

REPORT TO: Health Policy and Performance Board
DATE: 6th November 2012
REPORTING OFFICER: Strategic Director -Communities
PORTFOLIO : Health & Adults
SUBJECT: Adult Social Care Customer Care Report : 1st April 2011 - 31st March 2012
WARDS: Borough Wide

1. PURPOSE OF REPORT

1.1 To report and provide an analysis of complaints, compliments and other enquiries processed under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and to meet statutory requirement to publish an Annual Report.

2. RECOMMENDATION: That members of the Board Consider and comment on any of the key learning points identified as a result of complaints.

3. SUPPORTING INFORMATION

The Adult Social Care Complaints Process

3.1 From April 2009 a common approach to handling complaints in the NHS and Adult Social Care was introduced aimed at encouraging complaints handling that is tailored for each individual and handled more flexibly. It allows a more efficient and effective way of responding to, and learning from, complaints encouraging the best outcome for the both the individual and for the organisation.

3.2 The complaints approach has a format where, right at the start, the Customer Care Team works with the person making the complaint to agree the details of the complaint and what would resolve it.

3.3 At that point, how it is to be handled and the likely timescales, taking into account complexity and complainant's availability etc, are explored and agreed, although they can be further negotiated as required. Although it can take longer, it does encourage greater focus on getting a satisfactory outcome.

3.4 Sometimes, it becomes apparent that, due to the complexity of the issues involved, a more detailed investigation by an independent person is required. This may be after some initial investigation so, for the purposes of identification of these cases, we have referred to them at "Stage 2 cases" in this report. Alternatively, a "stage 2 case" may also be where an alternative solution has been explored (e.g. through detailed mediation or including other agencies).

3.5 If a complainant remains dissatisfied with the outcome of this statutory

complaints process, they retain the right to refer their complaint to the Local Government Ombudsman.

3.6 **The Social Care Customer Care Team**

From 1st April 2011 the Children and Enterprise, Customer Care Manager joined with the Communities Customer Care Team to form one amalgamated team responsible for the administration of Adult and Children Social Care Representations.

3.7 The Customer Care Team monitors the responses and records and reports learning from various types of feedback including:

- **Statutory Complaints;** defined as “an expression of dissatisfaction or disquiet about an action, decision or apparent failings of local authority adult social care services provision, which requires a response”
- **A Customer Care issue;** where people want to raise a concern but not make a formal complaint, or where clarification on an issue or concern has been sought and provided.
- **MP / Councillor enquiries** on behalf of a constituent.
- **Representations;** the term representations is used when making collective reference to Customer Care, MP and Councillor enquiries and they are included in reports to inform learning.
- **Compliments;** it is just as important that we learn what people are happy about so compliments are recorded and reported in the same way.

3.8 **ANNUAL REPORT : 1st April 2011 to 31st March 2012**

Contextual Information

3.8.1 Both national and local intelligence indicated that people can find it difficult to complain, particularly where they or their family are in vulnerable situations and dependent on services. They can worry about negative repercussions, or they just want a quick and less formal way of raising concerns.

3.8.2 In Halton’ we responded by developing the “Help Us Help You” campaign which was launched autumn 2011. It aims to reassure people that we take their concerns seriously, whether they want us to deal with them formally or informally, and that they should not be afraid of raising them. The theme was adopted throughout the Council (social care and corporate complaints etc) with the colourful logo being included on the website and rolled out to all council documentation.



3.8.3 Whilst we cannot be certain of the impact to date, the campaign may have been contributory to the increase in the number of complaints received in the year. However, feedback from colleagues on both local and national groups

indicate that complaints about social care have increased considerably in the last year. This may be due the public awareness of dwindling resources within Local Authorities and the perception that decisions may be made based on financial pressures.

3.8.4 In Halton this was not found to be the case. In considering a complaint of this nature what must be considered is whether the quality of the assessment sound enough to justify the decision? Complaints investigated locally found that service provision was based on Assessed Need and the resulting Support Plans.

