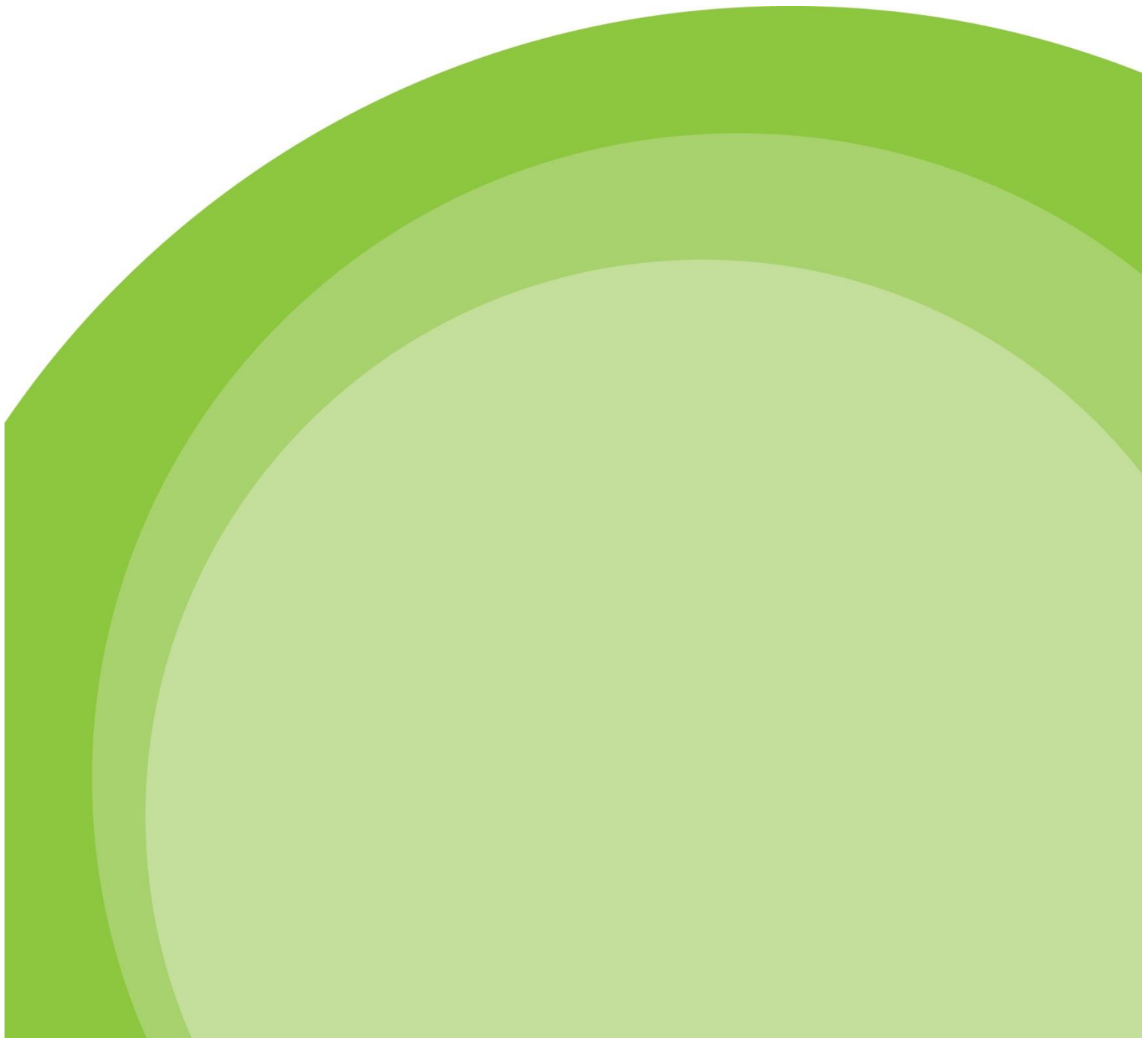




Adult Social Care & Public Health Services

Customer Feedback – Compliments/Complaints
Annual Report (1st April 2017 – 31 March 2018)
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Introduction

This report fulfils the Council's statutory duty to monitor the effectiveness of the complaints procedure and produce an annual report for Adult Social Care and Public Health Complaints.

This report provides statistics for 2017/18 on the number of compliments and complaints received; a summary of complaint causes; the number of complaints that were well founded (upheld fully or in part); performance; the actions taken to improve services because of complaints; complaints considered by the Local Government and Social Care Ombudsman (LGSCO) and the effectiveness of the complaints procedure.

The report will be presented to the relevant local authority committee and will be made available on the Council's website.

The Complaints Procedure

The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 require us to investigate complaints about social care functions in a manner appropriate to resolve it speedily and efficiently, whilst keeping the complainant informed. This gives us flexibility on the approach to take in responding. However, the next stage if we are unsuccessful at resolution is the LGSCO.

Managers are expected to assess a complaint to determine its seriousness and any potential risks to the individual or the organisation. Each complaint should have a clear action plan on how the complaint will be handled. The level of seriousness determines the appropriate method for handling the complaint. There are a number of options to address complaints. Timescales can be flexible and negotiated with the complainant although as a Council we have set minimum standard timescales as best practice. Options include:

- Local Resolution by Service Manager – 10 working days, 20 for complex cases
- Formal Investigation – 25 up to 65 working days
- Conciliation/Mediation – 10 working days/25 working days

If a complainant asks for further action on a completed complaint it will be reviewed by the Assistant Director/Director. If the Assistant Director/Director decides the complaint has been fully addressed, it will be signed off and the complainant advised of their right to refer to the LGSCO.

All complaints are triaged to ensure they are suitable for the process. This ensures matters are managed through the correct procedures, should an alternative process be in place. Any matters which are not suitable for the complaints process are filtered out and passed to the appropriate channel.

Executive Summary

Adult Social Care

44 compliments were received in 2017/18 for Adult Social Care services with instances of customers telling us that services were getting it right and having a positive impact on their lives.

There were 45 new complaints received, 41 of which were managed through the complaints procedure. The remaining issues related to internal management processes; alternative review processes; matters which the local authority was not responsible for; and matters which were resolved on the spot. These cases were filtered out and where appropriate passed to alternative channels already in place to manage those issues.

43 complaints were concluded. Complaints were important feedback for services and a means of considering how to improve. Managers listened to customers' views with 74% of complaints either upheld fully or in part. The main reason for complaints in 2017/18 related to incorrect action being taken and staff conduct/attitude issues.

Performance in complaints handling was similar to the previous year in that 78% of cases had an action plan to determine how the complaint would be managed. 81% of those cases complied with the plan. Individual cases had specific remedies put in place and the majority of wider service improvements resulted in the complainant's experience being shared with staff to improve and inform practice going forward.

Four complaint cases escalated to Assistant Director/Director Review. In three cases the Assistant Director concluded that the complaint had been fully addressed and the complainant was advised of their right to refer to the LGSCO should they remain dissatisfied. The fourth case was escalated to Director Review and partially upheld. Following disagreement on an appropriate remedy the complainant was advised of their right to refer to the LGSCO.

The LGSCO considered one complaint about Adult Social Care Services during the period and found fault in relation to the Council's actions however, the LGSCO concluded that there was no significant injustice to the service user or complainant.

Public Health

The Public Health Service in Central Bedfordshire delivers most of its services by commissioning from external providers who manage their own complaints. The Stop Smoking Service is delivered directly by Central Bedfordshire Council. There were 14 compliments registered about the quality and helpfulness of the Stop Smoking Service. No complaints were registered.

