



Item No: 17

Meeting Date: Wednesday 8th November 2017

Glasgow City Integration Joint Board

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GLASGOW CITY INTEGRATION JOINT BOARD COMPLAINTS HANDLING PROCEDURE

Purpose of Report:	To present for approval a complaints handling procedure to deal with complaints about the decisions and activities of the Integration Joint Board.
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Background/Engagement:	This procedure is based on a model determined by the Scottish Public Services Ombudsman Complaints Standards Authority and must be approved by them as well as by Glasgow City Integration Joint Board.
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Recommendations:	The Integration Joint Board is asked to: a) approve the procedure for immediate implementation subject to further approval by Complaints Standards Authority; b) agree that any minor changes to the procedure recommended by the Complaints Standards Authority may be incorporated into the procedure with the approval of the Chief Officer; and c) agree that the approved procedure may be published on the Website of Glasgow City Health and Social Care Partnership with appropriate summary information referring to the procedure for members of the public.
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Relevance to Integration Joint Board Strategic Plan:

Page 23 – Stakeholder Engagement Page – Legal status of the Integration Joint Board (a complaints process is a mandatory requirement of being such a Scottish Public body)

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	None	
Personnel:	None	
Carers:	None	
Provider Organisations:	None	
Equalities:	The procedure is compliant with and references equalities responsibilities.	
Financial:	None	
Legal:	Legal requirement to implement the procedure - Section 16B of the Scottish Public Services Ombudsman Act 2002 as amended by section 119 of the Public Service Reform (Scotland) Act 2010.	
Economic Impact:	None	
Sustainability:	None	
Sustainable Procurement and Article 19:	None	
Risk Implications:	Reputational risk if not implemented as per legal requirements.	
Implications for Glasgow City Council:	None	
Implications for NHS Greater Glasgow & Clyde:	None	
Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	✓
	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	

1. Purpose

- 1.1 To present a complaints handling procedure to deal with complaints about the decisions and activities of the Integration Joint Board.
- 1.2 To seek approval to implement and publicise this process subject to further approval by the Complaints Standards Authority of The Scottish Public Services Ombudsman.

2. Background

- 2.1. The Complaints Standards Authority of The Scottish Public Services Ombudsman's office has set a model complaints handling procedure for implementation by all Integration Joint Boards covering complaints concerning the decisions, actions and administration of those bodies.
- 2.2 The Complaints Standards Authority is empowered to direct such procedures under legislative powers granted by Section 16B of the Scottish Public Services Ombudsman Act 2002 as amended by section 119 of the Public Service Reform (Scotland) Act 2010. Compliance is mandatory.
- 2.3 The model has some scope to tailor specific arrangements to suit local circumstances but the general process, timescales and principles of complaints handling are determined by the Complaints Standards Authority and may not be significantly altered.
- 2.4 If approved by The Integration Joint Board then this will require final ratification / approval by the Complaints Standards Authority.
- 2.5 A version of the procedure has been developed and is presented alongside this report. The main sections that have been adapted to local circumstances are as follows:
 - 2.5.1 Page 2: A list of what is not a complaint under procedures has been significantly expanded.
 - 2.5.2 Pages 11-13: The roles, responsibilities and governance have been adapted to local structures and roles. Complaints about the personal conduct of Integration Board members have been specifically excluded by cross-referencing with other processes and regulation under codes of conduct procedures.
 - 2.5.3 Page 14: it is suggested that reporting of such complaints, whose anticipated incidence is low, should be as part of the existing arrangements for reporting on social work and health complaints activity instead of the separate quarterly and annual reports envisioned by the complaints standards authority.
- 2.6 This procedure replaces a draft procedure currently on the website pages for Glasgow City Integration Joint Board. This has been in place since May 2016: https://glasgowcity.hscp.scot/sites/default/files/publications/IJB_Meeting_20160510_Item_8_Joint_Board_Complaints_Handling_Procedure.pdf

2.7 That procedure is 39 pages long whereas the current proposed procedure is 22 pages long. The length is largely to accommodate mandatory requirements of the standard imposed model. There have however been no complaints received under the above procedure since its inception. It is not anticipated that many complaints will be received under these procedures in future. Where complaints relate to service delivery and day to day management of service and case management decisions, these will continue to be handled under the relevant health or social care complaints procedure.

3. Recommendations

3.1 The Integration Joint Board is asked to:

- a) approve the procedure for immediate implementation subject to further approval by Complaints Standards Authority;
- b) agree that any minor changes to the procedure recommended by the Complaints Standards Authority may be incorporated into the procedure with the approval of the Chief Officer; and
- c) agree that the approved procedure may be published on the Website of Glasgow City Health and Social Care Partnership with appropriate summary information referring to the procedure for members of the public.



Glasgow City Integration Joint Board Complaints Handling Procedure

November 2017

(Replaces Draft Procedure issued May 2016)



Glasgow city Integration Joint Board Complaints Handling Procedure

Foreword

The Integration Joint Board is required to have its own complaints handling procedure (separate to those of the local authorities' social work service and NHS procedures) to cover its own activities and the decisions that it makes. This procedure has been developed from a Model Complaint Handling Procedure for Integration Joint Boards issued by the Complaints Standards Authority of the Scottish Public Services Ombudsman in 2017.

Our complaints handling procedure reflects the Integration Joint Board's commitment to valuing complaints. It seeks to resolve customer dissatisfaction both as thoroughly and as quickly as possible and to ensure that any complaints received about the Integration Joint Board in particular are considered in an objective, fair, rigorous and evidence-based manner. In following a standardised model developed by the Ombudsman, our customers can be assured that we are pursuing those aims in line with recognised best practice.

Complaints raised directly with or about the Integration Joint Board will be about the organisation and administration of the Integration Joint Board, the strategic decisions that it makes and the measures it implements to achieve strategic objectives. Complaints about front-line services and the functions that support these will continue to be dealt with under the relevant health or social work complaints procedure. The Integration Joint Board will continue to receive regular reports on that activity.

Whatever the subject matter, all complaints give valuable information that can be used to improve public satisfaction with our services, ensuring a proper and transparent explanation of the work that we do and how we strive to improve. This supports our vision of transforming health and social care services in Glasgow for better, healthier, lives and stronger communities, enabling the City's people to flourish with access to health and social care support when they need it.

