



Care and Social Services Inspectorate Wales

CONCERNS AND COMPLAINTS

Guidance for Regulatory Inspectors

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Note: This guidance supersedes all previous complaints guidance and remains under review.

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Part 1 General Policy and Principles

1. What is in this policy?

1.1 This guidance document explains the context and process by which concerns and complaints are received, processed and managed within Care and Social Services Inspectorate Wales (CSSIW).

1.2 It includes;

- General principles that we as an organisation will abide by.
- The roles and responsibilities of staff who are involved.
- Guidance for staff about how concerns and complaints are received, recorded and actioned.
- Flow charts detailing the process steps for recording and dealing with a concern.
- The concerns and complaints log template and guidance notes for staff completing it.
- Frequently asked questions.

1.3 This guidance will be supported by training for all grades of staff.

2. Introduction

2.1 CSSIW aims to offer the public assurances about the quality of registered services in Wales – and also for those services we inspect, but do not regulate. In so doing it is essential that we make best use of all available information and intelligence relating to services so that the assurances we provide can be as accurate and up to date as possible.

2.2 The information we gather allows us to increase our knowledge and understanding of those services; to judge their effectiveness and the quality of care they provide. By triangulating evidence from a number of sources we maximise our understanding of these services and ensure that they continue to offer good quality care and support. Where there is evidence that this is not the case we are able to take action to address failings and drive up standards.

2.3 Information gathered from concerns and complaints cannot be underestimated as an important source of intelligence about the services we regulate. The information we receive in this way needs to be formally considered and followed up appropriately. As an organisation and as professionals we should view concerns as a means of providing us with an insight into the way a service operates when we cannot be there ourselves.

2.4 Lessons from recent enquiry reports (Winterbourne View; Mid Staffordshire NHS Trust) stress the importance of concerns and complaints as vital indicators of most fundamental care related issues affecting the most vulnerable in society. As professionals, it is essential to take ownership of concerns and act upon them – and unsafe to assume that ‘someone else will deal with it’. Against this backdrop, we need to know whether a provider is failing to meet the conditions of their registration and if anyone using a service is at risk of harm as a result. Concerns and complaints offer clues as to whether this might be the case. It is therefore crucial that we analyse all the information we receive and, where appropriate, respond effectively in every instance.

3. What is a concern?

3.1 A concern is an expression of worry or a cause for worry for the person who has chosen to report it. For CSSIW a concern relating to a registered service may call into question the quality of that service and suggest its users are at potential risk of harm and/or indicate possible non-compliance issues. A concern can relate to any or all of the regulatory 'themes' – 'Quality of Life'; '...of Staffing'; '...of Leadership and Management' or the 'Environment'.

3.2 Concerns are an important source of information for inspectors and are often voiced by the people who use and rely upon the care services we regulate; as well as their relatives, visitors, staff, involved professionals or neighbours. These people are often close to the service and in a position to provide key indicators regarding practice – in effect they are our 'eyes and ears' when we cannot be there. Their comments and observations give us valuable insights into services about which we would otherwise be unaware.

3.3 CSSIW positively welcomes concerns, comments and compliments about the services it regulates. Where we receive information which suggests non-compliance by a provider, we will act upon that information as promptly as possible.

4. How are concerns received?

4.1 Concerns can be received in many ways. Face to face or telephone discussions with people or by formal notifications, letters and e-mails. Increasingly the use of social media such as text messaging or online commentaries might be used – in some children's services this is already commonplace. It is particularly important to be sensitive to concerns and the way they are presented; body language or behaviour in children, older people or people with a learning disability may offer indirect cues to the care being provided. In some cases people have thought long and hard about whether or not to voice their concerns and by responding positively we offer them reassurance about their decision. Annex 1 shows the sources of concerns that are commonly involved.

4.2 As most concerns usually stem from people who are close to or involved with a service they should always be taken at face value until we determine otherwise. Inspectors should take the view that information received via a concern warrants further consideration and should be acted upon as soon as possible. **It should always be remembered that every concern has the potential to be a serious issue.**

5. Some key principles to remember

- Where information is received which suggests people using a service are at risk of harm we will always take prompt action including immediate inspection visits and/or safeguarding referrals.
- CSSIW positively welcomes concerns, comments and compliments about the services it regulates.
- In Wales people have a right to express their views in Welsh if they choose to do so. All staff should respect and support this right by confirming the language of choice and identifying a Welsh speaking member of staff to take and record the details of their concern if necessary.

- People sharing a concern with us will be kept updated about its progress – letters will be sent confirming the receipt of their concern, its outcome and a copy of any subsequent inspection report will be provided if required.
- People sharing a concern with us have the right to remain anonymous if that is their wish and we should respect that choice.
- Whistle-blowers who are employees, trainees or agency staff, have a right to share with us any concerns they may have and are protected by law when they do so.
- Our response to concerns will always be measured, proportionate and appropriate.
- The concerns and complaints log provides a clear audit trail and outlines our response to a concern– including rationale for decisions made, actions taken and by whom. **Its completion is essential in all cases.**
- Information relating to concerns and complaints will be regularly monitored to identify themes and trends across services and service providers.
- The way we use and retain information will be compliant with the Data Protection Act (1998).

6. Roles and responsibilities

6.1 When processing concerns it is essential that all staff are clear about their role and the tasks required of them.

a. Business Support Officers (BSOs)

6.2 Concerns are usually received and logged by the regional Customer Care Teams and the BSOs which make up the team (see parts 1 of both the Flowchart and Concerns Log and Notes 7 and 9). They are the first point of contact for callers wishing to telephone in with their concern and they will usually be the first to become aware of a concern. The importance of their role cannot be underestimated. Dealing with people who may sometimes be distressed or anxious requires understanding, sensitivity and skill – capturing the necessary information may often be a difficult task requiring skill, patience and concentration.

