



## **Adult Social Care**



## **Statutory Complaints & Compliments**

## **Annual Report April 2014 – March 2015**

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# 1. Purpose and Context of Report

## 1.1 Purpose & Scope

The purpose of this report is –

- To report to Members and Officers detailing Leicestershire County Council's (LCC) Adult Social Care complaints and compliments activity from 1<sup>st</sup> April 2014 to 31<sup>st</sup> March 2015
- To set out future developments and planned improvements.
- To meet the Council's statutory duty requiring the production of an annual report each year.<sup>1</sup>

The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 outlines the statutory responsibilities of the County Council.

This report provides analysis and comment for Adult Social Care Services on all complaints managed under the statutory complaints process. Those complainants not qualifying under the statutory process have been considered under the County Council's Corporate Complaints and Compliments annual report presented to the Scrutiny Commission.

## 1.2 Background Context

The Adult Social Care Service within the Adults and Communities Department arranges and supports the provision of a wide variety of services to help people to remain living independently in their own homes with increasing levels of choice and control over the support they receive. When this is no longer possible, the department supports residential or nursing care as well as having lead responsibility for safeguarding adults at risk of harm.

This year 9,574<sup>2</sup> people received long-term support from the social care department during 2014-15. This figure is not comparable to figures previously supplied in annual reports due to significant changes in our statutory returns. In essence the Council now excludes a number of services which were previously included such as Short term residential, respite and community equipment. It is of course still possible for complaints to be made against these areas. A comparable figure should be available next year.

The department always aims to provide high quality services that meet the needs and circumstances of individuals and their families. The department actively promotes involving clients and carers in shaping services; using their skills and experiences to help ensure they provide the right services. However, given the

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<sup>1</sup> [Statutory Instrument 2009 no.309 \(18\)](#)

<sup>2</sup> Figures supplied by Performance and Business Intelligence Team

personal and complex nature of some adult social care services, sometimes things do go wrong.

The complaints process is a mechanism to identify problems and resolve Issues. If things go wrong or fall below expectation, the County Council will try to sort things out quickly and fairly. We also want to learn from our mistakes or concerns that arise and will use this learning to make changes to improve services.

Analysis of information about complaints received during 2014 -15 gives Adult Social Care an opportunity to reflect on both the quality of the services it provides and also consider how well it listens and responds to their needs.

#### 1.4 Reform of Health and Social Care complaints regulations

As a result of the reforms in the Care Act, it is likely that more people will be brought into contact with the local authority. This increased demand is a mixture of new services such as social care for prisoners and increased volume of existing work such as assessments. Importantly all carers now have a right to request an assessment

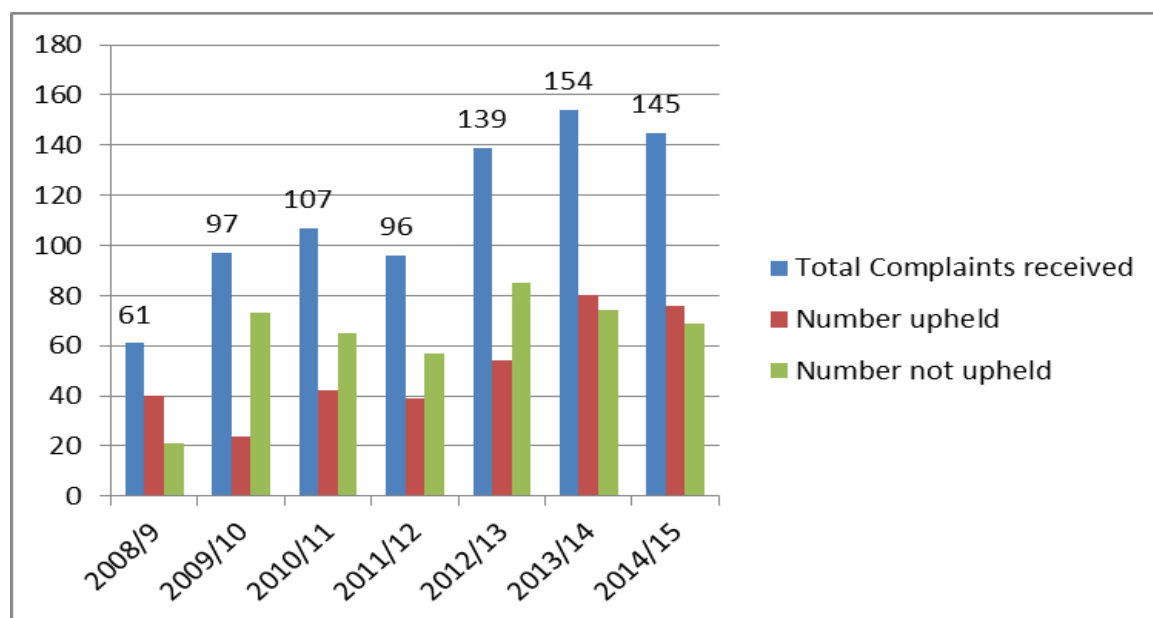
Given these changes, it is vital that individuals have confidence in the system, and that they are able to challenge decisions without having to resort to judicial review. With this in mind and, following consultation in 2014, the Department of Health recognised a potential need for change in this area and the Act provided a power to establish an appeals system.