Our complaints handling procedures, including this one, will work in a cohesive and comprehensive manner to enable us to address any and all concerns expressed to us about the work that we do, preventing problems and issues recurring. Handled well, complaints can both offer individual customers redress when things go wrong and also help us continuously improve our services.

All staff across the Health and Social Care Partnership should be familiar with this complaints procedure and those applying to health and social care service delivery so we can appropriately route complaints for investigation and resolution.

David Williams
Chief Officer
Glasgow City Health & Social Care Partnership

Heading	Page
What is a complaint?	2
Handling anonymous complaints	3
What if the customer does not want to complain?	3
Who can make a complaint?	3
Complaints involving GCIJB and GCHSCP or another statutory body	3
The complaints handling process	4
Stage one: frontline resolution	5
What to do when you receive a complaint	6
Timelines	7
Extension to the timeline	7
Closing the complaint at the frontline resolution stage	8
When to escalate to the investigation stage	8
Stage two: investigation	8
What we will do when we receive a complaint for investigation	9
Timelines	9
Extension to the timeline	9
Mediation	10
Closing the complaint at the investigation stage	10
Independent external review	10
Governance of the Complaints Handling Procedure	11
Roles and responsibilities	11
Complaints about senior staff / members of GCIJB	13
Recording, reporting, learning and publicising	13
Recording complaints	13
Reporting of complaints	14
Learning from complaints	14
Maintaining confidentiality	15
Managing unacceptable behaviour	15
Supporting the complainant	15
Time limit for making complaints	15
Appendix 1 - Timelines	17
Appendix 2 - The complaints handling procedure	20

What is a complaint?

Glasgow City Integration Joint Board's (GCIJB) definition of a complaint within the terms of this procedure is:

'An expression of dissatisfaction by one or more members of the public about Glasgow City Integration Joint Board's action or lack of action, or about the standard of service Glasgow City Integration Joint Board has provided in fulfilling its responsibilities as set out in the Integration Scheme'.

The integration scheme is as set out at:

https://glasgowcity.hscp.scot/sites/default/files/publications/Integration_Scheme_-_Glasgow_City.pdf

Issues that are not covered by this definition are likely to be covered by other complaints handling procedures relating to either health or social work services.

A complaint may relate to dissatisfaction with:

- Glasgow City Integration Joint Board's policies
- Glasgow City Integration Joint Board's decisions
- Measures and systems put in place by Glasgow City Integration Joint Board to ensure the delivery of functions delegated to it.
- The administrative or decision-making processes followed by Glasgow City Integration Joint Board in coming to a decision

This list is not exhaustive but describes the main areas likely to give rise to complaint. Other issues raised as complaints will be considered on a case-by-case basis in terms of whether they fall within the definition given above and are not excluded by virtue of the list set out below.

A complaint in terms of this procedure is **not**:

- a complaint about the delivery of health and social care services by staff employed by the partner agencies of the Glasgow City Health and Social Care Partnership
- a request made to Glasgow City Integration Joint Board for it to take action
- enquiries seeking an explanation of Glasgow City Integration Joint Board processes or decisions, including enquires and other representations made by elected representatives on behalf of constituents
- disagreement with Glasgow City Integration Joint Board decisions or proposed decisions expressed solely within the context of a consultation or public engagement exercise (a person may however express disagreement within such an exercise and also separately make a complaint about the matter)
- issues raised by staff of the partner agencies about their employment
- a complaint about the personal conduct of any member of Glasgow City Integration Joint Board
- a request for compensation
- issues that are in court or have already been heard by a court or a tribunal
- disagreement with a decision where a statutory right of appeal exists
- an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision

We will not treat these issues as complaints, but will instead direct the customer raising them to use the appropriate procedures.

Handling anonymous complaints

We value all complaints and treat all complaints, including anonymous complaints, seriously. We will take action to consider these further, where appropriate. Generally, we will consider anonymous complaints if there is enough information in the complaint to enable us to make further enquiries. If, however, an anonymous complaint does not provide enough information to enable us to take further action, we may decide not to pursue it further. Any decision not to pursue an anonymous complaint about GCIJB under these procedures must be authorised by the Chief Officer, or Chief Officer Strategy and Operations, or Chief Officer Finance and Resources.

If an anonymous complaint makes serious allegations, it will be considered under these procedures and investigated by a relevant senior officer reporting to the Chief Officer.

If we pursue an anonymous complaint further, we will record the issues as an anonymous complaint on the complaints log. This will help to ensure the completeness of the complaints data we record and allow us to take corrective action where appropriate.

What if the customer does not want to complain?

If a customer has expressed dissatisfaction about GCIJB in line with our definition of a complaint but does not want to complain, they will be advised that we do consider all expressions of dissatisfaction and that complaints offer us the opportunity to improve services where things have gone wrong. They will be encouraged submit their complaint formally and allow us to deal with it through this complaints handling procedure. This will ensure that they are updated on the action taken and receive a response to their complaint.

If, however, the customer insists they do not wish to complain, we will record the issue as an anonymous complaint. This will ensure that their details are not recorded on the complaints database and that they receive no further contact about the matter. It will also help to ensure the completeness of the complaints data recorded and will still allow us to fully consider the matter and take corrective action where appropriate.

Who can make a complaint?

Anyone who is affected by the decisions made by GCIJB can make a complaint. This is not restricted to people who receive services of Glasgow City Health and Social Care Partnership (GCHSCP) under the direction of GCIJB, their relatives or representatives, but would usually be such a person. Those indirectly affected by decisions of GCIJB who are not recipients of GCHSCP services may also complain under these procedures.

Sometimes a customer may be unable or reluctant to make a complaint on their own. We will accept complaints brought by third parties as long as the customer has given their personal consent.

Complaints involving both GCIJB and GCHSCP or GCIJB and another statutory body

A complaint may relate to a decision that has been made by the GCIJB or an administrative process of GCIJB as well as a health or social care service or activity provided by GCHSCP. Initially, these complaints will all be handled in the same way. They will be logged as a complaint, and the content of the complaint will be considered by complaints staff within GCHSCP to identify which bodies and services are involved and which parts of the complaint are appropriate for GCHSCP to respond to under what procedures. A decision will be taken as to who will investigate each element of the complaint so that all parties are clear about this decision. The final response will be a joint response, taking into account the input of all those involved.