Effectiveness

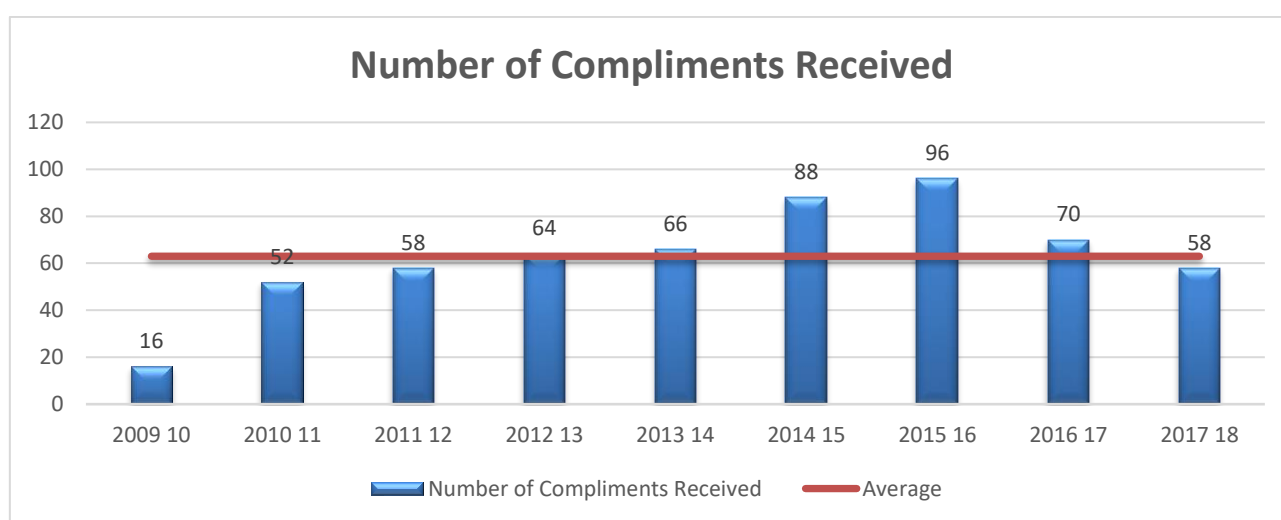
The activity for this reporting period shows the complaints procedure has been effective at resolving customer complaints at a local level. In Adult Social Care learning from the customer experience through complaints has led to improvements to practices. There is some room for improvement in managing complaints to agreed timescales and to establish root-cause of complaints to identify further learning for services.

1. Representations Made to Central Bedfordshire Council

1.1 Compliments Received

Compliments from service users and/or their representatives about service delivery are recorded under the Customer Feedback Procedure. Whilst Adult Social Care and Public Health Services may seek and receive positive feedback from families and professionals via other mechanisms, the Customer Feedback Procedure captures compliments where the service user and/or representative has gone out of their way to provide praise and appreciation for the service provided to them.

58 compliments were recorded across Adult Social Care and Public Health Services relating to good customer care and the quality of support to service users and their families.

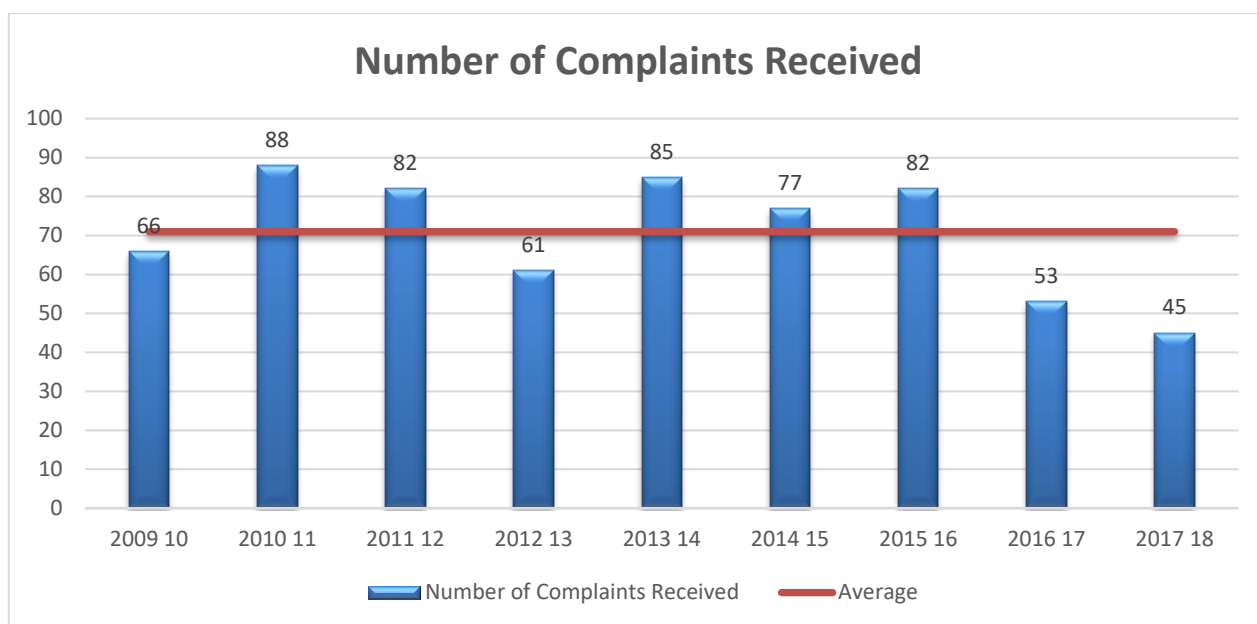


The number of compliments received in 2017/18 reduced from the number received in 2016/17 (by 17%). The number received in this period was also below the average number of compliments received across Adult Social Care and Public Health Services in previous years.

1.2 Complaints Received

A complaint may be generally defined as an expression of dissatisfaction or disquiet in relation to an individual, which requires a response.

45 new complaints were received across Adult Social Care Services in 2017/18. There were no complaints received for Public Health Services in 2017/18.



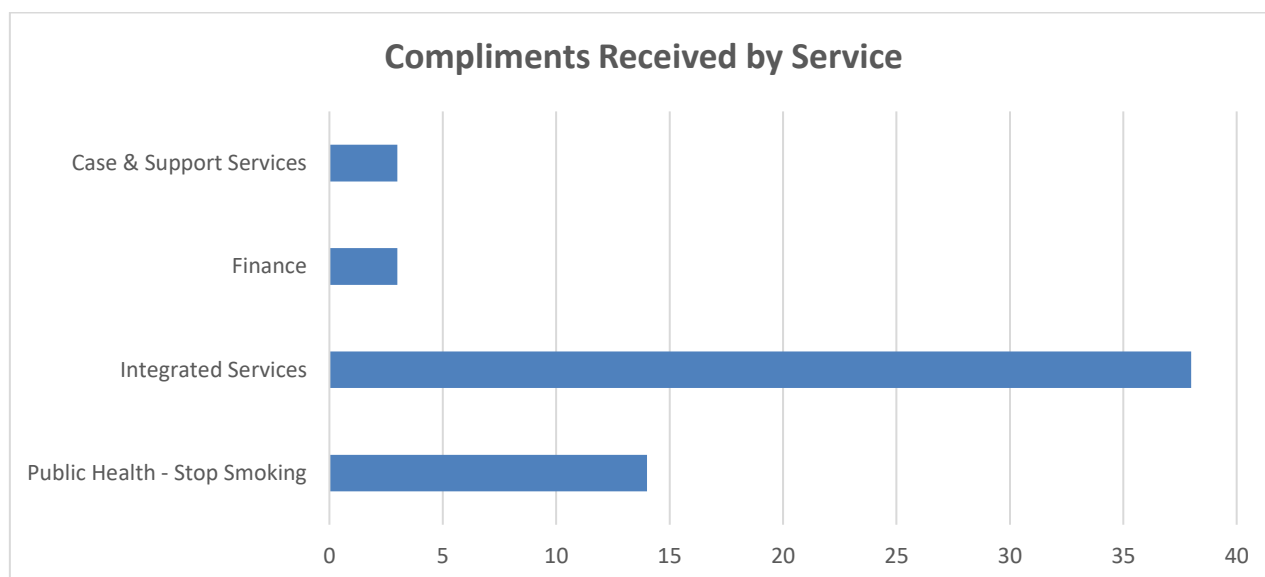
The number of new complaints received in 2017/18 reduced from the number received in 2016/17 (by 15%). The number of new complaints received in 2017/18 was below the average number of complaints received in previous years.

Of the 45 new complaints received, 41 were managed through the complaints procedure. The remaining issues related to internal management processes; alternative review processes; matters which the local authority was not responsible for; and matters which were resolved on the spot. These cases were filtered out and where appropriate they were passed to alternative channels already in place to manage those issues.

