

**NORTH LINCOLNSHIRE COUNCIL**

**ADULT SERVICES  
CABINET MEMBER**

**ANNUAL COMPLAINTS REPORT 2007-2008**

**1. OBJECT AND KEY POINTS IN THIS REPORT**

- 1.1 The object of this report is to present the annual report for April 2007–March 2008 in respect of formal complaints received about Adult Social Services.
- 1.2 This report is part of our statutory duty to address complaints about our social care function under NHS Community Care Act 1990 Regulations.
- 1.3 We encourage service users to tell us if they are not happy with or have worries about a service they receive and support them when they do.
- 1.4 We want to make sure that we use information from complaints to improve services.

**2. BACKGROUND INFORMATION**

- 2.1 The complaints procedure that applies to Adult Services is governed by the NHS Community Care Act 1990 and by guidance laid down by the Department of Health.
- 2.2 The Local Authority Social Services Complaints (England) Regulations 2006 further amending the procedure, and guidance to this procedure produced by The Department of Health, came into force on 1<sup>st</sup> September 2006.

**3. OPTIONS FOR CONSIDERATION**

- 3.1 The complaints report is compiled in accordance with the above legislation and guidance. It outlines the complaints made and key actions taken by the services in response to them. The report also

contains information about the operation of the procedure over the year.

#### **4. ANALYSIS OF OPTIONS**

- 4.1 There has been a significant decrease of almost 50% in the number of complaints made this year in comparison to last. This reflects in part the work that has been done with external providers of home care that has resulted in a reduction of complaints about the services that they provide. Efforts are always made to resolve service users concerns before they reach the formal complaint stage and this year's figures may reflect the effectiveness of these efforts.
- 4.2 Five of this year's complaints were investigated at stage two and one proceeded to panel review, the final stage of our procedure. A slight increase over the previous year and indicates that the issues that reach the formal complaint stage are more involved and difficult to resolve.
- 4.3 Just under half of these complaints were upheld in full.
- 4.4 The issues that people complain about indicate that information and consultation and the way in which we deliver services are just as important as the nature and standards of the services themselves.

#### **5. RESOURCE IMPLICATIONS (FINANCIAL, STAFFING, PROPERTY, IT)**

- 5.1 Any financial implications arising out of our complaints procedure would be subject to separate reporting
- 5.2 We have to increasingly turn to external investigating officers to conduct the stage 2 investigation of complaints. This ensures that we are able to complete these, often lengthy and complex pieces of work within timescales.

#### **6. OTHER IMPLICATIONS (STATUTORY, ENVIRONMENTAL, DIVERSITY, SECTION 17 - CRIME AND DISORDER, RISK AND OTHER)**

- 6.1 Our complaints procedure ensures that we meet our statutory obligations.
- 6.2 Our complaints procedure requires a consideration of the needs of complainants to ensure that the process is accessible and appropriate for all.

- 6.3 Effective complaints procedures ensure that the views of service users, carers and their representatives have an influence on the provision of services.
- 6.4 Any changes to policies or procedures as a result of a complaint received would be, where appropriate, subject to a separate report.

## 7. OUTCOMES OF CONSULTATION

- 7.1 We survey complainants when they have received the response to their complaint to ask their views about how effective they thought the procedure was for them.
- 7.2 Complainants indicate that they do not find making a complaint difficult but that they would prefer their concerns being resolved before they get to the complaint stage. Some complainants felt that, once made, their complaint could have been dealt with more promptly. Timescales are something that we continue to look at to ensure a timely response.
- 7.3 Trades unions have been consulted and have raised no concerns in relation to this report.

## 8. RECOMMENDATIONS

- 8.1 That the Adult Services Cabinet Member acknowledges receipt of the Annual Report on complaints for 2007-2008 and endorses the actions that have been taken, both to resolve the complaints and to learn from them.

SERVICE DIRECTOR ADULT SOCIAL SERVICE

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Date: 27 August 2008

### **Background Papers used in the preparation of this report:**

The Children Act 1989  
The NHS Community Care Act 1990  
The Children Act Guidance and Regulations, Volume 4.  
The Local Authority Social Services Complaints (England) Regulations 2006  
Learning From Complaints – Social Services Complaints Procedure for Adults, Best Practice Guidance, Department of Health 2006