Where a complaint relates to a decision made jointly by GCIJB and the NHS Greater Glasgow and Clyde or Glasgow City Council or another statutory body, or relates to functions or decisions of GCIJB as well as services delivered by GCHSCP then the elements relating to GCIJB will be handled under the terms of this procedure. This means, for example, that the whole of any formal response issued must be authorised by either the Chief Officer, Chief Officer Strategy and Operations or Chief Officer Finance and Resources.

A single response addressing all of the points raised will be issued.

If a customer complains to GCIJB about services of another statutory body, agency or public service provider, but GCIJB has no involvement in the issue, they will be advised to contact the appropriate organisation directly. Due regard will be made to data protection legislation and SPSO guidance on handling our customer's personal information. The customer will be directed to resubmit their complaint to the other body – complaints will not be transferred to the other body by GCHSCP staff. If there is any requirement for GCHSCP staff to liaise with the other body then that will be done in compliance with relevant data protection guidelines and in a manner consistent with the professional duty of confidentiality.

The complaints handling process

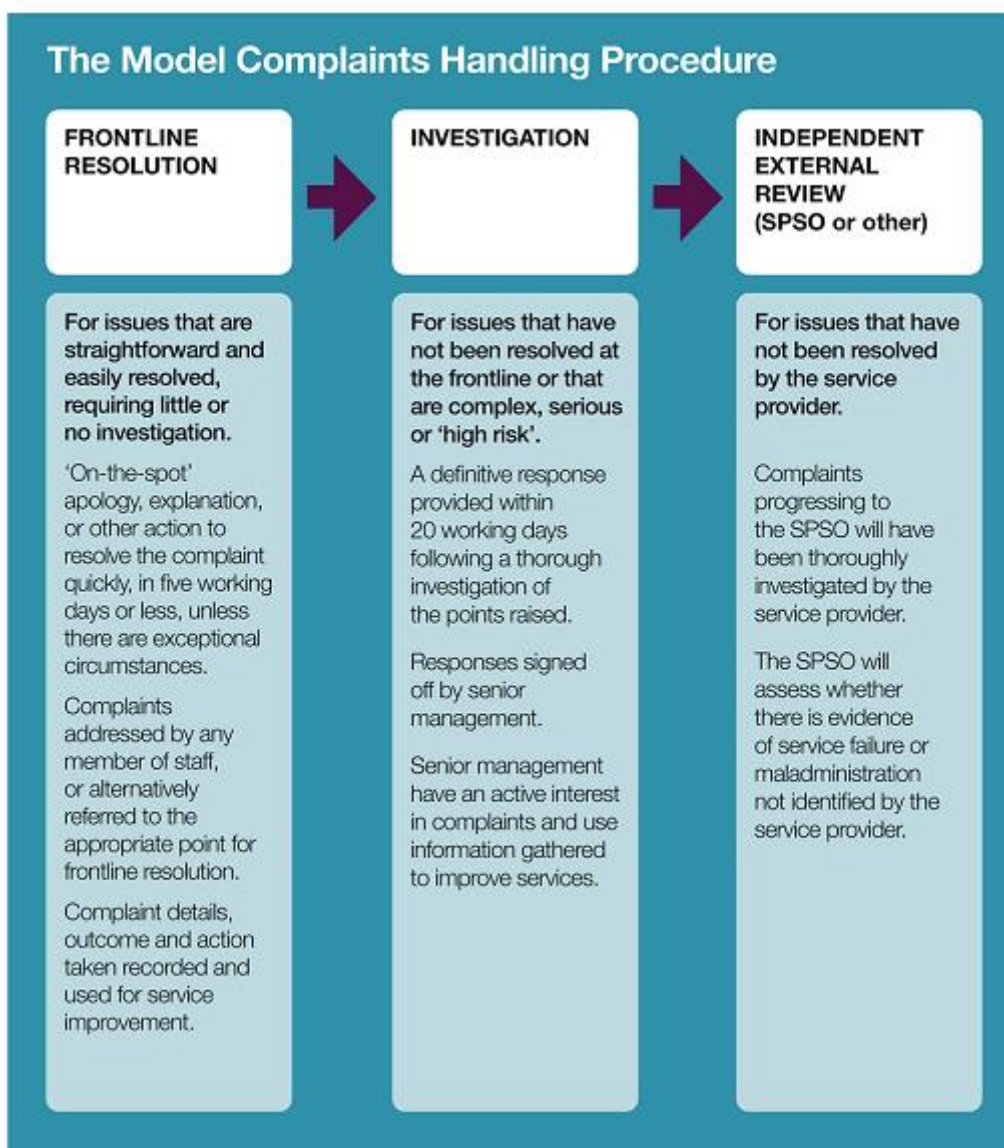
The Complaints Handling Procedure aims to provide a quick, simple and streamlined process for resolving complaints early and locally by capable, well-trained staff.

Our complaints process provides two opportunities to resolve complaints internally:

- **frontline resolution**, and
- **investigation**.

For clarity, the term 'frontline resolution' refers to the first stage of the complaints process. It does not reflect any job description within GCHSCP or GCIJB but rather means seeking to resolve complaints at the initial point of contact where possible.

The diagram on the following page displays the general model of public sector complaints handling procedures set by the Complaints Standards Authority. This model applies to these current GCIJB complaints procedures as well as the process for handling Health and Social Work complaints under two separate procedures.



Stage one: frontline resolution

Should a member of staff within GCHSCP receive a complaint that relates to GCIJB, and they have the relevant and appropriate information to resolve it, they should attempt to do so. If the staff member feels unable to offer a response however then the complaint should be passed to the Rights and Enquiries Team of GCHSCP as early as possible.

Frontline resolution aims to quickly resolve straightforward customer complaints that require little or no investigation. Any member of staff may deal with complaints at this stage; if the member of staff receiving the complaint is not able to provide a response, then it should be referred on to a more appropriate member of staff.

The main principle is to seek early resolution, resolving complaints at the earliest opportunity. This may mean a face-to-face discussion.

Whoever responds to the complaint, it may be settled by providing an on-the-spot apology where appropriate, or explaining why the issue occurred and, where possible, what will be done to stop this happening again. They may also explain that, as an organisation that values complaints, we may use the information given when we review policies and processes in the future.

