



Integration Joint Board

29th November 2016

This Report relates to  
Item 6 on the Agenda

# Integrated Services Complaints Handling

*(Paper presented by Eddie Docherty)*

*For Approval*

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| <b>Approved for Submission by</b> | Eddie Docherty, Nursing, Midwifery and AHP Director                                   |
| <b>Author</b>                     | Emma Murphy, Patient Feedback Manager   |
| <b>List of Background Papers</b>  |   |
| <b>Appendices</b>                 | The Integrated Joint Complaints Handling Framework – An Update Report (17 March 2016) |

## SECTION 1: REPORT CONTENT

**Title/Subject:** Integrated Services Complaints Handling

**Meeting:** Integration Joint Board

**Date:** 29 November 2016

**Submitted By:** Emma Murphy

**Action:** For Approval

### 1. Introduction

- 1.1 This report provides an update to members on the joint complaints handling approach being developed between Dumfries and Galloway Council and NHS Dumfries and Galloway to deal with complaints about integrated services.

### 2. Recommendations

- 2.1 **The Integration Joint Board is asked to note the contents of this report.**

### 3. Background

- 3.1 Section 11 of the Integration Scheme between NHS Dumfries and Galloway and Dumfries and Galloway Council *'...sets out how the Parties will work jointly to achieve an integrated approach to handling complaints about any integrated health and social care service from service users, patients, carers and any other authorised representatives.'*
- 3.2 The Scheme requires that a *'...properly developed framework will be published, showing clearly the lead Party for each integrated service and the contact details for those who will be responsible for progressing any complaints received.'*
- 3.3 NHS Dumfries and Galloway has been working closely with colleagues from Dumfries and Galloway Council to develop an appropriate framework for managing complaints about integrated services.
- 3.4 A report from Dumfries and Galloway Council's Information Management and Complaints Manager was laid before this Board on 17 March 2016 providing an update on progress and an outline of the proposed framework (Appendix 1).

### 4. Main Body of the Report

- 4.1 NHS Dumfries and Galloway and Dumfries and Galloway Council met on 5 July 2016 to further discuss joint complaints handling and to progress the draft framework.

- 4.2 The meeting considered the updated draft process flow and screening tool designed to support the framework.
- 4.3 The meeting recognised that NHS Dumfries and Galloway were in the process of reviewing and updating their Complaints Handling procedure and that this required to be finalised to assist the planned joint work.
- 4.4 The meeting identified the importance of staff commitment and buy in and explored potential opportunities for joint working around training and awareness raising.
- 4.5 In October 2016, NHS Dumfries and Galloway received correspondence from the Scottish Government confirming that the new NHS Scotland Model Complaints Handling Procedure (MCHP) had been finalised and that it must be implemented by 1 April 2017.
- 4.6 The new MCHP will bring NHS Dumfries and Galloway's Complaints Handling Procedure in line with Dumfries and Galloway Council's and will greatly assist joint complaints handling moving forward.
- 4.7 NHS Dumfries and Galloway are in the process of implementing the MCHP under the guidance of the newly appointed Patient Feedback Manager.
- 4.8 The Patient Feedback Manager previously worked for Dumfries and Galloway Council as the Senior Corporate Complaints Officer and has a sound understanding of the Complaints Handling Procedures of both organisations.
- 4.9 The Patient Feedback Manager has an established relationship with the Council's Information Management and Complaints Unit as well as with key Social Work Services staff. This will assist future joint working on complaints.
- 4.10 The Patient Services Team and in the process of coordinating a further meeting with Dumfries and Galloway Council in order to finalise the complaints handling framework and associated documents.
- 4.11 The next meeting will also seek to further progress a joint approach to training and awareness raising.
- 4.12 It is intended for the meeting to take place before the end of this year.
- 4.13 Following the meeting, a further report will be brought to the Integrated Joint Board to confirm the final framework accordingly

## **SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS**

### **5. Resource Implications**

- 5.1 The paper of 17th March 2016 highlighted potential resource implications, including in relation to the delivery of training and awareness raising activities.
- 5.2 Resourcing of the Patient Services Team is currently under consideration in response to the increased statutory duties resulting from the new Model Complaints Handling Procedure, of which, the above is also a consideration.

