

## **Appendix 1**

# **CENTRAL BEDFORDSHIRE COUNCIL**

## **ADULT SOCIAL CARE & PUBLIC HEALTH SERVICES**

### **CUSTOMER FEEDBACK –**

#### **COMPLAINTS COMPLIMENTS**

### **ANNUAL REPORT 1 April 2014 – 31 March 2015**

## **INTRODUCTION**

This report fulfills the statutory duty to monitor the effectiveness of the complaints procedure and produce an annual report for Adult Social Care and Public Health complaints.

The report provides statistics for 2014/15 on; the number of complaints received; those considered by the Local Government Ombudsman (LGO); the number of complaints that were well founded (upheld fully or in part); a summary of the complaints subject matter; performance; and the actions taken to improve services as a consequence of complaints. The report will be presented to the relevant Local Authority Committee and will be made available on the Council's website.

## **EXECUTIVE SUMMARY**

The complaints procedures contain a number of different options to handle complaints. Complaints are assessed with the emphasis on understanding the complaint at the outset and taking the right approach to resolve it. Options include:

- Local resolution by Service Manager – 10 working days, 20 for complex cases
- Formal Investigation – 25 up to 65 working days
- Conciliation – 10 working days & Mediation – 25 working days

Timescales can be flexible depending on the nature of the complaint. Extension to timescale is acceptable if it is negotiated with the complainant. When the Council has concluded a complaint the complainant may refer it to the LGO.

### Adult Social Care

There were 77 new complaints received in the period compared to 85 the previous year, the majority related to services for older people. 64 complaints were actioned and closed, and were dealt with through Local Resolution.

Complaints were seen as important feedback for services and a means of considering how to improve. Managers listened to customers' views in complaints, with 69% of complaints upheld either fully or in part. Individual cases had specific remedies put in place. For wider service improvements see Section 4.

There were 63 compliments with instances of customers telling us that services were getting it right and having a positive impact on their lives.

### Public Health

The Public Health Service in Central Bedfordshire delivers the majority of its services by commissioning from external providers who manage their own complaints. The Stop Smoking Service is delivered directly by Central Bedfordshire staff. There were 25 compliments registered about the quality and helpfulness of the stop smoking service. No complaints were registered.

### Effectiveness

The activity for this reporting period shows the complaints procedure has been effective at resolving customer complaints at a local level. In Adult Social Care learning from customer experience through complaints has led to improvements to practices. There is some room for improvement in managing complaints to agreed timescales.

# 1 SUMMARY STATISTICS – ADULTS SOCIAL CARE

## 1.1 Customer Feedback Received – Adult Social Care & Public Health Compliments

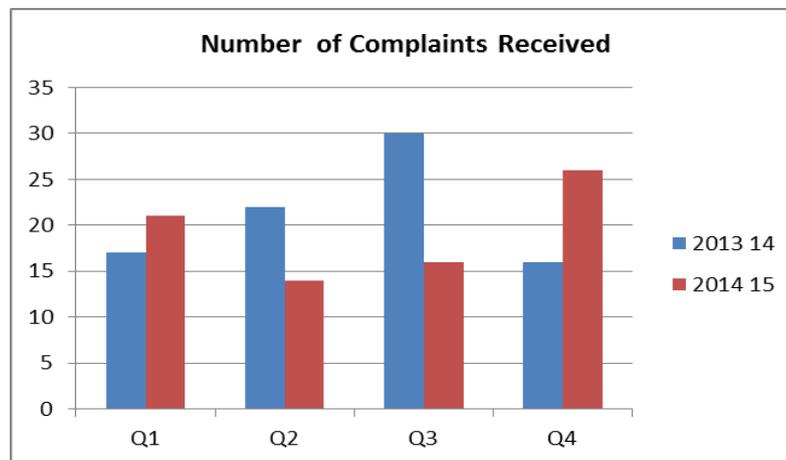
88 compliments were recorded across social care and public health services relating to good customer care and the quality of support to service users and their families.

There were a significant number of customers who experienced good quality services that made a real difference to their lives such as good quality residential care; reablement and care support in their own home; help to arrange the right care and support; support to feel safe and settled; and help to stop smoking.