It is not suggested that front-line staff can or should apologise for strategic decisions made by GCIJB, for the processes employed in reaching those decisions or the measures put in place by GCIJB to implement strategic decisions.

There may however be instances where complaints arise because the customer does not correctly understand the role of GCIJB, the nature or effect of its decisions on local services or has not been provided with adequate explanations or communications to enable them to understand such issues. In those circumstances staff should feel empowered to provide the customer with correct explanations as to the nature and effect of decisions and the role of GCIJB. They may apologise for any shortfall in information and communication around these issues and feedback the customer's concerns.

A customer can make a complaint in writing, in person, by telephone, by email or online, or by having someone complain on their behalf. Frontline resolution will always be considered, regardless of how the complaint has been received.

If a member of front-line staff does receive and resolve a complaint about GCIJB that falls within the terms of this procedure then this should be reported to the Rights and Enquiries team based at Commonwealth House in order that it can be recorded and later reported to GCIJB itself.

If a member of front-line staff receives a complaint about GCIJB that they are unsure falls within procedure or do not feel able to respond to or resolve then these should also be reported to the Rights and Enquiries team based at Commonwealth House in order that a decision can be taken as to whether the complaint falls within these procedures and requires to be escalated for formal investigation and response under stage 2 of these procedures

What we will do when we receive a complaint

- 1 On receiving a complaint, GCHSCP staff will first decide whether the issue can indeed be defined as a complaint. The customer may express dissatisfaction about more than one issue. This may mean we treat one element as a complaint, while directing them to pursue another element through an alternative route.
- 2 If GCHSCP staff have received an expression of dissatisfaction and identified it as a complaint, they will pass details on to the Rights and Enquiries Team in order that they can record the details on the relevant complaints system. If advice is required from the Rights and Enquiries Team as to whether this constitutes a complaint, under what procedure and whether it needs to be escalated to the next stage then advice will be sought at this point.
- 3 Staff will determine whether or not the complaint is suitable for frontline resolution, seeking advice from their line managers and the Rights and Enquiries Team as appropriate. Some complaints will need to be fully investigated before we can give the complainant a suitable response. A senior officer within the Rights and Enquiries team will identify and escalate these complaints immediately to the investigation stage.
- 4 Where we consider frontline resolution to be appropriate, we will consider four key questions:
 - What exactly is the complaint (or complaints)?
 - What does the complainant want to achieve by complaining?
 - Can I achieve this, or explain why not?
 - If I cannot resolve this, who can help with frontline resolution?

What exactly is the complaint (or complaints)?

It is important to be clear about exactly what the customer is complaining about. Staff may need to ask the supplementary questions to get a full picture.

What does the complainant want to achieve by complaining?

At the outset, staff will seek to clarify the outcome the complainant wants. Of course, they may not be clear about this, so there may be a need to probe further to find out what they expect and whether they can be satisfied.

Can I achieve this, or explain why not?

If staff can achieve the expected outcome by providing an on-the-spot apology or explanation of matters then they will do so. If they cannot achieve this then they will explain the reason to the customer, for example that they are unable to fully explain the matter and must refer it to a more senior manager. If they consider an apology is suitable, they may wish to follow the SPSO's guidance on the subject, which can be found on the SPSO website.

The customer may expect more than we can provide. If their expectations appear to exceed what the organisation can reasonably provide, the officer will tell them as soon as possible in order to manage expectations about possible outcomes.

Decisions at this stage may be conveyed face to face or on the telephone or via e-mail. In those instances, staff are not required to write to the customer as well, although they may choose to do so. A full and accurate record of the decision reached must be kept, including the information provided to the customer.

If I can't resolve this, who can help with frontline resolution?

If the complaint raises issues which the staff member cannot respond to in full because, for example, it relates to an issue or area of service they are unfamiliar with, they may pass details of the complaint to more senior staff who do have that information and can seek to resolve the issue within the frontline resolution process.

Timelines

Frontline resolution must be completed within **five working days** of GCHSCP receiving the complaint, although in practice we would often expect to resolve the complaint much sooner.

Staff may need to get more information or seek advice to resolve the complaint at this stage. However, they will respond to the complainant within five working days, either resolving the matter or explaining that GCHSCP will investigate their complaint.

Extension to the timeline

In exceptional circumstances, where there are clear and justifiable reasons for doing so, senior management may agree an extension of no more than five working days with the complainant. This must only happen when an extension will make it more likely that the complaint will be resolved at the frontline resolution stage.

If, however, the issues are so complex that they cannot be resolved in five days, it will be appropriate to escalate the complaint straight to the investigation stage.

If the customer does not agree to an extension but it is unavoidable and reasonable, a senior manager can still decide upon an extension. In those circumstances, they will then tell the complainant about the delay and explain the reason for the decision to grant the extension.

Such extensions will not be the norm, though, and the timeline at the frontline resolution stage will be extended only rarely. All attempts to resolve the complaint at this stage will take no longer than **ten working days** from the date GCHSCP received the complaint.

Appendix 1 provides further information on timelines.

Closing the complaint at the frontline resolution stage

When staff have informed the customer of the outcome, they are not obliged to write to the customer, although they may choose to do so. The response to the complaint must address all areas that we are responsible for and must explain the reasons for our decision. Staff will keep a full and accurate record of the decision reached. The complaint will then be closed and the complaints system updated accordingly.

The number of complaints resolved at the frontline stage and proportion of complaints that exceed the five-day limit will be evident from reported statistics. These statistics will be presented to GCIJB on a quarterly basis where any relevant complaints are made under this procedure, otherwise a nil return will be advised to the Chief Officer GCHSCP for verbal report to GCIJB.

When to escalate to the investigation stage

GCHSCP will escalate a complaint about GCIJB to the investigation stage when:

- frontline resolution has been attempted but the customer remains dissatisfied and requests an investigation. This may happen immediately when the decision at the frontline stage is communicated, or some time later
- the customer refuses to take part in frontline resolution
- the issues raised are complex and require detailed investigation
- the complaint relates to serious, high-risk or high-profile issues.
- the complaint is questioning a decision of GCIJB and cannot be resolved simply by correcting misinformation or lack of information about that decision

When a previously closed complaint is escalated from the frontline resolution stage, the complaint will be reopened on the complaints log.

