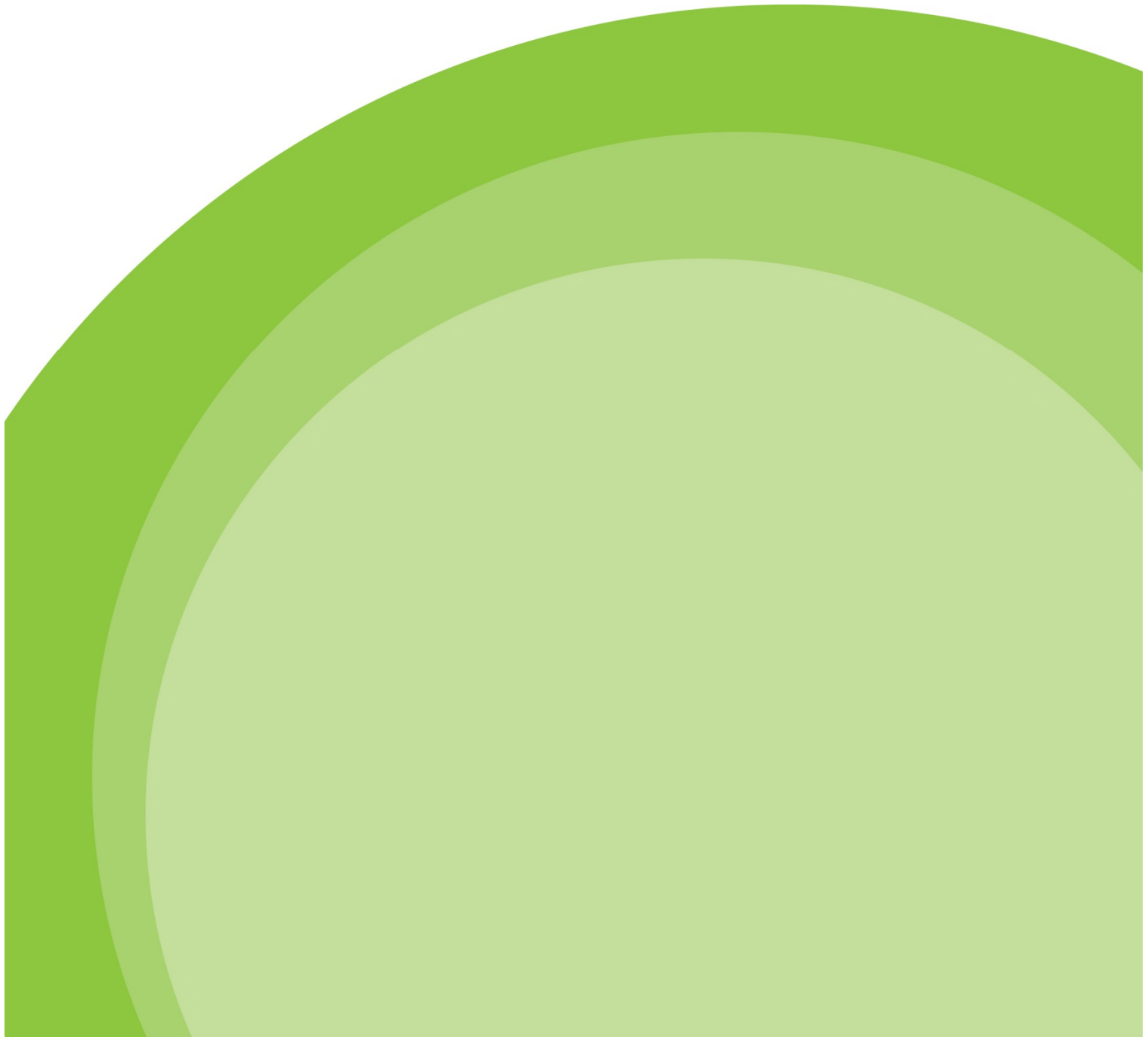




Adult Social Care & Public Health Services

Customer Feedback – Compliments/Complaints
Annual Report (1st April 2015 – 31 March 2016)
Not Protected



Contents

Chapter	Page
Introduction	3
Executive Summary	4
Representations Made to Central Bedfordshire Council (Compliments and Complaints)	5
Complaint Received Analysis	8
Outcomes from Concluded Complaints	11
Performance in Complaint Handling	12
Learning and Service Improvements from Complaints	13
Local Government Ombudsman (LGO) Complaints	15
Equality & Diversity Monitoring	17
Monitoring and Quality Assurance	19
Customer Relations Team – Support Adult Social Care	21

Appendices
Glossary – Appendix 1

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Introduction

This report fulfils the Council's statutory duty to monitor the effectiveness of the complaints procedure and produce an annual report for Adult Social Care and Public Health Complaints.

This report provides statistics for 2015/16 on the number of compliments and complaints received; a summary of complaint causes; the number of complaints that were well founded (upheld fully or in part); performance; the actions taken to improve services as a consequence of complaints; complaints considered by the Local Government Ombudsman and the effectiveness of the complaints procedure.

The report will be presented to the relevant local authority committee and will be made available on the Council's website.

The Complaints Procedure

The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 require us to investigate complaints about social care functions in a manner appropriate to resolve it speedily and efficiently, whilst keeping the complainant informed. This gives us flexibility on the approach to take in responding. However, the next stage if we are unsuccessful at resolution is the Local Government Ombudsman (LGO).