Following further consultation on a draft appeals proposals, a number of concerns were raised by both the Association of directors of adult social services (ADASS) and individual local authorities directly. After considering these views, the department of Health have now deferred the introduction of any appeals mechanism to allow for wider debate at the next spending review.

## 2. Complaints Analysis

### 2.1 Complaint Volumes

Table 1: Adult Social Care Complaints recorded

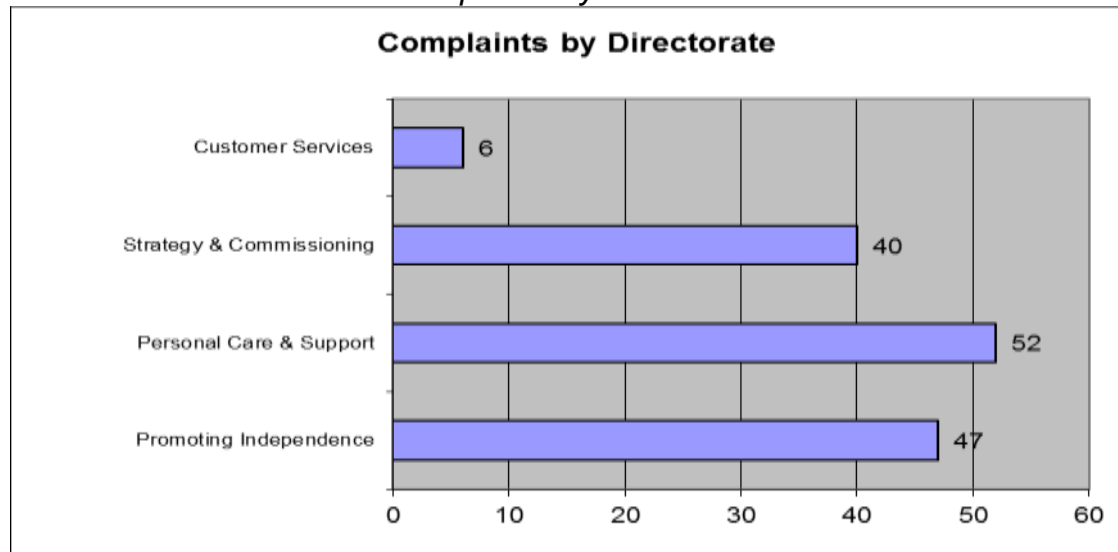


As illustrated above the total number of complaints received this year reduced slightly from prior year (by 6%). This reverses the trend seen over the last couple of years. Discussions with regional complaints managers within the eastern region complaints managers group indicate the majority of authorities are seeing slight increases although data is not considered statistically viable to include any formal benchmarking.

Complaint outcomes for 2014-15 are considered in more detail later in this report but numbers of complaints upheld each year are included in the above graph in the interests of tracking the long-term trend in this area.

