

CENTRAL BEDFORDSHIRE COUNCIL ADULT SOCIAL CARE

CUSTOMER FEEDBACK –

COMPLAINTS COMPLIMENTS

ANNUAL REPORT 2011/12

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121123 Annual Report- Customer Feedback ASC Sonya Branagan

INTRODUCTION

This report fulfills the statutory duty to produce an annual report for Adult Social Care complaints. The report provides statistics for 2011/12on the number of complaints received; complaint outcomes (upheld/not upheld); performance; issues complained about; and learning and improvements resulting from complaints.

The complaints system requires updating and has limited reporting functionality. There are plans to replace the system in 2013/14 to improve customer access to online reporting of complaints and compliments and to improve management information.

The Customer Relations Team managed the procedures for Adult Social Care complaints. The Adult Social Care management team received regular status reports, monthly and quarterly reports on complaints and learning.

EXECUTIVE SUMMARY

The Council's Adult Social Care complaints procedure contains a number of different options to handle complaints. When the Council has fully considered a complaint the next stage is referral to the Local Government Ombudsman. The complaints procedure requires individual complaints to be assessed with the emphasis on understanding the complaint at the outset and taking the right approach to resolving it. Services also seek to make improvements as a result of complaints.

Each option for handling complaints has a minimum standard timescale for responding:

- Local resolution by Service Manager 10 working days, up to 20 for complex cases
- Independent Investigation 25 up to 65 working days
- Conciliation 10 working days
- Mediation 25 working days

However, timescales can be flexible depending on the nature of the complaint. Extensions to timescales are acceptable providing this is negotiated and communicated to the complainant.

There were 82 new complaints received in the period compared to 88 the previous year. 61 complaints were actioned and closed. The majority (56) were dealt with by Local Resolution. 49 complaints were either upheld fully or in part. Whilst individual cases had specific remedies put in place wider services improvements were also identified in a number of cases. These are detailed in Section 4.

There were 58 compliments recorded where service users thanked or praised staff for the excellent service and support they had provided. This was a slight increase on the 52 reported in the previous year.

1 SUMMARY STATISTICS

1.1 Headline Data for Customer Feedback

Feedback Received	Q1	Q2	Q3	Q4	Total
Complaints	16	21	21	24	82
Compliments	19	7	17	15	58

1.2 Spread of Complaints Received



- 1.2.1 There were few similarities in the spread of complaints over the year compared to the previous year. July and November saw the same number of complaints as in the previous year. The peak for complaints was in October in direct contrast to a low in October the previous year. The low in this period was December.
- 1.2.2 The peak of 10 complaints in October saw complaints were spread across services. There was no single issue creating a trend of dissatisfaction in the month. The similar number of complaints in September saw a spread of complaints across services but included 3 complaints about the blue badge service in Business Support. The service has since been reviewed.
- 1.2.3 Following assessment 17 of the 82 complaints registered across the range of services were not put through the complaints procedure. 8 cases were referred on to another process such as safeguarding or to an external provider responsible for the complaint, i.e. a Health Authority or care provider. In 2 cases service users did not agree to the complaint being made on their behalf by a representative. In 7 cases the complainants withdrew the complaint due to a change in circumstances or following an action or review by the service. This left 65 cases requiring action under the complaints procedure.

1.2.4 Health Services and Social Care Joint Complaints

There were 5 complaints received that related to both health and social care services delivered to an individual. All received a coordinated single response to the issues.

1.3 Local Government Ombudsman (LGO) Complaints

- 1.3.1 The council received 4 complaint enquiries from the LGO about its adult social care services. In 2 cases the LGO decided not to initiate an investigation as the Council was considering one of the cases through its complaints procedure already, and in the other case the service user confirmed they did not wish to make the complaint made by another family member. Two cases were investigated by the LGO.
- 1.3.2 The first investigation related to an historical handling of a safeguarding matter relating to a residential home. The LGO decided to discontinue the investigation as the Council had remedied the case. A number of improvements had been made to the safeguarding process and procedures since the matters complained about.
- 1.3.3 The second investigation related to the Council's actions and alleged failure to consult on the decision to cease the Welfare Rights Service. The Ombudsman was satisfied with the actions taken by the Council and did not purse the complaint further.