Managers are expected to assess a complaint to determine its seriousness and any potential risks to the individual or the organisation. Each complaint should have a clear action plan on how the complaint will be handled. The level of seriousness determines the appropriate method for handling the complaint. There are a number of options to address complaints. Timescales can be flexible and negotiated with the complainant although as a Council we have set minimum standard timescales as best practice. Options include:

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

All complaints are triaged to ensure they are suitable for the process. This ensures matters are managed through the correct procedures, should an alternative process be in place. Any matters which are not suitable for the complaints process are filtered out and passed to the appropriate channel.

Executive Summary

Adult Social Care

96 compliments were received in 2015/16 for Adult Social Care services with instances of customers telling us that services were getting it right and having a positive impact on their lives.

There were 82 new complaints received, 72 of which were managed through the complaints procedure. The remaining issues related to safeguarding investigations; lack of consent from the service user, data protection; quality assurance or were the responsibility of another body. These cases were filtered out and passed to the appropriate channel where necessary.

68 complaints were concluded. Two cases escalated to Assistant Director Review.

Complaints were seen as important feedback for services and a means of considering how to improve. Managers listened to customers' views with 73% of complaints either upheld fully or in part. The main reason for complaints this year related to customer care and communication issues.

Performance in complaints handling was consistent with last year in that 81% of cases had an action plan to determine how the complaint would be managed. 70% of those complaints were managed in line with the plan.

Individual cases had specific remedies put in place and the majority of wider service improvements resulted in the customer experience being shared with staff, in order to improve and inform practice going forward. This was followed closely by reviews of current processes. For wider service improvements see Section 5.

The Local Government Ombudsman (LGO) considered one complaint about Adult Social Care Services during the period. The LGO found fault in relation to the Council's actions and it was agreed that any accrued debt in relation to care contributions (£2786) would be written off to settle the complaint.

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 Council.

There were 8 compliments registered about the quality and helpfulness of the Stop Smoking Service. No complaints were registered.

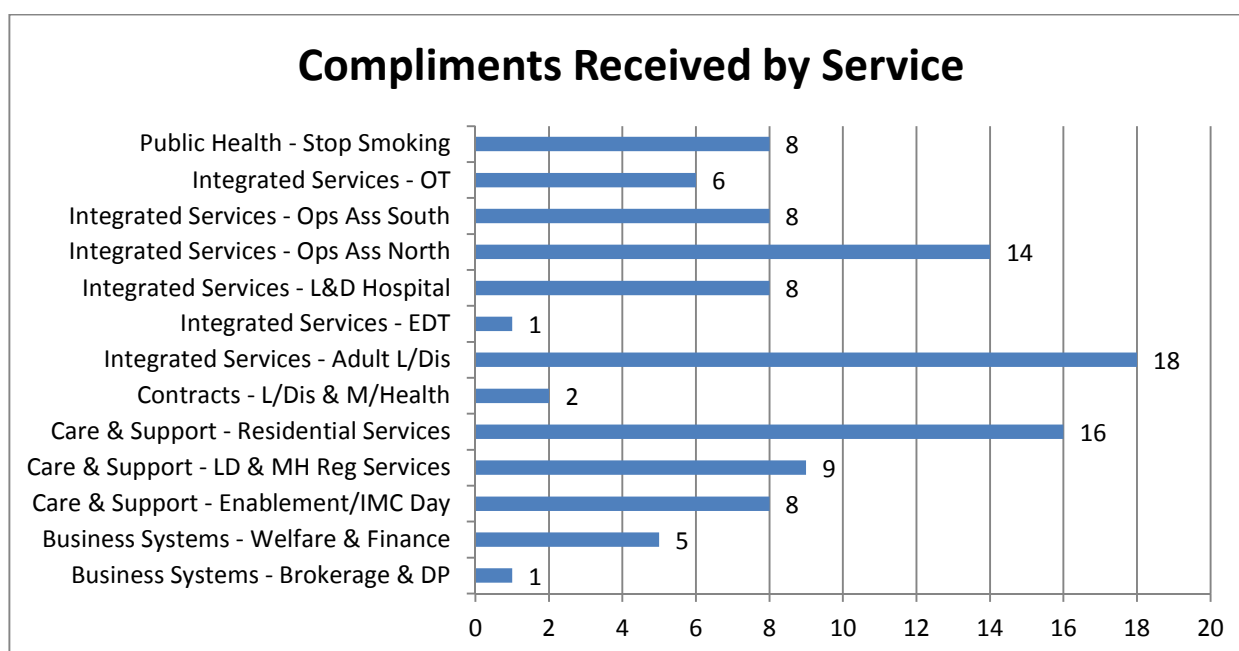
Effectiveness

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 the customer experience through complaints has led to improvements to practices. There is some room for improvement in managing complaints to agreed timescales and to establish root-cause of complaints to identify further learning for services.

1. Representations Made to Central Bedfordshire Council

1.1 Compliments Received

104 compliments were recorded across Adult Social Care and Public Health Services relating to good customer care and the quality of support to service users and their families. The below chart shows the number of compliments received by service area in 2015/16:



The breakdown of compliments received by service is detailed below:

Public Health – Stop Smoking

Friendly, approachable and helpful staff; thanks for help (3); good supportive skills (3); excellent guidance and motivation

Integrated Services – OT

Appreciation for service provided; recognition of care and professionalism; staff are professional and knowledgeable (2); kind and understanding worker; thanks for effort to find suitable housing

Integrated Services – Ops Ass South

Proactive support and timely referral to Age UK; excellent support provided to carer; social worker team have provided brilliant work; thanks for support (3); praise for professionalism and knowledge; caring and helpful worker

