

# North Somerset Council

## Report to the Adult Services and Housing Policy & Scrutiny Panel

**Date of Meeting: TBA**

**Subject of Report: North Somerset Annual Complaints Report 2020-21**

**Town or Parish: All**

**Officer/Member Presenting: Hayley Verrico, Director of Adults Services**

**Key Decision: No**

**Reason: It does not result in expenditure or savings of £500, and does not have a significant impact on two or more wards**

### Recommendations

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

#### 1. Summary of Report

1.1 This Annual Report for 2020/21 covers complaints and compliments about Adult Social Services, a service provided and commissioned by Adult Social Services.

#### 2. Policy

2.1 Department of Health Guidance recommends that an Annual Report on the operation of the Complaints and Compliments Procedure be presented to the Executive Member for Adult Services. This information, as contained in this report, is annually referred to the relevant Scrutiny Panel for comment.

#### 3. Details

3.1 The number of recorded complaints in 2020-21 was 60 compared to 71 in 2019-20.

3.2 There were 47 compliments received. A decrease of 9 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. There may be costs to the Council if complaints are upheld and the Ombudsman allocates costs or financial compensation to the complainant.

## **6. Legal Powers and Implications**

- 6.1 The attached Annual Complaints and Compliments Report ~ Adult Social Care 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

## **7. Climate Change and Environmental Implications**

- 7.1 There are no climate change or environmental implications relevant to this report.

## **8. Risk Management**

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

## **9. Equality Implications**

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

## **10. Corporate Implications**

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

## **11. Options Considered**

- 11.1 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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**Appendices:**

See Appendix 1 attached

**Background Papers:**

None



# **North Somerset Council People and Communities**

## **Annual Complaints and Compliments Report ~ Adult Social Care**

**1<sup>st</sup> April 2020 - 31<sup>st</sup> March 2021**

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# 1 Introduction

1.1 This report presents information about customer feedback received regarding Adult Social Care Services during 1st April 2020 – 31<sup>st</sup> March 2021. The report provides an analysis of outcomes and trends from the information received during 2020-2021 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

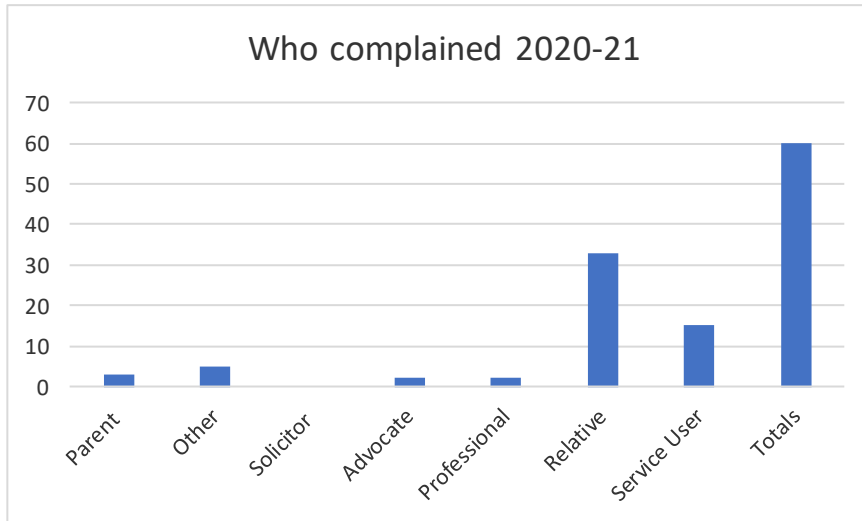
2.1 There was a total number of 60 complaints received and dealt with at stage one of the Complaints Procedure – see figure 1 below.