25	Public Health – stop smoking	15	Residential Services
19	Older People’s Services	14	Reablement Services
6	Learning Disability Services	2	Disability Services
3	Home Care	2	Finance Services
1	Safeguarding Team	1	Occupational Therapy

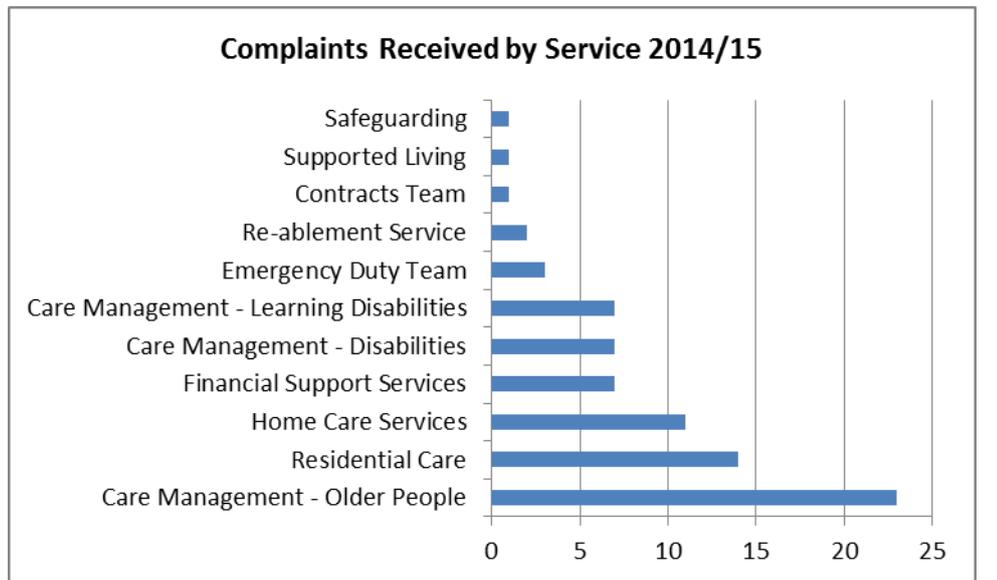
## 1.2 Customer Feedback Received – Adult Social Care Complaints

1.2.1 In 2014/15 there were 4745 records of adults receiving long term support from Adult Social Care Services. There were 77 new complaints received and in 2013/2014 85 new complaints were recorded with 4484 records of adults receiving long term support. The table below shows the spread of complaints over each quarter of the year, ‘Q’ is used as an abbreviation for ‘quarter’:



1.2.2 The spread of complaints year on year varied. This year quarter 4 was busiest with 26 new complaints, fairly evenly spread over the 3 months. Eight complaints were assessed as being unsuitable for the complaints process, three of which were the responsibility of another body. This left 18 new complaints, 13 of which were about services for older people; and 9 of those cases about the quality of care provided either in the home or in a residential setting. Last year the peak was in quarter 3, due to a busy October with a number of complaints received relating to externally commissioned home care providers and errors in the Council’s invoicing.

### 1.3 Trends - Services Most Complained About



- 1.3.1 Over the year the majority of the complaints (46) were about services to older people. These complaints were about; management of cases (23); care services provided by external companies on behalf of the Council (16); Council run residential homes (5); and the Council's Reablement Service (2).

The main causes of complaint in case management cases were poor staff attitude, customer care and communication; and disagreement with the decisions made or action taken.

Complaints about care provision both in the home and in residential settings were mainly about the quality of care, but included missed calls and poor communication.

- 1.3.2 A further 31 cases were spread over a number of additional service areas:

Learning Disability Services received 10 complaints mainly related to care management of cases (5). Complaints were also about a breach of data protection; a provider not being paid; poor communication about an inquiry regarding residential care; staffing issues in a supported living resource; handling of customer enquiry.

There were 9 complaints about Disability Services, mainly about care management of case (6) i.e. quality of assessments, poor information, and lack of support. Complaints were also about the quality of home care services (2); and the quality of an occupational therapy assessment (1).

There were 7 complaints about Financial Services relating to; incorrect or confusing invoices (3); direct payments (3); and changes to rates for residential care.

Five remaining complaints related to Safeguarding (1) the Emergency Duty Service (3), Contracts (1).

## **1.4 Outcomes from concluded Complaints**

- 1.4.1 During the period 3 complaints were identified as being the responsibility of another body. Of the 77 for Adult Social Care 8 complaints were not suitable for the complaints procedure and were dealt with using other procedures. Five cases were withdrawn.