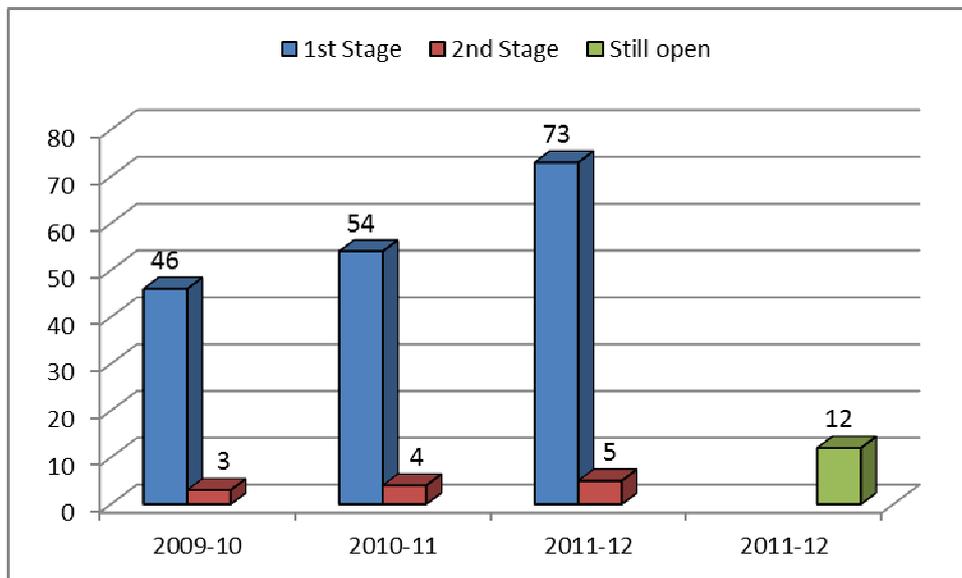
3.8.5 In the following, complaints have been analysed by the majority processed in the normal way (Stage 1) and those of a more complex nature (Stage 2)

3.8.6 **Statutory Complaints closed at Stage 1**

There have been 73, in the year, showing an increase of 19 (35%) from the previous year. Of those 73 there were 4 that progressed to Stage 2.

77 new complaints were received in the year, 22 more than the last when it was 55, this indicates a 40% increase in complaints.

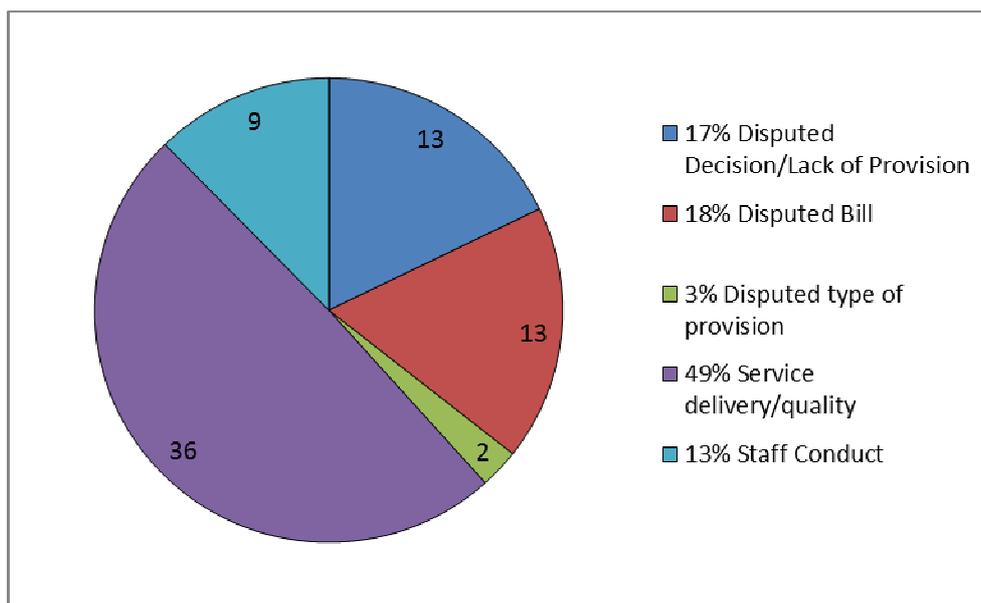
During the year 5091 people received a service from Adult Social Care Services, 1.51% of them made a complaint an increase from the previous year from 1.09%.