#### Complaints by Service

Service	Numbers 2018-19
Adult care	38
Learning disabilities	2
Independent Providers	3
Contracts and Commissioning	6
Finance and benefits	9
Avon Wiltshire Partnership and North Somerset Council	2
<b>Totals</b>	<b>60</b>

*Fig 1 – Complaints by Service*

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



Adults	
Who complained	
Parent	3
Other	5
Solicitor	
Advocate	2
Professional	2
Relative	33
Service User	15
<b>Totals</b>	<b>60</b>

Figure 2 – those who complained

### Further Review

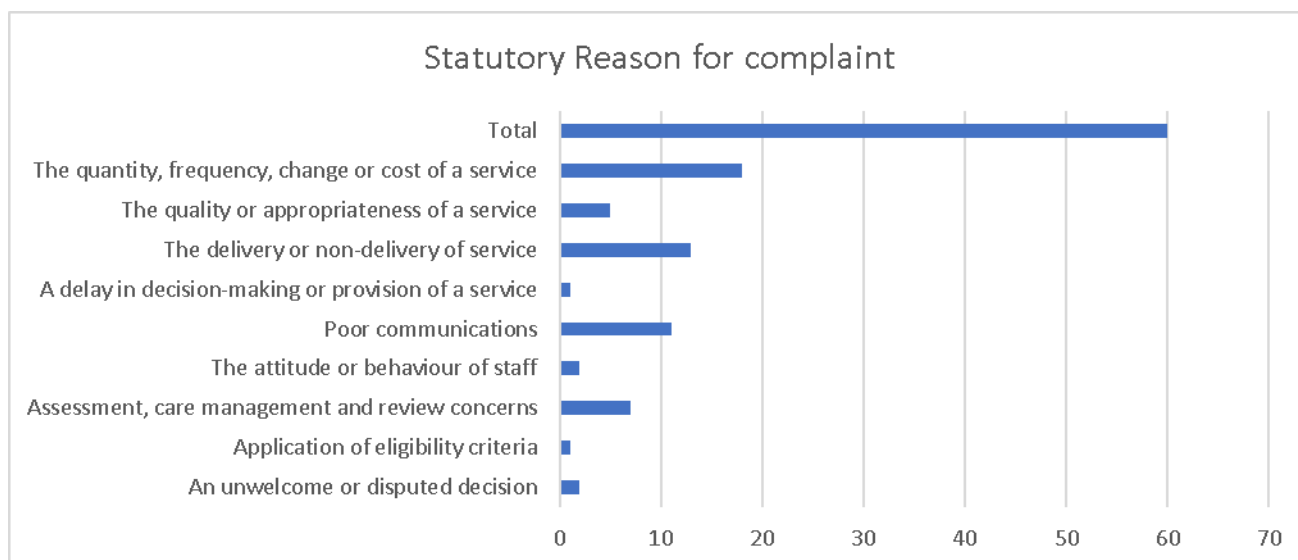
- 2.2 The Adult Care Regulations dictate what sorts of complaints must be considered as part of the legislative Stage 1 process. These are reported within the paper. The Council does however incorporate a further review to ensure all aspects considered within the Stage 1 formal process have been thoroughly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

### Local Government Ombudsman (LGO)

- 2.3 Five complaints went to the Local Government Ombudsman (LGO) the year 2020-21. This is a decrease of 8 from the previous year. The outcomes of these are as follows: Five were considered, two were upheld, two are outstanding and the final one was not upheld. The LGO won't investigate a complaint where there is a likelihood they are unable to find fault. Of the complaints investigated, two separate complaints were regarding the same service user from different family members. The complaints related to quality of care within a care home, care management issues and safeguarding concerns. (The final determination has not yet been issued so cannot be reported in the five cases listed above). One complaint related to blue badges and the application process where the Council was found to be at fault. The final case related to a service user returning home and their equipment needs. Again, the Council was found to be at fault.

Statutory reason for complaint categories	Adults
An unwelcome or disputed decision	2
Application of eligibility criteria	1
Assessment, care management and review concerns	7
The attitude or behaviour of staff	2
Poor communications	11
A delay in decision-making or provision of a service	1
The delivery or non-delivery of service	13
The quality or appropriateness of a service	5
The quantity, frequency, change or cost of a service	18
<b>Total</b>	<b>60</b>

Figure 3 – complaint categories



Some complaints cover more than one subject area  
Fig 4 – Complaints by Subject

### 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), Sirona, Bristol, North Somerset and South Gloucestershire Councils (BNSSG) and the Clinical Commissioning Group and Weston General Hospital.