2. Compliments Received Analysis

2.1 Compliments by Service Area

The chart below shows how the 58 compliments received across Adult Social Care and Public Health during 2017/18 were distributed by service area:



A breakdown of compliments received by service is detailed below along with a table which provides a general overview of the work each area undertakes:

Service Name	Description
Care & Support Services (3 compliments received)	Central Bedfordshire Council run residential homes and day centres
Finance (3 compliments received)	Invoicing for care and management of direct payments for care; blue badge applications
Integrated Services (38 compliments received)	Assessment of eligibility for care and support; development and management of care plans; managing care provision by providers; care at home to support independence
Public Health-Stop Smoking (14 compliments received)	Offers support and advice to residents wanting to stop smoking

Care & Support

Thanks for accommodating service user whilst his home was being deep cleaned; grateful for support and care provided; care received was amazing

Finance

Thanks for professional level of service; thanks for processing blue badge application so swiftly; thanks for sensitive handling of matters

Integrated Services

Praise for earned trust in preparing service user for independent living (2); thanks to the Independent Lifestyles Team; praise for completion/outcome of assessment (4); thanks for help received (8); praise for new care package; compassion and professionalism (3); kind, caring and patient (5); thanks for valued time; thanks for making service user feel comfortable; praise for support and guidance (3); thanks for advice/assistance to MS sufferer at a time of crisis; treated with care and respect; appreciation for way dementia sufferer's needs were assisted; praise for understanding difficulties and frustrations; thanks for aids and alterations to remain living at home; people orientated; friendly

Public Health – Stop Smoking

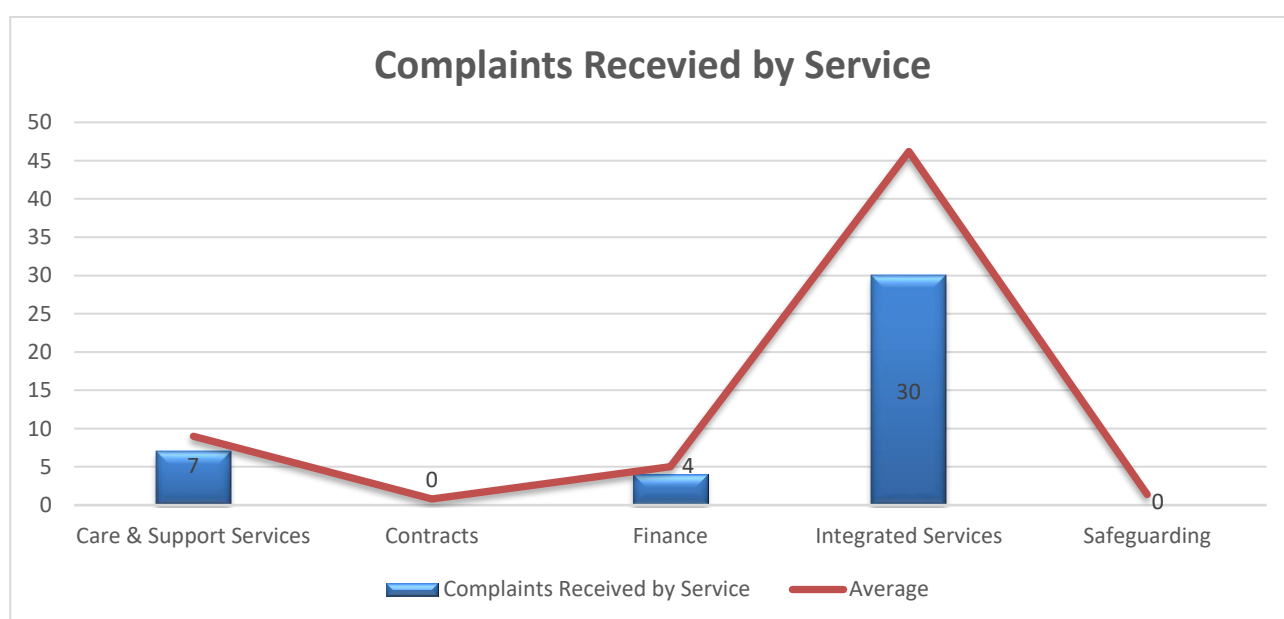
Praise for wealth of knowledge and encouraging; excellent support to someone with mental health issues; thanks for help and support (8); delivering a fantastic and supportive service (2); friendly service that doesn't judge; patient and kind staff;

3. Complaints Received Analysis

3.1 Complaints by Service Area

The Customer Relations Team undertook a project in 2015 to pull all complaints data recorded by the team into a single system. The team were previously working on two databases. From 1st December 2015, all complaints data received by the team has been recorded onto a single database to ensure consistency when capturing complaints and to enhance reporting functions. The improvements made in this area is starting to enable us to undertake further analysis in relation to complaint trends.

The analysis below, on complaints received, is based upon the 41 complaints accepted into the complaints process about Adult Social Care services during 2017/18. The chart shows complaints accepted into the process by service area.



Over the year much of the complaints were received by Integrated Services (30). Integrated Services is responsible for the delivery of statutory services through front line, customer facing teams. The nature and volume of work undertaken by this service area is likely to give rise to more complaints than other areas of Adult Social Care.

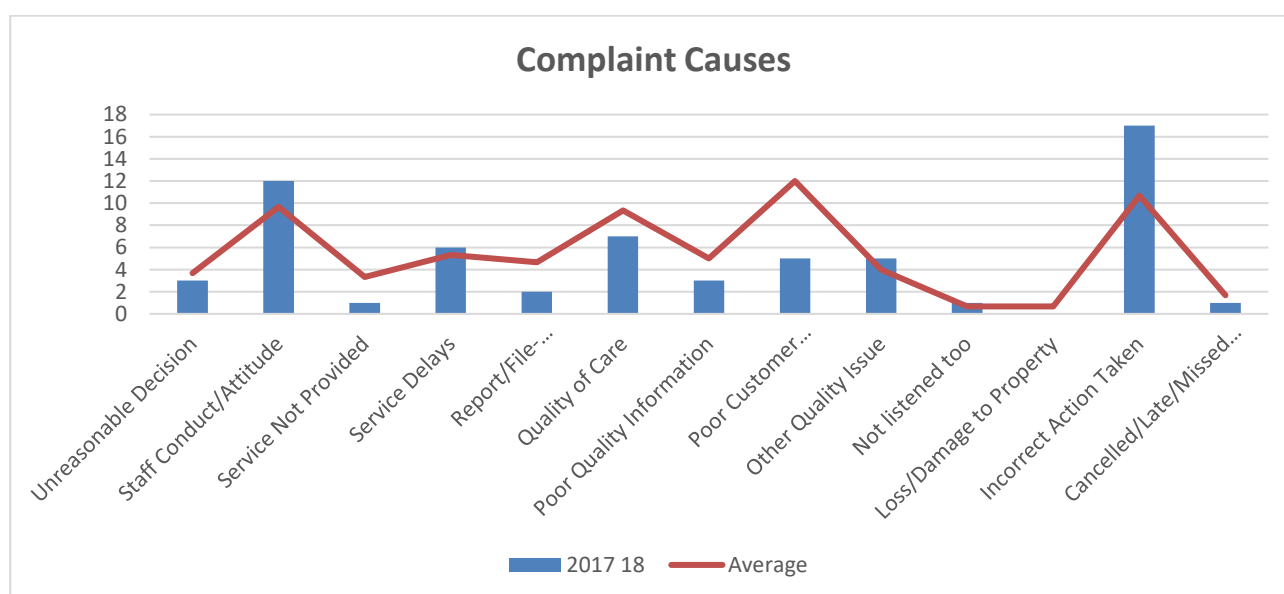
The number of complaints managed through the complaints procedure by service area were below the average number of complaints accepted into the process in previous years. The table below provides a general overview of the work each service area undertakes.

