Agenda item 19
Report No: B-39-2019

Title:	Complaints about Care Services in Scotland 2015/16 to 2018/19. A statistical bulletin.
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Appendices:	**1.** Complaints about care services in Scotland, 2015-16 to 2018/19.
Consultation:	Comments and amendments from the Interim Executive Director of Strategy and Improvement and the Chief Inspector, Adults.
Resource Implications:	***~~Yes~~/No** (*Please provide detailed description in Resources section of report)

EXECUTIVE SUMMARY

This report provides the Board with a statistical report on trends and patterns in complaints over the past four years.

This is the fourth annual report on complaints and presents trends in complaints received, registered and completed, alongside patterns and trends in the nature of the complaints we investigate about care services.

The introduction of the new complaints procedure in November 2017 has had an impact on the statistics presented, and this is noted, where relevant, in the report.

The report is a public report and was made available on our website in July 2019. Members were notified of its release at the time. A copy of the published report is contained as an Appendix.

The Board is invited to: *(Give details: Approve/agree/note)*

1.	Note the contents of this report.

Links:	Corporate Plan Outcome	1	Risk Register - Y/N	N	Equality Impact Assessment - Y/N	N

For Noting	**X**	**For Discussion**		**For Assurance**		**For Decision**	

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If the report is marked Private/Confidential please complete section overleaf to comply with the Data Protection Act 2018 and General Data Protection Regulation 2016/679.

Reason for Confidentiality/Private Report: *(see Reasons for Exclusion)*
Disclosure after:

Reasons for Exclusion	
a)	Matters relating to named care service providers or local authorities.
b)	Matters relating to named persons which were they to be discussed in public session, may give rise to a breach of the Data Protection Act 2018 or General Data Protection Regulation 2016/679.
c)	Matters relating to terms and conditions of employment; grievance; or disciplinary procedures relating to identified members of staff.
d)	Matters involving commercial confidentiality.
e)	Matters involving issues of financial sensitivity or confidentiality.
f)	Matters relating to policy or the internal business of the Care Inspectorate for discussion with the Scottish Government or other regulatory or public bodies, prior to final approval by the Board.
g)	Issues relating to potential or actual legal or statutory appeal proceedings which have not been finally determined by the courts.

COMPLAINTS ABOUT CARE SERVICES IN SCOTLAND 2015/16 TO 2018/19 - A STATISTICAL BULLETIN

1.0 Introduction

This report provides the Board with a statistical report on trends and patterns in complaints over the past four years with a particular focus on 2018/19.

This is the fourth annual report on complaints and presents trends in complaints received, registered and completed, alongside patterns and trends in the nature of the complaints we investigate about care services.

The introduction of the new complaints procedure in November 2017 has had an impact on the statistics presented and this is noted where relevant in the report.

The report is a public report and was made available on our website in July 2019. Members were notified of its release at the time. A full copy of the published report is contained as an Appendix.

2.0 How many complaints were received and how did we respond to them?

Since 2015/16 we have continued to receive over 4000 complaints each year and this has been increasing year-on-year. We received 4,940 complaints about care services in 2018/19, a 5% increase compared to 2017/18.

While the level of complaints received has increased over time, this is not necessarily an indicator that quality of care is in decline. Comparing 2015/16 to 2018/19, the percentage of services graded good, very good or excellent in all quality themes has remained fairly constant at 88% in both periods respectively. This may be attributable to the increased awareness of our complaints process and of the standards of care people should expect.

In this and our previous report we mention the change to our complaints procedure in November 2017. This procedure is designed to be open, transparent, risk-based and focused on people's experiences. It gives us more flexibility in how we can respond to try to resolve simple matters quickly be it by frontline resolution, provider resolution or using the complaint information as intelligence to assist with future scrutiny activity. It then focuses more attention on more serious issues. We now have a full year's data available using the new procedure and while there are some caveats comparing to previous years which have been mentioned in the report some comparison has also been made to the post-November 2017 period in 2017/18:

- An average of 78 complaints per month were resolved by front line resolution in 2018/19, higher than the 75 complaints per month for the period in 2017/18 since the new procedure was introduced. This has followed an upward trend over the past 4 years especially since introducing our new process.

- An average of 65 complaints per month were used/logged as intelligence, higher than the average of 46 per month post November 2017/18.

- We registered an average of 121 complaints per month for full investigation by the Care Inspectorate, while down on previous years due to the availability of the other options from our risk based approach, this is higher than the 115 per month from 1 Nov to 31 March 2018 when the new approach was introduced.

- The number of complaints completed has continued to decrease year on year from 1,748 in 2015/16 to 1,397 in 2018/19. This decrease is due to the new risk assessment process allowing us to deal with less complex complaints more quickly through frontline resolution. This trend is dependent on the complaints we receive meeting the requirements of our risk assessment process for quicker resolution.