6.3 In Wales, people have a right to express their views in Welsh; staff should accommodate this right and identify a Welsh speaker to take and record the details of the concern if required.

6.4 The BSO is responsible for a number of key process activities, as follows;

- for capturing on part 1 of the log the basic information relating to the person making the concern; details of the service and of the concern itself.
- for storing the log in the 'Events' section of QA+ for the setting that is the subject of the concern.
- for ensuring that the allocated inspector and their Area Manager are made aware of the concern as soon as possible.
- for generating and sending the initial acknowledgement letter (letter 1) to the person raising the concern.

- for generating and sending the final letter (letter 2), following a request to do so by the inspector, to the person raising the concern. This will set out what has been done, or is going to be done as a response to their concern.
- for closing off the log when required to do so by the inspector and Area Manager.
- for ensuring a copy of any inspection report produced in relation to the concern is provided to the person raising the concern if required.

6.5 There will be rare occasions when both the allocated inspector *and* Area Manager are absent because of sickness or leave. It is essential that concerns are not subject to drift and delay. Where such absences can be anticipated clear arrangements should be put in place to provide cover and any such arrangements always communicated to BSOs. Where absences have not been anticipated a BSO receiving a concern should seek advice from their Business Support Manager, an available Area Manager or the Regional Director if necessary.

6.6 Where a person raising a concern is referred back to a local authority to access their internal complaint procedure, brief details of their concern/complaint should be captured and the relevant Area Manager informed. Either the concerns log can be used for this purpose or alternatively a file note or e-mail capturing the essential information can be written – whichever is used the record should be logged against the service record on QA+.

6.7 Similarly, where a concern relates to a service area which we review, but do not regulate (Fostering and Adoption Agencies; Boarding Schools and Further Education Colleges), details of the concern/complaint should be captured on QA+ against the relevant setting and the allocated inspector and Area Manager informed. Either the concerns log can be used for this purpose or alternatively a file note or e-mail capturing the essential information can be written – whichever is used the record should be logged against the service record on QA+.

b. Inspectors

6.8 The allocated inspector is usually the case holder for the service that is the subject of the concern.

6.9 Where an allocated inspector is absent - because of leave or sickness for example – one or more inspectors may be asked by the Area Manager to look at the concern. Where two inspectors are allocated one will be designated the lead inspector and will be responsible for completing part 2 of the concern log and ensuring the related actions detailed below are carried out.

6.10 The allocated/lead inspector may need to further contact the person raising the concern to clarify or gather more detail so that consideration of the issues is based upon the most accurate, relevant and current information. It may in some instances be appropriate to visit the person and conduct a face to face discussion.

6.11 The allocated/lead inspector is responsible for:

- considering the detail of the concern and agreeing – with the Area Manager if necessary - any subsequent action, ensuring this is carried out and reported upon.

- completing the audit trail relating to the concern (see parts 2 of both the Flowchart and Concerns Log).
- ensuring that the person making the concern receives feedback if that has been agreed; the action we took and what was found.
- ensuring that the inspection report and any non-compliance notifications arising from the inspection process are completed.
- completing the log upon completion of the agreed actions. The concerns log is not time limited and the inspector needs to finalise and sign off once the response to the concern and any actions are agreed and recorded. The log should not be kept open for any longer than is necessary. For example, if a focused inspection is to be undertaken, there is no need to keep the log open until the inspection is completed – the log can be closed and any findings will be captured within the inspection report or where there are delayed outcomes, through file notes saved against the service record.

6.12 The person raising the concern may wish to have sight of any inspection report produced in relation to the concern once it is publicly available and this should be offered. Options for the best way to provide the report should be discussed with the person – whether by e-mail a link to our website or by a paper copy. The agreed method should be noted on part 2 of the concern log by the inspector. The inspector should inform the BSO when and how to send the report to the person raising the concern.

6.13 It is important that concerns which fall outside of the more usual communication routes are also captured. Where an inspector receives a concern verbally or directly via an e-mailed notification (Regulation 26; 31 or 38 notifications for example), details need to be forwarded to the BSO with a request to initiate a concern log as soon as possible.

6.14 Not all notifications will prompt a request to initiate a concerns log. Requests should be limited to those issues of obvious concern (allegations of or actual abuse; identified 'themes' suggesting poor practice or regulatory failure) and/or those which have prompted, or will prompt further action by the inspector (telephone calls; e-mail discussions or focused inspections for example) and where the concerns log can then capture the rationale for this.

Consideration of a concern by inspectors

6.15 Information received via a concern should always be placed in the wider context taking into account the overall history of the service. An inspector should ask themselves;

- Is the service well managed? Are the provider and manager visible and accessible? Have there been frequent managerial changes?
- Is the provider generally compliant or have there been similar issues before?
- What are the overall risk factors associated with the service?
- How vulnerable are the people who use and rely upon the service – do they have an effective and independent 'voice' and is this listened to?
- Is the service responsive to complaints/concerns and deals with these promptly and appropriately? Are concerns and complaints used to improve the service?

6.16 Reflective discussion with the Area Manager should be considered and, where this takes place, a brief record of agreed actions should always be made on the Concerns Log.

6.17 Inspectors should always be wary of the tendency to only accept positive messages about a service or provider and downplaying any negative feedback. Even providers with a 'good' history may at some point have issues which need to be addressed.

What options are available to inspectors?

