
Committee Consultation (where appropriate)	Quality and Strategy Committee 17/05/17	Minor amendments	Reported modified
Partnership Forum Consultation (where appropriate)			
<b>Equality Impact Assessment</b>			
Confirm that Involvement and Equalities Team have been informed	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
EIA Carried Out	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
If yes, please attach the accompanying EIA and appendix and briefly outline the equality and diversity implications of this policy.			
If no, you are confirming that this report has been classified as an operational report and not a new policy or change to an existing policy (guidance, practice or procedure)	Name: Anne Haddow Position: Convener, Complaints Committee		
Authorised by Director	Name:	Date:	

## 1.0 INTRODUCTION

The Complaints Committee Annual Report to the Board summarises the work of the Complaints Committee during 2016/17. Over the course of the year, the Committee has undertaken an important role in monitoring the themes and trends arising from the Care Inspectorate's complaints activity. In doing so, members have also noted the useful learning outcomes for individual staff members through complaints, as well as the helpful feedback from stakeholders.

## 2.0 REMIT OF THE COMPLAINTS COMMITTEE

The purpose of the Complaints Committee is to take an overview of the complaint handling arrangements of the Care Inspectorate for both complaints about registered care services and for complaints about the Care Inspectorate. It is tasked with reporting and making recommendations to the Board in relation to the outcomes of any complaint relating to the Care Inspectorate which has been referred to the Scottish Public Services Ombudsman, as well as the identification of any themes and trends in respect of the complaints handling procedures. The Committee also ensures that there are robust internal arrangements in place for risk management and business continuity planning in respect of complaints.

## 3.0 MEMBERSHIP

The Complaints Committee met on five occasions during 2016/17. The membership during 2016/17 has been:

Anne Haddow (Convener)  
Mike Cairns  
Gavin Dayer  
Anne Houston  
Cecil Meiklejohn

## 4.0 SUMMARY OF COMPLAINTS COMMITTEE WORK

### 4.1. Complaints About Registered Care Services

#### 4.1.1 Complaints Annual Report (Reporting period 2011-2015)

In September 2016, the Committee received, and made recommendations on, the new annual report on complaints activity, covering the years 2011-2015. The report had been prepared in response to the Committee's request for a regular annual publication of trends and patterns in complaints.

Notably, there had been an overall increase over the four year period in the number of complaints received but it was considered that this pointed towards the growing awareness of the role of the Care Inspectorate and the promotion of its complaints

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function. Members agreed with the proposal to circulate the report to local partnerships in order to raise awareness that the main reason for people complaining was in relation to general health and welfare.

The annual report showed that, generally speaking, there had been fewer complaints about care homes for older people provided through local authorities and the voluntary sector, on average. The Committee also noted that the number of complaints being upheld had been reducing.

In terms of communicating the findings of the public-facing annual report, members agreed that it should provide a balanced interpretation between the higher number of complaints received and the positive role this has had at a time when the quality of care services was high and in many cases improving.

#### **4.1.2 Complaints Quarterly Reports (Reporting period Quarters 1 to 3 2016/17)**

The Committee has continued to receive quarterly reports on complaints activity in order to identify key themes and trends. By the end of the third quarter 2016/17, members noted a slight increase per month in the numbers of complaints about registered services, and the continuing trend that the majority of these were in relation to care homes for older people.

Members noted the lower rate of complaints from people who experience care versus the rate from carers and family members. In particular, the Committee has recommended a further breakdown of these figures to show the percentage from children and young people, so that this might help inform and develop better means of engagement with these groups.

#### **4.1.3 Assessing the Seriousness of a Complaint**

The Committee has been kept informed of the Care Inspectorate's revised process for assessing the seriousness of complaints against registered services, the need for which has been driven by the increased volume of complaints received and the need to prioritise complaints where it appears people may be at risk. Clear identification of what constituted a complaint had also been a factor in the decision to implement the change.

The Committee has welcomed the opportunity for the complaints handling procedure to be more streamlined and has emphasised the need to ensure that accessibility to the complaints service is made easier, especially for people who use services and who do not have family or friends to advocate on their behalf. The Committee has noted the improved partnership working between the Care Inspectorate and service providers, enabling greater responsibility on a service to resolve matters and take improvement action themselves.

