

# North Somerset Council

## REPORT TO THE ADULT SERVICES AND HOUSING POLICY AND SCRUTINY PANEL

**DATE OF MEETING: 16 JANUARY 2015**

**SUBJECT OF REPORT: NORTH SOMERSET ANNUAL COMPLAINTS REPORT 2013/14**

**TOWN OR PARISH: ALL**

**OFFICER/MEMBER PRESENTING: GERALD HUNT – ASSISTANT DIRECTOR - ADULT SOCIAL SERVICES & HOUSING**

**KEY DECISION: NO**

### RECOMMENDATIONS

It is recommended that:

#### 1. SUMMARY OF REPORT

Members note the content of the annual report on Adult Social Care (attached) and referred to Scrutiny for consideration and any further action.

This Annual Report for 2013/14 covers complaints about Adult Social Services, both services provided and commissioned by the Adult Social Services. The Housing Service produces a separate Annual Complaints Report.

#### 2. POLICY

Department of Health Guidance recommends that an Annual Report on the operation of the Complaints Procedure be presented to the Executive Member for Adult Services and this report has been regularly referred to the relevant Scrutiny Panel for comment.

The main role of the Complaints Manager is to monitor all complaints and have an overview of complaints in order to make recommendations about policies and procedures. The post holder is also responsible for investigating complaints formally and writing reports which are then sent to the complainant and Assistant Directors who act as the Adjudication Officer.

#### 3. DETAILS

The number of recorded complaints in 2013/14 was 66 compared to 47 in 2012/13.

Two complaints were escalated and investigated at Stage 2 of the process.

The number of recorded compliments in 2013/14 was 330 compared to 404 in 2013/14. Analysis of compliments is included in the report.

#### **Priorities for 2014/15**

The Complaints Manager post is unfortunately vacant again following the current postholder's departure. Recruitment is progressing.

#### **4. CONSULTATION**

Not applicable.

#### **5. FINANCIAL IMPLICATIONS**

None

#### **6. RISK MANAGEMENT**

None

#### **7. EQUALITY IMPLICATIONS**

The evaluation and analysis of complaints is an important means of monitoring and improving service standards including service access for groups within local communities. For example, BME groups continue to be under represented in the take-up of services and complaints. Promoting services and engaging with BME groups continues to be a service priority.

#### **8. CORPORATE IMPLICATIONS**

Legislation and Department of Health guidance requires that an Annual Complaints Report is produced and reported to the organisation.

#### **9. OPTIONS CONSIDERED**

None

#### **AUTHOR**

Nicola Lownds – Complaints Manager



**North Somerset Council  
People and Communities**

**Annual Complaints Report  
Adults Social Care**

**1<sup>st</sup> April 2013 - 31<sup>st</sup> March  
2014**

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## **1 Introduction**

This report presents information about customer feedback received regarding Adult Social Care Services during 1st April 2013 – 31<sup>st</sup> March 2014. The report provides an analysis of outcomes and trends from the information received during 2013-2014 as well as the impact on service delivery and learning from complaints.

The report is written in line with and takes guidance from the following statutory context:

- Local Authority Social Services Act 1970
- Health and Social Care (Community Health and Standards Act) 2003
- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
- Department of Health, Listening, Responding, Improving: A guide to better customer care

## **2 Statistics**

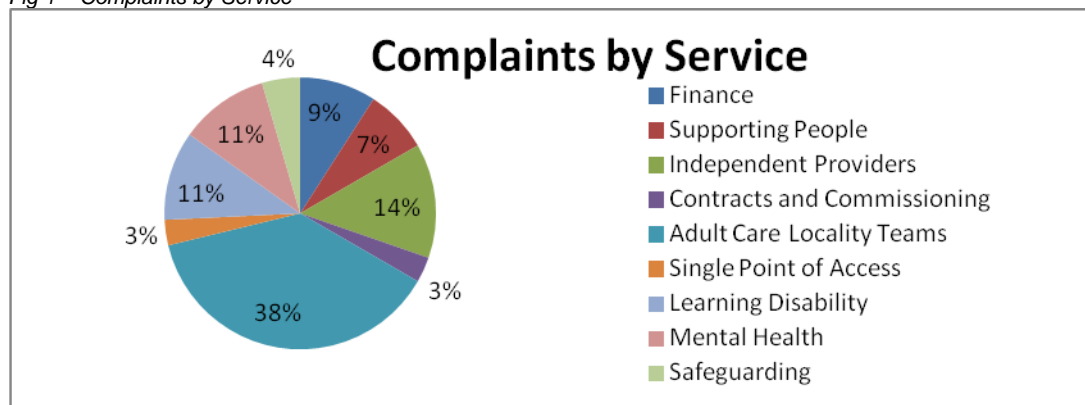
### **Stage 1 Complaints**

There was a total number of 66 complaints received and resolved at stage one of the Complaints Procedure. This is an increase from the previous year of 40%. In this year there have been improvements in the way complaints are captured, recorded and monitored and it is felt this is the reason for the increase in complaint activity.