Integrated Services – Ops Ass North

Good handling of complaint about care provision; caring, sympathetic and reassuring worker during a care needs assessment; thanks for sorting out respite; attention to detail in preparation of care plan; thanks to worker for assistance with care and support (3); thanks for help arranging move to residential care; commitment and perseverance to get the job done; good cover in absence of allocated social worker; gratitude for hard work in finding

solutions for service user's care needs; appreciation for the amount of time, effort and support provided; wonderful social worker; good clear assessment making support planning easier

Integrated Services – L&D Hospital

Thanks for help and expertise in finding post hospital care (4); professionalism and friendly worker (2); great support and listening; efficient and caring worker

Integrated Services – EDT

Thanks from CCG for help and support with a psychiatric problem

Integrated Services – Adult L/Dis

Professional attitude (2); good communication in relation to preparation of carer's assessment (2); fantastic job by social worker and TILT worker; thanks for helping to sort out a financial issue; thanks for settling service user into new home; praise for social worker's good work with a service user; empathetic worker; prompt action and refreshing approach from worker; family appreciative of social worker trying her best to achieve respite requested; brilliant support (2); thanks for input in arranging a placement; social worker made service user feel safe and supported during an assessment; thanks to workers who attending a teaching session at University/provided coaching (2); thorough, efficient and supportive worker during a difficult time

Contracts – L/Dis & M/Health

Superb communication; impressed with actions taken

Care & Support – Residential Services

Praise for care provided at residential homes (12); thanks for support to relatives; good care for difficult service user; treated service user with dignity at end of life; fantastic staff;

Care & Support – LD & MH Registered Services

Thanks for assistance with application to panel; good approach in relation to assisting healthy eating; good service provided at day centre; thanks to residential staff (6); thanks for taking service user out for the day

Care & Support – Enablement/IMC Day

Thanks for help and support (6); appreciated care on return home from hospital (2); thanks for kindness and friendly/professional consideration (2)

Business Systems – Welfare & Finance

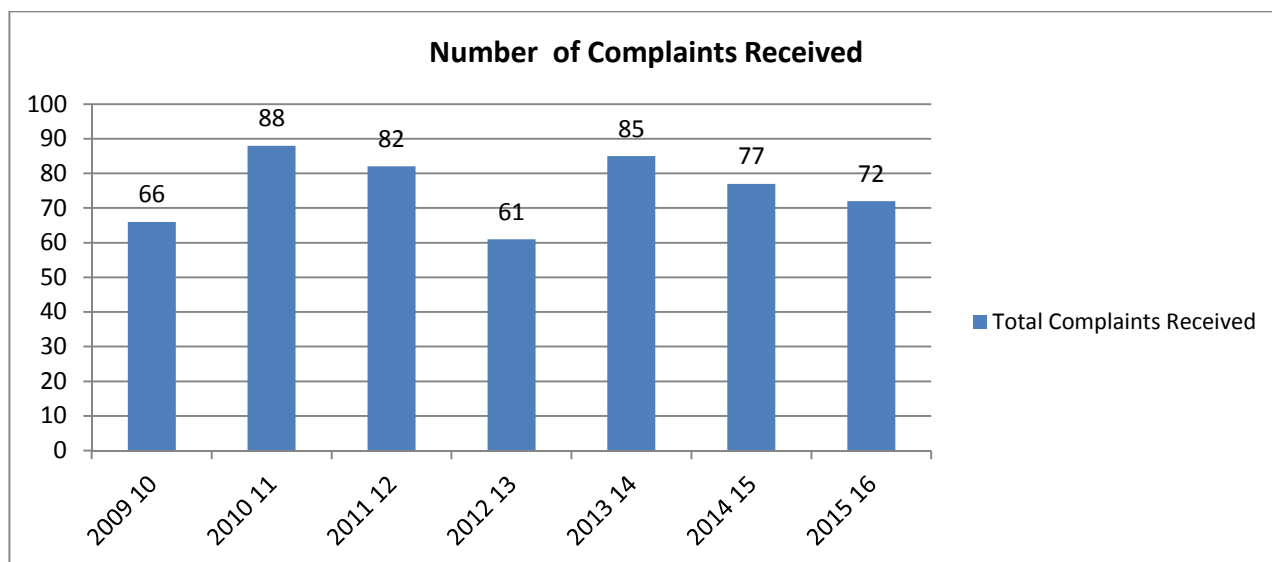
Thanks to helpful and patient worker; helpful and understanding member of staff talking through blue badge application; helpful, polite and efficient staff (2); thanks for patience, advice and kindness

Business Systems – Brokerage & DP

Conscientious and proficient apprentice

1.2 Complaints Received

There were no complaints recorded by Central Bedfordshire Council for Public Health Services in 2015/16. Therefore the below complaints refers to those received by Central Bedfordshire Council about Adult Social Care Services.



In 2015/16 there were 4323 records of adults receiving long term support from Adult Social Care Services.

