Adult Social Care

Complaints, Compliments and Representations
Annual Report

01\textsuperscript{st} April 2016 - 31\textsuperscript{st} March 2017
Complaints, Compliments and Representations Annual Report 2016-2017

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Complaints, Compliments and Representations Annual Report 2016-2017

1. Introduction

1.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 require all Councils with social care responsibilities to produce an Annual Report on the operation of the Complaints Procedure.

1.2 The Department of Health policy guidance requires that this report should include a summary statistical analysis and review of the effectiveness of the adult social care complaints procedure. It does not include complaint information relating to statutory children’s social care, wider council services or any partner NHS agency.

1.3 The report is written and is made available for:
   - Staff,
   - Management,
   - The relevant scrutiny committee,
   - Care Quality Commission,
   - Healthwatch Gloucestershire, and;
   - The general public.

2. Summary of Activity

2.1 Key findings;
   - 259 adult social care complaints were received by the Council.
   - All complaints were investigated and resolved internally without the need to commission external investigators.
   - Adult care received 278 compliments covering all service areas.
   - 11 complaints were referred to the Local Government Ombudsman. Details can be seen on page 11.

3. Compliments Activity

3.1 This section looks at the positive feedback received. Recording compliments enables the adult care service to recognise the positive comments made about services and staff alike and it provides an opportunity for senior managers to congratulate staff where appropriate to do so.

3.2 There were 278 compliments recorded by adult care (table 3.3). This represents a 0.7% increase in the number recorded compared to the previous year (276 in 2015/16).
3.3

The majority of comments received about staff are related to their professionalism, the information and advice they gave and their pleasant and friendly outlook.

4. Complaints Activity

4.1 In complying with legislative requirements - the arrangements comprise of two stages:
   - Local Resolution which is the responsibility of the Local Authority, and,
   - then recourse to the Local Government Ombudsman. (Point 5)

Trends

4.2 259 adult social care complaints were received by the Council of which 22% were upheld. This number represents a 3% increase on the previous year, when a total of 251 complaints were received, of which 33% were upheld.
4.3

Complaints over a 3 year period

<table>
<thead>
<tr>
<th>Year/Quarter</th>
<th>No. of complaints</th>
</tr>
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<tbody>
<tr>
<td>2014-15 Q1</td>
<td>50</td>
</tr>
<tr>
<td>2014-15 Q2</td>
<td>70</td>
</tr>
<tr>
<td>2014-15 Q3</td>
<td>58</td>
</tr>
<tr>
<td>2014-15 Q4</td>
<td>49</td>
</tr>
<tr>
<td>2015-16 Q1</td>
<td>76</td>
</tr>
<tr>
<td>2015-16 Q2</td>
<td>65</td>
</tr>
<tr>
<td>2015-16 Q3</td>
<td>52</td>
</tr>
<tr>
<td>2015-16 Q4</td>
<td>58</td>
</tr>
<tr>
<td>2016-17 Q1</td>
<td>75</td>
</tr>
<tr>
<td>2016-17 Q2</td>
<td>64</td>
</tr>
<tr>
<td>2016-17 Q3</td>
<td>68</td>
</tr>
<tr>
<td>2016-17 Q4</td>
<td>52</td>
</tr>
</tbody>
</table>

4.4 Of the 259 recorded:
   - 22% were upheld,
   - 36% were not upheld,
   - 40% were partially upheld,
   - 2% were withdrawn after the complaint was made.

A further 36 contacts from customers were received by the complaint service but were then passed to other agencies within Gloucestershire as they were not the responsibility of the Council.

4.5 Within the regulations the only prescribed timescale is that of the requirement to acknowledge a complaint within 3 working days of receipt. The percentage of complaints received which were acknowledged within 3 working days was 86%. Some complaints are received elsewhere within the Council other than the Complaints team and this can cause a delay in acknowledging.

4.6 Of the 259 complaints received, 67% were responded to within 20 working days. The reasons for this percentage can be attributed to the complexity of the case and waiting for information from external providers.

4.7 Of the 259 complaints, 9 were sent by Members of Parliament (MP’s) acting on behalf of their constituents. When this occurs the complaint response is sent from the Commissioning Director for Adults following an investigation by the relevant team manager and briefing to the Director.