### **Complaints by Service**

Service	Number
Finance	6
Supporting People	5
Independent Providers	9
Contracts and Commissioning	2
Adult Care Locality Teams	25
Single Point of Access	2
Learning Disability	7
Mental Health	7
Safeguarding	3

Fig 1 – Complaints by Service



## Stage 2 Complaints

Two complaints were escalated to Stage Two of the complaints procedure, both of which reached a resolution at this stage.

One complaint related to the support a service user was given following a hospital discharge. The second was regarding financial and direct payments offered to a carer. The local authority investigated the complaints thoroughly and they were both unfounded.

## Local Government Ombudsman

No complaints were escalated to the Local Government Ombudsman (LGO). One complaint received was a previous complaint that had gone through the Complaints Procedure and LGO in 2012/2013. The complaint was a recurrent complaint of the issues previously investigated by the LGO and was therefore not processed any further than a response at Stage One.

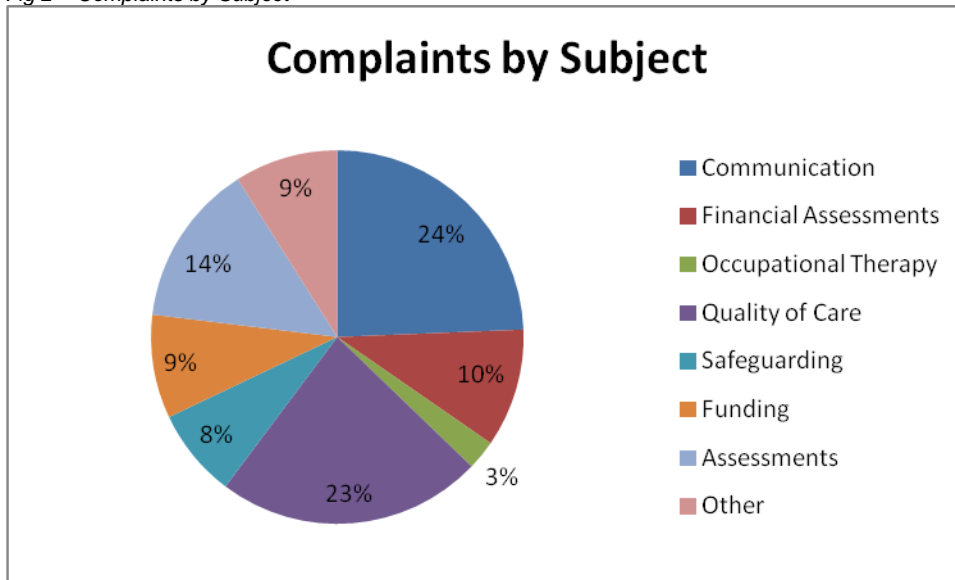
## Subject of Complaints

Communication	19
Financial Assessments	8
Occupational Therapy	2
Quality of Care	18
Safeguarding	6

Funding	7
Assessments	11
Other	7

Some complaints cover more than one subject area

Fig 2 – Complaints by Subject



### Joint Complaints

Joint protocols on dealing with complaints that cross over agencies and services are in place. These have been reviewed in this year and we have therefore achieved a more robust procedure and joint working. Joint protocols are made with Avon and Wiltshire Mental Health Partnership NHS Trust (AWP), North Somerset Community Partnership (NSCP) , NHS South West Clinical Commissioning Group and Weston General Hospital.

Six complaints were dealt with jointly, five with AWP and one with NSCP.