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## 4.2 Complaints About the Care Inspectorate

### 4.2.1 Process for Handling Complaints about the Care Inspectorate

The Committee has been fully apprised of the development of the amended approach to handling complaints about the Care Inspectorate. The revised process has been developed following meetings between the organisation and the Scottish Public Services Ombudsman (SPSO), which had focussed on how the Care Inspectorate determined the “head of complaint” and the organisation’s ability to complete complaints handling within the five and 20 day deadlines. The amended approach is more simple and streamlined and focusses on service review and learning.

The Committee has noted the new Complaints Handling Policy, produced along with the revised procedures and the new set of staff guidance. Members have welcomed the positive reaction from staff and their representatives to the new guidance. The Committee has been pleased to learn that the new approach has led to better quality complaints handling within required deadlines and that this has been the result of improved communication with complainants.

### 4.2.2 Complaints About the Care Inspectorate Tracker

Information on complaints about the Care Inspectorate has been provided regularly to the Committee in the form of a tracker. This format has enabled members to have a comprehensive overview of complaints, noting the status of each complaint and helping the Committee to gain a better insight into how the Care Inspectorate deals with them. During 2016/17, a new section was added to the tracker to demonstrate the actions and learning points applied in relation to upheld complaints.

### 4.2.3 Complaints Improvement Plan

The Committee has discussed the continued relevance of the plan and has agreed that the Committee action record, rather than the plan itself, has been the most effective means of recording and monitoring progress with complaints improvement tasks. With there being more emphasis on a qualitative rather than quantitative approach, members have agreed that the Care Inspectorate should focus on the lessons learned from complaints, as a core part of the complaints improvement cycle.

### 4.2.4 Details of SPSO Activity

The Committee has received regular information to enable it to take an overview of cases that have been examined by the Ombudsman. During 2016/17, members were pleased to note the high numbers of complaints about the Care Inspectorate that had not been upheld by the SPSO.

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#### 4.3 Risk Management

At each of its meetings, the Complaints Committee records any identified risks which are then brought to the attention of the appropriate Committee/Board. Risks that were identified for 2016/17 included:

- the need to adhere to a 20 day complaints processing timeline by the Scottish Public Services Ombudsman
- the need to be aware of the organisation's new staff structures and continuity of service to the public
- the risk to the new complaints handling procedure in the event of a delay to implementation of the digital transformation programme.

All Committee members attended the Annual Review of the Strategic Risk Register in February 2016.

#### 5.0 COMPLAINTS COMMITTEE EFFECTIVENESS

Throughout the course of 2016/17, the Committee has reflected on its role and the business it has attended to. At the effectiveness session in February 2017, members agreed that, although the Committee had continued to work within its terms of reference and had done so effectively, the business had moved more towards quality assurance and learning outcomes

The Committee has been supportive of the discussions that have taken place between the Chair and the Convener regarding the Care Inspectorate's committees' structures and remits and, in particular, the alignment of business between the Policy and Complaints Committees in respect of quality and improvement. Committee members have agreed that the restructuring of both committees would be a pragmatic move, enabling a more integrated approach to quality assurance. At the Board meeting in March 2017, members approved the establishment of the new Quality and Strategy Committee which will take forward the work of the former Complaints and Policy Committees.

#### 6.0 RESOURCE IMPLICATIONS

The work of the Complaints Committee is serviced by the Executive Director of Strategy and Improvement, the Executive Director of Scrutiny and Assurance, the Committee Support Officer, significant input from the Care Inspectorate's Intelligence and Analysis team, and other teams also. The Committee wishes to see continued progress to ensure that staff and resource levels are continually reviewed against the need, and in concert with the needs of other Care Inspectorate functions.

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**7.0 BENEFITS FOR PEOPLE WHO EXPERIENCE CARE**

The Care Inspectorate's complaints process plays a significant role in addressing poor quality care and allowing people with concerns and complaints to have them addressed. It is important that there are appropriate governance arrangements in place around this. Clear communication between the Complaint Committee and the Board is essential to the performance of this role and this annual report to the Board is an important part of this communication process.

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