64 Social Care complaints were dealt with in the period. Complaints were seen by services as an important means of identifying areas for improvement. 69% of complaints were deemed to be well founded in full or in part. Remedies were put in place for individual complainants. Section 4 sets out wider actions and improvements resulting from complaints.

## **1.5 Local Government Ombudsman (LGO) Complaints 2013/14**

- 1.5.1 The Council received 5 complaint enquiries from the LGO in the reporting period. One case is pending a decision.

In two cases the decision was not to investigate as the LGO was not able to achieve the outcome being sought and the actions the Council had taken to resolve the complaints had been proportionate. Issues related to a home's provision of respite and the Council's remedy to a breach of Data Protection. In one case, relating to provision of respite care, no fault was found.

The Council agreed to £250 to remedy a complaint about historical handling of a Direct Payment account. The Council had not monitored the account properly and not given enough information about the process for ending a contract of a support assistant. The Council wrote off the debt it had been attempting to recover.

## **2 EQUALITY & DIVERSITY MONITORING**

- 2.1 The purpose of capturing equalities data is to monitor access to the complaints procedure; to ensure services are appropriate for all service user groups; and to check whether any issues relating to discrimination have been raised. Data relates to the service user affected by the complaint or a person who has been affected by the actions taken by the service. The system used for Adult Social Care complaints has the facility to capture the service user's gender, ethnicity and whether the service user describes themselves as having a disability or not. However, the system has limited reporting functionality for analysis in this area to meet the needs of equality and diversity monitoring. Therefore, we can't easily analyse the detail of complaints and trends relating to discrimination/human rights/age.

- 2.2 In 2014/15 there were 4745 records of adults receiving long term support from Adult Social Care Services. There were 77 new complaints received.

### **2.3 Accessibility to Complaints**

By having a range of contact options for complainants to make their complaints the Council aims to meet the needs of its service users in accessing the complaints procedure. People can make complaints in person; face to face or via telephone (including a direct line to Customer Relations), in

writing; via email, letter, or complaint form. Complaints can be made by a representative of the service user or an advocate.

## **2.4 Social Care Complaints – Gender**

- 2.4.1 Where information was captured 40% of complaints affected female service users, 34% affected males. Service users receiving services were split 61% described as female and 39% male. Service users of both genders are represented in the complaints procedure and both genders were affected by similar issues. However, females were more affected by complaints about the care in the home (7 females, 3 males). The issues for both related to the standard of care and the timing of calls, including missed calls. Males were more affected by complaints about financial administration matters than females, with 6 identified as male and 2 as female.

## **2.5 Social Care Complaints – Race**

- 2.5.1 93% of service users receiving long term services were described as White British. A significant proportion of complaints (89%) were recorded with 'unknown' race which may mask representations from ethnic backgrounds not reflected here. 9% of complainants were recorded as 'White UK'. 'Black African' (1%) and 'Other' (1%) were also represented in complaints. The issues for complainants described as 'Black African' were similar to those raised by complainants recorded as 'White British'.

The complaint issues recorded where race was 'Other' related to alleged bullying and discrimination in relation to home care provision. The complaint reflected wider concerns that standards in the external service had fallen short and an improvement project was put in place.

## **2.6 Social Care Complaints – Disability**

- 2.6.1 A significant proportion of cases were recorded as 'unknown'. Social care services include services for older people, disabilities and adults with learning disabilities. Therefore, it is anticipated that a significant proportion of complainants would describe themselves as having a disability. Where information was recorded 18% of service users described themselves as having a disability. People with disabilities are able to access the complaints procedure. Section 1.3.2 sets out the reasons for complaints for those service users accessing services for people with disabilities.

# **2 PERFORMANCE**

- 3.1 There is no timescale in Regulations in which to resolve complaints. The emphasis is on assessing the complaint at the outset to fully understand the issues, and then planning a clear method of handling the complaint in a reasonable timescale. Timescales can be re-negotiated with the complainant if appropriate. Managers are encouraged to set out an action plan for the complaint detailing how it will be dealt with.
- 3.2 There were 64 complaints concluded, all were dealt with using the local resolution method; including one investigated by a Head of Service. Action plans were in place for 81% of cases, setting out how the complaint would be handled; 69% of these were completed in line with the timescale in the action plan.

