

10am, Thursday 29 June 2017

## City of Edinburgh Council Response to a Complaints Review Committee Outcome

Item number 8.14(b)  
Report number  
Executive/routine  
Wards

### Executive Summary

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This report outlines the actions taken by Health and Social Care following the recommendations of a Complaints Review Committee held on 28 April 2017.

The complaint relates to the South East Locality.

### Links

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Single Outcome Agreement [SO2](#)

## 1. Recommendations

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- 1.1 The City of Edinburgh Council is recommended to note the actions taken in relation to the decision of the Complaints Review Committee on 28 April 2017.

## 2. Background - Complaints Review Committee Findings

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- 2.1 The Committee upheld the complaint set out in paragraph 2.1 of the report by the Chief Officer, Edinburgh Health and Social Care Partnership, without qualification:  
"Paragraph 2.1- The complainant is dissatisfied that the complaint response letter did not address a report by the Care Inspectorate, nor did it reference the findings of an independent healthcare consultant."
- 2.2 The Committee upheld the complaint set out in paragraph 2.4 of the report by the Chief Officer, Edinburgh Health and Social Care Partnership. The Committee believed that the risk assessment by a staff member had been inadequate:  
"Paragraph 2.4 - The complainant states that the care home was understaffed when the incident occurred and queries why a member of staff was allowed to leave the building."
- 2.3 The Committee upheld the complaint set out in paragraph 2.5 of the report by the Chief Officer, Edinburgh Health and Social Care Partnership:  
"Paragraph 2.5 - The complainant states that she received conflicting reports from staff."

## 3. Main report - Improvement Actions

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- 3.1 The complainer's dissatisfaction with the content of the complaint response letter could not form part of the original complaint made; however, it was the opinion of the Complaint Review Committee that the stated reports ought to have been referred to. A number of investigations took place at the time of the complaint; the Care Inspectorate conducted an independent investigation of matters; the Council's Residential Review Team conducted an Adult Protection investigation and an independent healthcare consultant was employed by the complainer to conduct a further investigation. These investigations were completed and reports sent directly to the complainant and the care home. The Council was aware of the findings of both the Care Inspectorate's investigation and the privately hired healthcare consultant's investigation. The Council's complaint response letter detailed the

Council's findings following the complaint investigation and provided the Council's conclusion based upon the points raised, as required by the statutory social work complaints procedure. There is no requirement to reference an investigation conducted by another, the Council's statutory requirement is to answer the points of the complaint as raised.

- 3.2 The staffing levels were deemed as adequate and did not fall below the Staffing Schedule provided by the Care Inspectorate, which was 13 care staff and 1 Senior Member of Staff at any time; there were 15 care staff in the building at the time of the incident. The Staffing Schedule does not go into detail about how staff should be deployed throughout the 5 units within the care home, this decision is based upon the level of care needs in the flats and is decided upon by the Unit Manager and the completion of an Isaac and Neville assessment of need exercise. The staffing levels within the unit, at the time of the incident, were one member of staff to three service users which was thought to be adequate at the time. It should be noted that the staff member who left the building, was not allocated to the specific unit where the incident occurred.
- 3.3 Since the incident, the care home has increased staff awareness to ensure that any communal areas within the care home, where service users are located, are staffed at all times where possible. The Isaac and Neville Tool is used to determine the number of staff required in each flat and staffing numbers were increased by the manager to ensure that there are more robust staffing levels within the care home.
- 3.4 When service users' families indicate that there is to be one point of contact for any emergency occurrence, the care home will ensure this is documented clearly in the care plan. Care home staff ensure that any communication with relatives is clearly documented in the duty communication book; this is now signed by the person making the entry and any actions are recorded clearly.
- 3.5 The service will endeavour to have the same person communicate with families to ensure a consistency of information shared, where possible.

**Rob McCulloch-Graham**

**Chief Officer Edinburgh Health and Social Care Partnership**

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## 4. Links

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### **Single Outcome Agreement**

SO2 Edinburgh's citizens experience improved health and wellbeing, with reduced inequalities in health

### **Appendices**