



Policy for complaints about the Care Inspectorate

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Contents	Page
Foreword	3
1. Structure of our policy, procedure and guidance on complaints about the Care Inspectorate	4
2. Overview of our procedure for managing complaints about the Care Inspectorate	4
3. Summary of our procedure for managing complaints about the Care Inspectorate	5
3.1 What is a complaint?	5
3.2 Who can make a complaint?	7
3.3 How complaints may be made	8
3.4 Time limits for making complaints	8
4. Roles and responsibilities for managing complaints about the Care Inspectorate	9
5. Expected behaviours for all parties involved in complaints about the Care Inspectorate	10
6. Maintaining confidentiality and data protection	11
7. Recording, reporting and learning from complaints	11
7.1 Recording complaints	11
7.2 Reporting and learning from complaints about the Care Inspectorate	12
7.3 Publicising complaints information	13
8. Related policies	13
9. Policy review	13
10. Equality and diversity statement	14

Foreword

Our policy, procedure and guidance documents for complaints about the Care Inspectorate reflect the Care Inspectorate's commitment to valuing complaints. They support our aim to resolve dissatisfaction at the earliest opportunity by conducting thorough, impartial and fair examinations of complaints so that, where appropriate, we can make evidence-based decisions on the facts of the case.

We have based our policy, procedure and guidance documents on the Scottish Public Services Ombudsman's (SPSO) Model Complaints Handling Procedure (MCHP).

We will ensure all staff across the Care Inspectorate are aware of the policy, procedure and guidance. All staff receive training at induction and further, refresher training is available too, so staff are confident in identifying complaints, empowered to resolve simple complaints on the spot, and familiar with how to apply the procedure.

Complaints give us valuable information we can use to improve how we work. By following our policy, procedure and guidance, we can address a complainant's dissatisfaction and help prevent the same problems from recurring. Complaints give us first-hand accounts of people's views and experiences of us. This can highlight problems we might otherwise miss. Handled well, complaints can give complainants a form of redress when things go wrong and help us improve how we work.

Our policy, procedure and guidance for complaints about the Care Inspectorate will help us build positive relationships with our stakeholders and assure the public.

They will help us serve people better, by keeping them at the heart of what we do and learning from complaints.

Jackie Irvine

Care Inspectorate Chief Executive

1. Structure of our policy, procedure and guidance for complaints about the Care Inspectorate

Our policy, procedure and guidance documents for complaints about the Care Inspectorate explain how we manage complaints. They consist of the following.

Policy for complaints about the Care Inspectorate (this document): sets out our organisational commitment to valuing complaints and gives a high-level summary of our approach to complaints and our governance arrangements.

Procedure for complaints about the Care Inspectorate

Internal version: detailed guidance for our staff on handling a complaint through all stages of the process.

External version: summary guidance for the people we work with on how we handle complaints.

Guidance for staff on supporting our procedure for complaints about the Care Inspectorate: additional guidance for staff if they receive a complaint, are named in a complaint or have been asked to investigate a complaint.

When referring to any of the above documents, reference should also be made to the SPSO Statement of Complaints Handling Principles and good practice guidance on complaints handling from the [SPSO](#).

2. Overview of our procedure for managing complaints about the Care Inspectorate

We will try to resolve complaints to the satisfaction of the complainant wherever this is possible. Where this isn't possible, we will give the complainant a clear response to each of their points of complaint. We will always try to respond as quickly as we can (and on the spot where possible).

Our complaints procedure has two stages, Stage 1: Frontline response and Stage 2: Investigation (see overview in table 1).

If the complainant remains dissatisfied after stage 1, they can request their complaint is considered again at stage 2.

If the complaint is complex enough to require an investigation, we will progress the complaint through stage 2 from the beginning.

For detailed guidance on our process, please refer to our Procedure for complaints about the Care Inspectorate and our Guidance for staff on supporting our procedure for complaints about the Care Inspectorate, accessed using the links above.

3. Summary of our procedure for managing complaints about the Care Inspectorate

Stage 1: Frontline response

For issues that are straightforward and simple, requiring little or no investigation.

'On-the-spot' apology, explanation or other action to put the matter right.

Complaint resolved or a response provided in **five working days** or less (unless there are exceptional circumstances).

Complainants addressed by any member of staff, or alternatively referred to the appropriate point for frontline response.

Response normally face-to-face or by telephone (sometimes we will need to put the decision in writing).

Complainant advised on how to escalate their complaint to stage 2.

Stage 2: Investigation

Where the complainant is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, serious or 'high risk'.

Complaint acknowledged within **three working days**.