6.18 Depending upon the nature of the information there are a range of options available to inspectors when dealing with concerns, as follows;

- The concerns may be serious enough to warrant an immediate safeguarding referral.
- A focused inspection may take place which concentrates only upon the issue(s) highlighted by the concern.
- A baseline inspection may take place with a view to gathering specific evidence for safeguarding and/or enforcement reasons.
- An inspection initially scheduled at a later time may be *brought forward* so that the issues highlighted in the concern can be looked at.
- A baseline or focused inspection may be carried out *in addition* to one carried out earlier in the inspection year.
- After consideration of the information it may be appropriate to refer the caller back to the provider's or local authority's own complaint procedure (see notes 2 & 3).
- After consideration of the information it may be appropriate for the inspector to refer the concern to the provider's or local authority's own complaint procedure (see notes 2 & 3).
- After consideration of the information it may be appropriate to refer the concern to another agency (see note 10) or the provider for further consideration (see note 2).

6.19 Where a person raising a concern or complaint is referred back to a local authority to access their internal complaint procedure, brief details of their concern/complaint should be captured and the relevant Area Manager informed.

6.20 Where a concern or complaint is referred back to a provider for consideration or investigation, the inspector will request feedback as to the outcome of that concern or complaint investigation. This response may offer an important insight into how concerns and complaints are received, managed and used to develop the service and may in some instances prompt further consideration and action by the inspector.

6.21 Whatever the response, there is a need to record the action agreed and/or taken and to provide a rationale for the decision(s) made. Part 2 of the concern log should be completed by the inspector in all cases so that there is a clear audit trail of judgements made and actions taken.

6.22 Inspection reports should clearly state that the inspection was prompted, entirely or in part, by a concern and the outcome of the inspection visit clearly stated.

6.23 It is essential that the person providing the information- where identified - is given feedback in the form of a follow up phone call or letter where that is agreed. The inspector should provide any verbal feedback. It is also good practice to offer a copy of any inspection report related to their concern once this is publicly available – the method (paper version; e-mail or link to website) should be agreed with the person concerned by the inspector.

c. Area Managers

6.24 The role of the Area Manager is a strategically important one. They are well placed to offer an objective overview of a concern; identify patterns and themes and offer a reflective appraisal of the main issues. They should consider the detail and agree any action with the allocated inspector where that is required.

6.25 In the absence of the allocated inspector due to leave or sickness, the Area Manager is responsible for considering the concern details and, where necessary, allocating actions to another inspector and recording this detail on the concern log. This is essential to prevent drift and delay. When the allocated inspector returns to work it is essential that the Area Manager shares with the inspector the nature of the concern, action taken and issues raised.

6.26 The Area Manager may consider it necessary to allocate an additional inspector(s) to jointly undertake visit(s) in relation to a concern – one of these inspectors will be designated as 'lead' and this noted on the concerns log.

6.27 The Area Manager is responsible for;

- Considering the outcome of any action taken.
- Implications for future work with the service/provider concerned.
- Considering any broader local authority issues.
- Considering any patterns or themes arising from the concern.
- Signing off the concerns log.
- Overseeing monitoring arrangements for concerns within their area of responsibility to avoid drift and delay.

6.28 Where a person raising a concern is referred back to a local authority to access their internal complaint procedure, brief details of their concern/complaint should be captured by the BSO and the relevant Area Manager informed via e-mail which is also logged against the local authority setting on QA+. Whilst it may not be necessary for the Area Manager to follow up this concern it might nevertheless offer a useful line of enquiry at a future inspection.

6.29 The Area Manager is responsible for overseeing monitoring arrangements for concerns and ensuring that drift and delay do not occur. A monitoring report for all 'open' concerns should be reviewed each month and where actions are incomplete the reasons identified and addressed where necessary. Formal supervision at all levels should always include discussion about current concerns, their progress and any consequences and implications which may impact on their regulatory work.

Concerns received elsewhere in the organisation.

6.30 There will be occasions when a concern is initially received elsewhere within CSSIW (by a member of staff in National Office or by a senior manager for example). Details of the concern and, if possible, contact details of the person raising the concern, should be taken and passed to the relevant regional Customer Care team who will process the concern as described above.

7. What is a complaint?

7.1 A complaint is a statement of dissatisfaction requiring further exploration. Complaints do not have to be made in writing – it is always appropriate for an individual to make a complaint verbally and we should always be sensitive to and support this.

7.2 While we positively welcome information about any of the services registered with us, we do not have a statutory power to investigate individual complaints or resolve disagreements between people and their service providers. In some circumstances, therefore, we will refer people with concerns and complaints to other organisations and services that are better able to help them (see notes 3, 4 and 10).

7.3 All providers of care and social services are required to have their own complaints procedure and complaints can usually be resolved directly between the relevant person and the provider of a given service (see note 2). However, we will keep a record of every concern or complaint reported to us as this helps us to monitor the quality of services provided and determine whether it is appropriate and necessary for CSSIW to take action.

7.4 Where an individual has taken their complaint to the service provider or the commissioner of that service; has subsequently exhausted the in-house complaints process and remains dissatisfied with the outcome CSSIW may agree to review either the issues and/or the handling of their complaint.

7.5 Where it is agreed to look again at the issues relating to a complaint, this would be done as part of the inspection process and a focused inspection will be undertaken to look at the wider, systemic issues arising from the complaint. However, there needs to be a clear rationale and regulatory interest for doing so, such as that noted below, which should be captured in the concerns and complaints log. The subsequent report will provide the formal response to the complainant.