Two were dealt with jointly with our partner agencies, both with Avon and Wiltshire Partnership.

### Timescales

2.5 The average response times for complaints is 10.5 days. This is up marginally from last year’s figures of 8.8 days. Local Authority guidelines recommend that all responses are made within 10 working days. The main reason for the delays has been due to requests from the manager responding for additional time to complete the response adequately. Also delays related to COVID and the new complaint systems may have been a factor. Requests such as this are agreed with the complainant. On some occasions there has been a delay when the complainant has not been notified. This is an area we continue to work towards improving.

### Complaints during the period 2017-2021

Year	2017/2018		2018/2019		2019/2020		2020/2021	
Stage	Stage 1	Further review	Stage 1	Further review	Stage 1	Further Review	Stage 1	
Number of Complaints	80	5	70	4	71	5	60	5



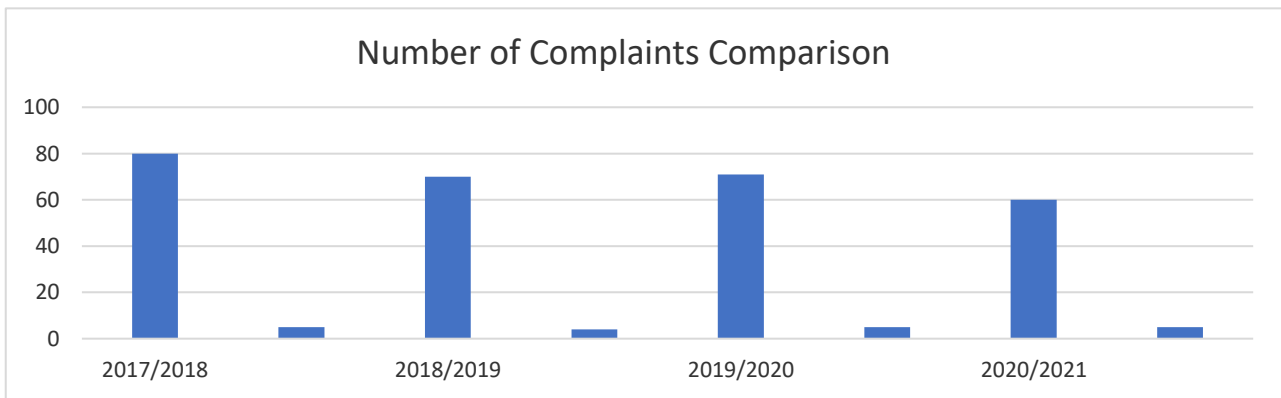


Fig 5 – Complaints 2017 – 2021

### Themes of complaints

2.6 The nature of complaints is captured below:

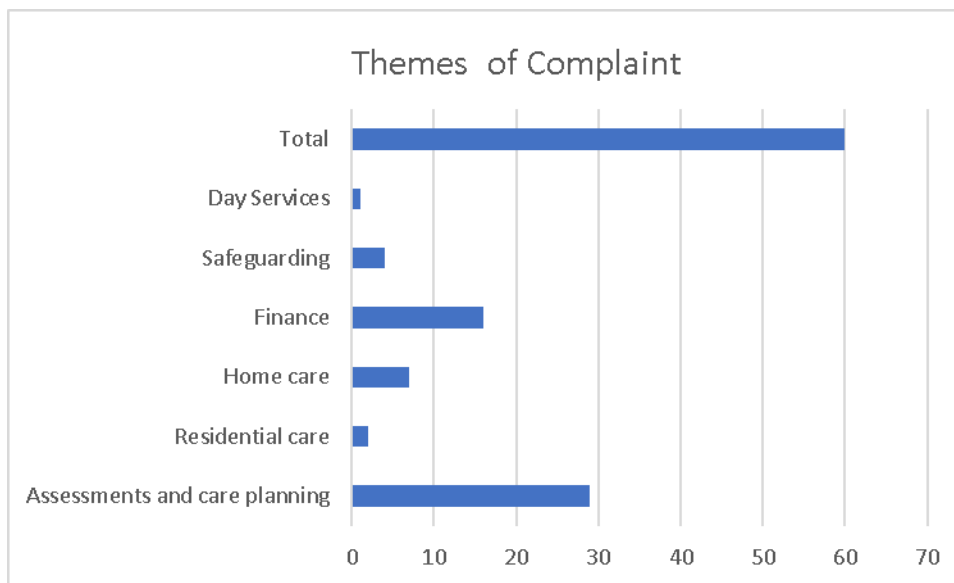


Fig 6 – Themes of complaints

Adults	
Themes	Number
Assessments and care planning	29
Residential care	2
Home care	7
Finance	16
Safeguarding	4
Day Services	1
<b>Total</b>	<b>60</b>

### 3. Compliments

3.1 There were 47 compliments received. A decrease of 9 from the previous year.

Compliments 2020-21	
Adult Care	27
Carers	1
Occupational Therapy	15
Contracts	4
<b>Total</b>	<b>47</b>