**Draft**  
**Adult's Social Services**  
**Annual Complaints Report April 2007-March 2008**

**1. Introduction**

- 1.1 This is the annual report on complaints about Adults Social Care Services, made under the statutory complaints procedure, for the year 2007-2008. The report relates to services to older people, people with a learning disability and people with a physical disability. Complaints relating to mental health services are dealt with by arrangement under the NHS procedures and reported according to those procedures.
- 1.2 Adults Services this year had 5500 service users and took over 7100 new referrals in the year. The service to each of these people has been designed following individual assessment, to meet their own specific needs and is delivered, wherever possible, in a way that suits them best. This requires us to be able to carefully manage and plan our services so that we can provide care that is reliable, consistent and of the highest possible standard.
- 1.3 We have to be careful that the care and services we provide are targeted to where they are needed the most. This enables us to, year on year, support increasingly vulnerable people in a way that maximises their independence and promotes their wellbeing.
- 1.4 We are keen to ensure that our service users and their carers retain control over their lives and are able to exert the right of choice as far as possible. We want to increasingly involve them in the design and delivery of services and to do this in ways that will enable us to hand over to service users, and their carers, as much as possible the determination of their own care.
- 1.5 To do this we have to be confident that our services are sufficiently robust and are able to respond to the views of the people who use and who should increasingly shape them. We ensure the incorporation of service user views in a range of ways, through quality assurance systems, care planning and reviewing, specific surveys. The complaints procedure is one other means of our discovering what our service users experience of our services is.
- 1.6 Our complaints procedure helps our service users and their representatives to have any concerns they may have about the service they receive to be addressed in a way that is open, impartial and fair. Every complaint that we receive is dealt with in the same way, according to the same principles no matter how significant the issue of concern may seem to be.

- 1.7 The complaint procedure is focussed on finding solutions but in the process the matter in question is subject to close scrutiny that enables the service to find about the quality of its provision from the people who know best, those who use it. Complaints can teach us equally about good practice as well as where improvements can be made and therefore are welcomed as a valuable learning opportunity.

## 2 The Procedure

In order to respond quickly and effectively to complaints we operate a three-stage procedure. This procedure is designed to meet the requirements of:

- The Local Authority Act 1970;
- The N.H.S Community Care Act 1990,
- The Children Act 1989, in respect of services to children.

The aim of the procedure is to allow complaints to be resolved promptly and locally in a way that is rigorous, transparent and fair to all who are involved. The purposes of the three stages are as follows:

**Stage One** provides an opportunity for the local manager to quickly resolve the service user's dissatisfaction by putting things right. For example, this might involve a manager taking up complaints about the quality of a service with a service provider. Alternatively, the manager might choose to reconsider a decision or provide a more detailed explanation of the reason why a decision was made in a particular way.

**Stage Two** provides the opportunity for a more detailed independent investigation of a complaint and will involve the Service Director in appointing someone to investigate the complaint on his behalf. If the complaint concerns a child or young person, or a vulnerable adult then someone independent of the Council may also be involved. This Independent Person provides an extra safeguard in ensuring that the complaint is investigated properly and fairly. This stage provides the complainant with a full report from the investigation, along with the adjudicating manager's decision.

**Stage Three** is the final stage of the procedure. It provides the opportunity for an independent review of the complaint. A panel of three people who are independent of the local authority and have had no previous involvement with the complaint undertake this review. The role of panel is to review the information from the original investigation, and to speak with the complainant, the Investigating Officer and the responding manager. They then

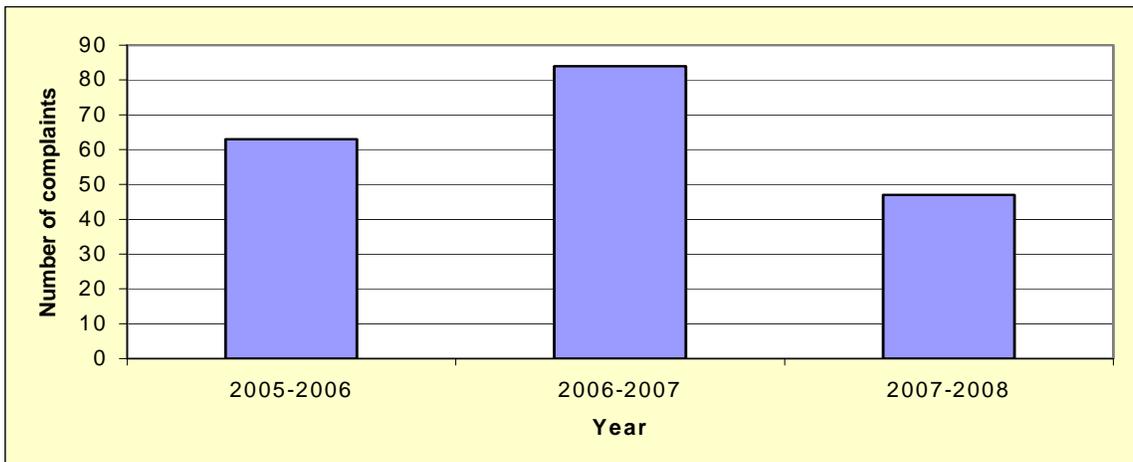
make recommendations to the Service Director, who must take them into account in reaching a final decision on the complaint.

