

Title/Subject: Integration of Health and Social Care Complaints Protocol

Meeting: Falkirk Integration Joint Board

Date: 24 March 2016

Submitted by: Head of Performance and Governance

Action: For Decision

## **1. INTRODUCTION**

- 1.1 This paper presents the Health and Social Care Complaints Protocol for consideration and approval (appendix 1).
- 1.2 The Protocol was developed as part of the Governance Workstream central to the overall programme to deliver the requirements of health and social care integration in Forth Valley.
- 1.3 The Integration Schemes for the Partnerships in Forth Valley set out a number of provisions relating to the implementation of the integration of adult health and social care. One key aspect of this is around the handling of complaints.
- 1.4 The Protocol sets out how complaints will be handled in the coming year. The process will be reviewed acknowledging the national changes intimated around complaints handling in both health and social care services. Current local procedures remain extant at this stage with the Chief Officer maintaining an oversight of complex cases.
- 1.5 It is anticipated that, in due course, the separate complaints handling arrangements for the different providers will be integrated into a standardised approach, and be consistent with the model Complaints Handling Procedure (CHP) developed by the Scottish Public Services Ombudsman (SPSO).

## **2. RECOMMENDATIONS**

The Falkirk Integration Joint Board is asked to:

- 2.1 Note and acknowledge the work carried out by the work stream to develop the Complaints Protocol.
- 2.2 Approve the Complaints Protocol acknowledging the forthcoming changes nationally in terms of complaints handling.

### **3. COMPLAINTS PROTOCOL**

- 3.1 The requirement to develop an approach to complaints handling was detailed within the Integration Schemes of the two partnerships within Forth Valley.
- 3.2 There are different processes within Health, Social Care and Housing which are managed through specific guidance pertaining to the relevant service.
- 3.3 The Scottish Government are currently working to develop guidance on complaints for Health and Social Care Partnerships to help ensure an integrated approach to handling complaints and annual performance reporting. This will largely follow the SPSO model Complaints Handling Procedure (CHP) including reference to the existing statutory Social Work and NHS complaints arrangements. The Scottish Government aims to publish guidance in Spring 2016.

### **4. MAIN BODY OF THE REPORT**

- 4.1 The protocol describes the context and why a protocol is required at this stage, considering definitions of complaints and when issues cannot be dealt with through this route.
- 4.2 It describes the process for the handling of complaints supported by a flowchart to further explain the detail. In respect of any complex issues where a complaint covers a number of areas between health and social care the Chief Officer will review and maintain oversight of the process and outcome.
- 4.3 The linkage to the Clinical and Care Governance Framework is highlighted in terms of reporting trends and also, of critical importance, in terms of learning from complaints and ultimately improving service provision.

### **5. CONCLUSIONS**

- 5.1 As noted above this paper proposes a complaint protocol for the coming year acknowledging that this will be reviewed in light of Scottish Government recommendations forthcoming in the Spring.

#### **Resource Implications**

Current resources for the handling of complaints will support the process.

#### **Impact on IJB Outcomes, Priorities and Outcomes**

Core to the requirements of the Integration Scheme

**Legal & Risk Implications**

The Complaints Protocol is required to minimise risk and limit litigation and is a core part of functioning organisations.

**Consultation**

The Complaints protocol has been reviewed through the workstream structure supporting the implementation of the Integration of Health and Social Care.

**Equalities Assessment**

The Protocol fully reflects the current national guidance

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**Approved for Submission by:** Chief Officer

**Author:** (Elaine Vanhagen, Head of Performance and Governance, NHS Forth Valley)

**Date:**

**List of Background Papers:** The papers that may be referred to within the report or previous papers on the same or related subjects.



**Clackmannanshire  
Council**



**Health and Social Care Integration  
Complaints Protocol  
February 2016**

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# **Health and Social Care Integration Complaints Protocol**

**February 2016**

## **1.0 Context**

The Public Bodies (Joint Working)(Scotland) Act 2014 aims to improve the wellbeing of service users and unpaid carers, in particular those whose needs are complex and who require services delivered jointly by health, social work and social care services in Scotland.