Service Name	Description
Care & Support Services	Central Bedfordshire Council run residential homes and day centres
Contracts	Monitoring the quality of care by providers in line with contractual arrangements to continue to improve the standards of care within Central Bedfordshire
Finance	Invoicing for care and management of direct

	payments for care; blue badge applications
Integrated Services	Assessment of eligibility for care and support; development and management of care plans; managing care provision by providers; integrated working with hospitals; and care at home to support independence
Safeguarding	Protecting adult's rights to live in safety, free from abuse and neglect

3.2 Complaint Issues

The chart below indicates the types of complaint issues received during 2017/18. Each complaint received can have several aspects, so one complaint may cover more than one of the types of complaint issues set out in the chart.



The main cause for complaint in 2017/18 related to incorrect action taken followed by staff conduct/attitude.

In 2015/16 and 2016/17 poor customer care/communication was one of the top reasons for complaint. The chart above demonstrates that there has been some improvement in this area during 2017/18 and that complaints about poor customer care/communication were below the average received about this complaint type over previous years. The chart also demonstrates that complaints received this year about incorrect action taken; staff conduct/attitude; service delays; other quality issues; and not being listened too are above the averages for this complaint type in previous years.

A breakdown of complaints received overall during 2017/18 is detailed in the table below:

Complaint Causes	Breakdown of issues raised
Unreasonable Decision	Disagreement with outcome of safeguarding in relation to fall at Day Centre; disputing best interests' decision/not involved in discussions; lack of assessment/consideration of case decisions

	around respite and moves;
Staff Conduct/Attitude	Lack of clarity; care plan not followed; no respond for privacy when service user refused support; falsified records; inaccurate information provided to safeguarding enquiries; abrupt and unsympathetic to service user with dementia; lies; laughing inappropriately; not explaining why home visit was required; uncaring attitude; arranging unannounced visit to service user who is confused and lacking capacity to decide on return home from hospital; bullied to agree care package; unjustified safeguarding referral made; lack of updated; not responding to calls; threatened with court if top up fees were not kept up to date; social worker reading private email/bank statement without permission; patronising, unfriendly and unreasonable to concerns raised about vulnerable people;
Service Not Provided	Agency care package ceased and service user left without care;
Service Delays	Delay in providing correct details of deceased service user's account for invoicing purposes; four-month delay between withdrawal of funding and new assessment; almost a year taken to provide invoice for day centre and transport charges; delay in providing review of care funding decision; delay in repairing broken stair lift; delay in occupational therapy assessment;
Report/File/Invoice/Integrity	Inadequate/poor quality record keeping; factually incorrect letter sent to care home about service user;
Quality of Care	<p>Day Centres: Service user sent home with arm trapped in chair; pressure injuries; missed medication; inadequate / inappropriate activities or interaction for service users; staff not fully understanding service users support needs; service user not supported to use signing skills to communicate; poor personal care; lack of physio; clothes missing</p> <p>Residential: No ambulance called following fall; medication not sent to hospital; medication not given; buzzer not working; personal care (shaving) done publicly; trivialising service users care; crash mat not</p>

	<p>provided; no call bell; placement on condition of service user sitting on alarm mat; poor nutrition; poor personal care; poor structure; poor physical healthcare; poor dementia care; poor equipment</p> <p>Home Care: Incorrect medication; front door left open; missed calls; poor recording</p>
Poor Quality Information	<p>poor advice/lack of response or visit following a flood; lack of communication and support with financial assessment and client contribution; lack of information re financial assessment and care home costs;</p>
Poor Customer Care/Communication	<p>Offensive tone of letter re unpaid invoice; unable to read staff notes or understand staff over the telephone; not informed social worker had left the local authority; no notification of home closure or reassurance to service user and family; not provided with copy of assessment, care plan or best interests decision;</p>
Other Quality Issue	<p>Lack of empathy and understanding of condition from Blue Badge Assessor; not getting appropriate support re personal situation and needs; concerns about quality of affordable care homes in Central Bedfordshire; lack of support to secure financial assessment; inadequate safeguarding enquiries;</p>
Incorrect Action Taken	<p>Promoting telecare services that use high cost phone numbers; attempts to contact deceased service user after being informed of death; lack of support leading to loss of Continuing Healthcare funding and moving care home; changes to care package not discussed; sling provided by Occupational Therapy not suitable and caused injury; receiving bills for care but unable to pay as direct payment not set up; notice to leave residential home did not follow process; service user with dementia and family were left vulnerable; care act assessment documentation and recommendations were not provided or actioned; physical and mental needs not taken into account/review of care not undertaken when requested; no discussion around hospital discharge and unsuitable care package in place; assessed for four calls per day but only receiving two; request for family to move service user in 24 hours; failure to act/assess risks following</p>

	alerts of new resident behaviour in residential home; failure to respond to safeguarding concerns; failure to assess health needs which may have entitled service user to Continuing Healthcare funding; residential placement arranged without agreement; no risk assessment or care plan for moving service user following home closure;
Cancelled/Late/Missed Appt	Not attending call on time/last minute cancellation;
Not Listened Too	Allegations from ex-partner believed without sharing and discussing to hear other side of the story;

4. Equality and Diversity Monitoring

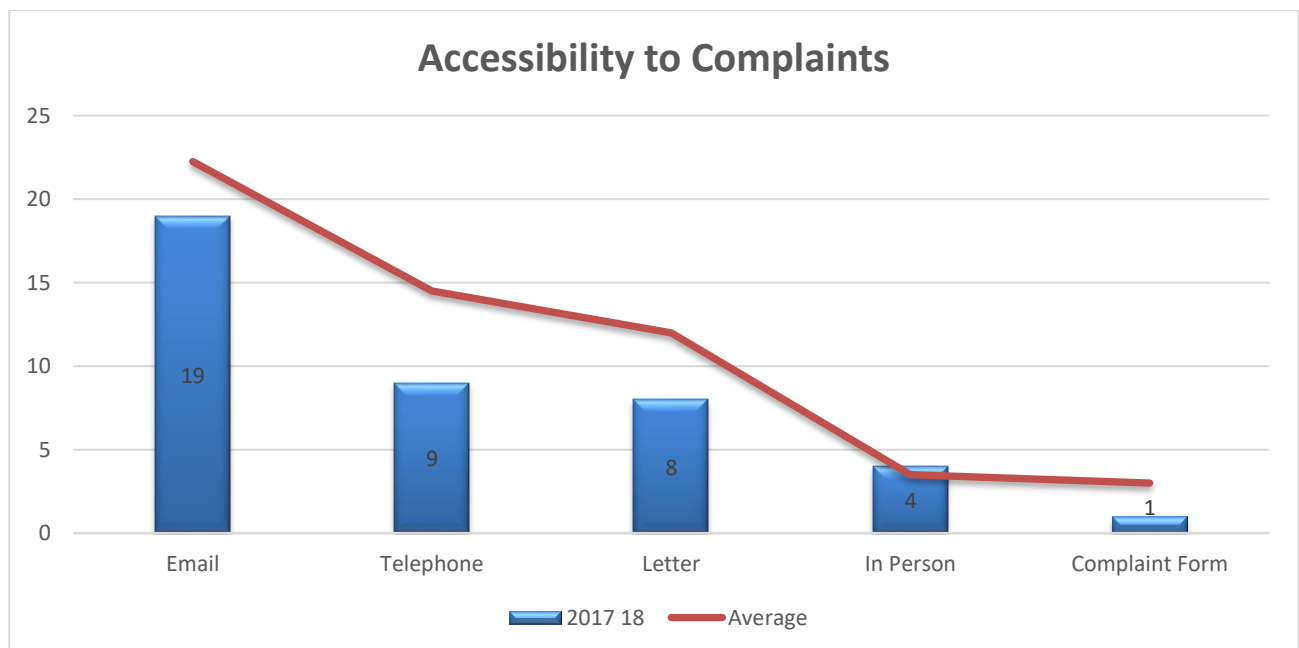
The purpose of capturing equalities data is to monitor access to the complaints procedure; to ensure services are appropriate for all service user groups; and to check whether any issues relating to discrimination have been raised. Data relates to the service user affected by the complaint or a person who has been affected by the actions taken by the service.

Whilst information is not always provided by a complainant the system used for complaints has the facility to capture the service user's gender, ethnicity, age group and whether the service user describes themselves as having a disability or not.

