North Somerset Council

REPORT TO THE ADULT SERVICES AND HOUSING POLICY AND SCRUTINY PANEL

DATE OF MEETING: 8 NOVEMBER 2018

SUBJECT OF REPORT: NORTH SOMERSET ANNUAL COMPLAINTS REPORT

2017/18

TOWN OR PARISH: ALL

OFFICER/MEMBER PRESENTING: STEVE DEVINE, COMPLAINTS AND DIRECTORATE GOVERNANCE MANAGER, PEOPLE AND COMMUNITIES

KEY DECISION: NO

RECOMMENDATIONS

It is recommended that Members consider and comment on the annual report on Adult Social Care complaints (attached), prior to its presentation the Executive Member for Adult Social Servcies.

1. SUMMARY OF REPORT

1.1 This report presents information about customer feedback received regarding Adult Social Care Services during 1st April 2017 – 31st March 2018. The report provides an analysis of outcomes and trends, as well as the impact on service delivery and learning from complaints

2. POLICY

- 2.1 Department of Health Guidance recommends that an Annual Report on the operation of the Complaints Procedure be presented to the Executive Member for Adult Social Services. This information, as contained in this report, is annually referred to the relevant Scrutiny Panel for comment.
- 2.2 The main role of the Complaints Manager is to monitor all complaints and have an overview of complaints in order to make recommendations about any changes required to policies and procedures to improve service delivery. Where complaints are formally investigated reports are sent to the complainant and Head of Service/Assistant Director who act as the Adjudication Officer.

3. **DETAILS**

3.1 The number of recorded complaints in 2017-18 was 80 compared to 83 in 2016-17.

3.2 The number of recorded compliments in 2017-18 was 70 compliments received. A decrease of 42 from the previous year.

4. CONSULTATION

4.1 Not applicable.

5. FINANCIAL IMPLICATIONS

5.1 There are no cost implications for administering the complaints procedure other than staffing costs.

6. RISK MANAGEMENT

6.1 A failure to present an annual report would be contrary to Department of Health Guidance.

7. EQUALITY IMPLICATIONS

7.1 The evaluation and analysis of complaints is an important means of monitoring and improving service standards including service access for groups within local communities.

8. CORPORATE IMPLICATIONS

8.1 Legislation and Department of Health guidance requires that an Annual Complaints Report is produced and reported to the responsible organisation. This report also supports the delivery of the Council Corporate Plan

9. OPTIONS CONSIDERED

9.1 None – Department of Health Guidance recommends that an Annual Report on the operation of the Complaints Procedure is presented to the Executive Member for Adult Services.

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North Somerset Council People and Communities

Annual Complaints Report Adults Social Care

1st April 2017 - 31st March 2018

Introduction Complaints Compliments Advocacy Trends, Learning and Service Improvements

Summary

1 Introduction

- 1.1 This report presents information about customer feedback received regarding Adult Social Care Services during 1st April 2017 31st March 2018. The report provides an analysis of outcomes and trends from the information received during 2017-2018 as well as the impact on service delivery and learning from complaints.
- 1.2 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

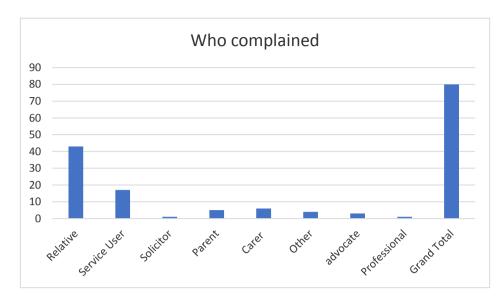
2.1 There was a total number of 80 complaints received and dealt with at stage one of the Complaints Procedure – see figure 1 below.

Complaints by Service

Service	Numbers 2017-18
Adult care	33
Learning disabilities	8
Independent Providers	17
Contracts and Commissioning	8
Finance and benefits	2
Avon Wiltshire Partnership and North Somerset	7
Council	
Safeguarding	1
Court of Protection	1
Blue badge	2
North Somerset Council North Somerset Community	1
Partnership	
Totals	80

Fig 1 - Complaints by Service

Details of those who made a complaint are shown in the following graph – figure 2.



Adults		
Who complained		
Carer	6	
Parent	5	
Other	4	
Solicitor	1	
Advocate	3	
Professional	1	
Relative	43	
Service User	17	
Totals	80	

Figure 2 - those who complained

Further Review

2.2 The Adult Care Regulations dictate what sorts of complaints must be considered as part of the Stage 1 process. The Council does however incorporate a further review to ensure all aspects considered within the Stage 1 formal process have been thoroughly considered by the service manager. There have been 5 of these further reviews this year.