1.4 Trends - Services Most Complained About

1.4.1 The service receiving the most complaints was the Older People Service receiving 40 of the 82 complaints. A total of 9 cases were referred on to another process or withdrawn leaving 31 for action through the complaints procedure.

The majority of the complaints related to social work management of cases. The main reasons for complaint were dissatisfaction with the level or type of support provided or planned.

The Council's Reablement Team provide assessments of home care needs and/or direct care in people's homes. The service received 6 complaints mostly about the quality of care.

There were 8 cases relating to the quality of services provided by external providers on behalf of social care i.e. home care and respite/residential. 6 complaints about residential care were mainly about the quality of care. 2 complaints about home care were about staff attitude and not providing a service in bad weather conditions.

The Older People Service also received the most compliments with 34 out of a total of 58.

1.4.2 The Learning Disability Service received the second largest number of complaints with 19 new cases. A total of 5 cases were referred on to another process or withdrawn leaving 14 for action through the complaints procedure.

The issues most complained about were:

- transition from children's services into adult services, in 4 cases concerns were raised about delay in providing support or services;
- 4 complaints about the level of support for service users;
- In 3 cases people complained about poor communication
- 1.4.3 The finance services in Business Support received the third highest number of complaints with 10 cases. The main reason for complaint (4 cases) related to letters; the quality and timing of information in letters to customers. 3 complaints were not directly related to social care services but were about delays in processing blue badge parking permit applications.
- 1.4.4 The Disability Service received 9 complaints. There were no repeat issues or trends. 2 cases related to Occupational Therapy services. The remainder of complaints were about the social work team role including quality of or no assessment of needs, poor communication, delay or support re direct payments, disagreement with decision to move to supported living, no plans for future care and support.
- 1.4.5 Complaints about the quality of services provided by care providers on behalf of the council i.e. home care and respite/residential were shared with the Adult Services Improvement Group and the Contracts Service. Whilst each individual complaint was actioned the Contracts Service ensured wider concerns about providers were monitored and managed to address contract and quality issues.

1.5 Outcomes from concluded Complaints

1.5.1 61 Social Care complaints were considered and concluded in the period.47% (29) were upheld. A further 33% (20) were partly upheld. This meant a total of 80% were deemed to be well founded in full or in part.

Whilst case specific remedies were put in place for individuals Section 4 details wider actions and improvements resulting from complaints.

1.6 Compliments

- 1.6.1 58 compliments from customers were captured relating to the quality and timeliness of services and support.
- 1.6.2 Extracts from compliments received:

Reablement Service

'This card is to say thank you to yourselves and all the carers for the excellent service you have given me over the last 10 weeks. All the carers that came to me were both friendly and very professional in the care they gave me. Thank you once again.'

Older People's Service

'A big thank you for the recent assessment of father's needs at home. The extra aids provided were not expected and are a real bonus. Dad finds the stair and grab rails especially helpful. We are planning a trip out with dad and his new wheelchair very shortly - the first day out for months! Thank you once again for an excellent service.'

Business Support – Finance Service

'Over a number of years (the worker) has helped my mother and myself with a wealth of good advise. She will help with problems outside her area if possible or act as a go between to help us get results. (the worker) makes it a pleasure to see her and sets a standard for council officers to try and achieve.

2 PERFORMANCE IN COMPLAINTS HANDLING

- 2.1 There is no timescale set in Regulations in which to respond to complaints. Instead the emphasis is on assessing the complaint at the outset to fully understand the issues, and then agreeing a clear method of handling the complaint to a defined timescale. In response to this the Adult Social Care complaint procedure includes a range of options for resolving complaints, each with a minimum standard timescale for response. Timescales can be re-negotiated with the complainant if appropriate.
- 2.2 The legacy database that is used for capturing complaints is not configured to reflect the options and flexibility for handling complaints including relevant timescales. The majority of complaints had an action plan setting out how the complaint would be handled.
- 2.3 Of the 61 cases that were concluded:

56 were dealt with using the local resolution method;
3 were dealt with by conciliation meeting method;
1 case was concluded following a formal investigation carried out by an external investigator; and
1 formal investigation case ceased when the matter was escalated to the Local Government Ombudsman, see 1.3.3.