Fig 7 - 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 Head of Service and Assistant Director. They are also included in staff newsletters. Examples of compliments received this year include:

Newly Qualified Social Worker - From your first communication with me you showed care and compassion and I felt heard by you. You listened and acted immediately giving us the chance to have a voice. You have been so helpful in many ways. This has enabled us to begin to build trust with the care home. When I explained my concerns you treated them seriously and you challenged the care home on our behalf, this showed strength confidence courage. Your communication between me and the care home has always been very prompt and when you said you were going to do something you did it.

Social Worker - We strongly feel that XXXXX went beyond and above her level of duty, showing genuine compassion as well as giving great advice and immediately carrying out her promises upon unlike many others we've experienced in various different care services.

I feel she should be publicly rewarded and acknowledged for always being there, giving her own time to Mums telephone support and reassurance. Thankyou.

Occupational therapy – I would like to express my deepest thanks for the support from XXXXX over the last year or so.

XXXXX has provided exceptional care whilst working with XXXXX

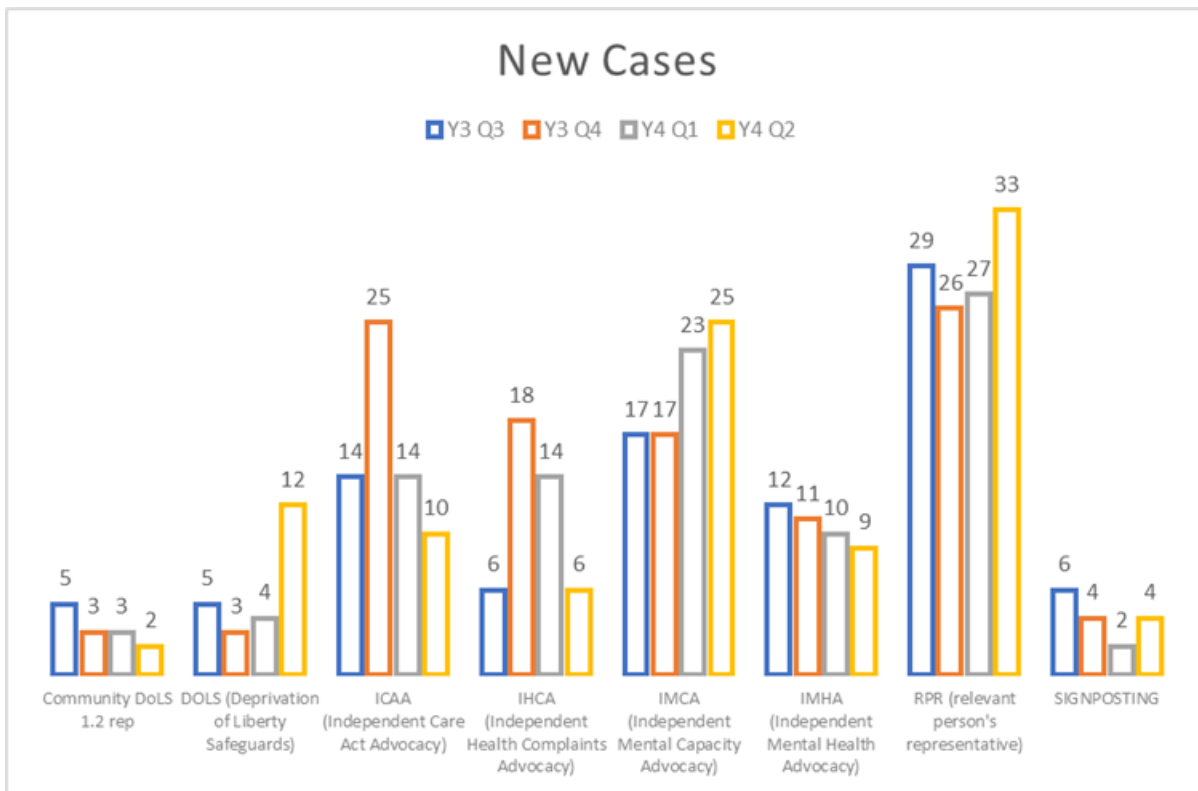
I now have safe ramping and an accessible door to my home. I would like to thank your team and XXXXX for all their efforts on my behalf.