3.8.7 **Outcome of closed Stage 1 Statutory Complaints**

Of the 73 closed complaints, 21 (29%) were upheld and 18 (25%) partially upheld (complaints that are partially upheld indicate a number of issues raised, some of which were not upheld). Overall 39 (54%) of complaints had elements of their complaint upheld.

3.8.8 **Category of the 73 closed Stage 1 Statutory Complaints that were upheld in full or part**



Of the 39 Statutory Complaints upheld in full or in part at Stage 1:

- 7 were in relation to a Disputed Decision/lack of provision
- 10 were due to a Disputed Bill
- 18 were about Service delivery/quality
- 4 related to Staff conduct

NB Complaints may cut across more than one category, for example communication may be linked to lack/ under provision, cost or staff conduct

3.8.9 Timescales Stage 1 Statutory Complaints

The procedures encourage timescales to be agreed with the complainant

Complaint Completion Timescales	2009/10	2010/11	2011/12
1. Within time agreed with complainant	N/A	93%	88%
2. Within 20 days or to resolution	80%	72%	52%

Row 1 illustrates that those targets were met in 88% of cases i.e. 64 out of 73). Although this figure has dropped from 93% (which equates to 50 out of 54) last year, there has been a significant increase in the number of complaints this year of 35%.

- 38 of the 73 were resolved within 20 days (52%)
- 54 of the 73 were resolved within 30 days (74%)
- 62 of the 73 were resolved within 40 days (85%)

Whilst, the figure in row 2 has dropped from last year, the procedures do allow more flexibility, focusing on getting the right outcome rather than satisfying any defined process or timescale; which is negotiated and agreed with the complainant. This approach is more 'person-centred' and encourages greater flexibility in finding solutions to complaints (e.g. mediation) and this can

contribute to the drop in numbers of complaints being resolved within 20 days. Emerging evidence, both regionally and nationally is that complaints are, on average, taking longer to process. It has also been commented regionally that the complexity of complaints appears to be increasing which may also have also been a contributing factor to the increased timescales to complaint resolution. In all likelihood, the approach now being taken, with early involvement of the Customer Care Team, may be more successful in identifying underlying root causes that, whilst it may take longer to resolve, will result in a more successful resolution.

Similarly the negotiated approach, although prolonging Stage 1, may also be contributing to fewer being classified as Stage 2 (e.g. although the number of complaints has increased, the numbers at Stage 2, has only increased by 1).

The Customer Care Team supports service managers when they investigate complaints, including the facilitation and mediation of meetings. Their quality assurance role in supporting managers, when they are formulating their responses to complaints, is especially valued.

Delays in dealing with complaints can give the impression of disinterest and disrespect. Regulations state that every complaint should be acknowledged no later than three working days after the complaint was received. Of the 73 closed complaints, all but one were acknowledged within this target and 88% were processed within timescales subsequently agreed with complainants.

On-going contact with complainants, and dealing with their concerns quickly and efficiently, demonstrates that we care about the fact that they have had a negative experience. It shows that we take complaints seriously, and are interested in resolving them.

3.8.10 **Analysis of complaints in relation to specific service areas**

We record complaints by specific complaint type and client groups, so that we can analyse whether there are any underlying trends or whether complaint numbers may be influenced by other factors (e.g. high profile cases from elsewhere in the country).

By way of example, following the high profile case covered by the BBC Panorama programme (May 2011), which exposed the abuses that had taken place at Winterbourne View hospital near Bristol, we have kept complaints from people in the Learning Disability are under close scrutiny.

Whilst, there has been an increase in numbers of complaints from this client area, this appears to be through a greater willingness to raise concerns rather than any abusive practice being identified through the complaints procedure.