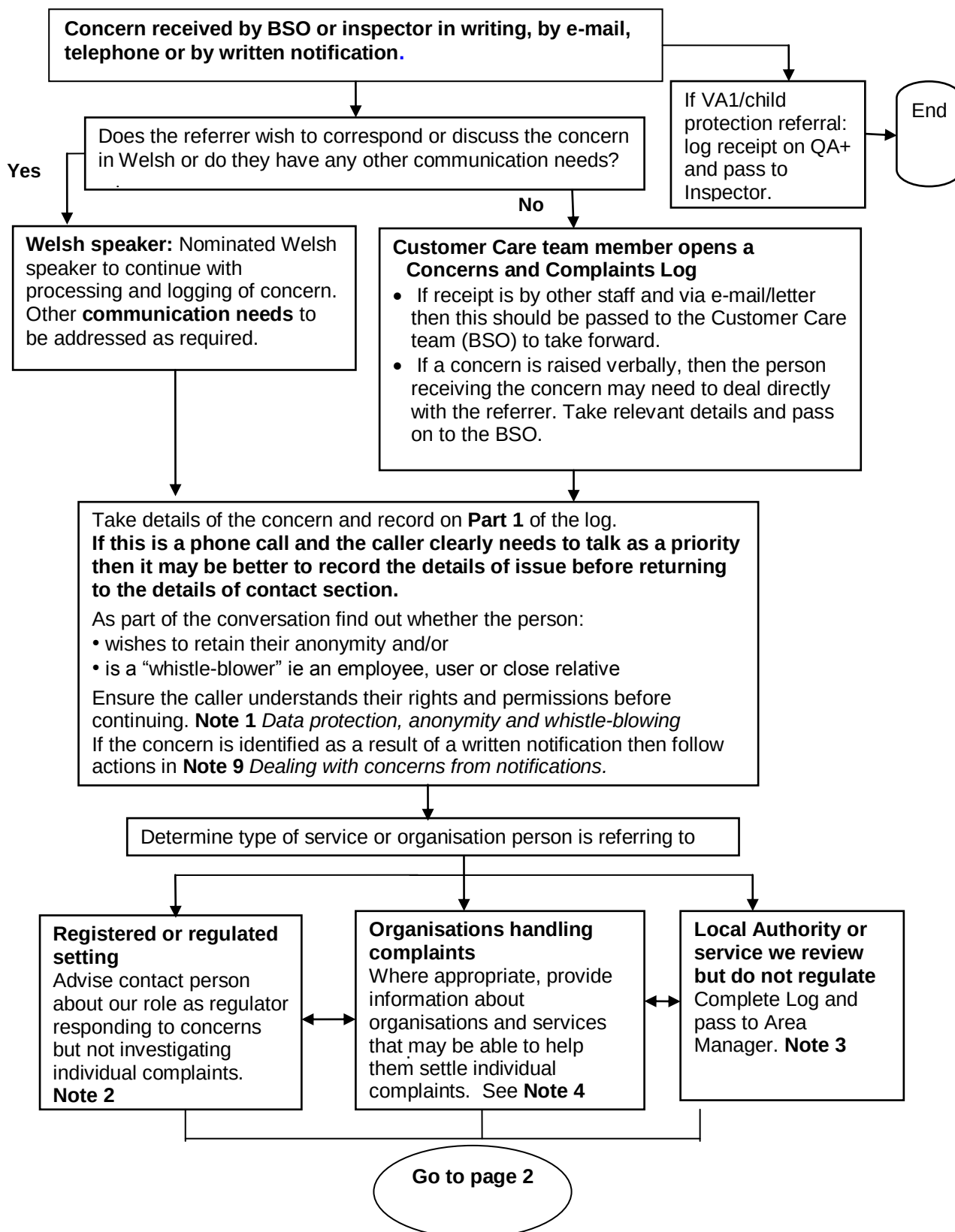
7.6 The way in which a provider handles a complaint offers an important insight into its management culture, responsiveness and the robustness of its systems and procedures. Feedback from a dissatisfied complainant can offer a useful insight into these areas. Upon consideration it may be worthwhile looking at the way the provider's complaints procedure is implemented – not least the inspector should ask whether complaints are being used as a learning opportunity and are contributing to ongoing development of the service. Again, a focused inspection would be an appropriate way to explore these issues.

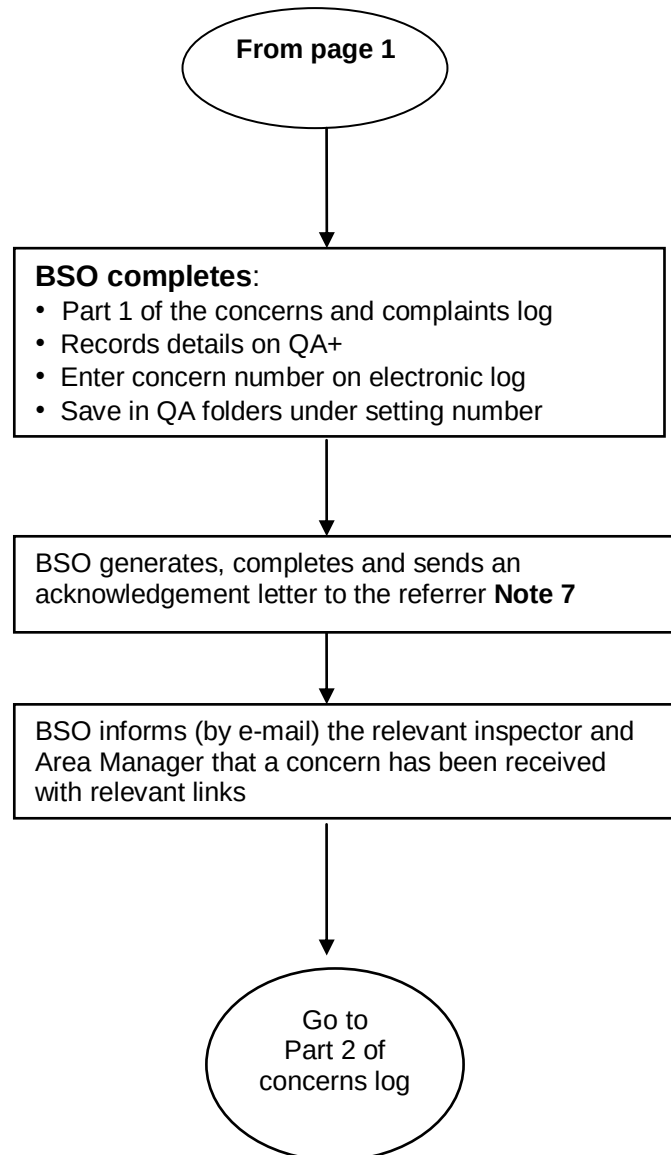
7.7 Note: this guidance does not cover complaints about CSSIW services and staff. Where a complaint is received about CSSIW, this will be considered in accordance with Welsh Government Policy on Customer Complaints, which can be accessed [here](#).