### **6. Impact on Integration Joint Board Outcomes, Priorities and Policy**

- 6.1. As 3.1 above, Section 11 of the Integration Scheme between NHS Dumfries and Galloway and Dumfries and Galloway Council details the expected protocol for managing joint complaints.
- 6.2. The effective and efficient handling of joint complaints also links to the following National Health and Wellbeing Outcomes:

**Outcome 3.** People who use health and social care services have positive experiences of those services, and have their dignity respected

**Outcome 7.** People using health and social care services are safe from harm

**Outcome 8.** People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide

**Outcome 9.** Resources are used effectively and efficiently in the provision of health and social care services

### **7. Legal & Risk Implications**

- 7.1. There are statutory duties placed on Local Authorities and NHS Boards in relation to complaints handling and the associated procedures.

### **8. Consultation**

- 8.1. The Associate Director of Allied Health Professions and the Director of Nursing, Midwifery and Allied Health Professions were consulted on this update paper.

### **9. Equality and Human Rights Impact Assessment**

- 9.1. As this report does not propose a change in policy or strategy, it is not necessary to complete an Impact Assessment.

### The Integrated Joint Complaints Handling Framework – An Update Report

#### 1. Purpose of Report

This report provides information on the proposals for the Integrated Joint Complaints Handling Framework.

#### 2. Recommendations

Board Members are asked to consider the development of the draft Integrated Joint Complaints Handling Framework.

#### 3. Considerations

3.1 As a requirement under the Public Bodies (Joint Working) (Scotland) Act 2014, NHS Dumfries and Galloway (NHS D&G) and Dumfries and Galloway Council (DGC), have agreed to adopt the 'body corporate' model and create a partnership in the form of the Integration Joint Board (IJB).

The IJB will plan and commission services which the local Health Board and the Council's Social Work Services will then deliver; in effect, this means that both agencies will remain responsible for the delivery of adult health and social care services, and any complaints about the delivery of services that have been integrated will be dealt with through the existing requirements under the respective statutory complaints procedures for health and social care services.

The context of delivering to patients, service users, their carers and authorised representatives, a complaints service which gives them a single point of contact to make their complaints, a co-ordinated single response to the complaint, irrespective of which agency it refers to, where and to whom they made the complaint, is already set out in 'Protocol' within the local Integration Scheme agreement; this requires both Parties to work jointly to achieve an integrated approach to handling complaints about any of the services integrated.

At 1 April 2016, it is highly likely that there will be no implementation of major changes anticipated in the current statutory regulations for complaints handling, including the role of the Scottish Public Services Ombudsman (SPSO), although the local framework developed to handle complaints received is unlikely to require changes in the founding principles, they will rather be focussed on the procedural steps involved. In any event, the IJB needs to recognise the importance of ensuring that complaints are joined up from the perspective of the complainant, and to that extent, joint discussions have been on-going with a view to agree arrangements for managing complaints that relate to the delivery of services that are within the scope of the Integration Scheme, with effect from 1 April 2016.

3.2 The development of the complaints handling framework is referenced at **Section 11**, within the document titled '**Integration Scheme between NHS Dumfries and Galloway and Dumfries and Galloway Council**', which also outlines details of the Protocol agreed by both Parties.

It will be important for managers and staff to be familiar with the scope of adult health and social care service that are integrated. Attached to the Scheme, under **Annex 1** and **Parts 1** and **2**, is a list of **Functions** and **Services**, respectively, which have been delegated by NHS D&G to the IJB. **Annex 2** and **Parts 1** and **2** contain the respective **Functions** and **Services**, respectively, delegated by DGC to the IJB.