### 3. Complaints received in the year.

**Fig 1**

SERVICE	COMPLAINTS
Older People	22
Physical Disability	2
Learning Disability	4
External provision of Home Care	19
Total	47

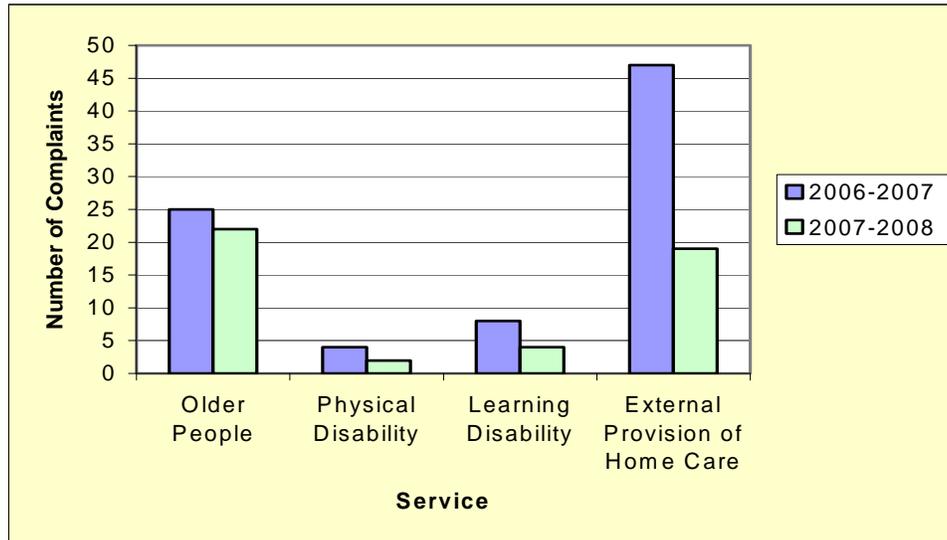
**Fig 2**



This year has seen a significant reduction from last year in the number of complaints we have received. This has, in the main, been achieved because fewer complaints have been made about external provision of home care. A key feature of our relationship with external providers of home care is our close monitoring arrangements. When service users raise concerns they are recorded and dealt with as complaints. Any issues arising from these complaints are identified and the contract monitoring section will follow up on these actions, providing additional external scrutiny, to ensure that they have been implemented and improvements in service made. These arrangements and the building of positive relationships with external providers coupled with the actions that have been taken in response to concerns raised by service users have, in recent years, led to a gradual reducing of formal complaints to

this low level. We will continue to maintain this close contract monitoring to ensure that standards of service are maintained.

**Fig 3**



This chart illustrates that each service area has had a smaller number of complaints made this year. This is attributable to a number of factors for example we have alternative established routes for dealing with issues raised about our services that mean they are not all recorded as complaints. One of these is the vulnerable adults procedure, which is used to address concerns about standards of care of an individual, such issues are recorded and reported on under that process and not as complaints: another is the means by which we deal with issues raised about decisions made in relation to care planning and the level of service provision. These concerns are generally dealt with and resolved through reassessment and review of service and so do not become formal complaints.

We expect that efforts will be made to resolve concerns informally before they become complaints wherever possible, and this is often what our service users prefer. The increasing inclusion of service users in decisions made about their own care means that services are more likely to meet the service users needs and expectations and so give rise to fewer complaints.