Part 2

Flowchart 1: Process for handling concerns and complaints

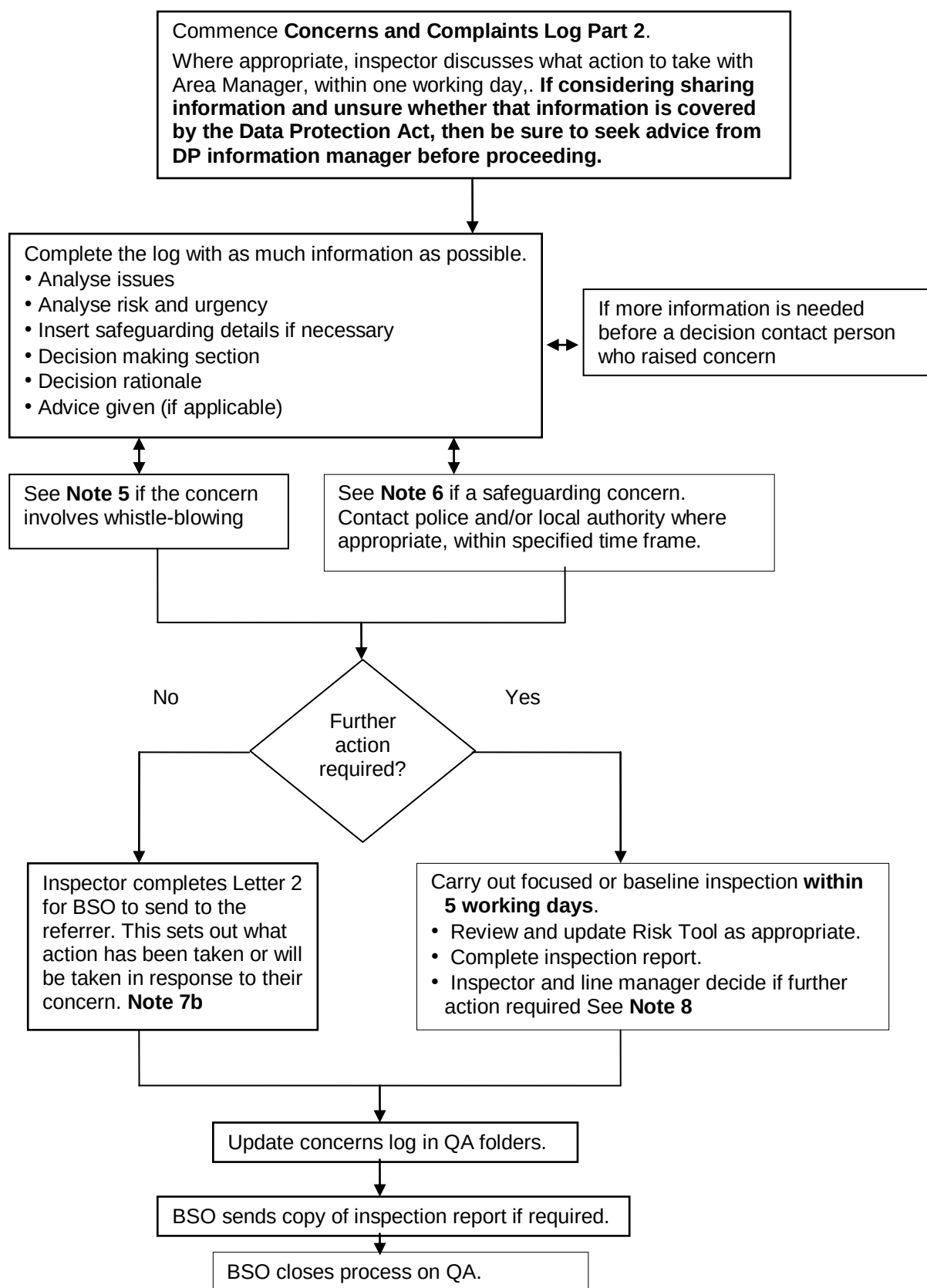
Part 1 – Colleagues receiving incoming concerns or complaints





Part 2

Flowchart 2: For inspectors and line managers responding to concerns or complaints following the initial call and log entry



Part 3 Supporting notes on the Concerns and Complaints process

Note 1 – Data protection, anonymity and whistle-blowing

- Where a concern or complaint about a particular service is reported by someone who wishes to preserve partial or total anonymity, then they will need to be aware that while we protect “personal data” (meaning information by which a living individual can be identified) in line with the Data Protection Act 1998 (DPA), we may also in some circumstances need to share personal data with other organisations.
- Further information on data protection and CSSIW’s commitments under the DPA can be found in our leaflet *How we handle and protect personal data*. This can be accessed [here](#). Further information can be sought from CSSIW’s Data Protection Information managers.