We will take particular care to identify complaints that might be considered serious, high risk or high profile. The SPSO defines potential high-risk or high-profile complaints as those that may:

- involve a death or terminal illness
- involve serious service failure, for example major delays in providing, or repeated failures to provide, a service
- generate significant and ongoing press interest
- pose a serious risk to an organisation's operations
- present issues of a highly sensitive nature, for example concerning:
 - a particularly vulnerable person
 - child protection.

Some of these definitions clearly apply more usually to service delivery within GCHSCP rather than the decisions and processes of GCIJB. However a complainer may seek to link such issues to a particular decisions taken by GCIJB or measure implemented under their direction. These criteria will therefore remain relevant in determining what constitutes a high risk or high profile complaint.

Stage two: investigation

Not all complaints are suitable for frontline resolution and not all complaints will be satisfactorily resolved at that stage. This is perhaps particularly true of complaints relating to the functions and decisions of GCIJB. Complaints handled at the investigation stage of the complaints handling procedure are typically complex or require a detailed examination before we can state our position. These complaints may already have been considered at the frontline resolution stage, or they may have been identified from the start as needing immediate investigation. It is anticipated that complaints relating to GCIJB made under these procedures will be routinely escalated to stage 2 of the process.

An investigation aims to establish all the facts relevant to the points made in the complaint and to give the complainant a full, objective and proportionate response that represents our final position.

What we will do when we receive a complaint for investigation

It is important to be clear from the start of the investigation stage exactly what is being investigated, and to ensure that all involved – including the customer - understand the investigation's scope. The investigating officer will have a responsibility to explain the GCIJB complaints handling procedure to the customer at the outset, to establish why they are dissatisfied, clarify the precise terms of complaint and whether the outcome they are seeking is achievable.

In discussing the complaint with the customer, the investigating officer will consider three key questions:

1. What specifically is the complaint or complaints?
2. What does the complainant want to achieve by complaining?
3. Are the complainant's expectations realistic and achievable?

It may be that the customer expects more than we can provide. If so, our staff will make this clear to them as soon as possible.

Where possible we will also clarify what additional information we will need to investigate the complaint. The customer may need to provide more evidence to help us reach a decision.

Details of the complaint will be recorded on the GCIJB complaints log. Where appropriate, this will be done as a continuation of frontline resolution. The details will be updated when the investigation ends.

If the investigation stage follows attempted frontline resolution, staff will ensure that all relevant information will be passed to the officer responsible for the investigation, and record that they have done so.

Timelines

The following deadlines are appropriate to cases at the investigation stage:

- complaints must be acknowledged within **three working days**
- GCHSCP will provide a full response to the complaint on behalf of GCIJB as soon as possible but not later than **20 working days** from the time they received the complaint for investigation.

Extension to the timeline

Not all investigations will be able to meet this deadline. For example, some complaints are so complex that they require careful consideration and detailed investigation beyond the 20-day limit. However, these would be the exception and we will always try to deliver a final response to a complaint within 20 working days.

If there are clear and justifiable reasons for extending the timescale, The Chief Officer, Chief Officer Strategy and Operations, or Chief Officer Finance and Resources will authorise and set a time limit on any extended investigation, as long as the complainant agrees. The Rights and Enquiries Team will keep the customer updated on the reason for the delay and give them a revised timescale for completion. If the customer does not agree to an extension but it is unavoidable and reasonable, then the senior officers referred to above can consider and confirm the extension. The reasons for an extension might include the following:

- Essential accounts or statements, crucial to establishing the circumstances of the case, are needed from staff, customers or others but they cannot help because of long-term sickness or leave.
- Further essential information cannot be obtained within normal timescales.

-
- Operations are disrupted by unforeseen or unavoidable operational circumstances, for example industrial action or severe weather conditions.
 - A decision complained of is itself under review and it is anticipated that awaiting outcome of that review would assist in final and satisfactory resolution of the complaint.

These are only a few examples, and senior management will judge the matter in relation to each complaint. However, an extension would be the exception and we will always try to deliver a final response to the complaint within 20 working days.

As with complaints considered at the frontline stage, the proportion of complaints that exceed the 20-day limit will be evident from reported statistics. These statistics will be presented to GCIJB on a quarterly basis where any relevant complaints are made under this procedure, otherwise a nil return will be advised to the Chief Officer GCHSCP for verbal report to GCIJB.

Appendix 1 provides further information on timelines.

Mediation

Some complex complaints, or complaints where customers and other interested parties have become entrenched in their position, may require a different approach to resolving the complaint. Where appropriate, we may consider using services such as mediation or conciliation using suitably trained and qualified mediators to try to resolve the matter and to reduce the risk of the complaint escalating further.

Mediation will help both parties to understand what has caused the complaint, and so is more likely to lead to mutually satisfactory solutions.

If GCIJB and the customer agree to mediation, revised timescales will need to be agreed.

Closing the complaint at the investigation stage

We will inform the customer of the outcome of the investigation, in writing or by their preferred method of contact. This response to the complaint will address all areas that GCIJB are responsible for and explain the reasons for the decision. We will record the decision, and details of how it was communicated to the customer, on a complaints log specific to the GCIJB complaints handling procedure. The complaint will then be closed and the complaints log updated accordingly. The complaints resolved at the investigation stage will be reported to the GCIJB on a quarterly basis where any relevant complaints are made under this procedure, otherwise a nil return will be advised to the Chief Officer GCHSCP for verbal report to GCIJB.

In responding to the customer, we will make clear:

- their right to ask SPSO to consider the complaint
- the time limit for doing so, and
- how to contact the SPSO.

Independent external review

Once the investigation stage has been completed, the customer has the right to approach the Scottish Public Services Ombudsman (SPSO) if they remain dissatisfied. The SPSO considers complaints from people who remain dissatisfied at the conclusion of our complaints procedure. The SPSO looks at issues such as service failures and maladministration (administrative fault), as well as the way we have handled the complaint.

We will use the wording below to inform customers of their right to ask SPSO to consider the complaint. The SPSO provides further information for organisations on the [Valuing Complaints](#) website. This includes details about how and when to signpost customers to the SPSO.

