Introduction
Healthcare Improvement Scotland (HIS) values listening to the opinions and feedback of those making use of our services and we are committed to ensuring stakeholder complaints and feedback shapes the work that we do. We have an ambition to ensure that we routinely collect and learn from patients, public and health and social care staff. As a National Board, HIS works with a wide range of stakeholders:

- Health and Social Care Partnerships
- NHS Boards
- Scottish Social Services Council
- Care Inspectorate
- Scottish Council for Voluntary Organisations
- Scottish Government
- service users, patients, carers and members of the public, and
- third sector organisations.

Healthcare Improvement Scotland (HIS) has a statutory remit in relation to the following types of complaint:

- complaints about HIS, which may relate to the standard of service provided, treatment by a member of staff, operational and procedural issues or difficulty in communicating with the organisation; this includes complaints about the Death Certification Review Service (DCRS) which is run by HIS and which has its own complaints handling process
- complaints about services provided by the independent healthcare providers we regulate
- concerns about health services raised by NHSScotland employees, through the NHSScotland National Confidential Alert Line or by contacting us direct under the Public Interest Disclosure Act.

This report focuses on performance in relation to the handling of complaints received against HIS, in line with the NHSScotland Model Complaints Handling Procedure (CHP), and is structured around 9 key performance indicators.

Indicator one: Learning from complaints
Due to the small number of complaints received, the scope for identifying trends is limited. One complaint received against HIS during 2018-19 was investigated at stage two and the investigation report included recommendations for action as a result of the complaint, specifically to improve clarity and transparency around HIS’ ‘Responding to concerns’ process. The recommendations are currently being progressed as part of the implementation of a revised approach to responding to concerns. This includes consideration of the most appropriate stage to meet with the individual raising a concern, as well as development of an information leaflet and updating of our website. We are also developing a template for individuals to submit concerns their concerns which will be on the website once finalised.
**Indicator two: complaint process experience**

HIS has not received any feedback on the complaint process experience in relation to the formal complaints received in 2018-19. As we work to review our processes on how the organisation requests, receives and deals with feedback from all stakeholders, as referenced elsewhere in this report, we will include the experience of complainants.

**Indicator three: staff awareness and training**

Complaints regarding Healthcare Improvement Scotland are handled by a small number of staff within the Corporate Governance Office. A standard operating procedure for handling complaints enquiries has been refreshed during 2018-19. As HIS regularly receives complaints about services provided by NHSScotland it is important that these are promptly and appropriately redirected. Information is therefore made available to all staff on the handling of such enquiries via the staff intranet.

**Indicator four: the total number of complaints received**

The total number of complaints received against Healthcare Improvement Scotland in 2018-19 was five, two of which were in relation to the Death Certification Review Service.

**Indicator five: complaints closed at each stage**

Four complaints were closed at stage one and one complaint was closed at stage two.

**Indicator six: complaints upheld, partially upheld and not upheld**

None of the complaints investigated at stage two were upheld. The investigation report of one complaint did, however, make recommendations to improve clarity and transparency around HIS’ ‘Responding to concerns’ process (see indicator one, above).

**Indicator seven: average times**

**Indicator eight: complaints closed in full within the timescales**

**Indicator nine: number of cases where an extension is authorised**

One stage one complaint was responded to within 7 days; otherwise all of the complaints were responded to and closed within prescribed timescales i.e. within 5 days at stage one and within 20 days at stage two. HIS did not request an extension to the complaint investigation timescale.

**Encouraging and gathering feedback**

HIS is currently collecting feedback in a number of ways as detailed below.

HIS uses paper and electronic feedback forms at all events, requesting feedback from attendees with a view to continuously improving the content of sessions, ensuring that the information provided is both relevant and useful to audiences. Feedback is used to adapt work to audiences to better meet their needs.

HIS requests feedback from providers at the end of each inspection. The independent Healthcare Team has an enquiry line for providers to contact the team directly and consultation exercises take place on aspects of the programme.

The Public Involvement Team works with community and voluntary groups in helping us to improve our processes and better engage with people.
Third sector groups, patients, service users, carers and members of the public are encouraged to complete evaluation questionnaires and equality monitoring forms.

Areas of the organisation ensure stakeholders are involved in the assessment of their work by offering the opportunity to participate in after action review.

SIGN regularly seeks stakeholder feedback. A post-guideline production questionnaire is developed for group members and stakeholder engagement groups following development of guidelines. Interviews are used to elicit feedback and information to improve future processes.

HIS uses public and patient, service user and carer questionnaires and feedback to engage with these key stakeholders in our work.

**Recording, collating and sharing and learning from feedback**

Feedback is being recorded and collated by teams across the organisation. This is being done through action logs and lessons learned logs and is shared through the publication of post event, project and programme reports.

Areas of good practice are being identified and HIS will look to work with these teams to share processes and ways of working to ensure that all of the organisation’s stakeholders have the opportunity to respond to the work that HIS does, and help shape future developments.

**Developing a strategic approach to learning from feedback**

An identified gap in the system is a lack of strategic oversight of feedback and themes from feedback across the organisation. Healthcare Improvement Scotland has developed a Care and Clinical Governance Framework and has established a Care and Clinical Governance Steering Group to implement key principles from the framework. Key deliverables identified within this work include:

- The provision of oversight and assurance of organizational learning from complaints, feedback and adverse events
- Ensuring the planning and delivery of all our programs of work take account the perspective of patients and service users

As a result Healthcare Improvement Scotland will be looking to develop and implement a clear strategy to ensure we are taking learning from complaints, feedback and adverse event and investigate opportunities for improving engagement with patients and service users over the next 12 months.