CSSIW staff should also consult WG intranet pages on data protection principles at: [intranet/English/DoingMyJob/InfoMan/PrivacyDP/Pages/introDPA.aspx](#) and be mindful of the principles and conditions for handling personal data described in the DPA Schedules 1, 2 and 3: www.ico.gov.uk/what_we_cover/legislation.aspx

When concerns or complaints are made about a service (including services that we regulate and also bodies that we inspect or review) by a “whistle-blower”, e.g. such records might include for example an employee of that service, then we handle any information received in accordance with the law on data protection, freedom of information, human rights legislation and any order of the court.

Provided that the whistle-blowing information amounts to a “qualifying disclosure” under the Public Interest Disclosure Act 1998 (PIDA), the relevant employee is protected against being victimised by their employer as a result of that disclosure. A qualifying disclosure is one that the employee makes in good faith and tends to show one or more of the following:

- a criminal offence has been or may be, committed
- a breach of legal obligation
- a miscarriage of justice
- a risk to health and safety
- damage to the environment
- deliberate concealment of any of the above

Whilst we would always try to protect the identity of a whistleblower, we are unable to guarantee confidentiality or give an assurance that their identity will not be revealed. It should be stressed that if we take enforcement action *which includes prosecution* against a registered person as a result of whistleblowing, the registered person will have a right to know the detail of the allegations and the relevant evidence, which may then include information from which the whistle-blower can be identified. Similarly, if, as a result of information received from a whistle-blower, criminal proceedings are brought by

the police, information – including statements made by CSSIW and the whistle-blower will be shared with the courts and the defence team.

It would be a good practice to always confirm the caller's understanding and repeat or elaborate where needed before continuing. If the caller does not wish to continue on this basis of what you have said, but you feel they have a serious concern to express, then ask them to hold the line and seek advice from a senior manager. There may be scope to take forward any concern as being from an anonymous source.

NB: Further detail on how we handle personal data and on the legal rights of whistle-blowers is available through our online leaflet '*How we handle and protect personal data*'. click [here](#)

Note 2 – Where a person wishes to make a complaint about a service we regulate.

If a person wishes to make a complaint about a service we regulate we need to make them aware that while we positively welcome concerns and complaints about any of the providers registered with us, we do not have a statutory power to investigate individual complaints or resolve disagreements between people and their service providers.

All providers of care and social services are required to have their own complaints procedure and complaints about a service can often be resolved directly between the relevant person and the provider of a given service.

We will usually recommend that the person raising the complaint approach the provider themselves. We may request feedback as to the outcome of the complaint from either the complainant or provider and/or possibly look at the way it was managed as part of a future inspection.

There may be circumstances however, where it is appropriate for the inspector to raise the complaint directly with the provider - where the person raising the concern is vulnerable due to age, understanding or disability and has no one to represent them or where the person insists upon anonymity, for example.

We will always look into concerns that might indicate a person is providing a service which is not registered and may be operating illegally.

We will keep a record of each concern or complaint reported to, or referred on by, us as this helps us to keep a check on the quality of services provided and determines whether it is appropriate for CSSIW to take action. We will request feedback from the provider as to the outcome of any concern or complaint we refer to them as this offers an important insight into how these are managed by them.

Where appropriate we will refer people to other organisations and services that are better able to help (see note 4).

Note 3 – Where a complaint relates to a local authority or a service that CSSIW reviews

We review through the inspection process some services which are not required to register with us (Fostering and Adoption agencies, Boarding Schools, Further Education Colleges and the 22 local authorities in Wales).

We welcome information that relates to these service areas and we may opt to use that information in our inspection process. If it is more appropriate we may ask other agencies or the providers themselves to look at the issues and ask them to feed back to us with their findings.

If a complaint relates to a local authority or a service that CSSIW reviews but does not regulate, we need to explain that:

- We cannot investigate complaints made by individuals about local authorities or other organisations that we review, e.g. CAFCASS Cymru as we have no statutory power to do so. We are however, interested to hear from people about their experience of receiving a service from one of these organisations as this helps us to form a view about the service and highlight areas for future inspection.
- Complaints should be made directly to the local authority or the relevant organisation, using their own complaint procedure. In relation to a local authority complaint, if the complainant remains unhappy with the outcome of the complaints process, they may also contact the Public Services Ombudsman who may choose to review their complaint and how it was handled.

At the point of contact a record of the discussion should be kept using the Concerns Log, a file note or e-mail which should be saved against the service record. Details of the complaint should be passed to the relevant inspector and/or Area Manager.

Note 4 – Other organisations handling complaints

Where appropriate, it would be helpful to give the caller information about organisations and services that may be able to help them settle individual complaints or offer appropriate advice.