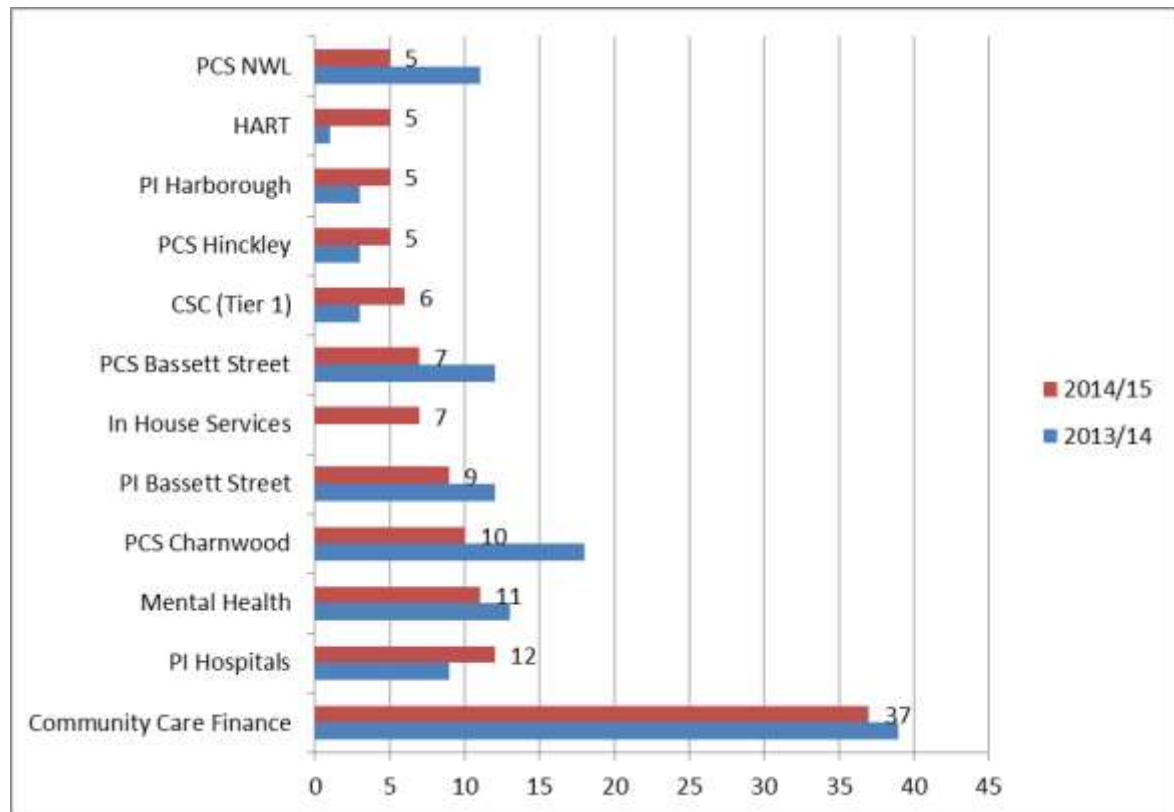
## 2.3 Complaints by Directorate

Table 2: Adult Social Care Complaints by Directorate



The above table shows the services which have been complained about through the year. This year figures are now included for those complaints which were about the initial contact handling (this is managed by the Corporate Resources Department)

Table 3: Adult Social Care Complaints by Service Area



The above graph (Table 3) breaks down where complaints have arisen. All complaints received have been mapped against a service area. Reporting at this level was first introduced last year and figures for the previous year have been included for comparison purposes.

It is worth highlighting that the three highest areas are all County-wide functions rather than restricted to a specific locality. It follows that these are always likely to generate a higher total volume than locality teams.

The highest area for complaints continues to be Community Care Finance. The nature of this team's work is likely to give rise to complaints if things do go wrong and unlike other areas there is not usually an opportunity to verbally discuss concerns (for example during an assessment). Additionally during the last year this team have improved their debt collection approach by chasing 'low current' debt (under £5k) and 'low aged' debt, which has increased the contact made with the public. Inevitably this has precipitated a number of disputes around accuracy of invoices (some of which have been substantiated).

A number of actions have been taken to address complaint volumes including:

- Review of resource utilisation around invoice runs to ensure availability of call handlers
- Review of letter templates
- Regular reminders issued to Locality teams regarding the importance and impact of accurate record keeping
- IT system enhancements
- Introduction of a Systems and Processes Group, which identifies, reviews and approves particular process issues, so that we implement changes to processes more holistically.

All of the above have started to make a positive impact and this can be seen by a reduction in complaints per invoice produced as expressed below

<b>Year</b>	<b>Invoices raised</b>	<b>Complaints received</b>
2013-14	80,850	39
2014-15	89,246	37

Whilst it is pleasing to see the proportionate reduction, it is clear that more can still be achieved and this will be driven through the systems and process group.

For the services that are restricted to locality areas rather than cross-county functions, it is pleasing to see the reduction in the two teams that received the most complaints in 2013-14 – Bassett Street and Charnwood. The Customer Relations Manager has worked closely with these teams to offer soft training and assistance in preventing issues escalating and this appears to be paying off.

## 2.4 Joint Complaints

The Health and Social Care complaints regulations place a duty on Local Authorities to work together with health partners in responding jointly to complaints<sup>3</sup>. Leicestershire County Council accordingly has a joint complaints handling protocol, supported by a multi-agency group, which sets out common guidelines and approaches to this. Members include Leicester City Council, the Clinical Commissioning Groups, University Hospitals Leicester (UHL) and the Leicestershire Partnership Trust (LPT)

During the year 2014/15, twelve complaints were considered using the Joint Complaints protocol. This is similar to the previous year (13) with the bulk, again, being complaints around hospital discharge arrangements.

There have been large-scale changes in management responsibility for complaints within partner organisations and this has prevented meaningful progress being made to streamline joint complaint handling. This therefore remains patchy and is an area where improvements can be made.

Recently the group re-started quarterly meetings in an effort to refresh and agree the protocol in this area. Working effectively together will be a clear priority as we move forwards and it is, therefore, vital this group commits to a common approach to handling multi-agency complaints.

Despite these issues, of the twelve complaints considered this year, eleven of the complaints were resolved within our jointly agreed 35 working day threshold.

## 2.5 Complaint Causes

During 2013-14, a decision was taken to map complaints against the Council's revised Customer Service Standards (which were launched in April 2014). As a key source of customer feedback, complaints often form an important part of evaluating how well the County Council is performing against these corporate standards.