4.1 Accessibility to Complaints

By having a range of contact options for complainants to make their complaints the Council aims to meet the needs of its service users in accessing the complaints procedure. People can make complaints in person; face to face; or via telephone (including a direct line to Customer Relations); in writing; via email; letter; or complaint form. Complaints can be made by a representative of the service user or an advocate.

The chart below shows which method of communication the 41 complainants used to contact the Council in 2017/18.



Email was the preferred choice for customers to contact the Council in 2017/18 in relation to making complaints. The averages detailed in the above chart show that email has consistently been the preferred option over previous years.

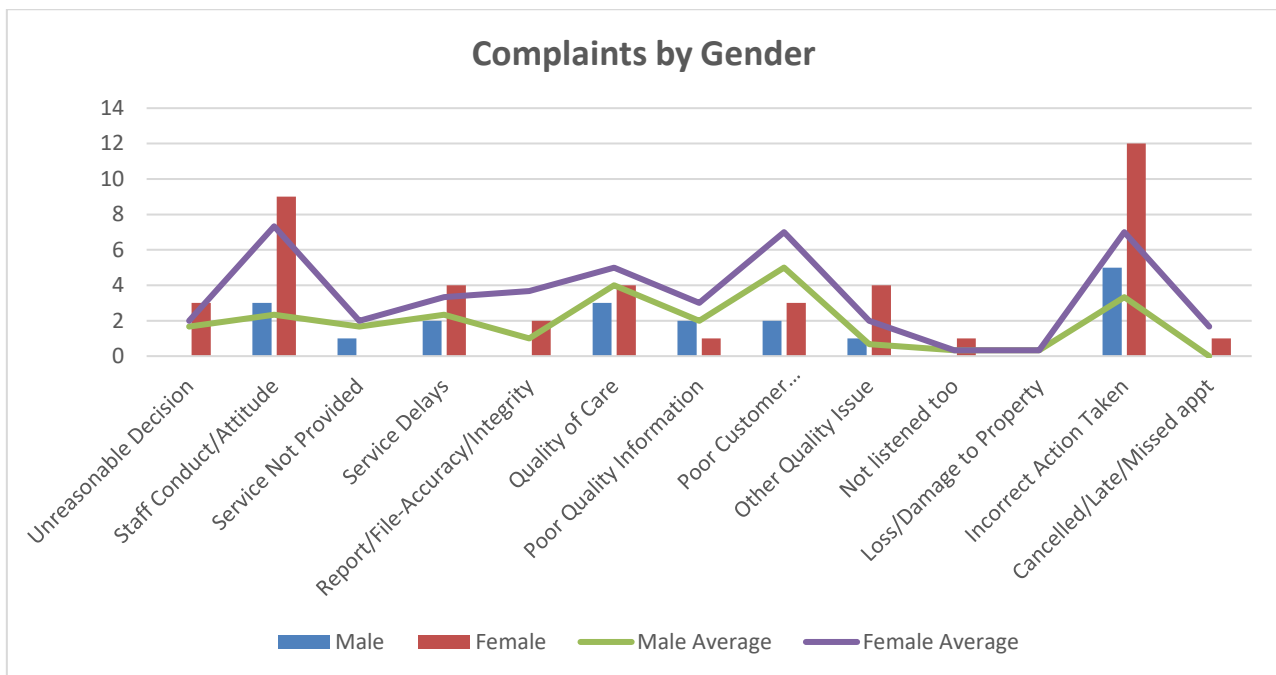
In 2018/19 the Customer Relations Team intends to introduce an additional form of accessibility by providing an online form for customers to make complaints by visiting the Council's website.

4.2 Social Care Complaints – Gender

In 2017/18 there were 3787 records of adults receiving support from Adult Social Care Services. Of those records 58% of service users were female and 42% were male.

Of the 41 new complaints managed through the complaints procedure in 2017/18, 63% affected female service users and 37% affected males.

The chart below shows that the top area of complaint for both females and males in 2017/18 was incorrect action taken.



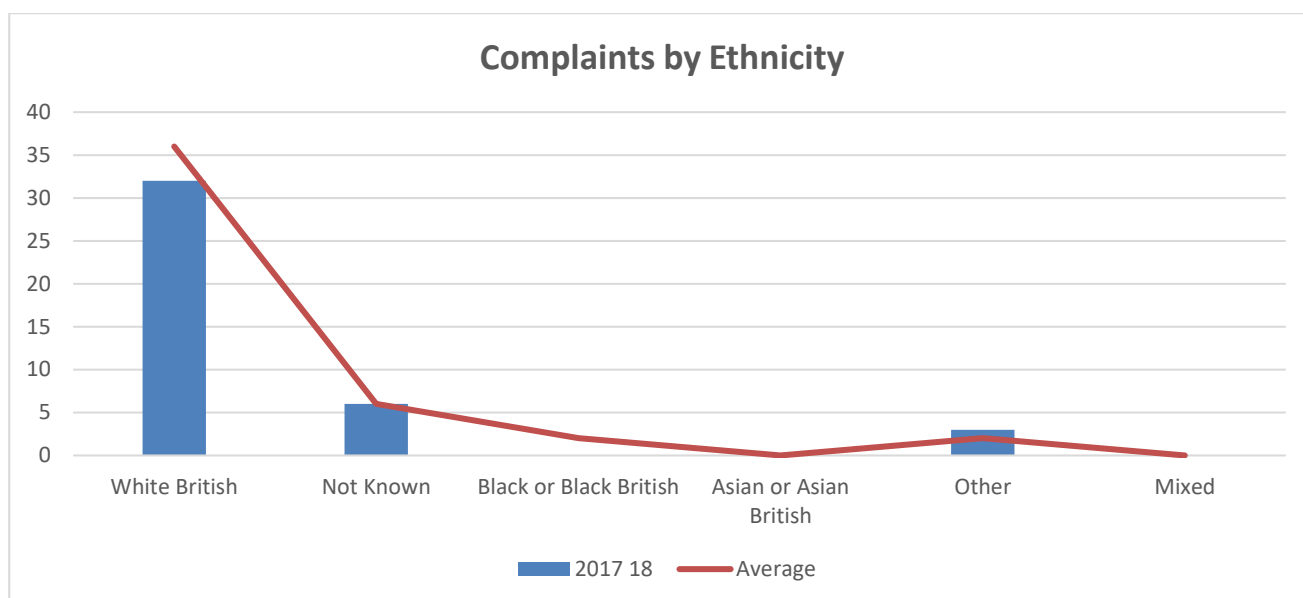
In 2015/16 and 2016/17 poor customer care/communication was the top reason for complaint for females. For males it was poor customer care/communication and quality of care. The chart demonstrates that poor customer care/communication was below the average for both females and males this year compared to previous years and that this was also the case for quality of care for complaints raised by males this year.

4.3 Social Care Complaints – Ethnicity

The last census on population by ethnic origin (2011) showed 89.7% of the population in Central Bedfordshire were 'White British' and 10.3% were classified as 'Other'.

Of the 3787 records of adults receiving support from Adult Social Care in 2017/18, 90% of service users were described as 'White British'.

The chart below provides a breakdown of how ethnicity groups were represented in the 41 new complaints received during 2017/18.



Most of the complaints received in 2017/18 were raised by those who were of White British ethnicity. This is to be expected as the population of Central Bedfordshire and the number of adults receiving support from Adult Social Care are predominantly represented by those of White British ethnicity.

4.4 Social Care Complaints – Age

Of the 3787 records of adults receiving support from Adult Social Care in 2017/18, 69% of service users were described as being over 65 years of age.