Occupational Therapy - I am sending this email to thank you for the wonderful help my wife and I have received from XXXXX. I am disabled, 90 years old and, my wife has dementia and we have a full time carer looking after us. Through Medequip she has recently supplied us with a Bath Lift, a Shower Seat with arms and a Bed Rail which enables me to turn round and get out safely. These aids have made life very much easier, and I am most grateful for all the help we have received.

#### **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 come from the service user's family, and in doing so they are advocating on behalf of the service user. Just under 80% of complaints are from family members. There were 294 total cases of advocacy across the authority in 2020/21.
- 4.2 The Council has access to several advocacy services. Each one is commissioned dependant on the complainant and their needs.

The Local authority provides a significant amount of advocacy across its services, this is best captured in the statistics belkow. Overall, the advocacy provision in North Somerset during 202/21 was as follows:



## 5. Trends, Learning and Service Improvements

- 5.1 Noting the pressures of Covid and staff workloads, overall service users have continued to be well-served with the average response time for complaints being 10.5 days, just above the requirement of the regulations. Going forward this does need to be improved as this is above the previous year's figure of 8.9 days. There has been a marginal decrease 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. 22% 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.
  - The need for clearer explanations about the reasons for the involvement of social care, including clear explanations regarding the charging of services, and evidencing this has happened
  - 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 is 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 One complaint focused on a service user receiving a reminder invoice for domiciliary care despite a payment plan being set up and the local authority receiving the correct instalments each month. In addition, letters were posted with a date but not received until 9 days later, thereby exceeding the 7-day payment request on the final reminder. The complainant highlighted how people will automatically think and worry that legal action has been taken. The local authority acknowledged the distress caused and subsequently reviewed and altered its processes to prevent this from happening again.

Another complaint involved the blue badge process. It was investigated at both stage one and two of the complaint's procedures. Whilst the decision to refuse the complainant a blue badge was correct, the council acknowledged that the responses and explanations given were not helpful or complete. They did not include the nature of a hidden disability of walking difficulties that caused considerable psychological distress. The council apologised for the failure to communicate effectively, and staff have received further training to address the quality of customer care. The Ombudsman was satisfied that the apology and further staff training remedied the injustice caused by the Council's failure to properly communicate with the complainant about its decision not to award a blue badge.

A further complaint focused on the quality of care within a care home. The evidence available shows the Council completed a thorough safeguarding investigation over several months. When it received the safeguarding alert, it did not limit the safeguarding investigation to concerns relating solely to the complainant. The local authority initiated a separate Whole Home investigation which considered the safety of all residents and the Home's practices and procedures. The Council acted to ensure its safeguarding investigation was detailed and wide ranging. It worked with the Home to ensure it improved over time. The Ombudsman did not find fault in the way the Council followed its safeguarding procedures to establish outcomes and therefore it was not necessary to make a recommendation for improvement.

As part of the learning, however, the Ombudsman advised the Council that it should remind its officers of the importance of recognising the status of those who hold Lasting Power of Attorney when giving advice related to mental capacity. The safeguarding team will take this forward once the findings are finalised.