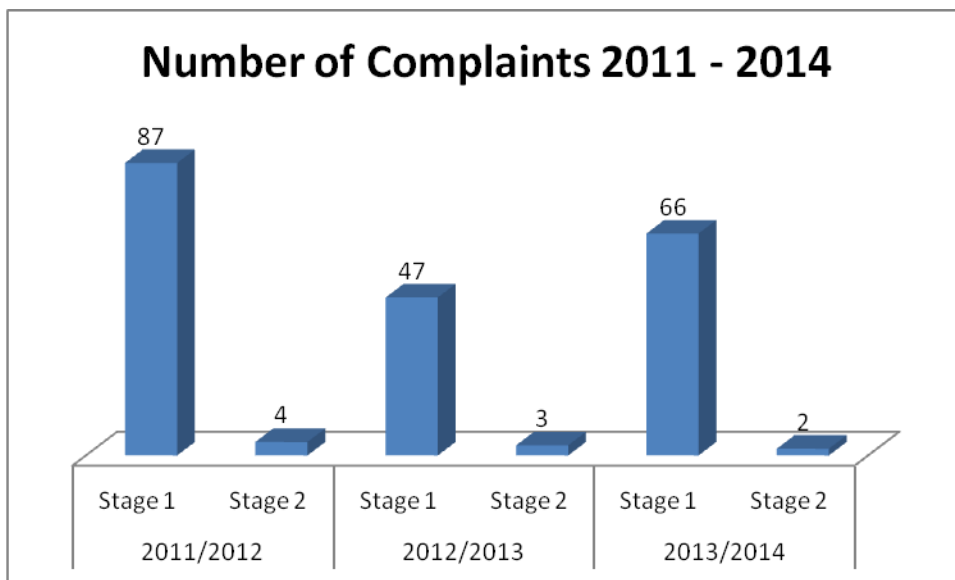
### Timescales

87% of all complaints were responded to within the ten day timescale we work towards. The main reason for delay has been at the request of the manager responding for additional time to complete the response adequately. Requests such as this are agreed with the complainant. On some occasions there has been delay when the complainant has not been notified, this is an area we continue to work towards improving.

### Complaints during the period 2011 - 2014

	2011/2012		2012/2013		2013/2014	
	Stage 1	Stage 2	Stage 1	Stage 2	Stage 1	Stage 2
Number of Complaints	87	4	47	3	66	2

Fig 3 – Complaints 2011 – 2014



### 3 Compliments

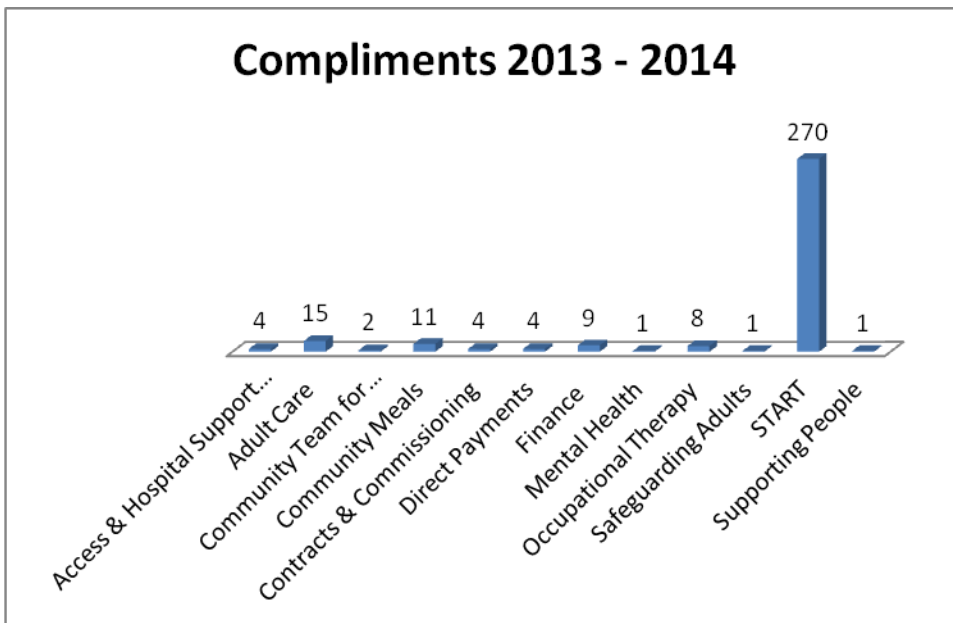
There were 330 compliments received. The majority of these were for the START team whom had 260 feedback forms returned all with complimentary comments from the service user.

Compliments for each team are collated by form of personal cards, emails and letters.

Access & Hospital Support Team	4
Adult Care	15
Community Team for People with Learning Disabilities	2
Community Meals	11
Contracts & Commissioning	4
Direct Payments	4
Finance	9
Mental Health	1
Occupational Therapy	8
Safeguarding Adults	1
START	270
Supporting People	1

Fig 4 - Compliments by Team

## Compliments 2013 - 2014



Compliments can reflect just one person, a service or a team of people. All compliments are passed to the Service Manager and Assistant Director. They are also included in staff newsletters. Examples of compliments received this year include:

*'Thank you so much for the excellent service you are providing'*

*'I wanted to let you know what difference your hard work has made to me and my family'*

*'Thanks for the care, dignity, respect & patience caring for my husband'*

*'I just wanted to say how impressed I have been with the service you and your team have provided to me and my late mother....nothing was too much trouble and a very helpful and understanding approach to all matters including the returns!'*

*'Thank you very much.....it is truly appreciated'*

*'Mum and I would like to thank you for the service mum had with the team. Mum enjoyed meeting everyone and found it a great help in gaining or regaining her independence'*

*'Thank you, these two words are inadequate for the care and attention shown to me by your ladies'.*

#### 4 Advocacy

One request was made for an advocate whom wished to access support to voice a complaint. Age UK were contracted as the Advocacy Service to support the service user however once all the information was received the issue was resolved at a local resolution stage and therefore no formal complaint was made.