This increase is positive as it evidences that customers with a learning disability and their families and carers are valued, included, treated equally, listened to and protected and that that one of the reporting systems in place i.e. complaints, can ensure that they are properly reported and investigated.

3.8.11 **Stage 2 complaints**

	2009/10	2010/11	2011/12
Complaints proceeding to Stage 2 (Independent Investigation)	3	4	5

There have been 5 complaints classified at stage 2. None were undertaken by an External Independent Investigator, all were conducted internally by Senior Managers. Of these, 3 Stage 2 complaints were partially upheld and 2 were completely upheld.

3.8.12 Local Government Ombudsman

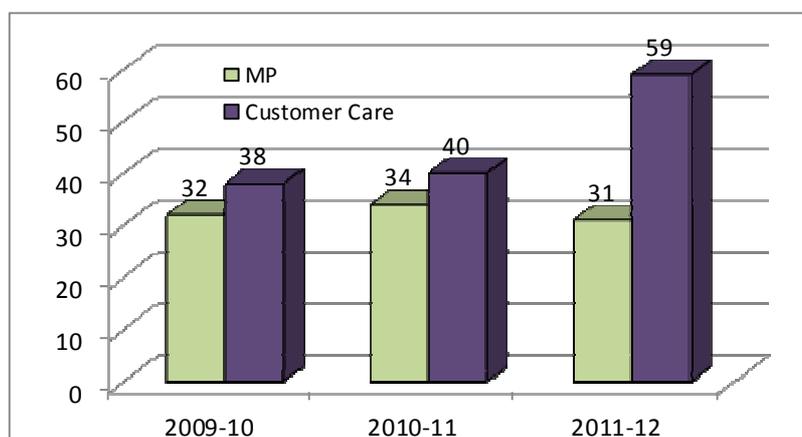
During this financial year, two enquiries were received from the Local Government Ombudsman. Information was provided to them about those complaints and neither resulted in investigations being conducted by the Local Government Ombudsman Office.

3.8.13 Category of people making the complaint

- 86% of complainants made are by people representing/ supporting the person using the services, this is consistent to last year which was 89%.
- 78% are related, again this is consistent to the 80% last year.

These statistics can be attributed to the vulnerability of individuals who access adult social care services.

3.8.14 Number of Customer Care and MP/Councillor Enquiries (see 3.4 definition) closed in the year.



90 (68%) of the Customer Care and MP/Councillor enquiries related to social care issues, with the remainder being housing or environmental health related. This is a 22% increase in activity.

3.8.15 Consideration and the allocation of priority of complaints

All complaints are scrutinised at an early stage, to identify the level of personal risk or other significant factors. They are considered against a matrix that considers the level of risk, along with the likelihood of reoccurrence. From that, a priority (Low, Medium or High) is set, identifying those that require urgent

action (e.g. action under the safeguarding procedures). The analysis of classifications set in the last year are set out below.

Low - relatively minor issues, no significant implications for the service user or the service	51
Medium - more complex and/or significant issues, implications for the service user or the service in terms of practice, procedure or service delivery.	13
High - most serious and complex significant implications for the service or the complainant in terms of practice, procedure or service delivery.	9

3.8.16 **Complaints with Dignity and Safeguarding elements**

Complaints are also monitored to identify where there are elements relating to the safeguarding and dignity of the service user. Complaints that have any element of adult abuse, or suspected abuse, are immediately referred through the Safeguarding Procedures. In such cases, any complaints investigation is put on hold until discussions have taken place to decide the most appropriate course of action. 4 complaints received in the year were passed on for investigation under the Adult Safeguarding Procedures.

Dignity Factors contribute to a person's sense of self-respect. It means treating people who need care as individuals and enabling them to maintain the maximum possible level of independence, choice and control over their own lives. Complaints are categorised to assist the Dignity in Care Coordinator to improve standards of dignity in care. 41% have been categorised as having communication issues at the root of their complaint.

3.8.17 **Provider Monitoring Feedback**

The Quality Assurance Team has a process in place where feedback on providers commissioned by the Council can be provided. Similarly they can be used to trigger any Safeguarding or Dignity issues and the learning is used to monitor and improve service delivery.