For Adult Services:

- The Local Authority/Health Board that commissioned the service
- The Local Authority complaints officer
- Public Services Ombudsman for Wales (Tel. 0300 790 0203)
- Citizen's Advice Bureau in their area
- Alzheimer's Society Wales (Tel. 02920 480593)
- Older People's Commissioner for Wales (Tel. 08442 640670)
- ACAS (Tel. 08457 474747)

For Children's Services:

- The Local Authority/Health Board that commissioned the service
- Local Authority complaints officer
- Public Services Ombudsman for Wales (Tel. 0300 790 0203)
- Citizen's Advice Bureau in their area
- The Family and Childcare Trust (Tel. 0845 872 6260)
- Wales Pre-School Providers Association (Tel. 02920 451242)
- Professional Association for Childcare & Early Years (Tel. 0845 880 1299)
- Wales Preschool Playschool Association (Tel. 02920 451242)
- Mudiad Ysgolion Meithrin National Office (Tel. 01970 639639)
- Clybiau Plant Cymru Kids Clubs (Tel. 02920 741000)
- National Day Nurseries Association (Tel. 01824 707823)
- Boarding Schools Association (Tel. 020 7798 1580)
- Children's Commissioner for Wales (Tel. 01792 765600 or 01492 523333)

Note 5 – Response to a whistle-blower

- It should always be remembered that it often takes courage and much deliberation for people to raise concerns about the service in which they live, depend upon or work – or where a loved one is reliant upon others for their care and wellbeing. They are often hesitant because of the perceived, or sometimes, real threat of retaliation or retribution. Many may wish to remain anonymous and this should be respected where it is made clear (see note 1). Reassurance that they have 'done the right thing' is often necessary and the person taking the call will need to do so using sensitivity, understanding and empathy.
- Where a concern has been raised by a "whistle-blower", an employee at the relevant service or organisation for example, the inspector, in consultation with their Area Manager, may deem it necessary to interview the individual and they should do so **within 7 days of the concern being raised**. A record of this interview will be included within the concerns and complaints log.
- Within a further fourteen days of receiving the information from a "whistle-blower", the relevant inspector, in consultation with the Area Manager, will decide what action is appropriate, record that decision on the concerns log and undertake the agreed actions. Where appropriate, the Regional Director and, in some circumstances, the Assistant Chief Inspector, may need to be consulted also.

Depending on the nature of the information actions may include;

- Referral to the local children's or adult safeguarding team (see note 6).
- Referral to another agency (see note 4).

- A focused or baseline inspection.
- An investigation into the practices of a local authority.
- Meeting(s) with senior managers of the organisation.
- Taking the information into account during the next inspection.
- Taking no further action.

It should be expected that all agreed actions will normally be completed within 21 days of receiving the information. Where this is not possible the inspector and Area Manager should agree a revised timescale as to how the actions can be completed and record the rationale for this on the concerns log.

Note 6 – Response to a concern where there may be a safeguarding issue

- If the information received indicates a safeguarding concern or the possibility that a child or vulnerable adult may be at risk, then the relevant inspector will refer the matter to the local authority and/or the police as soon as possible, but always **within 24 hours** of receiving all the relevant information. The inspector will follow up that referral **within 2 days** and record what action is being taken.
- Safeguarding concerns should normally lead to a focused inspection – and be undertaken as a result of a safeguarding strategy discussion or meeting. If not, then an explanation for this should be recorded.
- The inspector and their line manager, if appropriate, may attend a strategy discussion or otherwise share information with statutory safeguarding authorities to help determine the best time to schedule a focused inspection and whether it should be announced or unannounced. The decision will be recorded in the response to concerns log.

Note 7 – Acknowledging concerns

7a The BSO receiving a complaint or concern must ensure that it is acknowledged in writing **within 3 working days** of receiving it. The QA+ generated letter (Letter 1) will acknowledge receipt of the concern and confirm that an inspector will a) be in contact with the person raising the concern or b) will later write to confirm the outcome of their concern.

7b **Within 7 working days** a further QA+ generated letter (Letter 2) will be sent by the BSO following a request to do so by the inspector, to the person raising the concern. This will set out what has been done, or is going to be done as a response to their concern.

- Note: Where an inspection is to be initiated, the BSO needs to set a task bar reminder to send a copy of public inspection report to referrer following completion - where this has been agreed between the inspector and the person making the concern.

Note 8 – Inspection and other further action

- If the information received indicates a possible breach of regulations affecting the safety or quality of life of service users, or elevates the level of risk associated with the service, or adds to concerns arising from previous information received, then the

inspector, in consultation with their line manager where appropriate, will conduct either a focused or baseline inspection. The date of the inspection must be recorded on the response to concerns log.

- A copy of the inspection report must be sent to the person who raised the concern – where it has been agreed - and the date of sending recorded on the response to concerns log by the BSO.
- After the inspection the inspector, in consultation with their line manager where appropriate, will decide what action, if any, CSSIW or the provider must take in order to make sure that they continue to meet the conditions of their registration.
- Further action, following inspection or investigation, could include taking enforcement action and/or referring an individual on to their professional regulator such as Care Council or NMC. A summary of action taken will be recorded as a file note and retained on the service record.

Note 9 – Process for handling notifications (including safeguarding referrals) which might indicate a concern

- Where a Business Support Officer (BSO) receives a written or e-mailed notification (Regulation 26; 31 or 38 for example) or safeguarding referral (CP1/VA1) which suggests that the health, welfare and wellbeing of users has been compromised this should be brought to the attention of the allocated inspector or, in their absence, their Area Manager for further consideration. Either will make the decision to initiate a Concern Log and will inform the BSO accordingly. Where both the inspector and Area Manager are absent because of sickness and/or leave, arrangements to provide cover should be in place and BSOs will be made aware of who they need to discuss any issues with.
- Where it is unclear that a concern is indicated or the BSO is unsure, the BSO should discuss the notification with the allocated inspector or Area Manager for consideration. If deemed a concern a concern log record will be initiated; otherwise the notification will be recorded on QA+ as usual.
- Where an inspector receives an e-mailed notification which indicates that the health, welfare and/or wellbeing of people using a service is at risk the notification is to be forwarded to the BSO with a request to log as a concern as soon as possible.

Note 10 – Suggested areas where concerns may be referred to other agencies.