Information about the SPSO

The Scottish Public Services Ombudsman (SPSO) is the final stage for complaints about public services in Scotland. This includes complaints about the Scottish Government, NDPBs, agencies and other government sponsored organisations. If you remain dissatisfied with an organisation after its complaints process, you can ask the SPSO to look at your complaint. The SPSO cannot normally look at complaints:

- where you have not gone all the way through the organisation's complaints handling procedure
- more than 12 months after you became aware of the matter you want to complain about, or
- that have been or are being considered in court.

The SPSO's contact details are:

SPSO
4 Melville Street
Edinburgh
EH3 7NS

Freepost SPSO

Freephone: **0800 377 7330**

Online contact www.spsso.org.uk/contact-us

Website: www.spsso.org.uk

Governance of the Complaints Handling Procedure

Roles and responsibilities

As per the Public Bodies (Joint Working) Act and as specified within the Integration Scheme, the Chief Officer's role is to provide a single senior point of overall strategic and operational advice to GCIJB. In line with this, overall responsibility and accountability for the management of complaints lies with the Chief Officer.

Any complaint about GCIJB under these procedures must be agreed by an appropriate senior officer confirming that this is our final response. This ensures that our senior management own and are accountable for the decision. It also reassures the customer that their concerns have been taken seriously. If the Chief Officer is unavailable then this responsibility may be exercised on behalf of the Chief Officer and GCIJB by either the Chief Officer Strategy and Operations or the Chief Finance and Resources Officer.

Those officers will also have the responsibility of liaising with and formally gathering evidence from members of the GCIJB itself should that be required in order to respond to any complaint within the terms of this procedure.

Other more general roles and responsibilities relating to this procedure are as set out below.

Chief Officer:

The Chief Officer provides leadership and direction that enables GCHSCP and its staff to perform effectively across all services. This includes ensuring that there are effective complaints handling procedures, with a robust investigation process that demonstrates how we learn from the complaints we receive. The Chief Officer may take a personal interest in all or some complaints, or may delegate responsibility to appropriate members of the Senior Management Team, primarily the Chief Officer Strategy and Operations and the Chief Finance and Resources Officer.

The Chief Officer will ensure regular reporting to GCIJB of complaints received under this procedure, their disposition, outcome and compliance with procedure.

Members of the Senior Management Team:

Members of the Senior Management Team of the Health & Social Care Partnership may be responsible for:

- managing complaints and the way we learn from them
- overseeing the implementation of actions required as a result of a complaint
- deputising for the Chief Officer on occasion.

The responsibility for handling complaints about GCIJB and discussing these complaints with GCIJB members when the Chief Officer is unavailable will generally fall to the Chief Officer Strategy and Operations and the Chief Finance and Resources Officer. However when none of these lead officers are available, any member of the senior management team may be required to execute these functions in order to avoid delay in the resolution or response to the complaint.

Complaints investigator:

The complaints investigator will be responsible for the management of the investigation of the complaint and drafting an appropriate response for approval by the Chief Officer or delegated senior manager.

The complaints investigator will ensure that the terms of complaint and outcome sought is appropriately clarified with the customer at the outset of the complaint as set out above. They will ensure that a rigorous, thorough and evidence-based investigation is carried out. They will ensure that a comprehensive response is prepared that covers all points raised and references the evidence gathered during the investigation. They will ensure that the response is clear as to the outcome, any redress or remedial action not the taken and sets out the right of independent external review by SPSO.

The complaints investigator will usually be the Principal Officer or a senior officer within the rights and Enquiries Team, however the Chief Officer has discretion to appoint any other member of GCHSCP staff of appropriate seniority and expertise to this role.

All staff and GCIJB Board Members:

A complaint may be made to any member of staff in GCHSCP or submitted directly to any member of GCIJB. Staff and GCIJB board members must be aware of this complaints handling procedure and how to handle complaints and forward them to the Rights and Enquiries Team for logging and investigation as appropriate.

GCHSCP staff should also be aware of their potential role in resolving complaints at the frontline stage as set out at pages 4-7 above and the need to seek guidance where appropriate. We encourage all staff to try to resolve complaints early, as close to the point of service delivery as possible, and quickly to prevent escalation.

GCIJB Board members may wish to forward to The Chief Officer in the first instance any complaints they directly or personally receive which they feel may fall within the terms of this procedure.

GCIJB SPSO liaison officer

The SPSO liaison officer's role includes providing complaints information in an orderly, structured way within requested timescales, providing comments on factual accuracy on our behalf in response to SPSO reports, and confirming and verifying that recommendations have been implemented.

This role is currently executed by the Principal Officer Rights and Enquiries in terms of the NHS and Social Work Complaints procedures within GCHSCP. That officer will therefore also perform that function for any complaints received that fall within the GCIJB complaints procedure.

Complaints about senior staff / members of GCIJB

Complaints about decisions and actions attributed by the complainer to individual GCIJB board members including senior staff who are professional members of the Board such as the Chief Officer or by voting members can be difficult to handle, as there may be a conflict of interest for the staff investigating the complaint.

However it is important to distinguish between complaints about decisions and administrative functions executed by members of GCIJB in their capacity as GCIJB Board members and matters of personal conduct. Matters of personal conduct and complaints pertaining to these fall entirely outwith the scope of these procedures. Assertions of misconduct or inappropriate conduct by professional members of GCIJB are matters for the relevant employer. Conduct of all GCIJB members additionally fall within the remit of the codes of conduct for GCIJB: https://glasgowcity.hscp.scot/sites/default/files/publications/Glasgow_City_IJB_Code_of_Conduct.pdf

As set out in those codes, these are subject to regulation within the framework of The Ethical Standards in Public Life etc (Scotland) Act 2000 overseen by the Standards Commission for Scotland.

When complaints are raised about decisions and functions of GCIJB members at an individual level that do not fall within the scope of the above procedures then the Chief Officer will ensure that matters are looked into by an appropriately senior member of staff with sufficient independence of mind to consider the complaint fairly and objectively. When it is the Chief Officer who is themselves complained of, the matter will be managed by the Chief Officer Strategy and Operations in consultation with the Chair of the GCIJB as required.

Recording, reporting, learning and publicising

Complaints provide valuable customer feedback. One of the aims of the complaints handling procedure is to identify opportunities to improve services across GCHSCP and within GCIJB. We will record all complaints in a systematic way so that we can use the complaints data for analysis and management reporting. By recording and using complaints information in this way, we can identify and address the causes of complaints and, where appropriate, identify opportunities for improvements.