3.8.18 **Learning and Service improvement**

The vast majority of complaints are not due to any wilful intent, but often the unintended outcome actions of lack of actions (for example particularly communication issues such as where a lack of clarity may lead to one person misunderstanding what another means). Similarly, examination of complaints may not uphold that something has gone wrong, but may uncover a way of doing something that the individual is more comfortable with. Either way, the learning gathered from all forms of available feedback (complaints, compliments and other comments) is used to improve individual issues and fed into the service improvement process as appropriate, to inform and develop the services we provide and commission..

3.8.19 During the last year, resulting improvements have been developed include:

- Various examples of improved communication between the clients, their family or representative and services. This is the most commonly identified

theme identified in complaints, and cuts across all services. Any individual issues involving workers are addressed by managers during the supervision process, to inform individual learning.

- The opening and closing procedures of a day unit were reviewed and changes implemented.
- Medication and prescription policies were reviewed and changes implemented.
- The “Help Us, Help You” campaign resulting from the Care Quality Commission (CQC) undertook an inspection in Halton looking at “safeguarding adults whose circumstances made them vulnerable”. Whilst the findings of the inspection was that Halton was performing excellently in safeguarding adults there we noted that the inspectors had received some feedback from consultation exercises where people had commented:
 - That they like to have a less formal way of raising concerns; and
 - Sometimes people of wary of complaining, particularly when they perceive they are in vulnerable positions (e.g. in hospital, GP’s surgery register, dependent on care services e.g.), in case there are negative repercussions for themselves or their family.

3.8.20 **Feedback from Complainants**

We evaluate our complaints system by asking people how satisfied they were with the way their complaint was handled. When a complaint is closed an evaluation form is sent to the complainant

This process was in place in respect of Adult Services whereas in Children Services, primarily it was only the feedback of the Children and Young People that was sought. This is the first year of the amalgamated team and the first report covering both service areas.

Because some of the forms returned are anonymous it is impossible to identify which area the service user complained about, however the themes of the questions are such that they apply to both.

Of the 27 service users responded the summarise findings were that:

- 82 % said it was either easy or ok to make a complaint
- 74% indicated that they were happy or ok with the response
- 74% stated the staff who spoke to them was polite and friendly
- 78% stated the staff were able to give them the information they needed and help them with their complaint
- 89% stated they felt able to tell the staff about the issues they wanted to talk about
- 85% stated they were told how their complaint would be dealt with
- 70% indicated that they felt everything in their complaint was answered,

- 22% stated no with 8% not providing a response
- 77% replied stating they were either happy or ok with the outcome

Comments included:

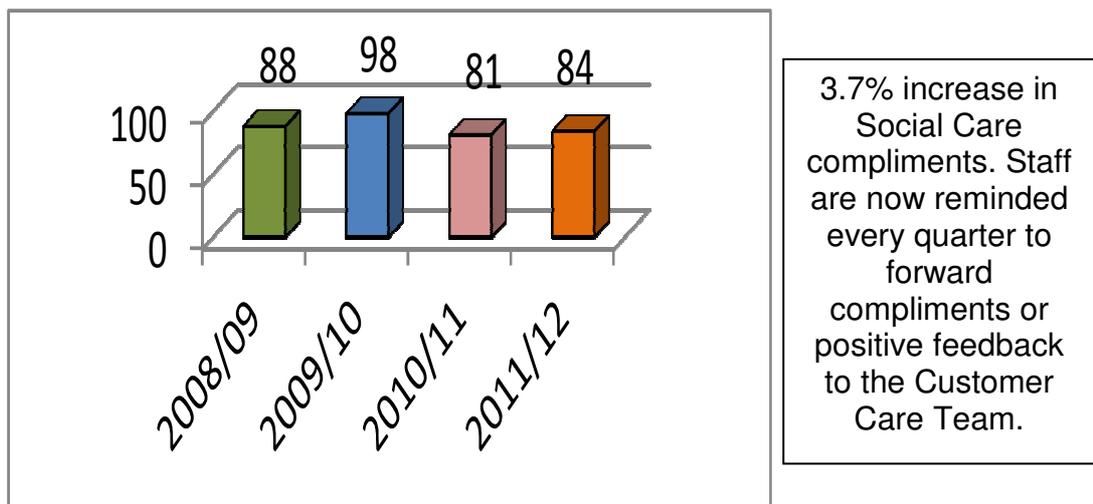
It was a shame that I felt the need to complain, however once I made the complaint all I spoke to were courteous, friendly and most helpful, thank you.