Where there was no action plan in place 67% of cases were concluded in 20 working days or less.

### **3 SERVICE IMPROVEMENTS FROM COMPLAINTS**

- 4.1 Remedies were put in place for individual complainants, for example an apology; reviewing a service; correcting information; an assessment. Where there was wider learning actions taken are set out below.

#### **4.2 Learning & Improvements from Complaints about Care Provision**

- 4.2.1 Poor care in the home or in a residential setting, can have a significant impact on service users. Some services are provided by external companies paid for in full, or in part, by Adults Social Care. Managers ensured complaints about externally provided services (commissioned services) were responded to fully and that appropriate action was taken to remedy mistakes.

As part of their wider work to monitor commissioned services the Contracts Team proactively seek service user feedback on their experience of the care provided. There are service user surveys both annually for residential care, and case by case for those receiving home care. In addition information from complaints is shared with the team who take appropriate steps to manage any wider contractual concerns. Where appropriate the Contracts Team worked with care providers to put in place action plans to improve.

- 4.2.2 Actions taken by external companies to improve their services included; additional training and support for staff; carrying out surveys to understand the views of the service being delivered; revising & improving processes or policies. Some examples of action taken as a direct result of complaints are set out below:

- Staff received training on person centred care, resident experience, dementia care and customer care.
- Introduction of written weekly lists for carers to reduce the risk of missed calls as a result of poor communication.
- Increased floor walking by the manager and improved monitoring of food and medication.
- Review of infection control practices.
- Minimum staffing levels within Special Care unit set
- Review of quality of activities for residents and a new plan implemented.

#### **4.3 Learning & Improvements from Complaints about Social Work Practice**

- 4.3.1 Service users and their families value clear and timely assessments and information from social workers.

A competency framework for social workers was introduced to improve standards and consistency. A practice governance board and forum were established to ensure learning is shared across teams and embedded into practice. The aim will be to share any themes from complaints with the forum. Complaints led to the following actions to improve:

- a) To improve information for customers the Business Systems Service are developing a letter that will be sent to service users transferring from Direct Payments to residential care. It will clearly set out the timeframe

and procedure for closing a Direct Payment account and any relevant redundancy responsibilities.

- b) Following a poor response to carer's request for support guidance has been provided to contact centre staff to ensure customer service officers do not advise on health issues. Training was introduced to improve workers understanding and skills in navigating around the system to find and record information correctly.
- c) Failure to support a placement and offer a review led to misinformation about charges for residential care. Communication, vital in ensuring safe and appropriate discharge arrangements are in place, was not joined up between the Hospital discharge team and the social work team. The operational manager has met with key staff to improve communication between teams.
- d) In response to a complaint about the poor quality of an assessment specialist Occupational Therapists have shared advice with less experienced colleagues and updated knowledge on the effects of brain injury on individuals.
- e) Staff were reminded of the correct procedure to follow when making a referral to local services ensuring they get permission from the customer.

## **5 EFFECTIVENESS OF COMPLAINTS HANDLING**

- 5.1 Service users; their representatives; and people affected by the actions of Adult Social Care access the Council's complaints procedure and the Local Government Ombudsman (LGO).

Local Resolution has generally been an effective means of dealing with complaints. Five complaints were considered by the LGO, with three of the cases resulting in no different outcome from that put in place by the Council.

Where fault was found the service acknowledged the need to improve the practices around monitoring and reviewing Direct Payment accounts resulting in regular account reviews and improved information for customers.

- 5.2 Last year we reported that there was room for improvement to ensure all complaints had an individual action plan when 70% of cases had plans. This year 81% of cases had plans. As 69% of cases were managed in line with the plan there is room for improvement in this area. A more robust plan is now in place to monitor and manage both the action plan and improvements.
- 5.3 The practice last year of being open and receptive to hearing customer's experience, and rectifying mistakes was repeated this year with 69% of complaints upheld fully or in part.
- 5.4 There has been improved recording of customer feedback for Public Health Services since last year when only 2 cases were registered. Feedback leaflets are now included in the stop smoking discharge pack for customers. This year 25 compliments were registered. No complaints were received.
- 5.5 Operational Managers engage in quarterly reviews of complaints handling. There has been improved handling of complaints about commissioned services. Managers are taking a more robust approach to management of timescales and standards of investigation by external companies.