3.0 Who makes complaints?

Between 2015/16 and 2018/19, the percentage of complaints received from each category of complainant has remained relatively constant. Between 2015/16 and 2018/19, just under half of all the complaints we received (46%) were made by friends, relatives or visitors of a person experiencing care. A further 22% were made by employees or former employees of the service. Only 8% of complaints were made directly by someone using the service.

4.0 What type of care services do people complain about?

Although making up only around 11% of the 12,900 or so registered services, care home services continue to account for most of the complaints, just under 50% of the total number of complaints investigated – a total of 2,963 completed investigations over the last four years.

Over the last four years, 20% of the complaints we investigated were about daycare of children services, 21% were about either combined housing support/care at home or standalone care at home services and 8% were about childminders.

5.0 What people complain about?

Of the complaints completed in 2018/19, the main areas of complaint were general health and welfare issues, accounting for just under a quarter of all areas of complaint, 18% were about specific healthcare concerns and a further 16% related to staffing concerns – a trend unchanged since last years report.

6.0 Complaints about care homes for older people

Almost half of all the complaints we investigated in 2018/19 were about care homes and of these the vast majority (91%) were about care homes for older people.

Of the care home for older people services that had a complaint investigated and upheld in 2018/19, 60% had only one upheld complaint, 23% had two upheld complaints, and the remainder had between three and six upheld complaints during the year.

Specific healthcare issues were the main area of complaint for care homes for older people (25%). This includes problems with medication, continence care, tissue viability, nutrition, hydration and inadequate care and treatment.

Just over half of all complaints received in 2018/19 about care homes for older people were from relatives and friends of people living in the service – nine percentage points higher than in other types of service. People experiencing care accounted for around 1% of all complaints about care homes for older people – compared with almost 15% for all other types of service.

7.0 Complaints about childminders

At 31 March 2019 there were 4,973 registered childminders. Although this is the largest single category of registered services, during 2018/19 we had received a complaint about less than 4% of childminders. We upheld a complaint about just under 1% of these childminders, all of whom had only one upheld complaint.

General health and welfare was the most frequent area of complaint (31%), followed by communication issues (18%) then issues about conditions of registration (11%) in particular exceeding their maximum permitted capacity.

Complaints from friends, relatives or visitors of a person experiencing care is considerably lower for childminders (by almost 13 percentage points) than for other types of services. Members of the public are considerably more likely to complain about a childminder than about any other type of service – 35% of complaints about childminders came from the public compared to only 7% about other types of service.

8.0 What we found when investigating complaints

In 2018/19 we upheld 58% of the 1,397 complaints completed, a slight increase from 56% in 2017/18. This may be due to our new procedure as only those complaints that were high-risk were taken forward for investigation.

This varies by type of service. In 2018/19, 58% of the 696 complaints investigations completed about care home services, 71% of the 202 complaints completed about combined housing support and care at home services, and 81% of the 109 complaints completed about standalone care at home services were upheld. This compares to less than half (45%) of the 229 complaints investigated about daycare of children services and 37% of the 104 complaints investigated about childminders upheld.

9.0 IMPLICATIONS AND/OR DIRECT BENEFITS

9.1 Resources

There are no direct resource implications arising from this report.

9.2 Sustainability (see guidance)

There are no direct sustainability implications arising from this report.

9.3 Policy

The report should be considered within the context of significant policy reform during 2015/16 to 2018/19, much of which continues to impact on the Care Inspectorate and social care services. Developments include the recent refresh of the National Performance Framework, implementation of the Health and Social Care Standards, continued implementation of health and social care integration and self-directed support, as well as ongoing reform of the early learning and childcare landscape.

More specifically, the period covered by the report saw the introduction of a duty of candour through the Health (Tobacco, Nicotine etc. and Care) (Scotland) Act, an extension of the remit of the Scottish Public Services Ombudsman in relation to social care complaints, and legislation that will see the establishment of an Independent National Whistleblowing Officer for NHS Scotland.

9.4 People Who Experience Care

Robust and responsive complaints investigations support improvement in the quality of care which enables people to experience more positive outcomes.

9.5 Customers (Internal and/or External)

This detailed annual report on complaints will allow longer-term trends to be reported and analysed. This will help to provide the intelligence to focus our scrutiny, assurance and improvement support resources appropriately. This can assist with improving the performance of the organisation in dealing with complaint investigations as well as improving outcomes, assurance and protection for complainants and people experiencing care.

10.0 CONCLUSIONS/NEXT STEPS

The Board will receive the six-monthly report for the period up to 30 September for the next Board meeting on 17 December 2019.