



**DIRECTOR OF ADULTS AND COMMUNITIES RESPONSE TO THE  
ANNUAL ADULT SOCIAL CARE COMPLAINTS AND  
COMPLIMENTS REPORT 2015-16**

- 1 The Adults and Communities Department acknowledges the Annual Report and thanks Simon Parsons for his work on this. We welcome the opportunity to improve services.
- 2 In response to the feedback, the department's aims going forward would be to:
  - Embed a process for learning from complaints throughout the Department;
  - Implement corrective actions arising from the two complaints upheld by the Ombudsman in 2015-16.
- 3 Key actions already identified for 2016-17 are as follows:
  - a) Keeping People Informed - Setting communication standards for feedback to service users regarding:
    - Waits for allocation;
    - Delays in service provision;
    - Ongoing case management;
    - Finance queries.
  - b) Timeliness of Response
    - Reiterating timescales for response with staff;
    - Confirming process with staff for requests for extensions for complaint responses.
  - c) Scrutiny of target areas (by Principal Social Worker)
    - Quality of work;
    - Professional judgement;
    - Decision making.
- 4 The above actions will be taken forward and monitored by the department's Senior Leadership Team (SLT) and further guidance issued to staff as outlined overleaf.

**Complaints upheld by the Ombudsman**

- 5 Complaint A concerned the quality of care the Council commissioned for the complainant's father, and the length of time the subsequent investigation took. Complaint B concerned the way a safeguarding investigation was conducted and the subsequent protection plan was created.

- 6 A number of the key actions identified for 2016-17 have arisen as a result of Case A. In addition, the following specific actions will be implemented:
- Concerns relating to independent sector providers are the subject of an individual action planning process at the outset covering progress monitoring arrangements, feedback and timescales;
  - Contractual arrangements are reviewed to ensure that providers have a clear framework regarding the reporting of any concerns relating to service users;
  - The manager investigating the complaint agrees timescales for completion of actions and contact arrangements relating to these with the complainant at the outset.
- 7 Complaint B has been the subject of an action plan which has also had internal departmental oversight via the Safeguarding Governance Group, and been shared with the Ombudsman at their request. The actions are as follows:
- Ensure Care Quality Commission referrals are dealt with promptly;
  - Ensure that initial recording captures the degree of urgency of the referral;
  - Consider the approach to investigations concerning independent sector residential care providers, with specific reference to timing of visits and the extent that reliance can be placed on the provider's own enquiries;
  - Ensure all allegations of neglect are addressed;
  - Ensure protection plans contain outcomes that can be specifically measured;
  - Ensure incomplete investigations following a case conference do not drift without an outcome.
- 8 All these actions are either complete or progressing satisfactorily. However, it is worth noting that the Leicester, Leicestershire and Rutland and East Midlands Safeguarding Adults Boards have been consulted on the aspect of the Ombudsman's ruling relating to the requirement to investigate each individual allegation of neglect in a care home setting, as this appears to contradict the Care Act Statutory Guidance on this subject.

### Learning Process

- 9 It is intended to establish a complaints Monitoring and Improvement Cycle, as set out below in Appendix 1.
- 10 When complaints are brought to the attention of the relevant team/service these will be logged and reviewed at the Locality Meeting on a monthly basis by the Locality Manager (LM) and reported to the Service Management Team (SMT) by the Head of Service (HOS). Individual performance issues will continue to be addressed through the supervision process. SMT will review these complaints on a three monthly basis, identify potential service improvements, where appropriate, and report these to the department's SLT, who will agree identified actions and brief Lead Members accordingly. The cycle will be completed via implementation of the action plan in teams and service areas.

11 I am confident that the learning process being implemented will provide the necessary improvements to service delivery and customer satisfaction.

**Jon Wilson**  
**Director of Adults and Communities**

**Learning the Lesson Process**

**Locality Manager**

Team Log and Template  
LM's Monthly Team Meetings – SV HOS



**SMT**

Review and Agreed Improvements.  
3 Monthly report to SLT



**SLT**

HOS area Report.  
Complaints Service Report.  
Action Log Agreed – Lead Member Briefs



**LM Meeting**

Action Plan Review and Implementation

**Complaints Monitoring and Improvement Cycle**

