

# **Minutes**

Meeting: Complaints Committee

Date: 21 November 2016

**Time:** 10.30 am

**Venue:** Room 0.24, Compass House, Dundee

**Present:** Anne Haddow, Convener

Anne Houston Gavin Dayer Cecil Meiklejohn

In Attendance: Rami Okasha, Executive Director of Strategy and Improvement

Alison Cook, Senior Solicitor

Marie Paterson, Service Manager, Complaints and Inspection

Fiona Angus, Committee Support Officer

**Apologies:** Mike Cairns

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Kenny McClure, Head of Legal Services

Item Action

The Convener opened the meeting and welcomed Alison Cook, who was deputising for Kenny McClure, and Marie Paterson who was presenting item 6.

# 1.0 APOLOGIES FOR ABSENCE

Apologies were received as noted above.

# 2.0 DECLARATIONS OF INTEREST

There were no declarations of interest.

# 3.0 MINUTE OF PREVIOUS MEETING HELD ON 6 SEPTEMBER 2016

The minute of the meeting held on 6 September 2016 was reviewed and agreed.

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#### 4.0 ACTION RECORD OF MEETING HELD ON 6 SEPTEMBER 2016

The action record of the meeting held on 6 September 2016 was noted.

The Committee highlighted the need to ensure that the new complaints handling procedure was considered as part of the digital transformation programme. The Executive Director of Strategy and Improvement explained that work was ongoing with NHS Education Scotland and the Scottish Government around providing advice and expertise to the Care Inspectorate on digital transformation.

The Committee agreed that, while digital transformation brought many benefits for public bodies, the process of handling complaints would still require "hands on" contact and not all elements could be automated.

#### 5.0 MATTERS ARISING

Under item 8.2 of the minute of the previous meeting (Report on Complaints Activity Q1), the Committee sought the management's view on the low number of complaints from care home residents, noting that the highest number of complaints received overall were in relation to care homes.

The Executive Director of Strategy and Improvement explained there had been a small increase in complaints received from care home residents, to 2%, but at this stage it would be difficult to determine if this was a trend. The Care Inspectorate intended to develop a more user-friendly, accessible process, in discussion with the sector and with people who use services. He also noted that many issues and views from people living in care homes were captured as part of our inspections and informed our assessments of quality.

#### **BUSINESS**

# 6.0 ASSESSING THE SERIOUSNESS OF A COMPLAINT - PRESENTATION

The Committee received a presentation on the changes to the way in which the organisation handled complaints. The drivers for change were the increased volume of complaints, the need to ensure our approaches remained modern and proportionate, and the need to prioritise complaints where it appears people may be at risk. Clear identification of what constituted a complaint was also a factor in the decision to implement the change.

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Members were informed of the different options for complaint handling which included:

- Noting the information for planned inspections
- Frontline resolution
- Investigation by the service
- Investigation by the Care Inspectorate

In assessing the seriousness of a complaint, the organisation would undertake a risk assessment, which would consider any protection issues, the history of the service, the nature of the complaint, the likelihood of the issue complained about happening more than once or to others in the service, and a service's capacity to improve.

The Committee welcomed the presentation and the opportunity for the complaints handling procedure to be more streamlined. Members emphasised the need to ensure that accessibility to the complaints service was made easier especially for people who used services and who did not have family or friends who could advocate on their behalf.

Members were also pleased to note 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. There was a desire to change the whole approach to complaints across the sector and it was recognised that this would require a culture shift, with more positive emphasis on how complaints might help improve services and outcomes.

The Committee raised a point in relation to care provided at home, where it was sometimes not made clear to people how to make a complaint. It was suggested that providers of this type of care could be encouraged to be more proactive in reviewing their services on a regular basis with the people who were using those services.

The Committee was informed that the changes to complaints handling were being piloted and members welcomed the opportunity to receive more information on the pilots in due course.

# 7.0 REPORT ON COMPLAINTS ACTIVITY – QUARTER 2 2016/17 – REPORT NO: C-07-2016

The Executive Director of Strategy and Improvement presented the quarterly report, which provided the Committee with a summary of key findings and trends about complaints handled during the second quarter.

The report showed that the previous downward trend in the numbers

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of complaints received in quarters 1 and 2 had reversed, with an average of 363 having been received per month. The majority of complaints were still in relation to care homes but the numbers received from service users in care homes for older people remained very low.

It was noted that a total of 48 complaints about the Care Inspectorate had been received during quarters 1 and 2, four of which had been withdrawn and eight closed through successful frontline resolution. A total of 29 complaint investigations had been carried out during the year to date and, in 11 cases, the complaint had been upheld. The main lesson learned by the organisation as a result of these complaints was the value of communication and the approach to customer services. Where required, coaching conversations took place to ensure our standards of customer service remains high.

The Committee noted the report.

#### STANDING ITEMS

# 8.0 DETAILS OF SCOTTISH PUBLIC SERVICES OMUDSMAN (SPSO) ACTIVITY

Members received an update on complaints handled by the SPSO and noted that five of the most recent complaints had not been taken forward.

The Committee welcomed the report and the evidence it provided that issues were being addressed.

# 9.0 COMPLAINTS IMPROVEMENT PLAN

The Executive Director of Strategy and Improvement presented the updated plan and members noted that it had neared completion.

In relation to reference 1.3 in the plan, it was noted that the new complaints handling procedure was being progressed by the Executive Team and that, once finalised, staff guidance would follow.

Under reference 2.1 of the plan, it was noted that further discussion with trade unions would be held at the next Partnership Forum in January 2017.

The Committee discussed the continued relevance of the plan and recognised that the Committee action records, rather than the plan itself, were now the means of recording progress with complaints improvement tasks. Members agreed that there was now a more qualitative than quantitative approach and suggested that, as part of

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the complaints improvement cycle, consideration could be given to how the organisation was applying lessons learned. The Committee agreed to include this matter for discussion at the Effectiveness session in January 2017.

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# 10.0 COMPLAINTS ABOUT THE CARE INSPECTORATE TRACKER

The Committee noted the information on complaints received about the Care Inspectorate during the previous six months. The tracker now clearly identified the actions and learning points applied in relation to upheld complaints, which the Committee agreed was very positive.

# 11.0 SIGNIFICANT/SERIOUS CASE REVIEWS

There were no significant or serious case reviews to report that involved the Care Inspectorate.

#### 12.0 IDENTIFIED RISKS

The Committee considered there could be a risk to the new complaints handling procedure in the event of a delay to implementation of the digital transformation programme.

### 13.0 SCHEDULE OF COMMITTEE BUSINESS

The Committee reviewed the schedule and agreed to the following additions:

- Update on piloting of complaints handling procedure, if at an appropriate stage – to February 2017 meeting
- Findings of Governance Review to Committee Effectiveness session in January 2017

#### 14.0 AOCB

There was no other competent business.

#### 15.0 DATE OF NEXT MEETING

The date of the next meeting was noted as Thursday 19 January 2017 (Effectiveness meeting) at 10.30 am, Compass House, Dundee.

Signed:

Anne Haddow Convener

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