Complainant contacted to clarify the points of complaint and outcome sought (where these are already clear, they will be confirmed in the acknowledgement)

Complaint resolved or a definitive response provided within **20 working days** following a thorough investigation of the points raised.

Independent review (SPSO)

Where the complainant is not satisfied with the stage 2 response from the Care Inspectorate.

The SPSO will assess whether there is evidence of service failure or maladministration not identified by the Care Inspectorate.

3.1 What is a complaint?

A complaint is an expression of dissatisfaction about the Care Inspectorate's action or lack of action, or about the work of the Care Inspectorate.

Where an employee also engages with the Care Inspectorate as a member of the public, they may also make a complaint under this policy.

A complaint may relate to the following, but is not restricted to:

- failure or refusal to provide a service
- inadequate quality or standard of service, or an unreasonable delay in providing a service

- dissatisfaction with one of our policies or its impact on the individual
- failure to properly apply law, procedure or guidance when delivering services
- failure to follow the appropriate administrative process
- conduct, treatment by or attitude of a member of staff or contractor
- disagreement with a decision, (except where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector).

A complaint is not:

- a routine first-time request for a service
- a request for financial compensation only
- issues that are in court or have already been heard by a court or a tribunal
- disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process (such as care service providers challenging decisions through the error response process)
- a request for information under the Data Protection or Freedom of Information (Scotland) Acts
- a grievance by a staff member or a grievance relating to employment or staff recruitment
- a concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern)
- a concern about a child or an adult's safety
- an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision
- abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our Zero Tolerance Policy
- an expression of dissatisfaction with the actions or service of a different organisation, where we have no involvement in the issue (except where the other organisation is delivering services on our behalf).

We will not treat these issues as complaints and will instead direct complainants to use the appropriate procedures. Some situations may involve a combination of issues, where some are complaints and others are not, and each situation will be assessed on a case-by-case basis.

If a matter is not deemed to be a complaint against the Care Inspectorate, or not suitable to be handled under the procedure for complaints about the Care Inspectorate, this will be explained to the complainant, and they will be advised on the action the Care Inspectorate will take and the reasons for this.

3.2 Who can make a complaint?

Anyone who engages with the Care Inspectorate or is affected by our work can make a complaint. For the purposes of the policy on complaints about the Care Inspectorate, any person making a complaint is identified as a 'complainant'.

Complaints will also be accepted from the representative of a person who is dissatisfied with the work of the Care Inspectorate.

All members of the public have the right to equal access to our procedure for managing complaints about the Care Inspectorate. Some people may face barriers when making a complaint about the Care Inspectorate. These may be physical, sensory, communication or language barriers, but can also include their anxieties and concerns. The Care Inspectorate is committed to providing the necessary support for complainants to overcome these barriers.

We are committed to meeting our legal duties to make our procedure for complaints about the Care Inspectorate accessible under equalities and mental health legislation. For example:

- the Equality Act (Scotland) 2010 gives people with a protected characteristic the right to reasonable adjustments to access our services (such as large print or BSL translations of information); and
- the Mental Health (Care and Treatment) (Scotland) Act 2003 gives anyone with a 'mental disorder' (including mental health issues, learning difficulties, dementia and autism) a right to access independent advocacy. This must be delivered by independent organisations that only provide advocacy. They help people to know and understand their rights, make informed decisions and have a voice.

Examples of how we will meet our legal duties include, but are not limited to:

- proactively checking whether members of the public who contact us require additional support to access our services
- providing interpretation and/or translation services for British Sign Language users
- helping people access independent advocacy.

In addition to our legal duties, we will support people to access our procedure for complaints about the Care Inspectorate, where this is needed. For example, some groups not having protected characteristics under the Equality Act (Scotland) 2010 may need support, such as people with experience of care and those who might be homeless.

Examples of actions that we may take include, but are not limited to:

- helping people needing support to identify when they might wish to make a complaint, for example through contact during inspection
- helping people access independent support or advocacy to help them understand their rights and communicate their complaints (for example,

through the Scottish Independent Advocacy Alliance or Citizens Advice Scotland)

- providing a neutral point of contact for complaints.

3.3 How complaints may be made

Complaints may be made verbally or in writing, including face-to-face, by phone, video conference, letter or email.

We will encourage complainants to email us, however there is no requirement for complaints to be made in writing. Where a complaint is made verbally, we will record the key points of the complaint raised.

The communications team is responsible for monitoring and operating all Care Inspectorate social media accounts. People may try to raise complaint issues on our social media accounts. Where this happens and depending on the nature of the message, the communications team will consider if it is appropriate to respond and may inform the complainant that we cannot take complaints through social media and signpost them to our website's complaints tab.