The Patient Rights (Scotland) Act 2011 supports the Scottish Government's vision for a high quality, person-centred NHS and applies to all staff working within the NHS in Scotland and to all independent contractors and their staff who provide NHS services. It details what patients in Scotland have a right to expect from their health service, no matter whether they are delivered by NHS staff or on behalf by independent contractors or their staff. The Act gives patients a legal right to give feedback on their experience of healthcare and treatment and to provide comments, raise concerns or complaints.

The Integration Schemes for the Partnerships in Forth Valley set out a number of provisions relating to the implementation of adult health and social care. One key aspect of this is around the handling of complaints.

This protocol sets out how complaints will be handled and will be reviewed during the next year acknowledging the national changes intimated around complaints handling in both health and social services. Current procedures remain extant at this stage which are governed nationally.

## **2.0 Why do we require a complaints handling protocol?**

Adult Health and Social Care partners are committed to providing high quality services to service users, unpaid carers and the wider community. 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. Listening to service users and unpaid carers helps us to put things right, learn from our mistakes and improve our services.

The integration of Health and Social Care services provides the opportunity to provide seamless services across Adult Care. This enhanced level of service integration requires, in time, to be reflected in a single approach to complaints handling making it easier for service users and clients to give feedback, both positive and negative, on the services they receive. This protocol therefore seeks to provide an improved and more consistent approach to complaints handling across Health and Social Care organisations.

It is anticipated that, in due course, the separate complaints handling arrangements for the different public sector providers will be integrated into a standardised approach, and be consistent with the model Complaints Handling Procedure (CHP) developed by the Scottish Public Services Ombudsman (SPSO).

### **3.0 What is a complaint?**

A complaint is an expression of dissatisfaction about an action or lack of action, or about the standard of service provided by us or on our behalf. Predominantly this is about the care and service we provide. The importance of a cross linkage to the Clinical and Care Governance Framework should be highlighted.

For example:

- delays in responding to enquiries and requests
- failure to provide a service
- failure to meet our care standards
- failure to meet needs
- dissatisfaction with our policy for the provision of care
- treatment by, or attitude of, a member of staff or a contractor acting on our behalf
- failure to follow the proper administrative process.

### **4.0 What is not a complaint?**

The above definition is broad, however not every concern raised is a complaint. For example, a complaint is not:

- a first request for a service
- an enquiry about a process or procedure
- a request for information or an explanation of our policy or practice
- a request under the Freedom of Information Act or Data Protection Act.

There are also other matters we can't deal with under the complaints procedure. These include:

- where a statutory right of appeal exists
- any service where you can use other methods to appeal
- insurance claims
- a complaint we have already investigated and given a final decision on
- complaints that are in court or have already been heard by a court or a tribunal or where there is intimation of a claim

## 5.0 Who can complain?

Anyone can make a complaint in person, by telephone, by email or in writing. If appropriate signed consent is given by the service user, someone can complain on their behalf e.g. family member, friend, MSP/MP.

This protocol acknowledges the support and involvement of other agencies where an individual wishes to make a complaint about health or social care services, for example, Advocacy Services, Care Inspectorate, Local Health Councils, the Mental Welfare Commission and the Citizens Advice Bureau.

## 6.0 How will complaints to Health & Social Care be processed?

NHS Forth Valley, Stirling and Clackmannanshire, Falkirk Joint integrated Boards have a body corporate model in place. This is where the Health Board and Local Authority create a partnership in the form of an Integration Joint Board, which plans and commissions services that are then delivered by the Health Board and Local Authority. This means that the Health Board and Local Authority remain responsible for the delivery of Health and Social Care services.

Whilst complaints about service delivery will be dealt with through the existing Health, Social Work & Housing complaints procedures, we aim over time to adopt an integrated approach that ensures complaints are handled efficiently, effectively, timeously and in a person-centred way.

In the management of complaints:

- 1) There will be identified officers from both Health and Social Care with a lead responsibility for complaints handling.
- 2) Information Sharing Protocols will be put in place at the correct level to enable staff to respond to the issues raised. This will be continually reviewed and developed to ensure the appropriate level of information can be shared by those who need it, in accordance with the legal framework. It is proposed that an ISP to support this complaints protocol is developed in the coming weeks.