- To the provider/employer - where concern relates to, for example, staff terms and conditions of employment.
- To the Environmental Health Agency - where concern relates to, for example, a flea or rodent infestation.
- To the Food Standards Agency - where a concern relates for example, to kitchen cleanliness or operation.
- To Natural Resources Wales - where a concern relates to, for example, the management or disposal of clinical waste.
- To the Fire Authority - where a concern relates to, for example, fire equipment, exits, fire risk assessments and evacuation plans/procedures.

- To the Health and Safety Executive - where a concern relates to potential risks associated with the physical environment, equipment or procedures.

It should be noted that any of the above issues do not necessarily preclude our involvement – where there are regulatory or non-compliance issues we may still choose to take appropriate action alone or in conjunction with another agency.

Part 4. Frequently Asked Questions.

Q. Who completes the concerns log?

A. BSOs are responsible for completing part 1 of the concerns and complaints log. The allocated or lead inspector is responsible for completing part 2. The Area Manager is required to 'sign off' the form before the BSO formally closes the log.

Q. When should the log be closed?

A. The concerns and complaints log should be closed once the response to the concern and any actions are agreed and recorded. The log should not be kept open for any longer than is necessary. For example, if a focused inspection is to be undertaken, there is no need to keep the log open until the inspection is completed – the log can be closed and any findings captured within the inspection report or where there are delayed outcomes, through file notes saved against the service record.

Q. Do I have to print off a paper copy of the log in order to sign it?

A. No. A typed name will be sufficient. As far as possible concerns and complaints logs will be maintained electronically.

Q. As a BSO, I'm not sure whether the phone call/letter/notification constitutes a 'concern'. What should I do?

A. Seek the advice of the allocated inspector or Area Manager if possible. In their absence seek the advice of another inspector or Area Manager.

Q. What if I receive multiple safeguarding referrals on the one form?

A. A multiple referral needs to generate a single concerns and complaints log record. If in doubt discuss with the allocated inspector or the Area Manager.

Q. The telephone caller was not entirely clear about the issue and I am unsure whether they were making a concern or not. What should I do?

A. Record any information you have obtained and discuss with the allocated inspector or their Area Manager. Agree whether a follow up phone call is required and who should make this.

Q. Who is a 'whistle-blower'?

A. A 'whistle-blower' is an employee including a manager, trainee or agency worker, of a service or organisation who chooses to raise concerns they have about the safety of people living and working there or to report a possible criminal offence. A 'whistle-blower' may have something to lose as a result of contacting us and providing information – they may fear retribution or retaliation by someone in a

position of authority if their actions are discovered – this fear may be perceived or realistic. Staff should understand that it has often taken courage for the individual to come forward in this way and respond in a supportive and empathetic way.

A user of a service or a relative cannot be considered as whistle-blowers. They should be encouraged to raise any concerns they have directly with the provider of the service or where this has been unsuccessful, to make a formal complaint via the service's own procedure.

An employee acting as a whistle-blower is protected under the Public Interest Disclosure Act (1998). The Act applies to people at work who raise genuine concerns about crimes, civil offences (including negligence), dangers to health and safety and the environment or the cover up of any of these. It applies whether or not the information is confidential and whether the malpractice occurs in the UK or overseas.

The Act makes specific provision for employees to make disclosures to regulatory bodies such as CSCIW and that such disclosures are protected in law.

When looking at a concern which has been raised by a whistle-blower, inspectors should bear in mind the need for services to have a policy/procedure in place designed to support and protect whistle-blowers. Inspections generally, but particularly those associated with a concern raised by a whistle-blower, should be concerned with way in which real or potential whistle-blowers are supported and protected.

Summary of changes to previous version of guidance

Version Number	Date of Publication	Page	Changes to previous version
V3.0	10 Oct 2013		Complete review of previous version. Now refers throughout to the need to respond effectively to concerns received and how this is to be achieved. Introduces process flow charts and concerns log for BSOs and inspectors. Clarifies identification of Whistleblower and how to deal with same.
V2.1	18 Oct 2012	3	Reference to complaints about CSSIW updated to reflect that complaints about CSSIW will be considered in accordance with WG Policy on Customer Complaints and hyperlink added.
		4/8	Reference to LA inspector changed to Area Manager
		5	Reference to <i>managers</i> changed to <i>line managers</i>
		6	Reference to <i>how we handle personal data</i> changed to <i>how we handle and protect personal data</i> and hyperlink updated.
		7	Reference to <i>how we handle personal data</i> changed to <i>how we handle and protect personal data</i>
V2.0	19 Sept 2012	Cover 1	'Complaints' incorporated into title – revised title to 'Concerns and Complaints'
		2	Contents renamed and arranged in sections
		3	General Policy section updated and reworded to include further detail regarding CSSIW process and reference to Data Protection Act
		4	Flowchart 1 revised to include further detail regarding CSSIW recording process and Data Protection Act
		5	Flowchart 2 revised to include further detail regarding CSSIW recording and referral processes and Data Protection Act
		6	Note 1 now refers to data protection, anonymity and whistle-blowing (and relevant links to further guidance) and telephone script when receiving calls from persons wishing to remain anonymous / whistle-blowing.
		7	Note 2 now refers to information relating to a registered regulated service.
		8	Note 3 now refers to information relating to local authorities or services that CSSIW reviews
		8	Note 4 now refers to organisations handling complaints
		10	Note 8 now includes guidance regarding referrals to professional regulators
V1.2	April 2012		-
V1.2.1		3	Para 1 grammatical correction
		4	Flowchart 1 comprehension changed to understanding
		5	Flowchart 2 box 7 timescale of 5 working days added

Annex 1

Figure showing sources of concerns and channels of communication