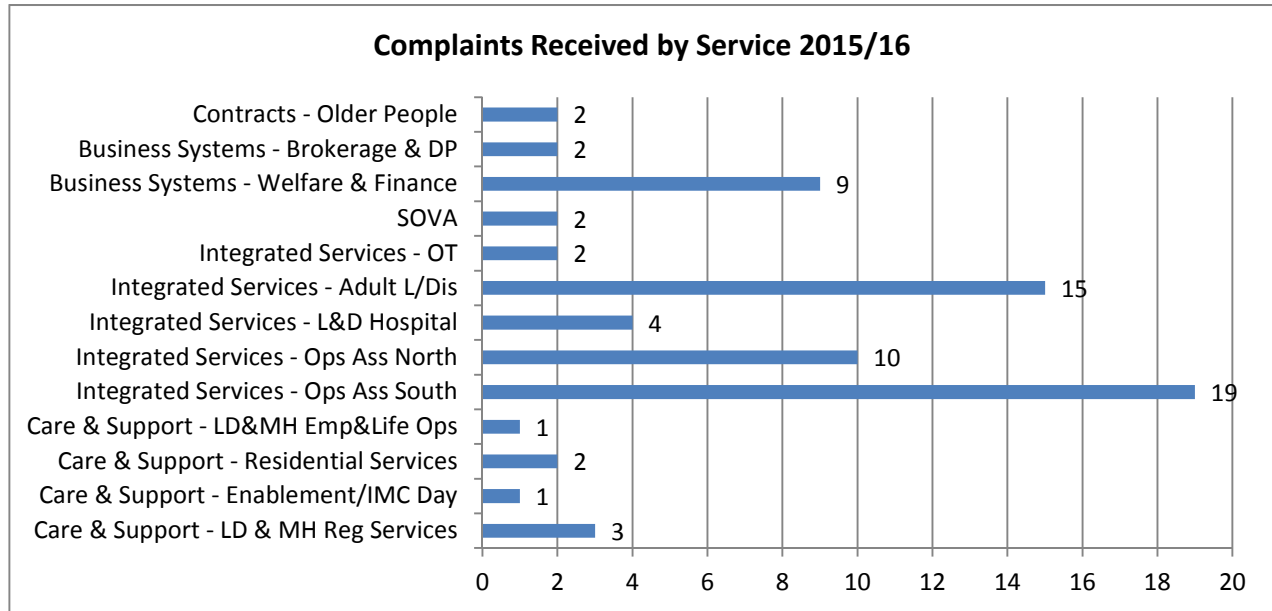
82 complaints were received in 2015/16, 72 of which were managed through the complaints procedure. The remaining issues related to safeguarding investigations; lack of consent from the service user; data protection; quality assurance or were the responsibility of another body. These cases were filtered out and passed to the appropriate channel where necessary.

The number of complaints received in 2015/16 reduced slightly from the prior year (by 6%). This follows the reduction seen between 2013/14 and 2014/15.

2. Complaints Received Analysis

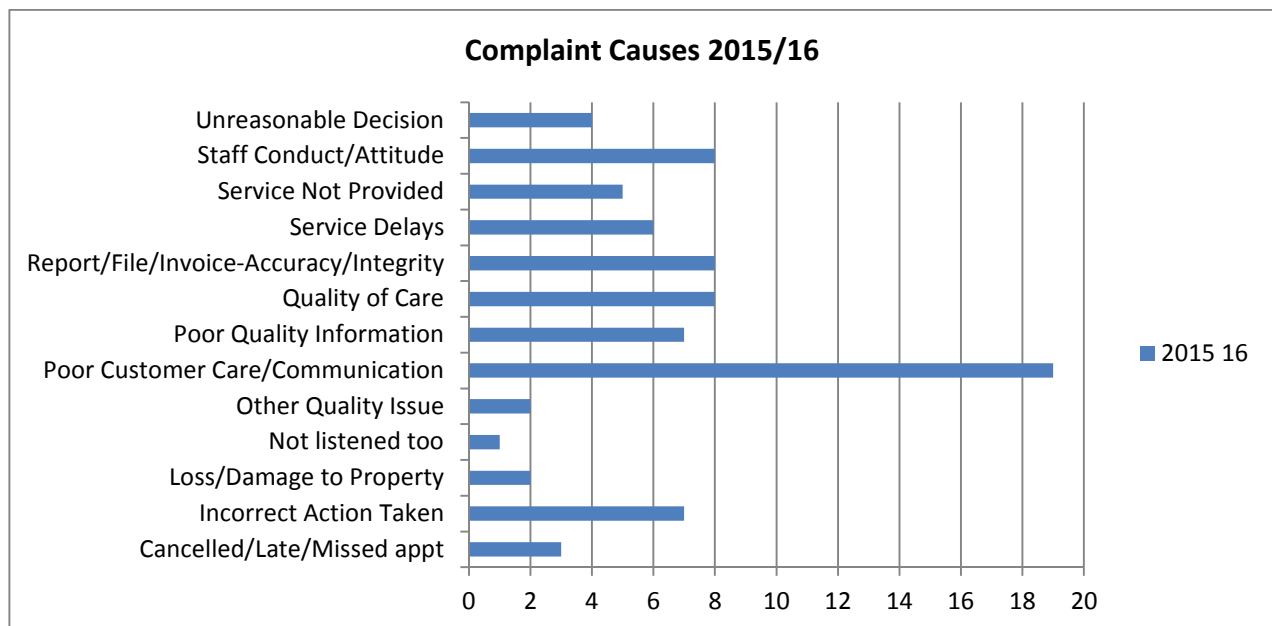
2.1 Complaints by Service Area

The below chart shows complaints received by each service area within Adult Social Care.



Over the year the majority of the complaints were received by Integrated Services (50). The teams which form this part of the service are responsible for the care management of cases. The nature of this team's work is likely to give rise to more complaints as they tend to be the front line services that engage with our service users.

2.2 Types of Complaints Made



Customer Relations undertook a project in 2015 to pull all complaints data recorded by the team into a single system. The team were previously working on two databases. From 1st

December 2015 all complaints data received by the team has been recorded onto a single database to ensure consistency when capturing complaints and to enhance reporting functions.

The above chart indicates the types of the complaints received over the year. Whilst there is no comparative data from previous years this will allow for future analysis.