2.4 Where an action plan was in place approximately 66% of cases were completed in line with the timescale in the agreed action plan. Of the 11 cases that took the longest to conclude:

4 had action plans and drifted beyond the planned timescale for response;
2 had no action plan and went beyond the local resolution timescale;
2 had been agreed as resolved within the timescale but the written response was delayed
2 had minor delays of less than 2 working days

2 had minor delays of less than 2 working days.

1 case had an extension agreed but with no set timescale

3 EQUALITY & DIVERSITY MONITORING

- 3.1.1 The purpose of capturing data is to monitor access to the complaints procedure and to ensure services are appropriate for all service user groups. Customer Relations record data about the service user for complaints.
- 3.1.2 The system used for Adult Social Care complaints has the facility to capture the service user's gender, ethnicity and whether the service user describes themselves as having a disability or not. However, the system has limited reporting functionality for analysis in this area and is not adequate to meet the needs of equality and diversity monitoring. We can't easily analyse the detail of complaints and trends relating to discrimination/human rights/age. The

Council's Customer First programme includes a plan to deliver a complaints system solution in 2013. The requirements for capture and reporting on equality and diversity information will be taken into account when developing categories of complaint.

3.1.4 There were 4770 service users in receipt of a service during the period 2011/12. 82 new complaints were registered. 57 of the complaints were made on behalf of service users by a representative. The majority, 51, were made by family members.



3.2 Social Care Complaints – Gender

- 3.2.1 64% of complaints affected female service users, 27% affected males which reflected similar proportions of service users receiving services where 62% were described as female and 38% male. Service users of both genders are represented in the complaints procedure.
- 3.2.3 When considering the details of specific issues of complaint the main cause for complaint affecting females was the level of support provided or planned from older people's services. Males and females were equally affected by complaints about the quality of care and communication in relation to older people's residential care.

Complaints affecting males more than females related to the learning disability service on matters around transition from children to adult social care and the level of support provided.

3.3 Social Care Complaints – Ethnicity



- 3.3.1 93% of service users receiving services were described as White British. 60% of complainants were recorded as 'White UK'. Other ethnic backgrounds were also represented in complaints. The 35% 'unknown' cases may mask representations from ethnic backgrounds not reflected here.
- 3.3.2 The issues for complainants in the minority categories for ethnicity were also raised by those in the majority category transition between children's and adult social care services, dissatisfaction with the level of support provided, the level of paperwork required for Direct Payment services.





3.4.1 In 46 % of complaints service users described themselves as having a disability. A significant proportion of cases were recorded as 'unknown'. The services covered included older people, disabilities and adults with learning

disabilities. Therefore, it is anticipated that a significant proportion of complainants would describe themselves as having a disability. The majority of complaints where a service user was recorded as having a disability were in relation to the actions or inaction of social work teams.

- 3.4.2 The main issues affecting people accessing learning disabilities services was; how their social work case was managed during transition from children's to adult social care services; and in general care management cases the level of support provided.
- 3.4.3 There was no single issue causing concern for people accessing services for those with a physical disability. Paragraph 1.4.4 summarises the areas of complaint. Where people complained they were largely concerned about getting the right level of care or equipment to meet their needs.
- 3.4.3 The figures demonstrate that people with disabilities are able to access the complaints procedure.

4 SERVICE IMPROVEMENTS RESULTING FROM CUSTOMER COMPLAINTS

4.1 The majority of the improvements identified in complaints are specific to individual cases and put in place to remedy the complaint. There is some evidence of learning from complaints detailed below:

4.2 Learning Disabilities Service

- a) Contracts and Compliance committed to monitor staff training arrangements in an external care home, paying particular attention to content and relevance, in respect of the needs of a person on the autistic continuum and how this is evidenced by the provider. The impact on service users was monitored through reviews.
- b) A care home committed to review scheduled activity to support and enhance the opportunities of individual customers to ensure maximum choice and opportunity in accordance with their assessed need.
- c) Training was provided for a staff group following a complaint that highlighted the need to improve safeguarding awareness. Customers of the facility were provided with updated information regarding safeguarding and provided with easy to read leaflets.
- d) There were a number of complaints about transition from children's to adult social care services. This area of work is currently subject to improvements on a National scale. Adult Social Care is currently working as part of the Disabled Children's Programme Board and is leading developments for young people and their family carers going through Transitions. This will include the need to assess young people from the age of 14 and support them through to the age of 25 by introducing a single health, education and social care plan and the identification of a lead professional. In the meantime the learning disabilities team have recognised the importance for service users, families and professionals to have a care manager as a contact to offer consistency and develop networks. The operation of the Independent Lifestyle Team has also been reviewed so that they can undertake an assessment and/or training

prior to the young person turning 18 in order for them to be clear about what support and/or services will be in place going forward.

- e) Staff at sheltered accommodation were provided with advice on how to respond to incidents involving service users and other local people.
- f) Following a complaint about poor communication and quality of information the duty desk service was audited on a quarterly basis to monitor communication and responsiveness.
- g) Complaint about poor communication and quality of information when contacting the duty desk. The duty desk was audited on a quarterly basis to monitor communication and responsiveness.

4.3 Older People Services

- i. Staff working within Extra Sheltered Schemes across Central Bedfordshire were reminded of the process and expectations of them whilst facilitating discharges from hospitals.
- ii. A worker had provided incorrect information to a service user on how Direct Payments work in relation to respite. Training on finance matters was put in place for the worker to improve practice. A project has since been put in place to review the direct payments process.
- iii. A customer had difficulty making contact with the reviewing manager, trying a direct dial number when the officer was on leave. Calls to the service are managed by the Council's Contact Centre and staff were made aware of the risks of giving out direct numbers to avoid a similar occurrence.
- iv. Complaints about the quality of food being delivered to people in their own homes were followed up by the Contracts Compliance Team who monitored the improvements set out in an inspection report.
- v. Domiciliary Care Agency put in place an emergency plan for bad weather to improve responses

4.3 Occupational Therapy Service.

The service has processes in place for requests for minor works to be outsourced to private contractors. An investigation into a complaint highlighted that there were problems with completion timescales. The service have put in place a reviewing process to review minor works within 6 weeks- if these are not completed then the contractor is contacted for reasons as to why. This will improve the information to service users.

4.5 <u>Reablement Services</u>

- a) A complaint about a failed call resulted in a system put in place that enables everything to be double checked with regards to staff being on annual leave and sickness. This will ensure that the timesheets corresponded with the annual leave and sickness lists before time sheets were sent out.
- b) A complaint about poor quality of care and a missed call resulted in specific staff undertaking further training and observations to ensure that they are fully competent. Staff involved in the complaint were informed of the concerns and expectations around performance.

c) A tenant in a resource where care was provided by the Council was unhappy that carers had not carried out checks on them. Checks will now be undertaken on all residents unless they opt out of this option, the same level of checks will be in place for weekdays and weekends. Roles for staff were clarified for checking tenants who were not receiving care.

4.6 Business Support

- i) The approach to letter writing was reviewed to improve the customer focus and to ensure individual circumstances are considered when deciding on the location to send letters to in respite cases.
- ii) The process for Blue Badge applications has undergone significant changes and the service continues to monitor performance and customer feedback to improve standards.

4.7 Complaint Handling:

- a) An audit of leaflets was carried out to ensure service users and their families are informed of how to, and provided with a means to, make complaints or compliments.
- b) During the period complaint learning sets were planned for a pilot in May 2012 to support staff to take a best practice approach to complaints including action planning; learning from complaints; managing complaints about services provided by external companies; and managing difficult complaints.

4.6 Externally Provided Care Services

The Commissioning Service routinely monitors complaints about care services and take appropriate steps to manage any concerns. Complaints data is considered alongside other relevant information. This includes liaising with operational staff, the safeguarding team, the Care Quality Commission and other local authorities to support their investigations. Where appropriate they worked with care providers on action plans and supported them in service improvement.