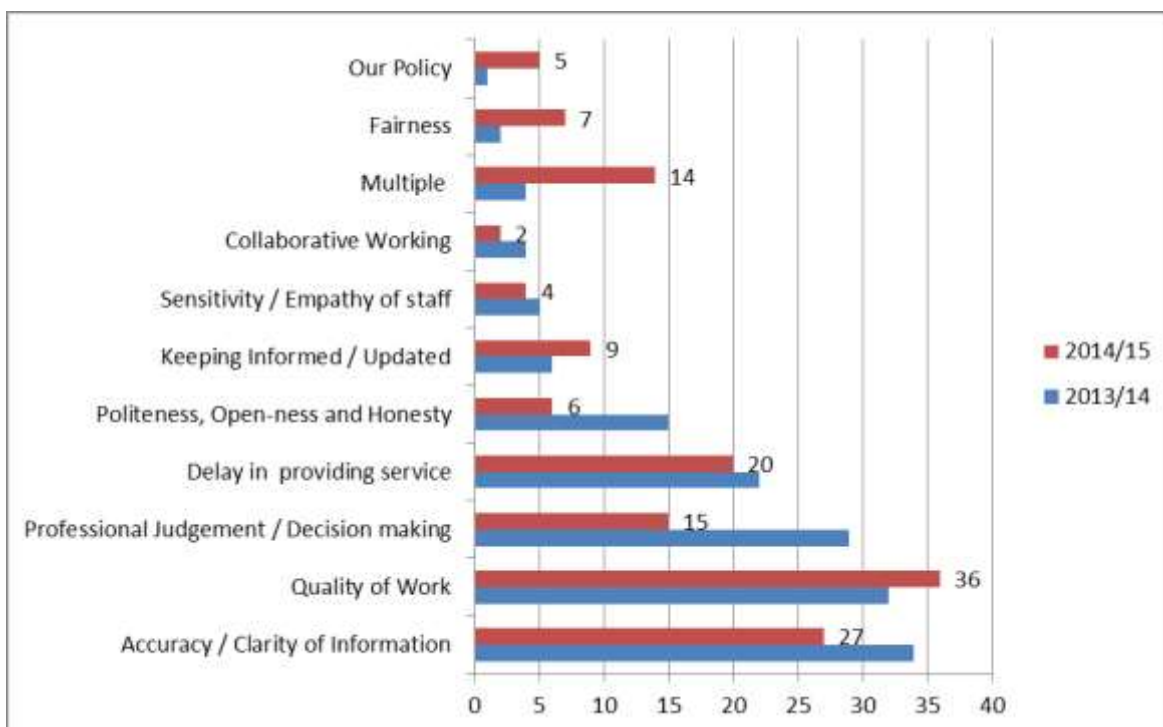
The same exercise was repeated this year and the results for both years appear in Table 4 overleaf.

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<sup>3</sup> [Statutory Instrument 2009 no. 309 \(9\)](#)



Table 4: Complaint causes



Whilst a number of the causes remain at similar levels, there are some interesting variances this year, in particular:

- 1) A significant reduction in complaints challenging professional decisions made. This suggests that there has been improvement in the clarity of how decisions are evidenced and explained.
- 2) A reduction in complaints regarding politeness and conduct. These levels were not previously high, but it is encouraging to see just six complaints featuring this as the major topic and none of these being upheld.
- 3) The increased level of complaints where no single cause could be identified. These are labelled as “multiple” and reflects an increased complexity of complaints this year

The full breakdown of complaint causes and uphold rates appears in Table 5 below.

*Table 5: What causes complaints?*

Cause	Number	% Upheld (Partly or Fully)
Accuracy / Clarity of Information	27	78%
Quality of Work	36	39%
Professional Judgement / Decision making	15	13%
Delays in providing service	22	77%
Politeness, open-ness and honesty	6	0%
Sensitivity / Empathy of staff	4	75%
Keeping Informed / Updated	9	77%
Collaborative Working	2	0%
Our fairness to you	7	28%
Multiple	14	50%
Implementing our policy	5	20%

## 2.8 Complaints Outcomes & Resolutions

*Table 6: Adult Social Care complaints recorded by outcome*

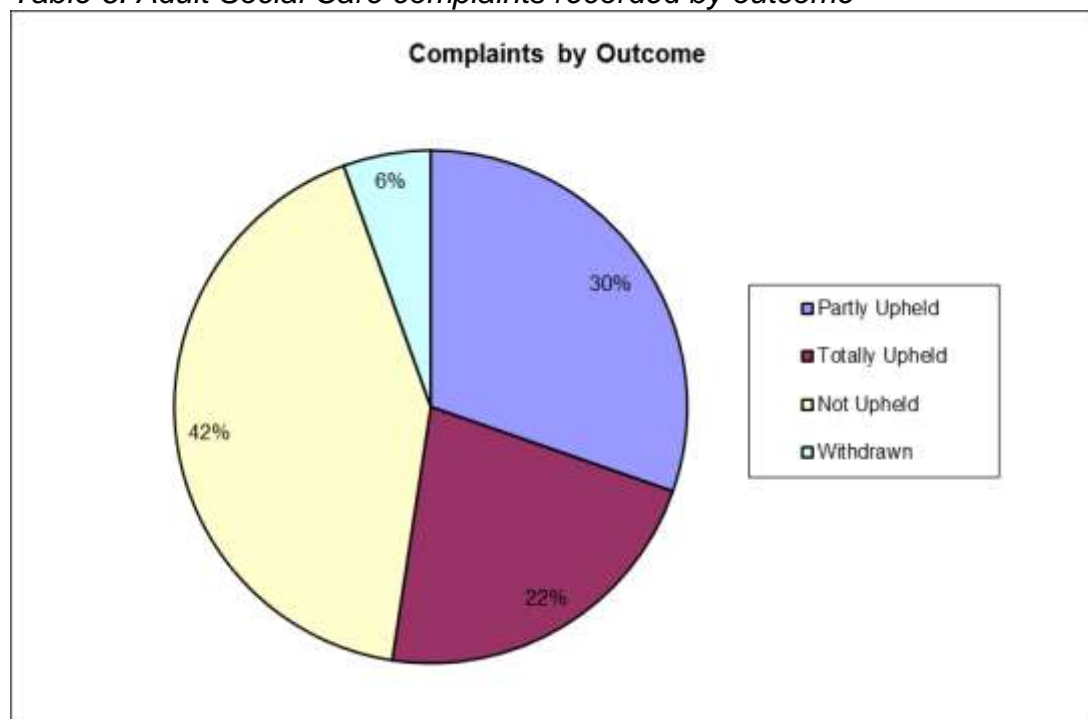
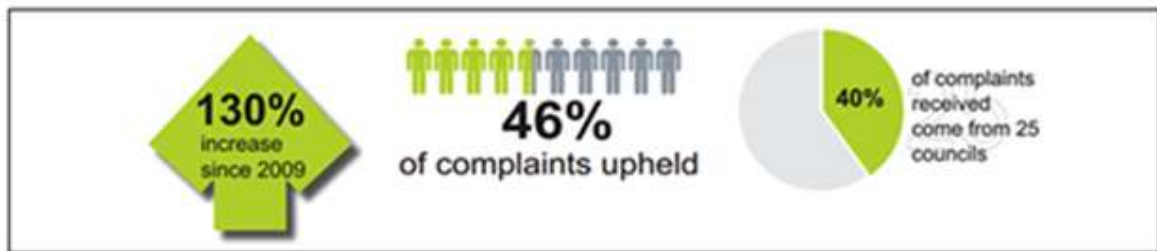