Each complaint received can have a number of aspects, so one complaint may cover a number of the complaint causes set out in the above chart. The main cause for complaint over the year related to poor customer care and communication. The breakdown of complaints received by team is detailed further below:

Integrated Services

Ops Assessment Teams (29): delay in financial assessment; poor customer care; poor communication; poor management of safeguarding concerns; misleading or lack of information about financial assessments and contributions; poor handling of discharge home from hospital; staff conduct; poor handling of move to alternative home for safety; care plan not being followed; quality of care; missed or late calls; carers working fewer hours than charged for; service user's personal items missing; removal of a service user's body after death without consent from the family.

Adult Learning Disabilities Team (15): staff conduct; poor communication; poor information; carers service not provided; accuracy of assessments; lack of support to find employment and housing or provide care; delay in reviewing needs and care package; delivery of care package.

L&D Hospital Team (4): poor handling of discharge from hospital; staff conduct; poor information provided about respite charges.

Occupational Therapy (2): received complaints related to poor handling of Disabled Facilities Grant application; staff conduct.

Resources

Business Systems (2): misleading information about home care charges; blue badge assessment; delay; incorrect invoicing; poor communication; failure to undertake financial assessment; unclear paperwork.

Contracts (2): poor handling of residential home closure; overcharging for care at home

Care & Support

LD & MH Registered Services (3): quality of care and standards at Council run residential home

Residential Services (2): quality of care at Council run residential home

LD & MH Emp. & Life Opps. (1): lack of support to service user to complete paperwork

Enablement/IMC & Day (1): inconsiderate parking by carers

SOVA

SOVA (2): poor handling of Deprivation of Liberty authorisation; quality of approach to the mental capacity act

2.3 Complaint Escalations

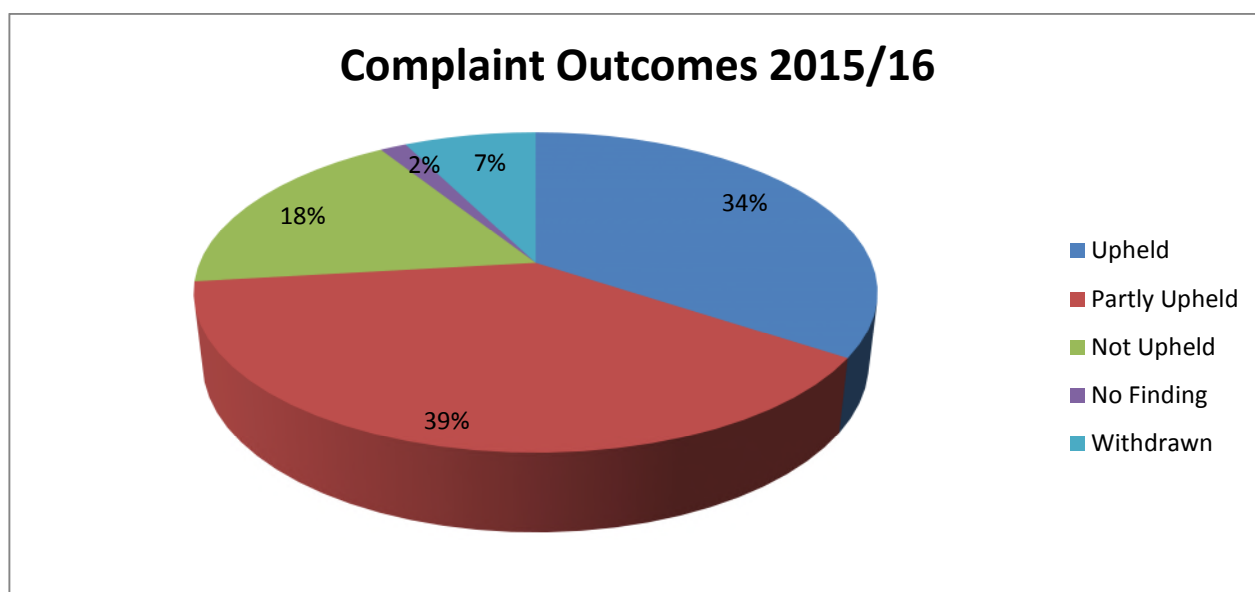
Regulations require the Council to investigate a complaint about Adult Social Care in a manner appropriate to resolve it speedily and efficiently. This gives us flexibility on the approach to take in responding. If a complainant asks for further action on a completed complaint it will be reviewed by the Assistant Director. If the Assistant Director decides the complaint has been fully addressed, it will be signed off and the complainant advised of their right to refer to the Local Government Ombudsman.

Two complaints were escalated to Assistant Director Review in the period. In both cases the Assistant Director was of the view that the complaints had been fully addressed and agreed with the outcomes. The complainants were advised of their right to refer to the Local Government Ombudsman should they remain dissatisfied.

3. Outcomes from Concluded Complaints

There were 68 complaints concluded in the period, including six cases that were withdrawn.

Of the remaining 62 cases, 3 were managed using the conciliation method and 59 were managed using the local resolution method. The below chart indicates the outcomes from complaints in 2015/16.



The above chart shows that 73% of complaints were upheld either fully or partly.

The below table indicates that the upheld rates were impacted predominantly by customer care and communication issues.

Types of Complaint	% of Upheld or Partially Upheld
Poor Customer Care/Communication	24.5%
Quality of Care	12.3%
Poor Quality Information	12.3%
Service Delays	10.5%
Service Not Provided	8.8%
Staff Conduct/Attitude	7%
Report/File/Invoice-Accuracy/Integrity	7%
Incorrect Action Taken	7%
Other Quality Issue	3.5%
Cancelled/Late/Missed Appointment	3.5%
Unreasonable Decision	1.8%
Loss/Damage to Property	1.8%

Complaints were seen by services as an important means of identifying areas for improvement. Remedies were put in place for individual complainants. Section 5 sets out wider actions and improvements resulting from complaints.