Staff in the complaints department was very helpful, at first contact they quickly understood the issues and were able to identify appropriate actions.

I was sent the complaint form, told how to proceed, I was also kept informed how it was progressing. Good service

3.8.21 Compliments

A new and developing report for the Communities Directorate focuses on compliments and provides a more in depth analysis. Compliments provide a balance and illustrates that the services we provide make a real difference to the lives of vulnerable people and their families.



Compliments have been received across a broad range of service areas. Illustrative examples include:

- Daughter moved into supported accommodation. "I am writing to express true appreciation for the very helpful and thorough support offered. Many other excellent inputs over nearly 20 years have contributed to her development to greater independence. For all of us we are most grateful to Halton Council"
- "A big thank you, a couple of years ago my mum was diagnosed with dementia, it happened rapidly and was traumatic for all concerned. We tried to cope but when we needed help we turned to the council. The help we needed was there as soon as we asked, as soon as we needed it. Halton Council can be justifiably proud of their concern for and care of the vulnerable and elderly in their charge. Once again thank you".

- Client has severe and enduring complex mental health issues, it should be noted that writing this letter was a massive thing for him. "I don't know if clients ever write to the management, but I wanted to say a big thank you for the on-going support I am receiving. They treat me with dignity, respect and a smile which helps put me at ease. If I did not receive their support I feel I could not live in the community".

4.0 POLICY IMPLICATIONS

- 4.1 Complaint analysis can highlight where policy needs to be strengthened, reviewed, or amended to improve service delivery. Comments, Complaints and Compliments are essential feedback in developing services and policies. There are no implications identified in this year.

5.0 OTHER/FINANCIAL IMPLICATIONS

- 5.1 Learning from complaints has the potential to reduce financial consequences and help inform the development of efficient and cost effective services.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

From March 2011 one Customer Care Team now services both Adults and Children's Directorates; this allows close working on relevant complaint issues. There is a close relationship between the social care services particularly to support young people during transition from Children and Young Peoples services to Adult Social Services.

6.2 Employment, Learning and Skills in Halton

Social care aims are often closely associated with these, to improve people's life chances and to be as independent as possible. Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

6.3 A Healthy Halton

Another core aim in social care is to prevent or delay reliance on institutional care, enabling people to be as independent as possible. Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

6.4 A Safer Halton

Adult social care has a close relationship with protection procedures for the vulnerable adults, the frail etc. Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

6.5 Halton's Urban Renewal

Many social care initiatives surround housing issues, enabling people to live as independently as possible in their community. Any findings from a comment, complaint or compliment relating to this priority will be used to inform the

relevant service.

7.0 RISK ANALYSIS

7.1 Failure to implement an efficient service could result in the local authority being challenged for not dealing with complaints in a timely and efficient manner and could result in the customer not receiving a service which could then be detrimental to their health, safety and well-being.

7.2 Whilst complaints can result in changes for individuals, collectively they are a key source of information to help us develop the services we provide or commission.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 No matter who complains they receive the same equality of access and provision.

Consideration is given to what type of support, help and encouragement may be required for individuals to pursue their concerns. People whose first language is not English and those with communication difficulties may require support from a Translation Service or an Advocate.

8.2 Data on equality and diversity are recorded, analysed and reported upon as appropriate.

8.3 The age profile of service users at 31st March 2012 has changed by 1% from last year. From 29% to 28% for the age group 18-64, with that 1% difference increasing the over 65 years age group figure to 72%.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009	Runcorn Town Hall	John Gibbon