The table below provides a breakdown of how age groups were represented in the 41 new complaints accepted into the process in 2017/18:

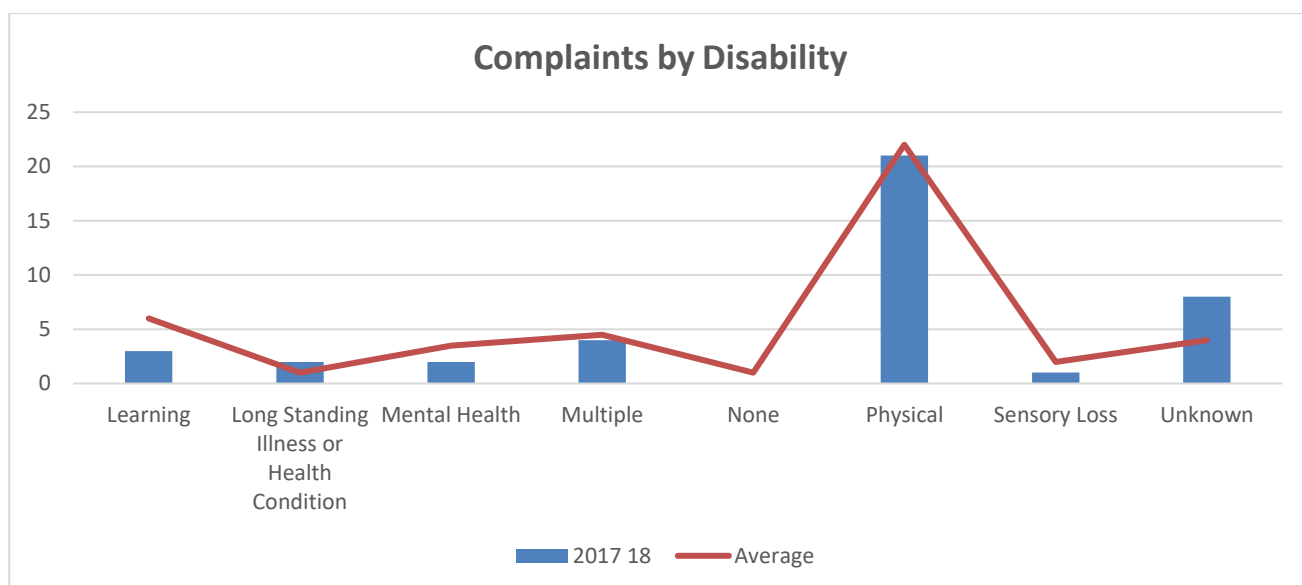
18-21	22-64	65+	Not Known
1 (2%)	9 (22%)	24 (59%)	7 (17%)

The majority of service users receiving support from Adult Social Care are reported to be over 65 years of age. The number of complaints reflects this with 59% of complaints being about the services to those who are in the 65+ age brackets.

4.5 Social Care Complaints – Disability

Of the 3787 records of adults receiving support from Adult Social Care in 2017/18, 56% of service users were described as having a physical disability.

The chart below provides a breakdown of how disability groups were represented in the 41 new complaints accepted into the process in 2017/18:

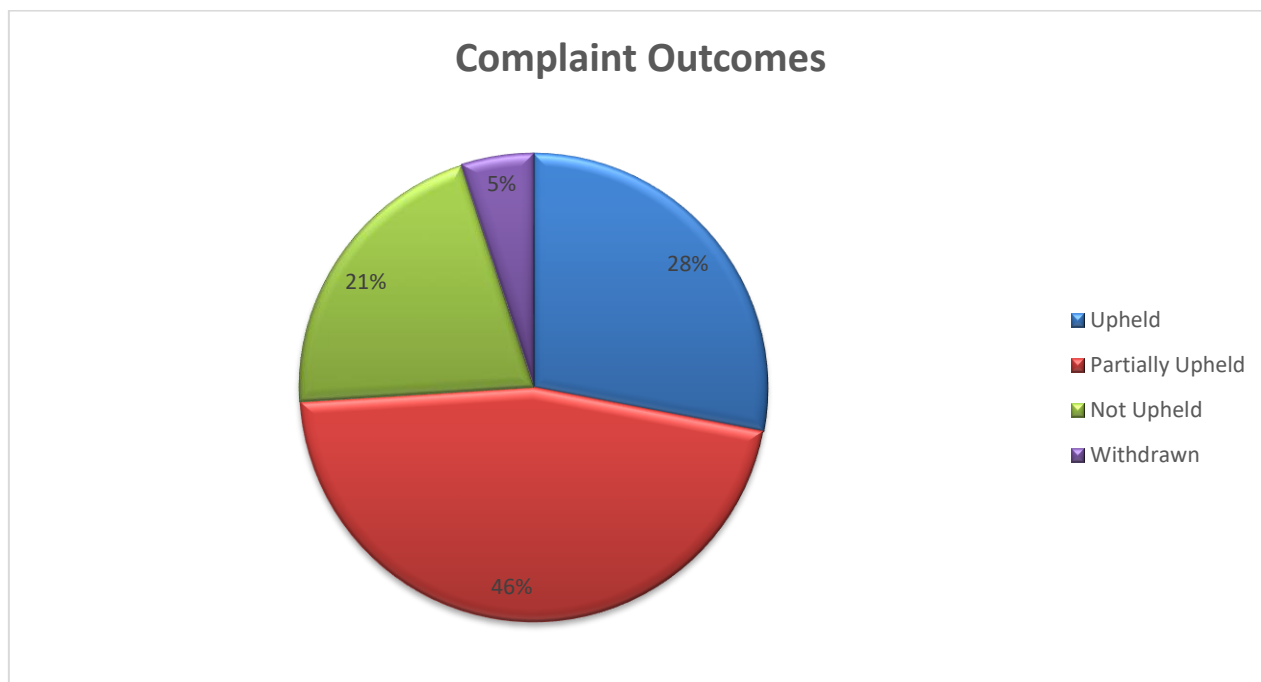


The majority of complaints received were about those services users with a physical disability. This is comparable in respect of the number of adults receiving support from Adult Social Care who are described as having a physical disability.

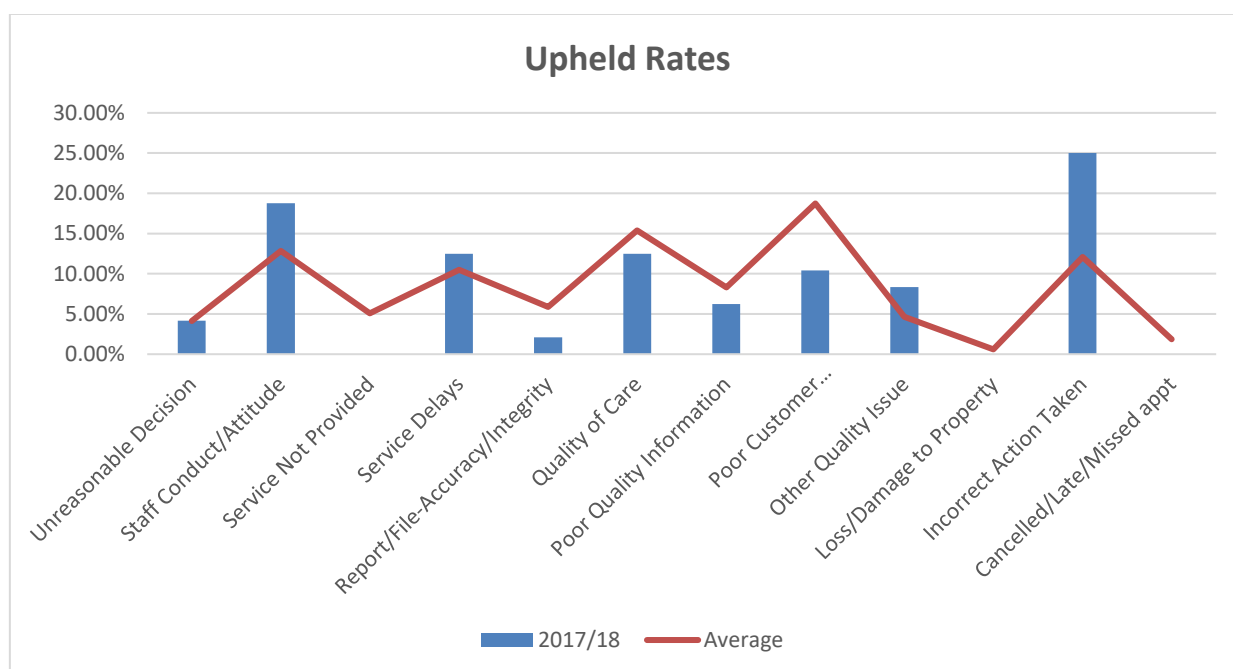
5. Outcomes from Concluded Complaints

There were 43 complaints concluded in the period, all relating to Adult Social Care Services. Two complaints were withdrawn; one was managed using the conciliation method and 40 were managed using the local resolution method.