4. Performance in Complaint Handling

There is no timescale set out in regulations in which to resolve complaints for Adult Social Care services. 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. Performance is therefore monitored on whether an action plan was in place and whether this was complied with.

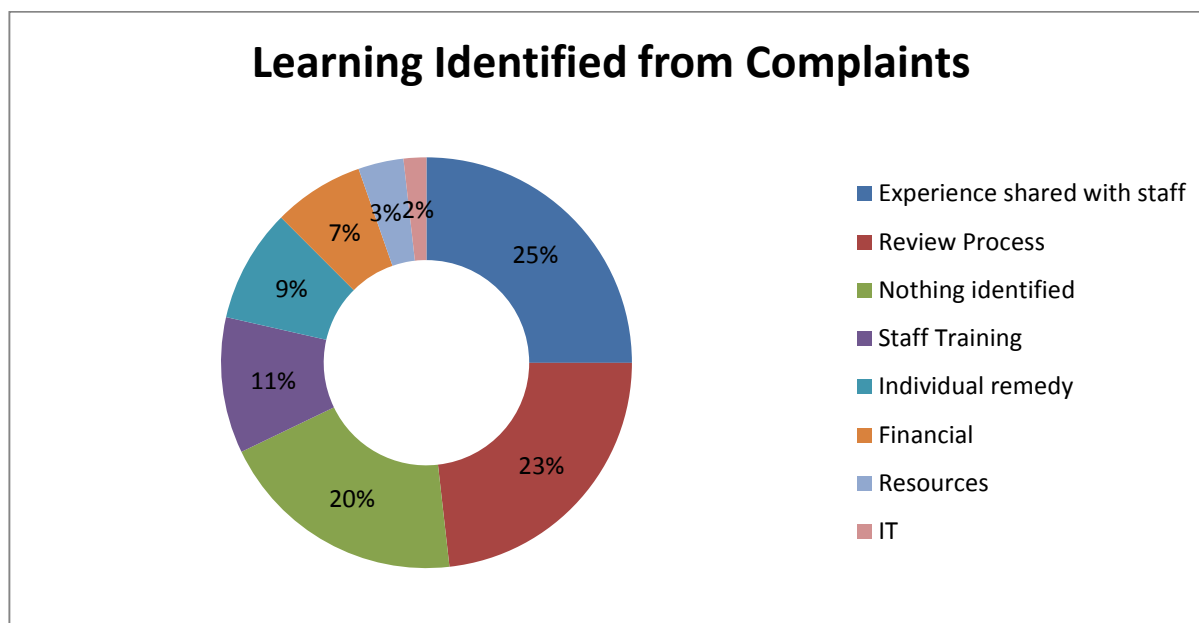
Action plans were in place for 81% of cases, setting out how the complaint would be handled; 70% of these were completed in line with the timescale set out in the action plan.

Where there was no action plan in place 58% of cases were concluded in 10 working days or less, which meets the minimum standard timescales set as best practice.

5. Learning and Improvements from Complaints

Where complaints are upheld either fully or partly complainants will receive an apology. However service areas are also expected to put in place a remedy which may be for the individual complainant or undertake wider learning across the service to ensure mistakes are not repeated.

The below chart shows the types of learning identified from complaints in 2015/16, in addition to an apology.



The above chart shows that the majority of improvements identified resulted in the customer experience being shared with staff in order to improve and inform practice going forward. This was followed closely by reviews of current processes.

Key improvements to Council services included:

- Introducing a report to identify service users who have passed away, the date of death and date the Council were notified in order to ensure financial accounts are managed in a timely manner.
- The Clinical Commissioning Group and the Council has agreed that there will be one point of contact for service users and families in relation to home closures to ensure communications are timely. Consideration is also being given to whether families can be informed when their relatives are not part of a safeguarding investigation, should that be the reason for the home closure.
- Learning, development and procedural needs have been explored between the Council and the Community Mental Health Team in relation to applying good practice in the Mental Capacity Act, Best Interests and Deprivation of Liberty Safeguards (DoLS). This has included engagement with Care Homes to ensure DoLS and its implications are understood and a review of the quality assurance process related to the independent Best Interests Assessments.

- A quality standard is to be implemented in relation to carers assessments
- A review has been undertaken in respect of the information presented to complex needs meetings and practice guidance implemented.
- Changes have been implemented to streamline the duty system in order to deal with increased pressure on the team.
- Blue badge applications will now be scanned so the team will have access to electronic documentation at all times to improve both internal processes and the service offered to service users
- Team Managers will review and establish how long it is taking for documents relating to transport services to be typed and distributed to enable appropriate advice and guidance for staff
- A tracking tool has been implemented to monitor requests for assessments
- Care managers have received additional training to ensure they are clear about the Care Act 2014 guidance on assessments.
- Training to be provided for staff in both Customer Finance and Social care to understand the end to end process of financial assessments.

Key improvements for care provision that the Council commissions included:

- Reviewing staff responsiveness to the service user call system
- Marketing campaign for agency workers in Stotfold to relieve a shortage in carers in that area.
- Daily records to reflect care plans and ensure any new information about accidents and incidents are fed back into the care plans.
- A mechanism put into place to enable people, including staff, to raise concerns about risks and poor performance
- Staff received further catheter training
- Alternative day services were reminded of their contractual obligations and the need for a formal and reasonable notice period when ending a period of support.
- Property inventories to be reviewed on a regular basis

It is also worth noting that the chart above also shows that in 20% of upheld or partially upheld complaint case managers were unable to identify clear and obvious improvements. This may suggest that more work needs to be done in this area to challenge and improve practices.