Analysis of Complaints

4.8 The following section looks at complaints related to Integrated Community Teams (ICT’s) and then separately summarises all other complaints within the remit of adult care services.

Integrated Community Team Complaints

4.9 This section provides a summary of the complaints received by each of the 6 Locality Integrated Community Teams in the county.

4.10 There were a total of 92 complaints recorded for the year (93 in the previous year). It should be noted that the total number of formal complaints that are dealt with in the ICT’s is
very low in comparison to the number of contacts received and the number of active cases each locality holds. The number of active cases on average throughout last year for all localities was 9,280 (cases that are being funded or are open to ICT for further input). When compared to the total number of complaints received of 92, this identifies that only 1% of customers involved with Adult Care have felt the need to formally complain about the ICT’s.

Breakdown

4.11

![Complaints by Locality](image)

4.12 This is a very similar distribution to the previous year with the distribution in line with the relative size of locality, with Gloucester consistently receiving the most complaints because of the number of cases they support.

Reasons for Complaint

4.13 Many of the individual complaints that are received include more than one area of concern and the graph below outlines the main reasons for the 92 complaints received in the year across the 6 localities.
The main areas of concern raised relate to the quality of service from the locality teams and disputed decisions (mainly the outcome of an assessment). These account for 45% of the reasons a complaint was made in the last year about the locality teams.

Issues Raised (within each Locality)

4.14

[Graph showing reasons for complaint by locality]
Specific Themes Highlighted by Complaints

4.15 From the analysis of the data the main themes from locality complaints are:

- Delay in communication and poor communication resulting in misunderstandings
- Staff not responding to telephone messages or e-mails
- Delay in allocating a worker following the initial referral being received
- Inaccurate assessments
- Family feeling they are not included in decisions
- A large number of complaints were raised about the apparent reduction in support hours and individual budget compared to those previously allocated to the service user following a care assessment or review.

4.16 In an attempt to improve and learn from the themes of both individual and collective complaints, the complaints teams periodically produce specific reports for all 6 localities and a general report for the Head of Adult Care on complaints. This is then presented quarterly and enables locality managers to review the above themes both locally and across the county to help influence and implement improvements.

Other Adult Care Service Complaints

4.17 For the Countywide Learning Disability fieldwork team there were 11 complaints made relating to the fieldwork service (16 in 2015/16). Issues raised include,

- 2 complaints about the accuracy and outcome of the assessment and subsequent individual budget generated. (not upheld)
- That a social worker was unprofessional and incorrectly arranged for a person to be removed from their home. (not upheld)
- Communication regarding the assessment and support plan process. (not upheld)
- That a social worker’s attitude and behaviour was poor when in a meeting with the service user and other professionals. (not upheld)

4.18 The Finance and Benefits (FAB) team received 8 complaints in the year, the themes were mainly about the accuracy of their assessments (not upheld), advice given about a benefit entitlement was incorrect (not upheld), that a FAB decision letter was sent to a home address when the person was in long term care (upheld) and that an assessment did not fully take into account someone’s realistic living costs (partly upheld with the assessment recalculated).

4.19 The Support Planning and Direct Payments team received 15 complaints. The main theme of the complaints were about the proposed changes to packages of support and an overall reduction in the service with service users believing that the council did not understand their disabilities (mainly not upheld). There were also a small number of complaints relating to the time taken to complete the support planning process, (these were partly upheld).
For context there were no complaints in previous years for this team as the support planning process was undertaken within the locality teams. This new team now specialises in support planning for younger adults, physical disabilities and people with a learning disability.

4.20 The Telecare team had 6 complaints about the service. Faulty equipment meaning Police officers had to gain entry to properties accounted for 2 complaints, (both upheld and learning actioned with the equipment monitoring centre). A service user was sent an inappropriate letter given their disability and the family received a written apology as a result. A complaint was also upheld where the team had made an incorrect assumption regarding a first responder, (upheld and learning actioned for the team).

4.21 Care Finance received 3 complaints about the issuing of invoices to pay care charges. The main complaints were a complainant was unhappy with the correspondence received being confusing and with delays in resolving a problem (upheld and learning actioned). A complainant received an incorrect invoice following a relative’s death (upheld and a credit note was issued). A complainant received invoices that did not take into account a holiday they had taken and had not received their care, subsequent credit notes produced were also not accurate (upheld). It must be noted that part of the issue was to do with inaccurate information provided by the locality team involved in the case.