An issue may be raised on other social media accounts. It is not appropriate for the Care Inspectorate to insert itself into discourse on social media accounts not owned by us and this is not part of our procedure.

3.4 Time limits for making complaints

Complainants must raise their complaint within six months of when they first become aware of their concern, unless there are special circumstances for considering complaints beyond this time.

Where a complainant wishes to escalate to stage 2, following the stage 1 response, they must request this either:

- within six months of when they first become aware of their concern or
- within two months of receiving their stage 1 response (if this is later).

These time limits will be applied with discretion, taking into account the following:

- the seriousness of the issue
- the availability of relevant records and staff involved
- the time passed since the events occurred
- the likelihood that any investigation will lead to a practical benefit for the person making the complaint or useful learning for the organisation will also be considered
- the time limit within which the complainant can ask the SPSO to independently review how we have handled a complaint (normally one year). The SPSO has discretion to waive this time limit in special circumstances (and may consider doing so in cases where we have waived our own time limit).

4. Roles and responsibilities for managing complaints about the Care Inspectorate

We are committed to ensuring that all staff are aware of:

- the policy, procedure and guidance for complaints about the Care Inspectorate
- how to handle and record complaints at the frontline response stage
- who they can refer a complaint to, for example if they are unable to handle the matter themselves
- the need to try and resolve complaints early and as close to the point of service delivery as possible
- their clear authority to attempt to resolve any complaints they may be called upon to deal with.

Training on the policy and procedure will be part of the induction process for all new staff. Refresher training will be provided for current staff on a regular basis.

4.1 Executive team

The executive team (chief executive and executive directors) provide leadership, direction and guidance to enable our work to be effective and efficient in all we do. This includes ensuring effective processes are in place for managing, investigating and learning from complaints about us.

4.2 Senior managers

Senior managers (heads of service and chief inspectors) are responsible for:

- playing an active role and understanding the policy and procedure for complaints about the Care Inspectorate
- using complaints information to support improvement
- overseeing the actions required as a result of complaints.

4.3 Professional standards and practice

To support independent management of complaints about the Care Inspectorate, the professional standards and practice team has been established. It is responsible for:

- managing complaints about the Care Inspectorate
- ensuring all staff receive training on the policy and procedure for complaints about the Care Inspectorate
- allocating and supporting complaints investigators to complete investigations, prepare investigation reports and identify wider opportunities for learning
- carrying out investigations when required

- ensuring complaint investigations are signed off in order to provide assurance that the complaint's concerns have been appropriately considered
- ensuring there are robust mechanisms in place to provide a consistent approach to the way complaints information is managed, monitored, reviewed and reported, this includes quality assurance processes.

4.4 Complaints investigators

A complaints investigator will be appointed for individual complaints that proceed to Stage 2, where frontline resolution is not possible or appropriate. While most complaints concern our scrutiny activities, this policy covers all aspects of the Care Inspectorate's work. To enhance the independence of the complaints process, complaints not requiring specialist knowledge are allocated to an investigator from a different business area. Complaints investigators are responsible and accountable for the management of the investigation.

5. Expected behaviours for all parties involved in complaints about the Care Inspectorate

Care Inspectorate staff are expected to behave in a professional manner and treat everyone with courtesy, respect and dignity. People raising a complaint about the Care Inspectorate are expected to treat our staff with respect and engage actively with our procedure by:

- explaining their complaint and sharing information they would like the Care Inspectorate to consider
- working with the professional standards and practice team to agree the key points of complaint when an investigation is required
- responding to reasonable requests for information.

We recognise that stressful situations can affect how a person expresses themselves. The distress a complainant has experienced may sometimes result in them acting in a way deemed unacceptable.

All complaints will be considered and treated seriously. However, we recognise that the actions of some complainants may result in unreasonable demands on time and resources or unacceptable behaviour towards our staff. In these situations, our Zero Tolerance Policy will be applied to protect staff from any unacceptable actions such as unreasonable persistence, threats or offensive behaviour.

6. Maintaining confidentiality and data protection

Confidentiality is important in complaints handling. This includes maintaining the confidentiality of complainants and information about staff members or any third parties involved in the complaint.

As far as possible, we are committed to being open and transparent in how we handle complaints. This includes sharing as much information with the complainant as we can and, where appropriate, with any affected staff members. When sharing information, we will be clear about why we are sharing it and our expectations of how the recipient will use the information.

We will address any legal requirements, for example data protection legislation, as well as our internal policies on information governance.