Issues that have emerged during joint discussions requiring top level support from the IJB include the following:

- commitment to the right of service users, patients, their carers and authorised representatives to make complaints and to the principles of effective complaints handling within an integrated approach, which delivers a single response to complaints about integrated services
- re-enforcing the need for a well-defined and resourced structure in relation to the respective Complaints Team in both agencies (see below):

**NHSD&G:** Patient Feedback and Complaints Co-ordinator

**DGC:** Social Work Quality Improvement Team and the corporate Council's Information Management and Complaints Unit

- Clarifying and confirming the roles, delegations, responsibilities, authority and accountability on the part of key players involved with complaints handling (as below):

**NHSD&G (PCCD):** Chief Executive, Chief Officer of the IJB, General Manager, Locality Managers and Heads of Service/Lead Nurses

**DGC:** Chief Executive, Chief Social Work Officer of the Council, Head of Adult Social Work Services, Locality Managers, Senior Social workers

### **3.3 Complaints Handling Framework (Integrated Services) – a brief outline**

#### **Principles**

The provision of health and social care services can be an increasingly complex arrangement which requires effective interagency responsibility. For individuals who wish to make a complaint about these services, they should not have to navigate through such complex systems and processes to make their complaints. Integrated services will therefore work jointly to ensure that, where complaints involve services provided by more than one agency, they are dealt with seamlessly, promptly and clearly through a single co-ordinated process which results in a single response being issued in response to the complaint. Such co-ordination will require:

- Openness and co-operation between agencies at each stage of the process
- A designated lead and contact for the complainant
- Clarity about the way in which each issue will be addressed
- A single response and
- Shared learning

#### **Process**

*Receiving the complaint (any point of contact)*

- Complaint can be made verbally/in person or in writing. Frontline staff must be aware that they can take issues relating to other organisations and that representatives should not be asked to make complaints in another form or at another place.
- Any complaint involving more than one agency should be passed to the designated Complaints Team
- The 'complaints manager' will be responsible to co-ordinate arrangements along with their counterpart in the other agency, subject to an appropriate mandate or consent being available for information sharing and, particularly so, where an advocate or authorised representative is making the complaint on behalf of the service user or patient (a Consent Form has been developed)

### *Establishing the Lead Agency*

The receiving agency will establish the lead agency for the complaint, which will be defined as per the criteria (See below):

- Is responsible for an integrated service
- Has responsibility for the majority of issues in the complaint
- Is accountable for the most significant issues
- The representative has asked to be the lead
- Receives the complaint, should the issues be evenly divided
- Is determined by the respective complaints managers

*Complaint Screening* (A Complaint Screening Tool (guidance and form) has been developed)

The Lead agency will be responsible to co-ordinate with the other agency the process for assessing the initial potential impact/risk raised by issues in the complaint, but each agency will be accountable for the grading of issues relating to its own services. Further details on the operation of the Screening Tool will be part of awareness and training sessions to staff.

*Individual Complaint Action Plan* (An Individual Complaint Action Plan (ICAP) has been developed)

- This will be drawn up to ensure clarity about the process for addressing the issues raised in the complaint. It will:
  - Set out each element of the complaint
  - State how each element will be addressed and by whom (if a first line, first help, and Frontline problem resolution is to be achieved and who will be involved with the complainant) or if an appropriate investigation is to be conducted and by whom
  - Establish the timescales involved
  - Any need to extend the timelines for an investigation must be by prior consent with the complainant and the Responsible Manager (who will respond to the complaint)
  - Record the preference for method of contact with the complainant or representative
  - Agree advocacy arrangements where appropriate
  - Establish the relevant consents (sought only once and applicable to all organisations involved- A Consent Form has been developed)