Other emerging themes include delayed assessments preventing timely discharge from hospital and moves between providers; poor communication between hospitals and care homes both working in crisis conditions; care providers failing to manage risk appropriately, for example around the use of PPE and with symptomatic staff; and prolonged delays in accessing occupational therapy services and assessment and provision of aides and adaptations.

- 5.4 It is recognised that complaints can cross more than one service area. In these circumstances, a joint response is required. The current advice is to send the responses to the Complaints Manager to send out on behalf of the Council.

- 5.5 The greatest number of complaints (38) have been in relation to Adult Care Locality Teams, which incidentally are the largest teams. 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 not 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.
- 5.6 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 sometimes 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. The quality assurance framework will include how to learn from complaints.
- 5.7 The availability of care in North Somerset can be a concern for some. The capacity issues in North Somerset are not unique, and most authorities across England are also struggling with the volume of necessary work. These issues are significant across the Southwest. Providers are managing to recruit staff but not at the pace to meet the existing waiting lists and the number of new referrals received each week. This has led to waiting lists for home care. Brokerage are regularly meeting with our providers to discuss the issues with recruitment and retention of staff with an aim to find a resolution. If there are complaints regarding care, North Somerset can offer a direct payment and further care management may be required to reduce risk and carers stress.
- 5.8 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.
- 5.9 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.
- 5.10 Joint protocols for complaints have been developed to create robust relationships with Avon and Wiltshire Partnership, Sirona, 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.

- 5.11 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.
- 5.12 The Council's CaseTracker system has now been operational for 18 months. It enables easy tracking of compliments and complaints and generates automatic reminders, sending an email to the relevant team manager when a response is required. Whilst it works well as a data recording system, it is not so helpful when reviewing what can be learned from complaints. Going forward better ways to record and act on ways to improve services or to share good practice are needed.

## **6 Benchmarking with our neighbours and Local Government Ombudsman**

- 6.1 There is no straightforward way to compare complaints across councils as 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 69% to 72% of cases. North Somerset Council is currently below National average, showing 40% of LGO investigations demonstrating fault. This figure is below the local authority's own complaints showing some degree of fault with 46% of complaints.

## **7 Summary**

- 7.1 We are reporting a small decrease in complaints this year from 71 in 2019-20 to 60 in 2020-21. 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. The complaints Casetracker system has taken time to imbed and the impact of COVID has impacted upon figures.
- 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 Adults Directorate both at the Town Hall and at Castlewood and on-line. In addition, the Complaints Manager will attend Adult Care management meetings, to give a brief review of complaints received and issues raised.
- 7.3 It is envisaged the joint protocols with other agencies will see improvements in the performance relating to complaints. The ongoing integration with health will lead to new pathways in terms of responding to complaints. It is hoped that this joint approach will help to achieve transparency throughout the process, having one key person to coordinate the complaint and provide one response to all the issues raised.
- 7.4 The introduction of the LGSCO findings check list, shown below, should help to improve services and lead to fewer complaints:

### **Health Check based on LGSCO findings (Local Government and Social Care Ombudsman)**

- Do you actively seek feedback about your services? ✓
- Is your complaints procedure visible in care settings? People should be able to request information about complaints in a format that best suits them. ✓
- Do you use the Single Complaints Statement to guide your approach to complaints? ✓
- Does your organisation set out a timetable for responding to complaints and keep people informed if there are delays? Long delays and poor communication during the complaints process can cause additional distress for people making complaints. ✓
- Do contracts between commissioners and providers contain clear processes for handling complaints? ✓
- Does your organisation have clear processes in place with local partners to provide a single investigation and response to people with a complaint about multiple bodies? ✓
- Does your organisation's complaints procedure clearly signpost to the Ombudsman? If people have been through all stages of your complaints procedure and are still unhappy, they can ask us to review their complaint. ✓
- Do you regularly review your organisation's local complaints data and the outcomes of complaints? Do your elected members or board members regularly scrutinise complaints data and outcomes? ✓
- How does your organisation ensure it shares the learning from complaints, across care locations or council functions to prevent the same issues affecting others? ✓