6. Local Government Ombudsman (LGO) Complaints

6.1 Complaints Received and Decision Notices

The LGO annual statistics show that they received 19,702 complaints and enquiries about local authorities in 2015/16. In comparison the LGO considered one complaint about Central Bedfordshire Council's Adult Social Care services during this period.

- The Ombudsman's decision reflected that the Council failed to provide adequate information about its charging policy for residential care placements. It also failed to undertake a financial assessment of the service user at the point respite became a permanent placement. This resulted in a debt being accrued of contributions towards care. The Council apologised to the complainant in writing and agreed to write off the accrued debt of contributions towards care (£2786).

Two LGO cases reported in the previous years received decision notices in this period.

- One case related to the poor handling of a service user's direct payments and not following the complaints procedure. This case was subject to a public report from the Ombudsman which recommended that the Council apologise to the service user and confirm it will not seek to reclaim any unpaid contributions; write off any debts it was attempting to recover; arrange for an independent social worker to carry out a new care needs assessment and prepare a support plan; set up a clear working agreement for future reviews and monitoring; reconsider the service user's Disability Related Expenditure and provide a clear explanation of why it does not consider some costs arise from disability; pay £5000 to acknowledge the impact of being without adequate care and support for over two years; pay £2000 to acknowledge the avoidable distress and frustration. All actions have been completed and the Ombudsman has issued the Council with a letter of satisfaction.
- The other case related to the Council failing to properly monitor a service user's direct payments or provide enough information about ending the service user's support assistant's contract when direct payments ended. The Council apologised to the complainant in writing and agreed to write off the debt to the direct payment account (£1947.77) and pay £250 to acknowledge avoidable distress.

6.2 Improvements from LGO Complaints

Key improvements for services following complaints upheld by the LGO are as follows:

- It was agreed that the Direct Payments Policy and Practice Guidance would be made clearer on what it can be used for and that this needed to interlink with the Support Planning Policy
- A new quality audit process has been introduced, practice governance approach and other quality improvements initiated. The implementation of the Care Act has renewed the focus on quality of assessment and support planning

- Reviewing the customer journey has been implemented which is looking at the process of assessment, support plan and review. Part of this is to focus on reducing or highlighting the hand-offs within the system.

7. Equality and Diversity Monitoring

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. Whilst information is not always provided by a complainant the system used for complaints has the facility to capture the service user's gender, ethnicity, age group and whether the service user describes themselves as having a disability or not. Further work is required to ensure the system is meeting the current needs of equality and diversity monitoring and linking in with information that may already be held in this respect about our service users. If we are able to improve this area it will enable us to undertake further analysis in relation to complaint trends and accessibility.

7.1 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.

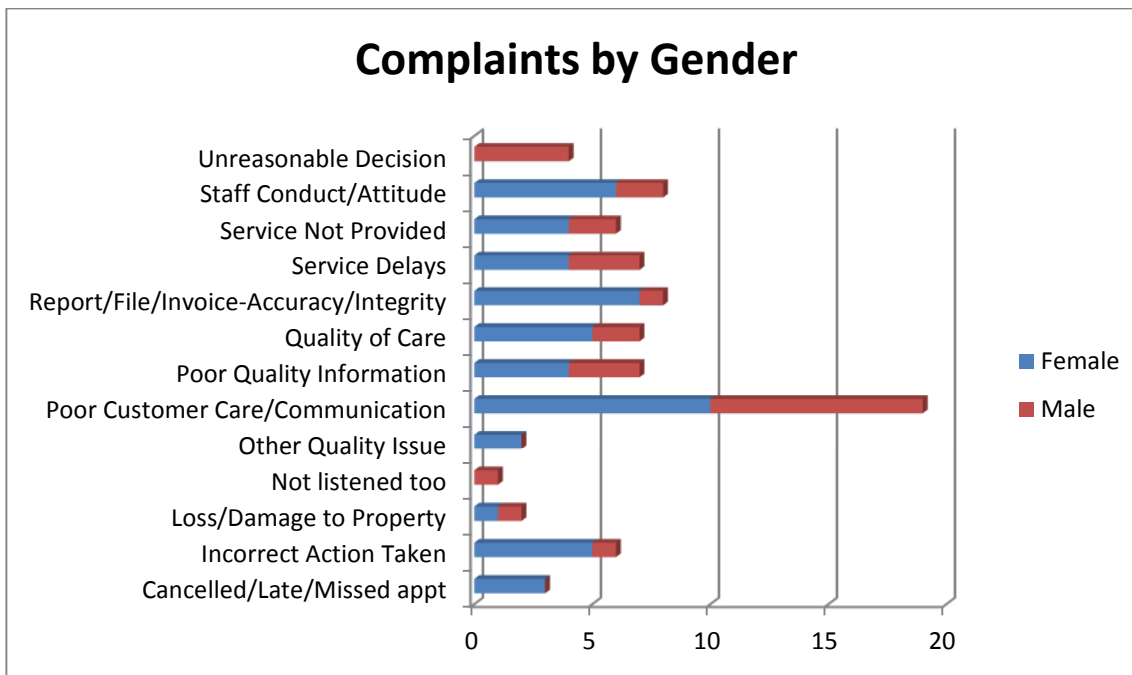
The 72 new complaints received in 2015/16 were by the following methods:

Email	Telephone	Letter	In Person	Form
26 (36%)	23 (32%)	16 (22%)	4 (6%)	3 (4%)

7.2 Social Care Complaints – Gender

In 2015/16 there were 4323 records of adults receiving support from Adult Social Care Services. 60% of service users were female and 40% were male. There were 72 complaints managed through the complaints procedure. 60% of complaints affected female service users and 40% affected males.