- Investigation Officers will complete an investigation report, which is supported by appropriate guidance (An Investigation Report Template and Guidance has been developed)
- Investigation Officers will conclude their findings on the basis of facts and evidence on the civil law of the 'balance of probabilities' and not the criminal law of 'beyond reasonable doubt'
- Investigation Officers will deliver their reports to the Responsible Manager for the complaint for their considerations and adjudications
- Reports will not be issued to complainants with the response, as they are for the purpose of an auditable trail
- Investigation Officers could provide suggestions on the outcomes of complaints to assist the Responsible Manager with their response to the complaint
- Clarifying who will provide the response and its sign off, on behalf of the agency to the investigation (this will not be the Investigation Officer's role)

### *Response*

- A single joint response is to be issued wherever there are joint responsibilities
- The response must be from a Responsible Manager for the investigation and/or someone other than the Investigation Officer, preferably for NHSD&G, a Locality Manager, as appropriate or the General Manager in some events, and for DGC, the Locality Manager and or the Head of Adult Social Work/Chief Social Work Officer (in some events)
- Where an adjudication meeting is required to conclude the response, this should always be done jointly for complaints involving more than one agency, but not in any way that prolong the response
- Joint responses must be signed off by respective managers authorised to do so by their agencies
- Response letters must include any apologies (as appropriate) and evidence of corrective actions to be taken as outcomes and remedies to the complaint and evidence of lessons learned from the complaint

### *Recording*

As the two Parties use different electronic complaints management systems, it will be important that all activities relating to all complaints. The respective Complaints Teams must ensure, however, that recording is:

- Continuous
- Clear
- Accurate
- Relevant
- Not duplicated (to avoid double counting)

### *Reporting*

The monitoring of complaints activity will support arrangements for the analysis and reporting of statistical performance data via joint meetings. The preparation for presentations to the IJB and

the Council's Audit and Risk Committee or the Social Work Services Committee, will be as per an agreed schedule.

3.4 In the recent months, the Council's Information Management and Complaints Unit has taken the initiative to develop the necessary documentation, including the Model Agreement for Complaints Handling in the new integrated health and social care services, the Joint Protocol for complaints handling, the process and templates that will be required to implement an Integrated Joint Complaints Handling Procedure. In addition to the development highlighted in this report, the Unit is confident that the completed work, including a *Flow Chart* showing the Complaints Handling Process for staff and members of the general public, will be achieved before 1 April 2016, despite existing pressures on my staff time and resources.

I note the appreciative support that the NHS Patient Feedback and Complaints Co-ordinator alone has been able to offer, despite the fact that the involvement of more NHS staff would have been helpful to progress the development work. This raises a concern as to the ability of the NHS Complaints Team to properly support this new process, if current staffing capacity is not addressed as a matter of urgency, a matter, which I have already raised with the new Nurse Director at a meeting on 18 February 2016.

From my perspectives on the pace of developments in other authorities, I am satisfied that the work required will be completed in reasonable time, however, the issues that have emerged in the joint discussions must be of interest to the IJB to ensure that appropriate support is offered to the Complaints Team to confirm the following:

*Commitments and 'buy-in':*

- From the General Manager and/or Locality Managers, that they will fulfil the roles and responsibilities of 'Responsible Managers' in complaints and to provide responses to complainants
- From Heads of services/Lead Nurses, that they will accept to act as 'Investigation Officers' to investigate single agency or joint-agency complaints, as appropriate

*Training*

How can a programme of joint training be resourced for NHS and Council staff?

*Publicity and promotion*

How a level of publicity and promotion internally and externally within the NHS and Council will be resourced and programmed?

*Launch*

Planning and preparation for a formal launch in due course.

#### **4. Governance Assurance**

The Council's Information Management and Complaint's Manager; Executive Nurse Director for NHS Dumfries and Galloway and the Council's Social Work Manager have been consulted and are in agreement with this report.

## **5. Impact Assessment**

As this report does not propose a change in policy/strategy/plan/project, it is not necessary to complete an Impact Assessment.