Examples of situations where a response to a complaint may be limited by confidentiality include, but are not limited to:

- where a complaint has been raised naming a staff member and has been upheld – the complainant will be advised that their complaint is upheld, but we will not share specific details affecting staff members, particularly where disciplinary action is taken, or
- where someone has raised a concern about a child or an adult's safety and is unhappy about how that has been dealt with – we will review whether the safety concern has been properly dealt with and confirm the outcome of this check, but we will not share specific details about the child or adult whose safety is of concern.

7. Recording, reporting and learning from complaints about the Care Inspectorate

Complaints provide valuable feedback to support our work. One of the aims of our policy and procedure for managing complaints about the Care Inspectorate is to identify opportunities to improve. By recording and analysing complaints data, we can identify and address the causes of complaints, identify training opportunities and make improvements.

7.1 Recording complaints data

Our policy and procedure for managing complaints about the Care Inspectorate ensure we record all the data required to fully investigate and respond to a complaint, and are able to use complaint information to identify themes and trends.

As a minimum, the following information will be recorded:

- customer's name and contact details
- date the complaint was received

- nature of the complaint
- the service the complaint refers to
- staff member responsible for handling the complaint
- action taken and outcome at frontline response stage
- date the complaint was closed at the frontline response stage
- date the stage 2 investigation was initiated (if applicable)
- date the complaint was closed at conclusion of stage 2 (if applicable)
- the underlying cause of the complaint and any remedial action taken
- referral to the SPSO (if applicable)
- outcome of the SPSO's investigation (if applicable).

The complainant may not wish to provide any of this information. In this situation the complaint will be managed appropriately through the complaints process and information that is available will be recorded.

Individual complaint files will be stored in line with our document retention policy.

7.2 Reporting and learning from complaints about the Care Inspectorate

Our process for the internal reporting of complaints information, including analysis of complaints trends, helps to inform our senior managers of where services need to improve.

Quarterly and annual reports are provided to the strategic management group on:

- performance statistics in line with the complaints performance indicators published by the SPSO
- analysis of trends and actions taken to support improvement.

The annual report is also submitted to our board in May of each year.

We are committed to ensuring we have clear systems in place to identify and act on learning from complaints. To support this, we:

- identify the root cause of complaints where possible
- take action to reduce the risk of recurrence by making improvements
- systematically review complaints activity through a robust reporting structure to support improvement.

Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data.

Each quarter, the professional standards and practice team compiles a summary of potential learning themes based on analysis of complaints data and shares it with each directorate's management team and the executive team.

The strategic management group and the directorate management teams review the quarterly complaints reports to ensure any trends or wider issues, which may not be obvious from individual complaints, are quickly identified and addressed. Where the need for service improvement is identified, directorate management teams take appropriate action and monitor performance in the relevant service area to ensure the issue has been resolved.

Directorate management teams provide an annual update of progress against confirmed actions with the professional standards and practice team. This information is included in the annual complaints performance report.

7.3 Publicising complaints information

The Care Inspectorate publishes information on complaints outcomes and actions taken to improve services.

This demonstrates the improvements resulting from complaints and shows that complaints can help to improve our services. It also helps ensure transparency in how we manage complaints and evidences our commitment to valuing and acting on complaints.

We publish an annual complaints performance report on our website every May, in line with SPSO requirements.

8. Related policies

This policy should be read in conjunction with the following:

- Procedure for Complaints about the Care Inspectorate (internal or external versions)
- Guidance for Staff on Supporting our Complaints Handling Procedure
- SPSO Statement of Complaints Handling Principles and good practice guidance on complaints handling from the [SPSO](#).

9. Policy review

This policy is reviewed every three years. Where there is a need to respond to changes in legislation/policy guidance, additional reviews will be considered.

Reviews will consider legislative, performance standard and good practice changes.

10. Equality and diversity statement

This policy complies fully with our equality and diversity policy and the Public Sector Equality Duty under the Equality Act 2010. We recognise our proactive role in valuing and promoting diversity, fairness, social justice and equality of opportunity by adapting and promoting fair policies and procedures.

We are committed to providing fair and equal treatment for all our stakeholders and will not discriminate against anyone on the grounds of race, colour, ethnic or national origin, language, religion, belief, age, sex, sexual orientation, gender realignment, disability, marital status, pregnancy or maternity. We will endeavour to achieve fair outcomes for all.

We carry out equality impact assessments when we review our policies. We check policies and associated procedures regularly for their equal opportunity implications. We take appropriate action to address inequalities that result or are likely to result from our implementation of the policy and procedures.

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