The below chart shows that the top area of complaint for both gender groups was poor customer care/communication. However for female service users the other main areas for complaint were around file/report/invoice accuracy/integrity and staff conduct. For male service users it was unreasonable decisions, delays and poor quality of information.



7.3 Social Care Complaints – Ethnicity

The last census on population by ethnic origin (2011) showed 89.7% of the population in Central Bedfordshire were 'White British' and 10.3% were classified as 'Other'

Of the 4323 records of adults receiving support from Adult Social Care in 2015/16, 92% of service users were described as being 'White British'.

A significant proportion of new complaints (94%) were recorded as 'unknown' ethnicity which may mask representations from ethnic backgrounds. Where data was captured the remaining 6% of new complaints were recorded as being made by service users described as 'White UK'. Without comparative data it is difficult to identify any trends. It is hoped this will be improved over the next year.

7.4 Social Care Complaints – Disability

Of the 4323 records of adults receiving support from Adult Social Care in 2015/16, 66% of service users were described as having a physical disability.

A significant proportion of new complaints (74%) were recorded as 'unknown' disability which may mask representations from those service users with disabilities. Where data was captured 24% of service users described themselves as having a disability and 2% described themselves as not having a disability. Without comparative data it is difficult to identify any trends. It is hoped this will be improved over the next year.

8. Monitoring and Quality Assurance

8.1 Effectiveness of Complaints Handling

Service users, their representatives and people affected by the actions of Adult Social Care services can access the Council's complaints procedure and the Local Government Ombudsman.

The Customer Relations Team monitors the operation and effectiveness of the complaints procedure as well as how information about complaints is being used to improve services and delivery.

Local Resolution has generally been an effective means of dealing with complaints with only two being escalated to Assistant Director level and one complaint investigated by the Local Government Ombudsman this year.

Complaints were seen as important feedback and a means of identifying how practices may be changed for the better. The customer experience in complaints has led to some improvements to practice. Last year we reported that there was room for improvement to ensure all complaints had an individual action plan when 81% of cases had plans. This year we maintained 81% of cases having action plans. 70% of cases were managed in line with the action plan which is a slight improvement on last year (69%). There is still room for improvement in this area but it is encouraging that in the cases where there was no action plan the service area were meeting the minimum standards in line with best practice in over half of those complaints (58%).

8.2 Financial Implications

There are a number of ways in which the local authority can incur costs as part of the statutory complaints process for Adult Social Care Services.

Formal Investigation is normally achieved by appointing an investigating officer. The investigating officer may be employed by the local authority or be externally commissioned. The investigating officer however cannot be in direct line management of the service complained about. Due to the nature of the complaints that tend to be suitable for formal investigation the usual practice is to externally commission an investigating officer specifically for that piece of work.

In addition there may be rare occasions where financial redress is offered through the complaints procedure. This can be through local settlement following investigation by the Local Government Ombudsman but can also be recommended during the local authority complaints process.

Any financial costs incurred are the responsibility of Adult Social Care Services. In order to assist in minimising the risk of costs the Customer Relations Team is actively involved in assessing the seriousness of complaints, whether complainants are eligible to use the statutory complaints procedure and ensuring appropriate and reasonable remedies are recommended.

The below table details the total costs incurred during 2015/16:

Reasons for Cost	2015/16 Spend
Formal Investigation	£0.00
Financial Redress (LGO Recommendation)	£7250 £4733.77 (Waiver of fees)
TOTAL	£11,983.77

9. Customer Relations Team – Supporting Adult Social Care

The Customer Relations Team supports Adult Social Care Services by:

- ✓ Providing guidance, advice and support to staff on the management of complaints
- ✓ Supporting staff involved in the complaints procedure
- ✓ Quality assurance of complaint responses
- ✓ Managing challenges to complaint handling and responses
- ✓ Liaison with the Local Government Ombudsman
- ✓ Overseeing the arrangements for communicating and publicising the complaints procedure
- ✓ Evaluating and reporting on the numbers, types, outcomes and trends of complaints to inform practice, development and service planning
- ✓ Providing a means to capture the learning from complaints to contribute to practice development, commissioning and service planning

During 2016/17 the Customer Relations Team will focus on a number of initiatives:

- Promote the Customer Relations root-cause analysis tool to help managers with identifying systemic improvements
- Promote the Customer Relations toolkit for handling persistent customers consistently and fairly
- Continue to ensure complaints are handled responsively and in a flexible way
- Work collaboratively with colleagues to achieve a reduction in levels of complaints upheld
- Maintain the low levels of complaint investigations by the Local Government Ombudsman and where the LGO finds fault
- Upgrade the Customer Relations database to improve reporting capabilities
- Improve capture of equality and diversity information

Appendix 1

Glossary of Terms – Adult Social Care Team Names

Acronym	Meaning
Adult L/Dis	Adult Learning Disability
Brokerage & DP	Brokerage and Direct Payments
EDT	Emergency Duty Team
Enablement/IMC & Day	Enablement/Intermediate Care Team and Day Services
L/Dis & M/Health	Learning Disability and Mental Health
LD & MH Emp. & Life Ops	Learning Disability and Mental Health Employment and Life Opportunities
LD & MH Reg. Services	Learning Disability and Mental Health Registered Services
L&D Hospital	Luton and Dunstable Hospital
OT	Occupational Therapy
Ops Ass North	Operations Assessment North
Ops Ass South	Operations Assessment South
SOVA	Safeguarding of Vulnerable Adults



Central Bedfordshire

A great place to live and work

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