Recording complaints

SPSO have set minimum requirements for the collection of information relating to complaints within this procedure as follows:

- the complainant's name and address
- the date the complaint was received
- the nature of the complaint
- how the complaint was received
- the date the complaint was closed at the frontline resolution stage (where appropriate)
- the date the complaint was escalated to the investigation stage (where appropriate)
- action taken at the investigation stage (where appropriate)
- the date the complaint was closed at the investigation stage (where appropriate)
- the outcome of the complaint at each stage
- the underlying cause of the complaint and any remedial action taken.

A log of complaints will be maintained by the Rights and Enquiries Team including this minimum data set for any complaints handled within this procedure and all paperwork associated with the complaint will be stored in a protected space within Glasgow City Council's EDRMS system.

Reporting of complaints

Complaint details will be analysed for trend information to ensure we identify procedural failures and take appropriate action. Regularly reporting the analysis of complaints information helps to inform improvement actions.

GCIJB has had an interim complaints procedure in place since May 2016. The terms of that procedure are similar to this present procedure. So far no complaints have been submitted that fall within the terms of that procedure. It is to be anticipated therefore that few complaints will be submitted in future that fall within this procedure. This is primarily because customers of GCHSCP tend to complain about service decisions, staff actions and quality of services that fall within one or other of the NHS and Social Work complaints procedures rather than making complaints related to strategic decisions or administrative matters relating to GCIJB.

SPSO have set as a standard that complaints should be reported on a quarterly basis. As referred to above that will be expressed within GCIJB by the submission of written quarterly reports to GCIJB for periods in which there are any such complaints to report and by verbal reports of nil return by the Chief Officer when there are not.

Annual reports will similarly be submitted if there are complaints received within the annual period. The reports submitted will be detailed in a manner commensurate with the number and nature of such complaints received, complying fully with SPSO requirements as applicable.

At present bi-annual and annual unified complaints reports are submitted to GCIJB reporting activity, trends and service improvement relating to the operation of the NHS and Social Work complaints procedures. It is anticipated that these reports will simply be expanded to include a third section on GCIJB complaints should any be received.

Any relevant annual reports will be published on the GCHSCP website. Should the volume of complaints received be significantly higher in future than in the past then the position will be reviewed and consideration given to quarterly publication of GCIJB complaints reports on the website and the production of a separate GCIJB complaints report as an appendix to the unified report as is presently the case for NHS and Social Work complaints. Any such reports will detail any service improvements resulting from complaints.

This will ensure transparency in our complaints handling service and will help the public to see that we value their complaints.

Learning from complaints

At the earliest opportunity after the closure of the complaint, officers involved in handling the complaint will make sure that the customer and relevant staff in GCHSCP understand the findings of the investigation and any recommendations made.

Senior management will review the information gathered from complaints as regularly as required in light of volume and frequency of complaints received and consider whether processes could be improved or internal policies and procedures updated.

Where applicable we will as a minimum requirement:

- use complaints data to identify the root cause of complaints
- take action to reduce the risk of recurrence
- record the details of corrective action in the complaints file, and
- systematically review complaints performance reports to improve processes.

Where we have identified the need for improvement resulting from a complaint about GCIJB:

- the action needed to improve services will be agreed by the GCIJB
- senior management will designate the 'owner' of the issue, with responsibility for ensuring the action is taken
- a target date will be set for the action to be taken
- the designated individual will follow up to ensure that the action is taken within the agreed timescale
- where appropriate, performance will be monitored to ensure that the issue has been resolved

Maintaining confidentiality

Confidentiality is important in complaints handling. It includes maintaining the complainant's confidentiality and explaining to them the importance of confidentiality generally. We must always bear in mind legal requirements, for example, data protection legislation, as well as internal policies on confidentiality and the use of customer's information.

Managing unacceptable behaviour

People may act out of character in times of trouble or distress. The circumstances leading to a complaint may result in the complainant acting in an unacceptable way. Customers who have a history of challenging or inappropriate behaviour, or have difficulty expressing themselves, may still have a legitimate grievance.

A customer's reasons for complaining may contribute to the way in which they present their complaint. Regardless of this, we must treat all complaints seriously and properly assess them. However, we also recognise that the actions of customers who are angry, demanding or persistent may result in unreasonable demands on time and resources or unacceptable behaviour towards our staff.

We will, therefore, work with NHSGG&C and GCC to apply the relevant organisational policies and procedures to protect staff from unacceptable behaviour such as unreasonable persistence, threats or offensive behaviour. Where a decision is made to restrict access to a customer under the terms of an unacceptable actions policy, the relevant procedure will be followed to communicate that decision, notify the customer of a right of appeal, and review any decision to restrict contact with us. This will allow the customer to demonstrate a more reasonable approach later.

Supporting the complainant

All members of the community have the right to equal access to our complaints handling procedure. Customers who do not have English as a first language may need help with interpretation and translation services, and other customers may have specific needs that we will seek to address to ensure easy access to the complaints handling procedure.

We must always take into account our commitment and responsibilities to equality. This includes making reasonable adjustments to our processes to help the customer where appropriate.

Several support and advocacy groups are available to support individuals in pursuing a complaint and customers should be signposted to these as appropriate.

Time limit for making complaints

This complaints handling procedure sets a time limit of six months from when the customer first knew of the problem, within which time they may ask us to consider the complaint, unless there are special circumstances for considering complaints beyond this time.

We will apply this time limit with discretion. In decision making we will take account of the Scottish Public Services Ombudsman Act 2002 (Section 10(1)), which sets out the time limit within which a member of the public can normally ask the SPSO to consider complaints. The limit is one year from when the person first knew of the problem they are complaining about, unless there are special circumstances for considering complaints beyond this time.

If it is clear that a decision not to investigate a complaint will lead to a request for external review of the matter, we may decide that this satisfies the special circumstances criteria. This will enable us to consider the complaint and try to resolve it.

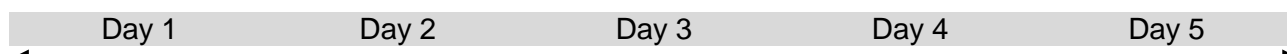
Appendix 1 - Timelines

General

References to timelines throughout the complaints handling procedure relate to working days. When measuring performance against the required timelines, we do not count non-working days, for example weekends, public holidays and days of industrial action where our service has been interrupted.