Local Government Ombudsman (LGO)

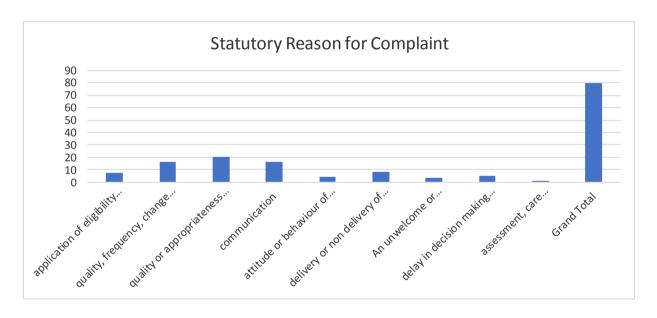
2.3 Nine complaints have been made to the Ombudsman this year. The outcomes of these are as follows. Two complaints did not warrant investigation by the LGO (the LGO won't investigate a complaint where there is a likelihood they are unable to find fault). Two complaints have been investigated and no fault has been found. Two complaints have been investigated and fault has been found. The first resulted in a report being issued by the Ombudsman, and as a result a change of policy has been implemented (as discussed in the commentary below). The second Ombudsman outcome found fault in the complaints process between the provider and the council, resulting in a delay in providing a response to the complainant. One complaint is currently being investigated and the final two complaints are at the initial inquiries stage.

Reasons for complaints

The issues that service users or the representatives complain about can be divided into categories, these are listed below

Statutory reason for complaint categories		
An unwelcome or disputed decision	3	
Application of eligibility and assessment criteria queries	7	
Assessment, care management and review concerns	1	
The attitude or behaviour of staff	4	
Poor communications	16	
A delay in decision-making or provision of a service	5	
The delivery or non-delivery of service	8	
The quality or appropriateness of a service	20	
The quantity, frequency, change or cost of a service	16	
Total	80	

Figure 3 - complaint categories



Some complaints cover more than one subject area

Fig 4 – Complaints by Subject. The issues that people complain about are divided into 9 categories these are listed above

Joint Complaints

2.4 Joint protocols on dealing with complaints that cross over agencies and services are in place. These have been reviewed this year and found to provide and achieve more robust procedures and joint working outcomes. Joint protocols are made with Avon and Wiltshire Mental Health Partnership NHS Trust (Avon and Wiltshire Partnership), North Somerset Community Partnership (NSCP), NHS South West Clinical Commissioning Group and Weston General Hospital.

Eight complaints were dealt with jointly with our partner agencies, 7 with Avon and Wiltshire Partnership and 1 with North Somerset Community Partnership.

Timescales

2.5 The average response times for complaints is 8.8 days. 81% of all complaints were responded to within the ten-day timescale we work towards, a 6% increase on last year. The main reason for delays has been the requests from the manager responding to have additional time to investigate the complaint and provide the response. 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 2014-2018

	2014	/2015	2015	/2016	2016	5/2017	2017	/2018
	Stage 1	Stage 2	Stage 1	Stage 2	Stage 1	Stage 2	Stage 1	Further review
Number of Complaints	73	2	75	1	83	1	80	5

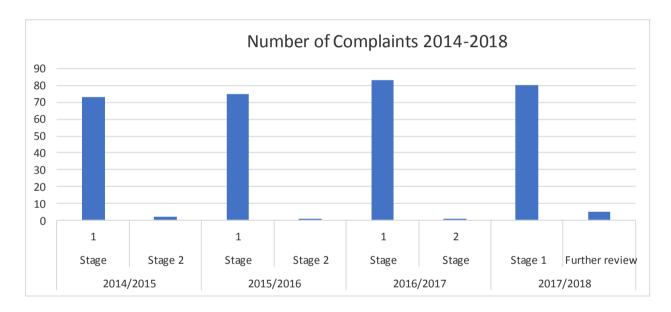


Fig 5 - Complaints 2014 - 2018

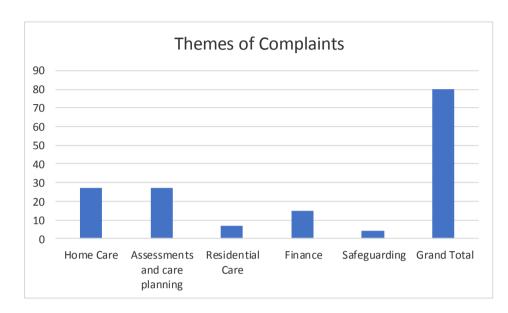
Below is a table that sets out the percentage of complaints that were either Upheld, not Upheld or Part Upheld. This is also compared with the two previous years and it can be seen that the proportion not upheld increased slightly over the last year with a corresponding reduction in the proportion partially/upheld.