Table 6 above shows that 52% of complaints were upheld either fully or partly. This is exactly the same figure as last year. Discussions with regional complaints managers generally show a similar trend and it is worth also noting that when complaints are referred to the Ombudsman this area remains the most likely to be upheld.

Whilst the Ombudsman has not published a specific report on social care this year, it is timely to remind on the top level findings from their annual review in 2014 which highlighted adult social services as their area of main concern expressed in the graphic below



Leicestershire County Council is not one of the 25 Councils referenced above and it is worth highlighting that a reduction in complaints in this context should be seen as healthy. There is however, clearly scope for reducing the number of complaints upheld.

As shown in Table 5, uphold rates are impacted predominantly by two areas - accuracy of information and delays in providing services. Improvements in the above two areas would have a big impact on the overall rate.

Actions already taken to address these areas include:

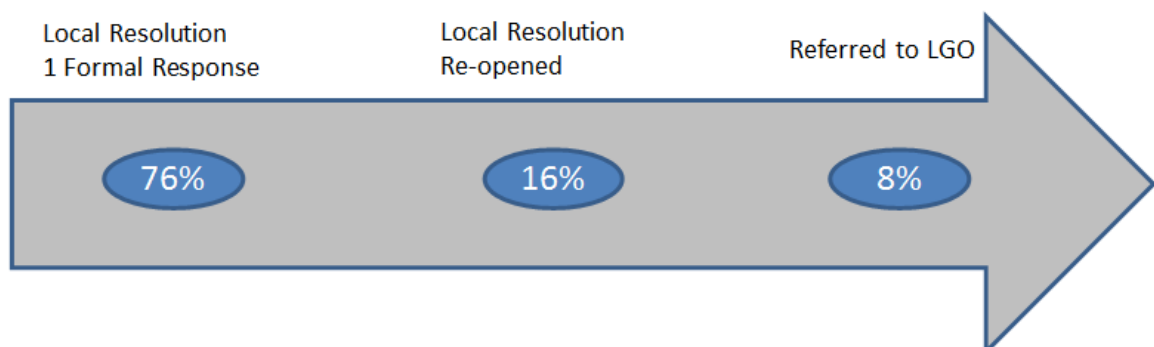
- Revised workflow introduced within Customer Service Centre
- Increased focus during supervision sessions on the importance of accurate record keeping

## 2.9 Complaint escalations

The statutory social care procedure is a two stage process with the Ombudsman as the second stage. However, before complaints are escalated to the Ombudsman, it is important that a flexible approach is taken to ensuring that every opportunity has been taken to resolve the matter.

On occasions, complaints are re-opened for further investigation prior to an Ombudsman referral. Predominantly this is where new issues arise or it is felt there is an opportunity to further clarify responses made at Stage 1. With this in mind, it is interesting to look at where complaints are resolved along the pathway.

*Table 7: Complaint escalations*



According to data supplied by the Local Government Ombudsman, their office received enquiries on 16 complaints during 2014-15.

Ombudsman complaints can sometimes take considerable time to be resolved which meant that previous annual reports often could not fully show the proportion of complaints upheld at this stage. To address this (and ensure consistency with other complaints reports) this year's report focuses on decisions made during the reporting year irrespective of when they were received.

