Towards a new Complaints Procedure for the Care Inspectorate

Two stage implementation plan

Stage 1 : 1st July 2012 – October 2012

Q1 Recommendation: That the Care Inspectorate implements a 6 month timescale for accepting complaints against care services.

Action: The Complaints Management Team (CMT) will draft a Care Inspectorate complaints procedure which takes into account this recommendation. Staff awareness training will be undertaken prior to implementation.

Q2 Recommendation: That the Care Inspectorate moves to a 20 day timescale for the completion of investigations (the facility for extending will remain).

Action: The CMT will draft a Care Inspectorate complaints procedure which takes into account this recommendation. Any changes to Key Performance Indicator's (KPI)'s cannot be made until the start of each reporting period. Therefore the intention would be to change this to 20 days from the 1st October 2012. Staff awareness training will be undertaken prior to implementation.

Q3 Recommendation: That the Care Inspectorate moves to a 3 stage process.

Action: The CMT will draft a Care Inspectorate complaints procedure which takes into account this recommendation. Staff awareness training will be undertaken before implementation.

Q5 Recommendation: That the Care Inspectorate removes the partially upheld outcome in the complaints.

Action: The CMT will draft a Care Inspectorate complaints procedure which takes into account this recommendation.

ICT Colleagues have indicated that it may be possible to remove the partially upheld outcome from the PMS system once complaints in progress have been completed. However, this requires further investigation.
As an interim measure staff can be instructed not to use this option. Staff awareness training will be undertaken before implementation.

Q7 Recommendation: That the Care Inspectorate moves to a 1 stage review process, either by an internal manager **OR** the CSC.

Action: The CMT will draft a Care Inspectorate complaints procedure which takes into account this recommendation. Staff awareness training will be

undertaken before implementation. All information relating to the complaints procedure will be reviewed and updated to provide clear information to complainants about the choices available to them.

Q8 & 9 Recommendation: It is recommended that the Care Inspectorate moves to implementing an error response stage into its complaints procedure.

Action: The CMT will draft a Care Inspectorate complaints procedure which takes into account this recommendation. If the decision is to move to an error response stage prior to the roll out of RMS then a paper system can be implemented at stage 1 of the implementation plan. Staff awareness training will be undertaken before implementation. However if the decision is to wait until the roll out of RMS then this would need to be included at stage 2 of the implementation plan.

Stage 2 – 1st October 2012 (Provisional)

Q4 Recommendation: It is recommended the Care Inspectorate moves to a system which reports the individual outcomes separately.

Action: Complaints staff and ICT colleagues are currently working on the specification for complaints handling on the Regulatory Management System (RMS. ICT colleagues have confirmed that we would not be able to move to reporting on complaints outcomes separately on the website until the RMS for complaints is operational. Significant staff training will be required for complaints handling on the RMS prior to implementation. Provisional dates cannot be agreed until ICT colleagues confirm the date RMS will be operational.

Q8 & 9 Recommendation: It is recommended that the Care Inspectorate moves to implementing an error response stage into its complaints procedure.

Action: If the decision is to adopt the use of an error response form electronically we would need to wait until the change over to the RMS. Staff training will be required for complaints handling on the RMS prior to implementation. Provisional dates cannot be agreed until ICT colleagues confirm the date RMS will be operational.