

Quality Assurance quarterly review Q2 2016 – 2017: Final Report

Assessment

37 cases were randomly selected for Quality Assurance (QA) in Quarter 2 and reviews were on all of these cases in January 2017.

Process

All cases were assessed under four areas – process, decision-making, communication and delay, and areas of learning were identified. In addition, examples of best practice were recorded. QA of the summaries issued in Q2 was also undertaken by the communications officer. This is the first time the summaries have been subject of formal assessment, and has been introduced to help improve the quality and consistency of information that is presented to Parliament and the public. A summary issued by each member of staff was assessed against the following criteria:

- Has risk of identification (such as through location, specific dates or other personal details) been avoided?
- Has the use of 'A', 'C' and so on been applied accurately and consistently (including the relationship/connection between C and A)?
- Is it clear what is being complained about?
- If applicable, is there mention of actions taken by the BUJ to remedy?
- Is it clear what we found?
- Is it clear what we decided?
- If applicable, is it explicit that the advice we have taken is independent and is the adviser described correctly?
- If applicable, has the name of the hospital or water company been included?
- If applicable, have complex or specialist terms been explained?
- Is the tone throughout neutral, non-inflammatory and unemotive (including avoiding expressions of regret)?
- Is the summary of an appropriate length? i.e. sufficiently concise yet not so short that it lacks in learning points?
- Is the language used on the whole plain, informal and easy to read, avoiding jargon?

Key Findings

The Q2 findings show that, in the vast majority of casework, the complaints are progressed at all stages in accordance with the standards expected.

The summary QA has identified that there are areas where our communication can and should be improved. For example, in one summary, an individual's name had not been anonymised. Other areas for improvement surrounded the use of technical terms and poor grammar. Areas for improvement were identified in the majority of cases.

RED – must dos/remember; **AMBER** – to be aware of and **GREEN** – good/best practice.

Issues picked up as follows (i.e. a 'No' scored in one or more of the questions in the following sections for each case):

Process	3
Communication	4
Decision-Making	4
Delay	0

RED

- In one case, the complaints reviewer incorrectly excluded complaint on the basis of section 7(1) of the SPSO Act.
- Anonymise names within summary report

AMBER

- In one case, the decision letter could have commented on the arguments made by the council for why they believed that the works included on the statutory notice were carried out (i.e. no more reports of damage, other neighbours paid and no complaints). This was powerful evidence countering the complainant's position that they could not recall the works being completed.
- In one case, the complaints reviewer incorrectly informed the complainant that they had not brought a complaint of administrative or procedural failure.
- In one case, the wrong letter template has been used. The final letter could be read as meaning the recommended further response, in and of itself, would resolve the issue.
- We found instances where letters were sent where the complainant's preferred contact method was e-mail.
- In one case, although the decision is sound, the letter incorrectly said we could not deal with the issue.

GREEN

We found examples good practice or exemplary service in a variety of ways:

- In one case we found a good example of a complaints reviewer going back to the clinical adviser to query advice given on level of carbon monoxide in the blood. The advice was ultimately changed.
- We found an excellent example of probing questions and recommendations leading to systemic change.
- We found an example of really good description given by complaints reviewer on the Ombudsman's power to challenge discretionary decisions.

Conclusions

A recurring finding in previous QA, is that the outcomes sought and perceived injustice were not reflected in the decision letters. The decision letter template was amended last year to prompt staff to address this and managers have been asked to remind staff about this. Q2 findings show a significant improvement in this area.

As noted above, there was a relatively small number of issues under amber. No systemic issues were identified. One red case was identified where we incorrectly told the complainant that we did not have the power to take the complaint forward. This case was not been re-opened on proportionality grounds. The staff responsible for QA had a number of discussions with a variety of staff in respect of our approach to section 7(1) of the SPSO Act and work is ongoing in this connection.

All comments and examples will be fed back to individuals by their line manager as part of the performance management process. This summary of key findings will be made available to all teams, managers and the Senior Management team, and is also presented at the quarterly Service Improvement Group meeting.

Recommendations & actions

	Recommendation
1	All individual issues to be fed back to complaints reviewers by managers, as well as highlighting to complaints reviewers areas of good practice picked up in QA.