Timelines at frontline resolution

We will aim to achieve frontline resolution within five working days. The day GCIJB receives the complaint is day 1. Where they receive it on a non-working day, for example at the weekend or on a public holiday, day 1 will be the next working day.



Day 1:

Day GCIJB receives the complaint, or next working date if date of receipt is a non-working day.

Day 5:

Frontline resolution achieved or complaint escalated to the investigation stage.

Extension to the five-day timeline

If GCIJB has extended the timeline at the frontline resolution stage in line with the procedure, the revised timetable for the response will take no longer than 10 working days from the date of receiving the complaint.



Day 1:

Day GCIJB receives the complaint, or next working date if date of receipt is a non-working day.

In a few cases where it is clearly essential to achieve early resolution, GCIJB may authorise an extension within five working days from when the complaint was received. They must conclude the frontline resolution stage within 10 working days from the date of receipt, either by resolving the complaint or by escalating it to the investigation stage.

Day 10:

Frontline resolution achieved or complaint escalated to the investigation stage.

Transferring cases from frontline resolution to investigation

If it is clear that frontline resolution has not resolved the matter, and the complainant wants to escalate the complaint to the investigation stage, the case must be passed for investigation without delay. In practice this will mean on the same day that the complainant is told this will happen.

Timelines at investigation

GCIJB may consider a complaint at the investigation stage either:

- after attempted frontline resolution, or
- immediately on receipt if they believe the matter to be sufficiently complex, serious or appropriate to merit a full investigation from the outset.

Acknowledgement

All complaints considered at the investigation stage must be acknowledged within **three working days** of receipt. The date of receipt is:

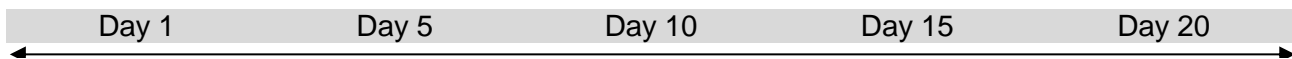
- the day the case is transferred from the frontline stage to the investigation stage, where it is clear that the case requires investigation, or

- the day the complainant asks for an investigation after a decision at the frontline resolution stage. It is important to note that a complainant may not ask for an investigation immediately after attempts at frontline resolution, or
- the date GCIJB receives the complaint, if it is sufficiently complex, serious or appropriate to merit a full investigation from the outset.

Investigation

GCIJB will respond in full to the complaint within **20 working days** of receiving it at the investigation stage.

The 20-working day limit allows time for a thorough, proportionate and consistent investigation to arrive at a decision that is objective, evidence-based and fair. We have 20 working days to investigate the complaint, regardless of any time taken to consider it at the frontline resolution stage.



Day 1:

Day complaint received at investigation stage, or next working day if date of receipt is a non-working day. Acknowledgement issued within three working days.

Day 20:

The decision issued to complainant or agreement reached with them to extend deadline

Exceptionally you may need longer than the 20-day limit for a full response. If so, the Chief Officer will explain the reasons to the complainant, and agree with them a revised timescale.



Day 1:

Day complaint received at investigation stage, or next working day if date of receipt is a non-working day. Acknowledgement issued within three working days.

By Day 20:

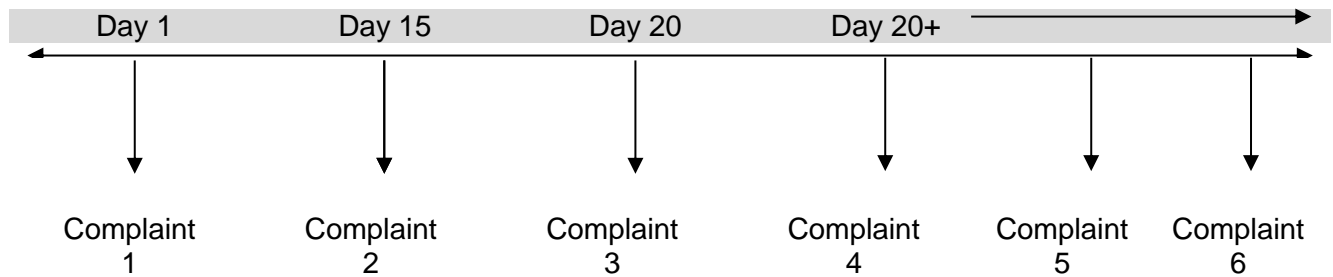
In agreement with the complainant where possible, decide a revised timescale for bringing the investigation to a conclusion.

By agreed date:

Issue our final decision on the complaint

Timeline examples

The following illustration provides examples of the point at which we conclude our consideration of a complaint. It is intended to show the different stages and times at which a complaint may be resolved.



The circumstances of each complaint are explained below:

Complaint 1

Complaint 1 is a straightforward issue that may be resolved by an on-the-spot explanation and, where appropriate, an apology. Such a complaint can be resolved on day 1.

Complaint 2

Complaint 2 is also a straightforward matter requiring little or no investigation. In this example, resolution is reached at day three of the frontline resolution stage.

Complaint 3

Complaint 3 refers to a complaint that we considered appropriate for frontline resolution. We did not resolve it in the required timeline of five working days. However, we authorised an extension on a clear and demonstrable expectation that the complaint would be satisfactorily resolved within a further five days. We resolved the complaint at the frontline resolution stage in a total of eight days.

Complaint 4

Complaint 4 was suitably complex or serious enough to pass to the investigation stage from the outset. We did not try frontline resolution; rather we investigated the case immediately. We issued a final decision to the complainant within the 20-day limit.

Complaint 5

We considered complaint 5 at the frontline resolution stage, where an extension of five days was authorised. At the end of the frontline stage the complainant was still dissatisfied. At their request, we conducted an investigation and issued our final response within 20 working days. Although the end-to-end timeline was 30 working days we still met the combined time targets for frontline resolution and investigation.

Complaint 6

Complaint 6 was considered at both the frontline resolution stage and the investigation stage. We did not complete the investigation within the 20-day limit, so we agreed a revised timescale with the customer for concluding the investigation beyond the 20-day limit.

Appendix 2 - The complaints handling procedure