4.22 The Adult Safeguarding team responded to 6 complaints. None of the complaints were upheld. The complaints were about the way in which the team managed concerns, including a person’s opinion that inappropriate information was shared with a 3rd party.

4.23 The Hospital Social Work team dealt with 5 complaints. These were mainly about communication, with families suggesting they were not informed that services put in place following discharge would be chargeable and that in general the team did were not keeping families informed of decisions. Parts of these complaints were upheld and the learning shared across all social care teams in the Council.

4.24 The Client Affairs team responded to 4 complaints where concerns raised were mainly people being upset at having their finances managed by the team and also allegations of the team not providing enough money on a weekly basis. None of the complaints were upheld.

4.25 There were a total of 103 complaints made about externally commissioned services for adults, 12 for residential and nursing placements (9 fully or partly upheld), 1 for residential respite care (partly upheld) and 33 for domiciliary care services (24 fully or partly upheld). As in previous years the complaints service work closely with the Commissioning team to try to resolve these issues and to work with the providers to ensure that any actions taken by the agency or home are monitored to minimise repeated complaints and to improve that service.

4.26 56 complaints were received for the new community meals service which started in April 2016. There were some difficulties in the transition of the service to a new provider and a number of teething problems occurred, such as late deliveries, missed meals, wrong meals and back office support. These problems issues have largely been resolved and the Council now sees very few complaints about the service.
4.27 Included within the 103 complaints was 1 complaint about a provider the Council commissions to provide administrative support to people who receive a direct payment. The complaint centred on the responsiveness of the office staff to a problem, this was upheld and an apology given.

Changes to Practice as a Result of Complaints (All Service Areas)

4.28 Many of the actions resulting from complaints involve improving things for individuals. However, some complaints highlight shortfalls in a whole service. On a number of occasions there is individual learning for staff and a small number result in disciplinary action.

4.29 When it has been identified that we have failed one of our customers and when this has resulted in a financial impact to them, good practice dictates that we apply the principle of restitution. In the last financial year for a small number of complaints we have either reimbursed customers for fees that should not have been applied, waived outstanding debt because of the quality of the service provided, or have compensated customers when standards of service have not been acceptable.

4.30 The following represent the actions taken, or changes to practice implemented that were identified through the complaints procedure in 2016/17.

Locality Teams

- All social care staff in the locality teams were reminded of the importance of accurate record keeping.
- The community meal “start up” letter has been amended to explain the correct process for review.
- Locality teams reviewed their processes for recording and leaving messages for staff and were reminded of the importance of acknowledging the receipt of messages with customers.
- Locality teams were reminded to update customers and have a process in place in the event of a worker being unexpectedly away from work for a long period of time.
- All staff were reminded to fully explain to customers that services could be chargeable and to follow this up by letter.
- All staff were reminded to avoid using “throw away lines” as customers may not consider their attempt at humour as appropriate.
- A template complaint response letter and “quick reference guide” was produced for managers to aid them in responding to complaints.

Support Planning Team

- All staff in the team were reminded of the importance of fully explaining their role and the process they are to undertake to service users and families.
Telecare

- The procedure at the Telecare monitoring centre has been changed to ensure that faulty equipment is dealt with more efficiently.

Commissioned Care Homes

- A provider has commissioned a quality assurance consultant to review all of the home’s policies and to update staff in their application.
- A provider’s staff were retrained by Gloucestershire Care Service’s staff in moving and handling and continence management.
- A provider’s staff were retrained by Gloucestershire Care Service’s staff in dementia and managing challenging behaviour.
- A provider commissioned refresher training for all staff on safeguarding and dementia.
- A provider has changed its admissions policy to ensure that all items belonging to a new resident are correctly itemised, including those of value.
- A provider has reviewed its fluid and nutrition recording policy and charts and has retrained all of their staff.

Commissioned Domiciliary Care Agencies

- A provider retrained all its staff in “effective communication”.
- Due to the majority of clients having dementia an agency has arranged for all of their staff to undertake additional dementia training.
- An agency commissioned specialist moving and handling training.
- An agency ensured all of their carers undertook refresher training on best practice reporting and recording and moving and handling training.
- An agency, via memo and staff meetings, reminded all carers about the need to accurately record what care, fluids and food someone has received at each visit.
- Via staff briefings an agency reissued their procedures for when a carer experiences difficulties in gaining access to a service user’s property.