With this in mind the Ombudsman made decisions on 18 cases during the year with three cases being upheld. The details for these 3 cases appear below:

1. Complaint regarding the charges the Council applied for daughter's stay in a residential placement. The Ombudsman found fault that the Council did not formally notify that there would be charges. The Council agreed to waive 3 month's charges until the point that formal notification had been sent.
2. Two part complaint regarding how the Council dealt with financial issues regarding her aunt and also a failure to adequately consider concerns under safeguarding procedures.  
The Council accepted a number of shortcomings and agreed to review a number of forms and staff guidance. The Ombudsman was clear that, whilst there was fault, there was no significant injustice caused.
3. Complaint that the Council delayed in providing care upon a hospital discharge and failed to give clear advice on what services the service user was entitled to.  
The Ombudsman did not find fault with how the Council ended a re-ablement package or the alternative provision provided. However there was fault in advice given which suggested eligibility for a further period of re-ablement without charge. An apology was considered sufficient as the family had not suffered any financial loss.

For the remaining cases –

- Eight cases were referred the complaint back to the Council as premature.
- In two cases the Ombudsman decided not to investigate, either because there was no evidence of any fault, or the complaint concerned matters outside of her jurisdiction.
- In five cases, the Ombudsman, after detailed investigation, was happy with the actions the Council had taken.

The absence again this year of any significant findings of maladministration is noteworthy and suggests that the vast majority of complaints have been dealt with effectively by the department.

## 2.6 Performance against timescales: How responsive have we been?

Table 8: Adult Social Care Performance

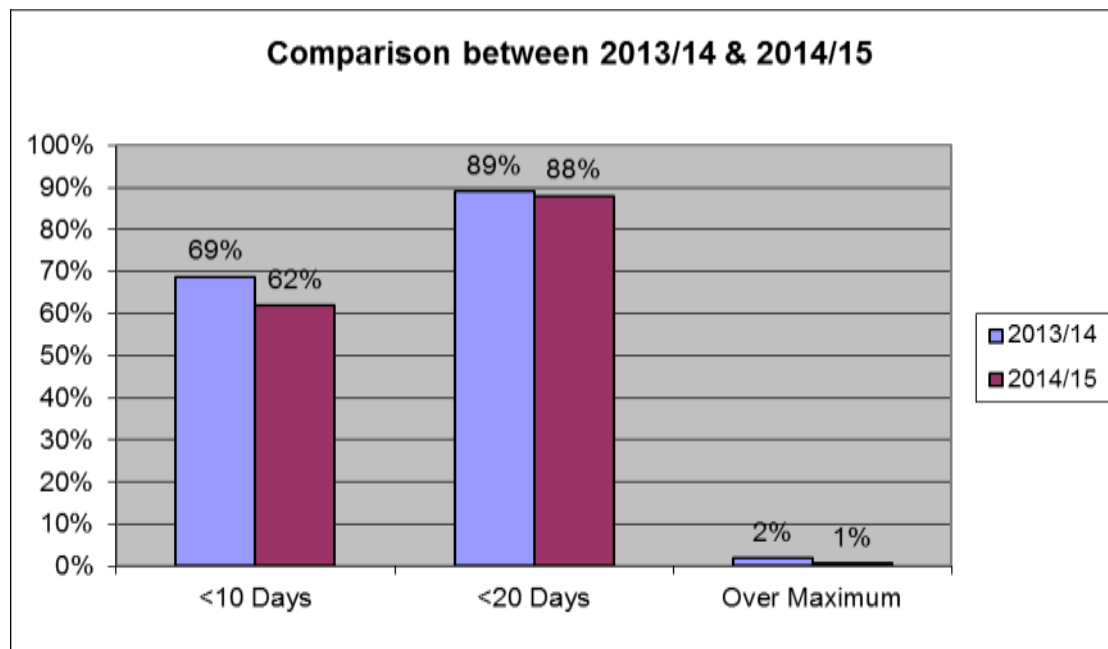


Table 8 above shows the time taken to respond to complaints, providing a comparison between the current reporting year and the previous one. The table shows a slight downturn in performance against the internal, best practice target of ten working days, but these are still excellent results given the complexities of social care complaints and competing resource pressures.

Just one complaint was recorded as outside of the statutory timescales of 65 working days. This was heavily impacted by 'scope creep' in what the complaint was actually about. Several meetings were held with the complainant and other agencies, and the Customer Relations Manager had no concerns with the approach taken by the responding manager which was focused on achieving the best outcome rather than being driven by timescales.

### 3 Learning from Complaints

#### 3.1 Corrective action taken

Each of the 76 complaints either partly or fully upheld have been reviewed to ascertain what action the department has taken to learn from the complaints and avoid such issues occurring in the future. The results are shown below.

Table 9: Actions taken in response to complaints



In 33 cases (45%) an apology was seen as the appropriate action, typically when events had moved on or the issues had already been addressed.

Investigating officers are also asked to explore whether there are systemic issues which need further action to prevent future complaints. In ten cases, a review of procedures was instigated including the following:

- Revision to wording on debt reminder templates
- Changes to how e-mails are handled within the Customer Service Centre
- Local changes to how messages for workers were handled and passed on

In seven cases, staff training was identified which included:

- Time-management training
- Managing challenging behaviours
- Further IAS system training

In addition to the above, managers also referenced more long-term improvements such as the customer journey simplification project. All of the above are appropriate and will help continuously improve our future service provision.

However it is suggested more can still be done in this area to challenge and improve practices. This is evident from the fact that, for only around 25% of upheld complaints, managers were able to identify clear and obvious process or staffing improvements. This may suggest that managers are not fully equipped to analyse complaints sufficiently.