As the requests for advocacy are currently minimal, the local authority spot purchase advocacy services as and when they are requested. We have a number of advocacy services available to us and each one is commissioned dependant on the complainant and their needs.



## 5 Trends, Learning and Service Improvements

The complaints manager role has been in a period of flux in this period due to a new manager coming into post and some gaps when the role was temporarily covered by another team. During this time some complainants experienced instability in the complaints service such as responses out of timescale, complaints not acknowledged and difficulty accessing the complaints manager or their substitute. Because of this there is now a clear spreadsheet recording complaints, which highlight when responses are due and prompt consultation with the complainant if additional time is required to respond.

24% of all complaints included communication as part of the complaint. A common theme with this has been professionals not getting back to the service user when they said they would or phone calls not being returned, this has left service users uncertain as to what is happening and unhappy with the service. Communication is an area of constant improvement in all teams in adult social care, Service Managers acknowledge this and continue to develop strategies for improvement in communication.

Adult Care Locality Teams have generated the most number of complaints in this year with 38% of all complaints relating to their services. It is reasonable to expect this due to the nature of the services provided which include Care Assessments. Complaints have been received due to disagreements with the level of need that have been assessed by the social worker. There is a process in place for complaints such as this to be scrutinised by the Team Manager to form a response to the complainant from all the information gathered. This is a method that continues to work well.

A trend in complaints relating to quality of care was noticed in relation to some home care providers. These complaints were handled by the Contracts and Commissioning Team who manage compliance and contracts with home care providers. Predominantly the complaints related to consistency of care and failed calls. The contracts and commissioning team followed their procedures for dealing with compliance in the form of contract compliance meetings, default notices, monitoring forms and formal meetings. Since this there has been improvement in this area and a decrease in complaints.

The Complaints Manager has developed an agreement with the Contract and Commissioning Team to communicate with them when a complaint is made about Service Providers such as residential care homes. A decision is made jointly how the complaint will be dealt with depending on the complainants circumstances such as if they self fund their care. Irrespective of this, the compliance officers are given the information about the complaint which can contribute to future compliance visits or discussions with the provider.

Clear boundaries are in place to distinguish between a complaint and an issue to be managed by the Adults Safeguarding Team. The Safeguarding Team have received complaints from families unhappy with communication channels and decisions made. The Adults Safeguarding Manager responds to complaints swiftly to ensure minimal distress is caused to families. These are dealt with under safeguarding procedures, and reported via the reporting mechanisms of the Safeguarding Board.

Joint protocols for complaints have been developed to create robust relationships with AWP, NSCP, CCG, and Weston General Hospital when managing complaints that cross over agencies. It aims to identify a lead agency to provide one response, which incorporates information from each service area as necessary. It is envisaged we will measure how effective this is in the year 2014-2015.

A complaint dealt with at Stage 2 initiated a review on processes relating to direct payments and personal budgets. We looked at how the support was being delivered by personal budgets in line with the enabling others agenda. As an outcome the complaint enabled us to highlight certain areas that needed further development and rigour.

## **6 Summary**

We are pleased to report an increase in complaints in this year, the reason being is we have worked hard to develop more robust systems for recording and monitoring complaints. It is felt these systems have started to present a more accurate picture of complaint activity. The complaints manager has opened up communication links with teams by various methods for example attending team meetings therefore meaning they are more visible within the People and Communities directorate. In addition an imminent priority is to assess the accessibility of complaints to our service users and develop easy read leaflets and explore other channels to encourage feedback from people using our services. Complaints remain to be predominantly made by the family of the service user so it is key to highlight the need to bridge the gap with communicating directly with service users regarding complaints and developing ways to increase direct feedback.

An area requiring improvement is responding to complaints within timescales, we work towards responding within ten working days and are currently achieving this on an 87% of complaints. It is hoped this will improve in 2014/2015 with a drive to increase awareness of the complaints procedure and timescales by the Complaints Manager and Team Managers.

It is envisaged the joint protocols with other agencies will see improvements in the performance relating to complaints. It hopes to achieve a transparency throughout the process by having one key person whom will coordinate the complaint and provide one response to all the issues raised.

Compliments continue to remain at a sound level and cover a range of services. The feedback forms from START contain many compliments from the service users they provide support too. In order to ensure a balanced overview of compliments within the directorate we may need to consider if START feedback forms are to continue to be classed as a formal compliment.