The following approach is proposed for complaints handling, whether the complaint is of a sector-specific or cross-service nature:

- |         |   |
|---------|---|
| Step 1: | Service User submits complaint to either Health or Social Care service  |
| Step 2: | Service receiving the complaint identifies the core issue being complained about and identifies the <u>lead service</u> for each issue raised:  |
| or      | <ol style="list-style-type: none"><li>(a) Single service complaint - If the matter falls clearly with either Health Social Care, then the matter will be resolved by that sector in accordance with their current complaints procedure. No requirement will be needed for cross-sector liaison.</li><li>(b) Cross-service complaint - The organisation with responsibility for the <u>predominant issue</u> will be nominated to take the lead in collating the response to the complaint. The response to a secondary issue from another sector will be incorporated into the response to ensure a</li></ol> |



single, joined-up response. The collective response will be agreed by the designated complaints officers. The right of challenge/appeal to each issue will fall within the relevant sector's complaints procedure.

In complex cross-service cases, each sector will identify the issues identified in the complaint, undertake separate investigations on each matter and then share respective outcomes before drafting co-ordinated and complimentary responses, ensuring they cover all aspects of the complaint. The designated complaints officers from each sector will liaise to agree responsibilities for responding to each issue and drafting of responses to service users, either jointly or collectively as appropriate.

Where agreement cannot be reached on respective responsibilities for dealing with a complaints issue, the matter will be referred to the Chief Officer to resolve.

Service user information will be updated in due course (via leaflets and web pages) making it clear to service users on 'How to make a complaint' and provide contact details.

The Flowchart in Appendix 1 summarises the approach.

## **7.0 Reporting our performance**

We will develop key performance indicators to help assess performance in relation to the handling of complaints, to facilitate continuous improvement and to report externally to service users.

This will build on the SPSO indicators already developed as part of the national Model Complaints Handling Procedure (CHP) and typically include details on:

- number and type of complaints recorded
- number and percentage of complaints resolved at each stage (Stage 1/Stage 2)
- number of social care complaints escalated to Complaints Review Panel (Stage 3)
- number and percentage of complaints upheld/not upheld/partially upheld
- average time taken to resolve complaints at each stage
- service user satisfaction in dealing with complaints

Complaints details will be analysed for trend information to ensure we identify service failures, areas for improvement and take appropriate action. Performance in complaints handling will be reported to the Health and Social Care Integration Joint Board, on a regular basis. Linkage will be made to the Clinical and Care Governance Framework and the reporting of trends and issues.

## **8.0 Learning from complaints**

Learning from complaints and the experience of our service users is a critical component of the management of complaints. Senior management will review the information gathered from complaints regularly and consider whether services could be improved or internal policies and procedures updated. As a minimum, complaints data will be used to identify the root causes and management actions taken to reduce the risk of recurrence. Learning will be shared and fed back to improve services and service delivery. Again linkage will be made with the work undertaken through Clinical and Care Governance.

## **9.0 Links to national developments**

The Scottish Government are currently working to develop guidance on complaints for Health and Social Care Partnerships to help ensure an integrated approach to handling complaints and annual performance reporting. This will largely follow the SPSO model Complaints Handling Procedure (CHP) including reference to the existing statutory Social Work and NHS complaints arrangements. The Scottish Government aims to publish guidance in Spring 2016.

A draft Scottish Public Services Ombudsman Act Amendment Order 2016 is currently before the Scottish Parliament for approval. This will add Integration Joint Boards to the list of organisations under SPSO's jurisdiction. The Scottish Government have also recommended changes to Social Work complaints procedures to help align and integrate processes.

In practice, it is expected the revised procedure will bring the NHS complaints procedure more closely into line with the model Complaints Handling Procedure (CHP) operating in Local Authorities, and with the Scottish Government's proposed arrangements for Social Services complaints.

The current Social Work Complaints Procedures timescales are:

- Stage One: Front line resolution within 28 days
- Stage Two: Complete investigation within 28 days

The current NHS procedure timescales are:

- Local Resolution within 3 days
- Complete investigation within 20 days

The proposed CHP model is based on a 2-stage process:

- Stage One: Front line resolution within 5 days
- Stage Two: Complete investigation within 20 days

The model CHP aims to resolve more complaints at source, learn more from the service users feedback and use feedback to improve service delivery. This approach brings a sharper focus to frontline ownership and early resolution of complaints.

## **10.0 Monitoring and review of protocol**

This protocol will be reviewed during the course of the year to ensure it remains fit for purpose and in accordance with local and national developments to improve complaints handling described above.

### **Integration of Health and Social Care** **Complaints Process**