To help assist with this, Customer Relations have implemented a revised lessons learned form, which gives guidance on using root cause analysis techniques. Completion of these forms is tracked and monitored to ensure that actions are carried out. A sample copy of the form is attached as Appendix A. The Customer Relations Manager is also keen to run workshops to critically look at complaint learning in a group environment.

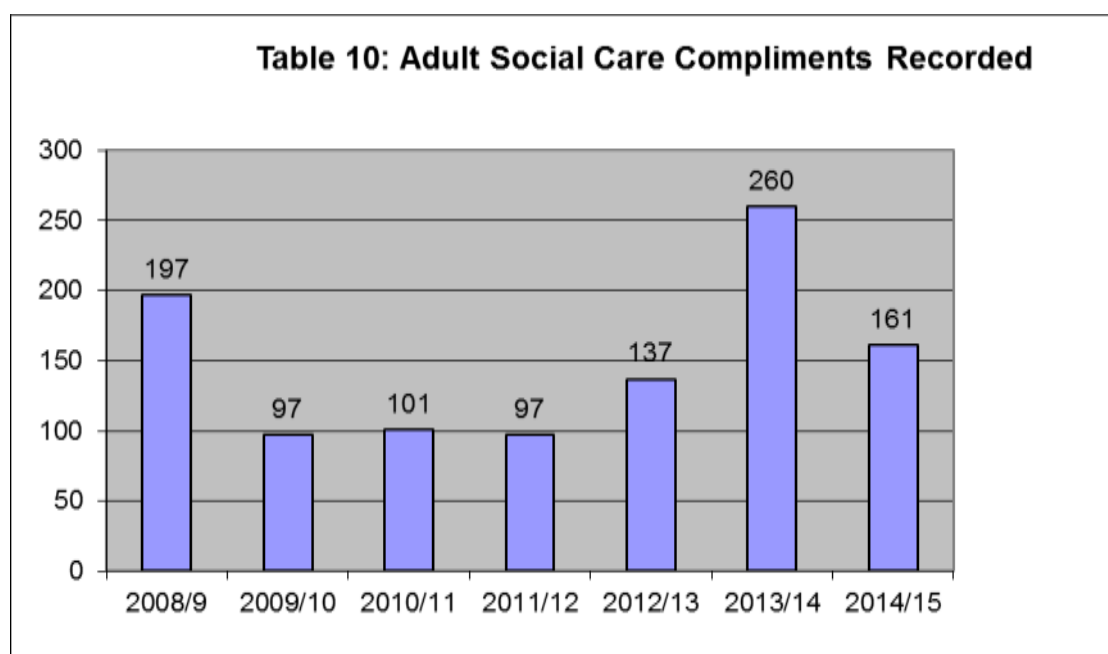
The theme of capturing learning has also been discussed at the Regional Complaints Managers Group and unanimously agreed as an area most authorities could improve on. The Customer Relations Manager has recently taken the chair of this group and arranged for a focused workshop on this important topic during summer 2015. This will be an opportunity to share best practice and discuss with other local authorities opportunities to explore. Learning will, of course, be brought back into the council and shared as appropriate.

## 4 Compliments 2014-15

There has been a change to the way compliments are recorded this year following an inconsistent approach previously. A number of areas were actively seeking positive feedback but then recording these as compliments, whereas other areas were keeping this solicited feedback separate as “positive feedback”. The latter approach is in line with our policy and, as such, is now the approach taken.

In previous annual reports, high numbers of HART compliments had been recorded. These are now more appropriately considered as positive feedback. This is the primary reason for a drop in recorded numbers this year down from 260 to 161 with a further drop expected next year as this change took place mid-year.

Table 10 below shows the long-term trend in compliments recorded.



Nonetheless, it is important to recognise the good work that is being delivered by the department.

A small selection of the commendations received can be found in Appendix B. They show some of the ‘real-life stories’ where Adult Social Care makes a huge difference to peoples’ lives.

The Customer Relations Team will continue to work closely with the department to try to reflect all the unsolicited feedback received across the teams and ensure visibility in annual reports.



## **5 Monitoring the Process**

The Customer Relations Team continues to support Adult Social Care Services to manage and learn from complaints. The key services offered are -

1. Complaints advice and support
2. Production of Performance Reports
3. Liaison with Local Government Ombudsman
4. Quality Assurance of complaint responses
5. Complaint handling training for Operational Managers
6. Scrutiny and challenge to complaint responses

Assistance continues to be routinely provided to Locality Managers in drafting responses to complaint investigations. This helps ensure a consistency of response and that due process is followed.

The Customer Relations Manager also meets with the department's Intelligent Client each quarter to talk through complaints matters.

Quarterly performance reports will be produced and delivered at Strategic Leadership Team (SLT). Additionally the Customer Relations Manager attends the Locality Managers meeting at 6 monthly intervals to less formally discuss emerging themes and issues.