The year	2015-2016	2016-2017	2017-2018
Complaints upheld	53%	58%	52%
Not upheld	23.5%	23%	32%
Part upheld	23.5%	19%	16%

Fig 6 – percentage of Complaints Upheld, Not upheld or part upheld 2015-2018

Themes of complaints

2.6 The nature of complaints is captured below:



Adults				
Themes	Number			
Assessments				
and care	27			
planning				
Residential	7			
care	1			
Home care	27			
Finance	15			
Safeguarding	4			
Total	80			

Fig 7 – Themes of complaints

3. Compliments

3.1 There were 59 compliments received. A decrease of 42 from the previous year.

Care Connect	1
Carers service	1
Adult Care	14
Brokerage	1
Finance and Benefits	5
Occupational Therapy	28
Adult Care and Occupational Therapy	1
Safeguarding	1
Total	59

Fig 8 - Compliments by Team

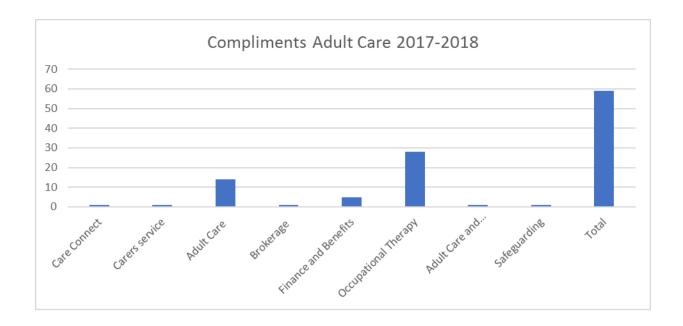


Fig 9 - Compliments by Team

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

From the beginning of contact with Social Services, the members of staff (who are simply awesome) and especially our appointed Social Worker. I simply cannot praise their efficiency, speed of service, professionalism and empathy highly enough. The care manager has delivered. So thank you to them. We as a family really appreciate your efforts.

I cannot thank the member of staff enough, and her brokerage team. They managed to get my very poorly Dad and Mum in the same nursing home where they spent 9 days together before Dad passed away. Mum is very happy there although is now very ill herself. Thank you so much.

The service user's daughter fed back how happy she was with all the support that you provided to her mother and herself during the assessment including keeping them updated and clearly explaining everything that was happening. She advised that your warmth and understanding nature made the process much less stressful. She wanted to highlight your professionalism and they are very grateful for your support in what has been a very difficult time for them.

4. Advocacy

- 4.1 Advocacy was used to help to resolve three complaints this year. The Advocacy Service is called 1 in 4. It is worth noting that most of complaints (just under 80%) come from the service user's family members, and in doing so they are advocating on behalf of the service user.
- 4.2 The Council has access to other several advocacy services to support service users generally in addition to that provide by 1 in 4 for complainants. Each one is commissioned dependant on the complainant and their needs.

Overall the advocacy provision in North Somerset was as follows:

Nature of Advocacy Support	No. of persons supported
Deprivation of liberty	49
Care Act	142
Independent Mental Capacity Act	90
Paid Representative	112
Independent Mental Health Advocate	121
NHS Complaints	84
Total	598

5. Trends, Learning and Service Improvements

- 5.1 The current Complaints Manager has been in post for over 3 years. The stability of the position has enabled the processes to be well-served with the average response times for complaints being 8.8 days. 81% of all complaints are responded to within the ten-day timescale we work towards. There has been a notable drop in compliments. The Complaints Manager would like to highlight the importance of sending out feedback leaflets when closing cases, so good work can be captured.
- 5.2 Communication is an area needing constant improvement in all teams in adult social care. Service Managers acknowledge this and continue to develop strategies for improvements. 25% of all complaints included communication as part of the complaint. Although a broad theme, this can be broken down into key areas:
 - Dissatisfaction may arise from the accuracy of the care plan and the social workers judgement.
 - Some complaints centre on concerns in relation to the apparent attitudes of staff and perceived bias
 - There may be a breakdown in relationships where the service user may request a change of social worker. This is to be considered on a case by case basis by the team manager.
 - Dissatisfaction when telephone calls are not returned, and the person is unable to speak to the social worker as quickly as they would like
 - Allegations of poor and unprofessional practice. Where complaints related to a worker, the complaints procedure will put on hold whilst investigated under the HR procedures.

Tensions inevitably arise when the service user and family have differing views with regards to care needs of a loved one. The work of all those involved in adult social care in complex and difficult decisions are taken daily. There is always a need to communicate decisions made and the reasons for these. The complaints received highlight the need for keeping service users central to this process.

5.3 As an outcome of a complaint the Council has reviewed its adult social care charging policy and procedures. This has been to ensure Care Act compliance, specifically addressing charging for enablement care. The Council has issued an intermediate updated care policy to clearly distinguish between intermediate care and enablement care.