The chart below indicates the outcomes from complaints in 2017/18. 28% of complaints were upheld in full and 46% were upheld in part. In total 74% of complaints were well founded either in full or in part.



The chart below indicates that the upheld rates in 2017/18 were impacted predominantly by incorrect action taken alongside staff conduct/attitude issues.



The chart also demonstrates that upheld rates were above average in relation to staff conduct/attitude; service delays; other quality issues and incorrect action taken compared to previous years. However, issues relating to unreasonable decisions; services not being provided; report/files accuracy/integrity; quality of care; quality of information; customer care; loss/damage to property; and missed appointments were all below the average compared to previous years.

6. Performance in Complaint Handling

6.1 Action Plan Compliance

43 complaints were concluded through the complaints procedure in 2017/18.

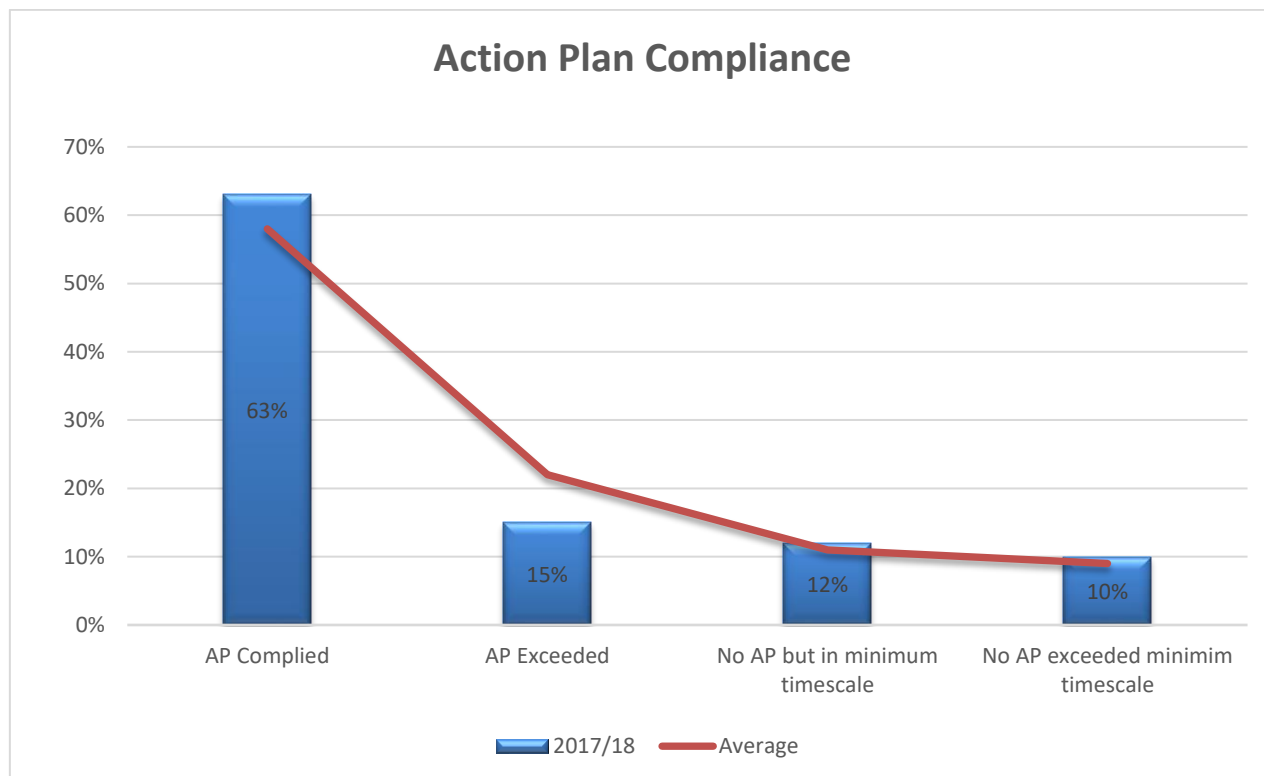
There is no timescale set out in regulations in which to resolve complaints for Adult Social Care services. The emphasis is on assessing the complaint at the outset to fully understand the issues, and then planning a clear method of handling the complaint in a reasonable timescale. Timescales can be re-negotiated with the complainant if appropriate. Managers are encouraged to set out an action plan for the complaint detailing how it will be dealt with.

Performance is therefore monitored on whether an action plan was in place and whether this was complied with. If an action plan is not in place then performance is measured on whether the complaint was concluded within the minimum timescales set out in the procedure as best practice.

Of the 43 complaints concluded in 2017/18, two were withdrawn. Of the remaining 41 complaints:

- 26 complied with an action plan
- 6 exceeded an action plan
- 5 had no action plan but were completed within minimum timescales
- 4 had no action plan and exceeded minimum timescales.

The chart below indicates the performance in handling complaints during 2017/18 in comparison to the average performance in handling complaints in previous years.



2017/18 saw an improvement in complaint performance overall and the chart shows that the number of complaints with action plans exceeded the average over previous years. Of the 10 cases that exceeded the action plan/timescale, 9 were down to delays by the service; 1 was down to the availability of key personnel.

6.2 Complaint Escalations

Regulations require the Council to investigate a complaint about Adult Social Care in a manner appropriate to resolve it speedily and efficiently. This gives us flexibility on the approach to take in responding. If a complainant asks for further action on a completed complaint it will be reviewed by the Assistant Director/Director. If the Assistant Director/Director decides the complaint has been fully addressed, it will be signed off and the complainant advised of their right to refer to the Local Government and Social Care Ombudsman.

Three complaints were escalated to Assistant Director Review and one was escalated to Director Review in the period.

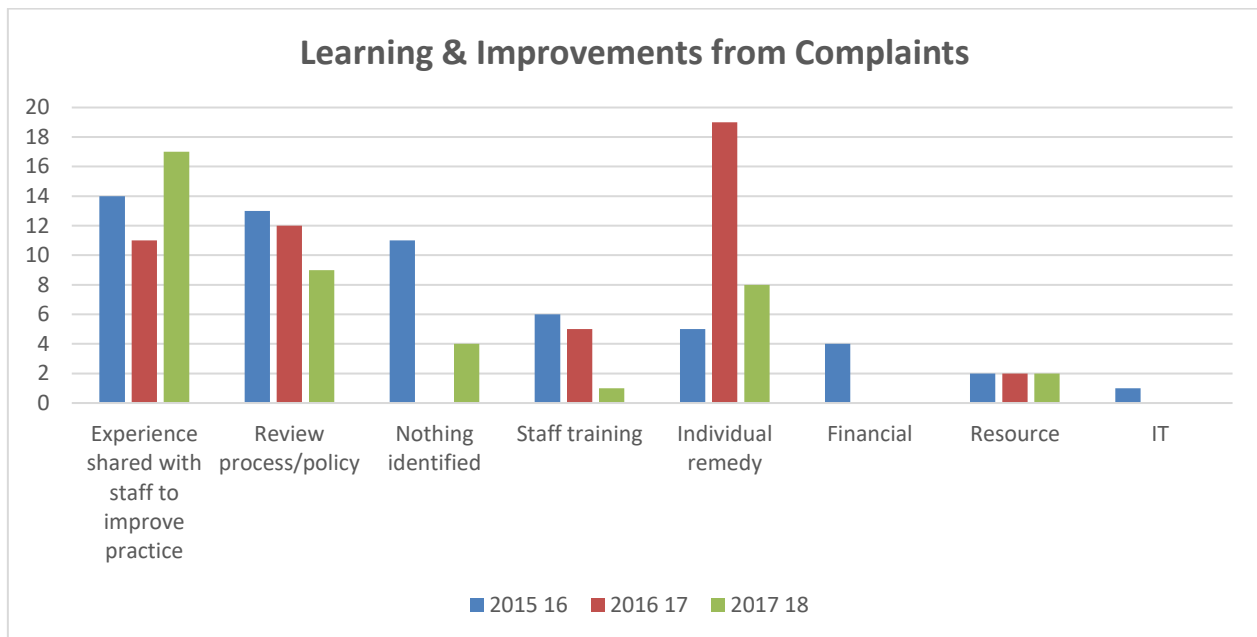
In three cases the Assistant Director was of the view that the complaint had been fully addressed and agreed with the outcome reached through local resolution/conciliation. The complainants were advised of their right to refer to the Local Government and Social Care Ombudsman should they remain dissatisfied.