## **6. Customer Relations Team – Work Priorities for 2015-16**

During 2015/16, the team will focus on a number of initiatives as set out below

- Identify and promote an easy to use root-cause analysis tool within the department to help managers with identifying systemic improvements.
- Continue to ensure complaints are handled responsively and in a flexible way
- Work collaboratively with the department to achieve a reduction in levels of complaints upheld
- Maintain the low levels where the Ombudsman finds fault.
- Develop a toolkit for handling persistent complainants consistently and fairly
- Arrange further complaints training for Locality Managers following successful pilot in 2013-14
- Review the Complaints policy to ensure fully compliant with the Care Act

## **7. Final Comments**

In times of change and austerity it is vital that service users are provided with a complaints process that is easy to access and fair. This year's Annual Report shows that Adult Social Care does listen and respond to comments and complaints.

It is encouraging that after 3 years of successive increases, complaint volumes reduced during 2014-15. Whilst it is too early to say whether this will be a longer term trend, some of the cultural improvements already instilled within the department will help keep the focus on early resolution.

The Customer Relations Manager would also highlight two key themes which have been evident from complaints received.

- **The importance of accurate and timely record keeping**

There have been a number of cases where the Council has taken a decision but where the rationale for this has not always been clearly recorded within case notes.

Examples have included strategy discussions around whether to trigger safeguarding investigation and discussions around potential for charges to apply. It is recommended that improvements are made to the discipline of contemporaneous and succinct case notes.

- **The importance of apologising effectively**

For the most part complaints are well managed and appropriate responses sent. However, there are some opportunities to improve the quality and, in particular, how an apology is delivered. There have been several cases this year whereby un-necessary escalation has occurred simply because an apology has not been made effectively. Examples include where it appears grudgingly given or fails to take responsibility for the errors.

Guidance notes have been circulated offering 'top tips' in this important area

The Customer Relations Team believes that improvements in the above areas would help further reduce the number of complaints received as well as fulfilling some of the key promises to customers within the Council's Customer Service Standards.

## APPENDIX A : Sample Lessons Learned Form

Initial Information (To be completed by Complaints Team)	
Customer Name:	A
Complaint Reference Number:	2486
Acknowledgement sent date:	
Response due:	29/5/15
Service investigating the complaint:	Adults & Communities
Assigned to:	XXX
Brief Details of the complaint:	Mr A phoned he is not satisfied that he never had a formal written response to his complaint letter; he would like this for clarity and closure. His complaint is regarding the protection plan for his daughter; he is concerned that he is not allowed to provide any personal care for her therefore if no one else is available she will be left uncomfortable.
Final Response Information (To be completed by responding Manager)	
Complaint outcome:- Upheld / Not Upheld / Partially Upheld / No Finding:	Partially Upheld
Were there any lessons learnt (i.e. could this have been avoided)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Details of lessons learnt (including factors of how the issue could have been avoided):	The Protection Plan that was formulated as a result of the Safe Guarding Adult Investigation was incorrect and needed to be reviewed by a senior Manager before sending it out.
Actions to be taken by service due to lessons learnt: (e.g. policy/practice changes, staff training)	Issues have been addressed with the Social Worker involved who completed the Protection Plan.
Date actions will be implemented by:	Already implemented
Person overseeing, implementation of actions:	N P
<i>N.B. The customer relations team will contact you to check if actions have been implemented by the deadline date you have set and will be looking for evidence of this.</i>	
Other Comments:	When the letter was initially received a meeting was request to resolve the situation. A number of meetings were completed and the issues were addressed at that point. Client then felt a formal reply was then needed.

## Appendix B: Sample of compliments received 2014-15

- Social Services had problems with continuity but Boyd was excellent and made contact with both D & me exceptionally. – **NWL LOCALITY**
- Thanks for the help and support Lorna gave to my father in his last few weeks. She made a difficult time much easier. – **BASSETT ST LOCALITY**
- I want to express our very heartfelt gratitude for Robert's considerable efforts in effecting and implementing L's transfer from Burton Hospital to Beverley Grange – **NWL LOCALITY**
- Thanks for all the kindness and support offered by June (OT) and David (SW) to family prior to move to Northampton – **MELTON LOCALITY**
- Thanks so much for the support given...we've gone from taking 2 hours to get up and about to half that time. All because he knew you were coming..The staff were always pleasant and professional - **HART**
- Personal Budget Team - Thanks for all the great work that you have achieved over the past year with personal budgets. Not only have you all been helpful with providers but you have all work with individuals in a person centred way giving choice and control to each and everyone of them.
- Natasha has been an absolute star helping me and my sister so much in coming to terms with mum going into a care home. – **BASSETT LOCALITY**
- I just wanted to put on record some extremely positive feedback regarding the marked improvement in meal delivery times over the last couple of months
- Thanks for everything you did to help me win my appeal (DLA refusal). You are a kind person who does a great job...without people like you disabled people are not given a voice...so thanks again it means so much – **COMMUNITY CARE FINANCE**
- Mrs E found the help given to her by Lynne extremely helpful...it has enabled her to go to day visits to socialise and encouraged her to interact with new people all helping with her mental health...This is a valued service – **CERT**
- Both workers (Rebecca & James ) without fail return any calls and make you feel like you are their only client even though there must be many more...They speak in clear understandable terms and helped me through the myriad forms needed to be completed – **COMMUNITY CARE FINANCE**