- 5.4 Concerns have been raised regarding the written information we pass onto service users and their representatives. A need to make amendments to this to include further details on financial implications for enablement placements has been highlighted. An enablement pathway has been drafted to help to clarify the outcomes of this service.
- 5.5 The Complaints Manager recognises that complaints can cross more than one service area. In these circumstances, a joint response is required. The advice is to send the responses to the Complaints Manager to send out on behalf of the Council.
- The greatest number of complaints have been in relation to Adult Care Locality Teams where 41 complaints have been made. When one considers the nature of the work of these services which include Care Assessments and Occupational Therapy assessments, a higher level of criticism is not unexpected. Complaints have been received due to disagreements with the level of need that has been assessed by the social worker or waiting times for assessments. The teams are nor complacent and have a process in place where such criticisms are scrutinised by the Team Manager who forms a response to the complainant from all the information gathered. This is a method that has and continues to work well.
- 5.7 The level of complaints cannot always be taken as a measure of poor quality or practice. Some criticisms are fundamentally about resources which include concerns about the levels of funding available and waiting lists for popular services. An apology and explanation can go a long way to address the concerns when services, however stretched, do not meet the expectations of service users. An early apology and dialogue can sometime prevent the Council's need to make a financial redress or change the provision of a service. Early engagement can provide reassurance that the Council or care provider can offer a satisfactory remedy. Equally as important, staff training, or procedure change can prevent further injustice if processes or procedures are found to no longer be appropriate.
- There was an increase in numbers of complaints regarding service providers. The restructuring of providers across North Somerset had resulted in a new provider taking on a significant amount of care packages within a short period of time. Operationally this created a challenge to manage the task which resulted in an increase of complaints in these areas. Changes have now been made to enable carers to work a defined close geographical location. This cuts down on travelling time and increases the efficiency of care support. The Council has seen the wait for care in two areas reduce considerably and will continue to work with these providers in the other service areas which are the harder to cover generally to see if the new approach with result in additional benefits to users. The contracts and commissioning team worked closely with the providers and service users to address the issues and resolve the concerns. From a complaint perspective the issues have now been resolved.
- 5.9 A review of the quality of care in relation to some home care providers is being undertaken as complaints in this area have increased. They predominantly relate to consistency of care and failed calls. The Contracts and Commissioning Team, who manage compliance and contracts with home care providers, follow their procedures for dealing with compliance in the form of contract compliance meetings, default notices, monitoring forms and formal meetings. The Council is still working through and continuing to monitor the issues and would hope to see an improvement.
- 5.10 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 about how the complaint will be dealt with, depending on the complainant's 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.

- 5.11 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 such issues 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.
- 5.12 Joint protocols for complaints have been developed to create robust relationships with Avon and Wiltshire Partnership, North Somerset Community Partnership, Clinical Commissioning Group, 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.
- 5.13 The Complaints Manager has simplified the process of responding to complaints. Whilst the Stage 1 response process will remain the same, if the complainant remains dissatisfied, they can request a further review undertaken by the Service Lead. This replaces the traditional stage 2 which, in terms of the Local Government Ombudsman's requirements, is not necessary.

6 Benchmarking with our neighbours

6.1 There is no straight forward way to compare complaints across councils are there are no nationally agreed performance indicators for social care complaints. It would therefore be difficult to compare 'like with like' complaints. The outcome of complaints is categorised into 3 groups - upheld, partially upheld and not upheld. Interestingly, National Local Government Ombudsman (LGO) statistics show an increase with respect to finding fault in complaint investigations from 52% to 63% of cases. North Somerset Council is currently below National average, showing 50 of LGO investigations demonstrating fault. This figure is consistent with the local authority's own complaints showing some degree of fault with 52% of complaints.

7 Summary

- 7.1 We are pleased to report a small decrease in complaints this year to 80 in 2017-18 from 83 in 2017-18. The system of capturing and monitoring complaints continues to work well. It is felt these systems have started to present a more accurate picture of complaint activity.
- 7.2 The Complaints Manager will continue to maintain links and communication with teams by various methods, for example, by attending team meetings and a visible presence within the People and Communities Directorate both at the Town Hall and at Castlewood. In addition, the Complaints Manager will attend Adult Care management meetings, to give a brief review of complaints received and issues raised.
- 7.3 A significant amount of complaints are made by the family of the service user. It is key to highlight the need and bridge the gap with communicating directly with service

users regarding complaints and developing ways to increase direct feedback. The Complaints Manager has altered the stage complaints acknowledgements letter to include a link for the complaints process and what can happen next if dissatisfied.

7.4 The joint protocols with other agencies will continue to enable a joined-up response to complaints.