In the fourth case the matter escalated to Director Review following considerable attempts to reach agreement with the complainants on how the issues should be investigated. The Director was of the view that the complaint should be partially upheld. Further disagreement on an appropriate remedy resulted in the complainant being advised of their right to refer to the Local Government and Social Care Ombudsman.

7. Learning and Improvements from Complaints

Where complaints are upheld either fully or in part complainants will receive an apology. However, service areas are also expected to put in place a remedy which may be for the individual complainant or undertake wider learning across the service to ensure mistakes are not repeated.

The chart below shows the types of learning identified from complaints in 2017/18 compared to those identified in the last two previous years.



The chart shows that the majority of improvements identified in 2017/18 resulted in the complainants' experience being shared with staff to improve practice. This was also the case in 2015/16 however in 2016/17 much of the improvements resulted in individual remedies for complainants.

Key improvements to council services included:

- Temporary changes to a service user's day centre routine should be given to the manager or a senior day care officer who will clarify the information with the customer and then ensure staff are informed and fully understand the changes.
- The Supported Living Service will ensure scheduled runs do not clash and the service users are notified in advance, where possible, if their support is likely to be delayed.
- Commissioned customer care training for a range of social care staff to support them in providing a courteous and empathetic approach even when discussions are difficult.
- EDT have ensured partners are aware of their remit and that practitioners have been reminded that care and support provided to service users should be robust including any contingency planning for those who may have complex or high-risk needs. Should EDT assess a service user's level of risk and deem that it does not

meet the threshold for emergency intervention they will be required to discuss with referrers a contingency plan if the situation alters.

- EDT Managers have reviewed the induction process to ensure staff have appropriate skills to manage queries raised with the team
- A process for duty workers arranging emergency care has been developed which will ensure a 'paying for care' leaflet is distributed and clear information regarding contributions is explained. All staff have also been reminded of the importance of obtaining financial circumstances when arranging care.
- In cases where there is multi-team involvement, a single person should be responsible as a point of contact and liaison between professionals and the person who is in need.
- OT have reviewed how they can keep people updated and communicate better about their waiting list and have also reviewed their waiting list letter that is sent to customers to ensure it has appropriate information to enable them to understand what will happen now a referral has been received.

Key improvements for care provision that the council commissions included:

- Ensure all residential home service users are registered with a local GP when accessing their service.
- Ensure thorough assessments are completed prior to individuals accessing services at a residential home.
- Residential home staff should only provide factual information to family members in emergency situations to avoid unnecessary worry and stress.
- Residential home staff must write all requests for maintenance work in the appropriate log and the maintenance person who has been instructed must sign off completion of the work so this can be monitored.
- Residential home processes have been amended to ensure that medication goes with a resident who may be admitted to hospital even if there is no immediate requirement.
- A residential home has reviewed its medication administration protocol and staff have been instructed to remain with anyone who is self-medicating to ensure medicine is taken.

The cases above show good evidence of how learning from complaints is helping to shape how services are delivered but more could be done in this area to challenge and improve practices. The evidence shows that much of the improvements resulted in the customer experience being shared with staff to improve practice. Although there were some improvements to enhance service provision, this may suggest that services need more support to analyse the root cause of complaints to identify clear process or staffing improvements.

8. Local Government & Social Care Ombudsman (LGSCO)

8.1 Complaints Received and Decision Notices

The LGSCO annual statistics show that they received 17,452 complaints and enquiries about local authorities in 2017/18. In comparison, the LGSCO considered one complaint about Central Bedfordshire Council's Adult Social Care services during this period. The table below sets out the complaint received and the Ombudsman decision reached:

Complaint	Ombudsman Decision
The complainant complains that the Council failed to adequately monitor the service user or recognise declining standards at a residential home which affected her health and wellbeing. The complainant also complains that the service user's social worker failed to respond to calls and correspondence or adequately address the concerns regarding the service user's care.	The Council's failure to review the service user's care needs and the delays in responding to the complainant's calls and emails in the social worker's absence amounts to fault. There is no evidence this fault has caused a significant injustice to the service user or the complainant.

9. Monitoring and Quality Assurance

9.1 Effectiveness of Complaints Handling

Service users, their representatives and people affected by the actions of Adult Social Care services can access the Council's complaints procedure and the LGSCO.

The Customer Relations Team monitors the operation and effectiveness of the complaints procedure as well as how information about complaints is being used to improve services and delivery.

Local Resolution has generally been an effective means of dealing with complaints with only four being escalated to Assistant Director or Director level and one complaint being investigated by the LGSCO in 2017/18.

Complaints were important feedback and a means of identifying how practices may be changed for the better. The customer experience in complaints has led to some improvements to practice. In 2016/17, we reported that there was room for improvement to ensure all complaints had an individual action plan when 82% of cases had plans. This has dropped slightly in 2017/18, with 78% of cases having action plans. 81% of those cases were managed in line with the action plan which is an improvement on last year (67%). There is still room for improvement in this area but in the cases where there was no action plan the service area were meeting the minimum standards in line with best practice in over half of those complaints (56%).

9.2 Financial Implications

There are a number of ways in which the local authority can incur costs as part of the statutory complaints process for Adult Social Care Services.

Formal Investigation is normally achieved by appointing an investigating officer. The investigating officer may be employed by the local authority or be externally commissioned. The investigating officer however cannot be in direct line management of the service complained about. Due to the nature of the complaints that tend to be suitable for formal investigation the usual practice is to externally commission an investigating officer specifically for that piece of work.

In addition, there may be rare occasions where financial redress is offered through the complaints procedure. Financial redress can be provided to acknowledge avoidable distress; harm; risk; or other unfair impact. As injustice of this nature cannot generally be remedied by a payment the amount is usually symbolic to acknowledge the impact of fault on the complainant. The amount will depend on the circumstances of the case and this can be paid through local settlement following investigation by the LGSCO but can also be recommended during the local authority complaints process.

Any financial costs incurred are the responsibility of Adult Social Care Services. To assist in minimising the risk of costs the Customer Relations Team is actively involved in assessing the seriousness of complaints, whether complainants are eligible to use the statutory complaints procedure and ensuring appropriate and reasonable remedies are recommended.

The table below details the total costs incurred during 2017/18:

Reasons for Cost	2017/18 Spend
Formal Investigation	£0.00
Financial Redress (LGSCO Recommendation)	£0.00
TOTAL	£0.00

10. Customer Relations Team – Supporting Adult Social Care

The Customer Relations Team supports Adult Social Care Services by:

- ✓ Providing guidance, advice and support to staff on the management of complaints
- ✓ Supporting staff involved in the complaints procedure
- ✓ Quality assurance of complaint responses
- ✓ Managing challenges to complaint handling and responses
- ✓ Liaison with the Local Government and Social Care Ombudsman
- ✓ Overseeing the arrangements for communicating and publicising the complaints procedure
- ✓ Evaluating and reporting on the numbers, types, outcomes and trends of complaints to inform practice, development and service planning
- ✓ Providing a means to capture the learning from complaints to contribute to practice development, commissioning and service planning

During 2018/19 the Customer Relations Team will focus on a number of initiatives:

- Continue to ensure the complaints procedure is accessible and introduce an online complaint form for customers
- Continue to promote the Customer Relations root-cause analysis tool to help managers with identifying systemic improvements
- Continue to promote the Customer Relations toolkit for handling persistent customers consistently and fairly
- Continue to ensure complaints are handled responsively and in a flexible way
- Work collaboratively with colleagues to achieve a reduction in levels of complaints upheld
- Maintain the low levels of complaint investigations by the Local Government and Social Care Ombudsman and where they find fault
- Introduce a performance scorecard for complaints to improve visibility of complaints and their outcomes
- Introduce a rolling programme of staff briefing sessions on good complaint handling



A great place to live and work

Contact us...

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