5. Local Government Ombudsman

5.1 If a complainant is dissatisfied with the response to their complaint, the complaint can be referred to the Local Government Ombudsman (LGO). The LGO will usually only accept referrals that have previously been considered through the Local Authority’s complaint procedure. However under the regulatory reforms, the LGO now has the discretion to
investigate if it is considered that there is no benefit in the Local Authority firstly considering the case.

5.2 In this reporting period there have been 11 complaints referred to the LGO regarding Adult Care Services. Below is a summary of the LGO’s findings.

**Summary of Referrals and Decisions**

5.3 **Cotswold Locality** – The Council did not work collaboratively with the NHS when planning a service user’s discharge from hospital, which caused the family avoidable distress. The LGO decided **there was fault and the Council should apologise, make a symbolic payment of £250 and review its procedures in the hospital.** These actions were completed by the Council to remedy the situation.

**Gloucester Locality** – That the Council failed to assess the service user’s needs properly, which meant that they did not always receive the level of care they were entitled to. The LGO found that **there is fault causing injustice in the Council’s assessment and support planning process.** To remedy the injustice, the Council apologised, agreed to pay the complainant £200 for the anxiety and uncertainty experienced and agreed to backdate the social care entitlement that should have been received.

**Gloucester Locality** – That the Council failed to provide the service user any emergency support by way of a suitable provider, meaning the extended family are left to provide this. At the time of this report the LGO had not made a decision on the case.

**Gloucester Locality** – That the Council’s social worker made unprofessional comments and knowingly neglected the responsibilities of their position when in a meeting with other agencies. The LGO decided to **stop their investigation as they will not investigate personal issues.**

**Stroud Locality** – That the Council were not adequately supporting the service user in the community and the assessment completed was not an accurate reflection of need. The LGO decided **that they will not investigate this complaint because it is unlikely they would find fault.**

**Countywide Learning Disability Team and Emergency Duty Team** – That the Council did not pay due regard to a person’s welfare when removing them from their home. The LGO decided **that there was no fault in the process the Council followed to reach its decision to remove the person.**

**Acute Hospital Social Work** – That the Council incorrectly charged the service user for their care following discharge from hospital as they did not inform the family that the service was chargeable. The LGO decided **that the Council acted without fault and did not uphold the complaint.**

**Acute Hospital Social Work** – That the Council failed to assess and meet the needs of a service user after they were discharged from hospital. The LGO decided **that the Council acted without fault in the way it assessed the service user and did not uphold the complaint.**

**Client Affairs Team** – That the Council submitted incorrect information to the Court of Protection when it applied to become Deputy for a service user’s affairs. The LGO decided **it had no legal power to investigate the complaint because it relates to the start of court action.** The LGO closed the complaint after initial enquiries.
Finance and Benefits Team – That the Council failed to properly consider a service user’s expenditure when assessing their contribution to care costs. The LGO decided that the Council acted without fault in considering the financial assessment.

Contracted Domiciliary Care Provider – That the provider made unfounded allegations about a person whilst in a caring role. The LGO decided they would not investigate the complaint as it was unlikely to be able to add to the investigation already carried out by the Council.

6.0 Representations and Member of Parliament Letters

6.1 In addition to managing the statutory complaints procedure and administrating the compliments process the Complaints team also deal with a number of other letters and contacts which are classed as representations. These contacts are usually concerns or requests for information that can be dealt with without recourse to the formal complaints procedure. In most cases these are dealt with within 1 working day of receipt.

6.2 In the reporting period there were 154 representations dealt with by the team. Of these 8 were made via MP’s offices around the County.

7. Summary

7.1 The Complaints team received in total 413 contacts relating to customer’s dissatisfaction with the Council’s Adult Care Service, all with varying degrees of complexity. This does not include compliments and those issues that were signposted to other organisations. Given that only 11 cases were referred to the LGO, of which, in only 3 cases the LGO found fault, these figures suggest that the Adult Care service are in a strong position when dealing with customer complaints and representations and that the Complaints team add value to the process in supporting both customers and staff in reaching satisfactory resolutions.

Colin Davies
Complaints Manager

Gary Liddington
Complaints and Compliments Coordinator

July 2017