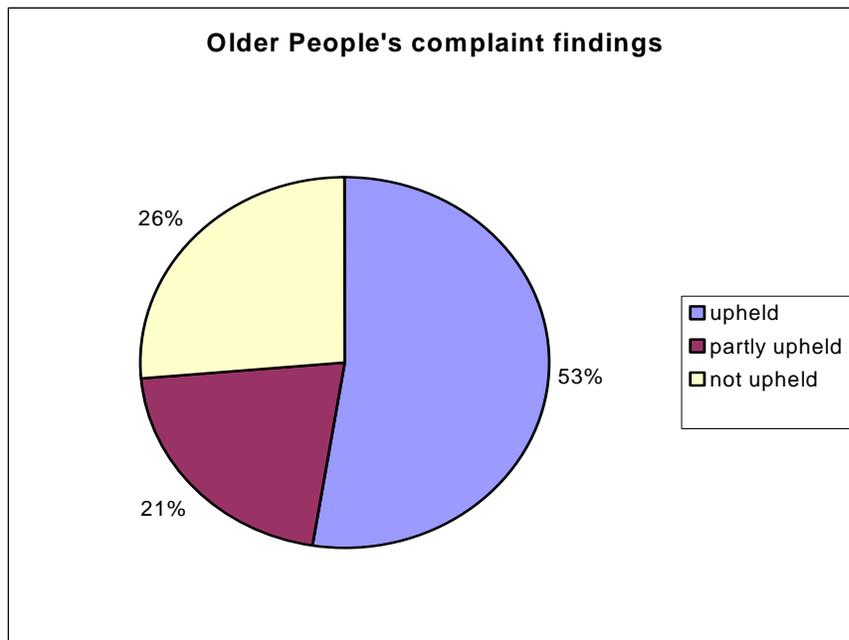
**Fig 4**

Year	Stage One	Stage Two	Stage Three
2006-7	80	4	0
2007-8	41	4	2

There has been an increase in complaints that have been investigated at stage two of the procedure and again in those that have been subject to Review Panel. Complaints dealt with at stages two & three have in the main concerned disputes about the nature of services that have been provided and have been from family or carers who have been concerned to make changes to service provision.

### **Older People's Service**

**Fig 5**



Just over three quarters of the complaints received in older peoples services were upheld in full or in part and around a quarter were found to be unsubstantiated.

The table below illustrates the complaints we have received against the Older People's Service outcomes. Some complaints relate to more than

one outcome area and so these figures are higher than the actual number of complaints.

**Fig 6**

<b>OUTCOME</b>	<b>COMPLAINTS</b>
Safe	10
Healthy	1
Independent	9
In control	2
Respected	3
Included	4
Confident in the future	

**Fig 7**

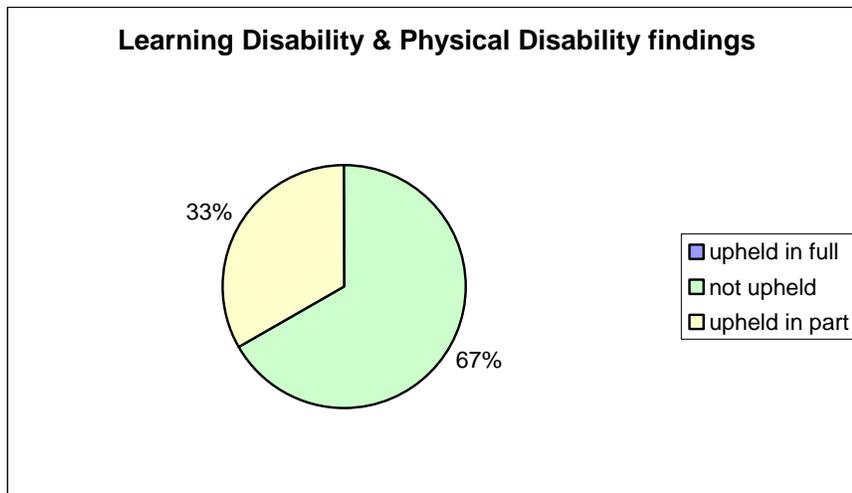
<b>Issues Raised</b>	<b>Number</b>
Inappropriate service	3
Service not provided	1
Charges for service	4
Service quality	7
Attitude & approach	1
Information & consultation	7

In response to these complaints we were able to:

- Put requested service in place
- Reimburse wrongly applied charges
- Risk assess &, where necessary, replace equipment
- Revise system of making temporary changes to rota's to ensure these changes are tracked effectively

- Require a review of procedures to ensure that relatives & carers are properly informed and included in decision making about service provision.
- Undertake a project around public information to make sure that it answers the needs of service users/relatives & carers in offering accurate information about our services & processes.
- Review and revise system of payment for respite care to ensure that it is robust and that payments can be tracked.
- Review charging processes to ensure that it is prompt and clear.

**Fig 8**



Around two thirds of complaints about physical and learning disability services were not upheld, the remainder were upheld in part and, as can be seen, no complaints about these services were upheld in full.

**Fig 9**

**Learning Disability Service**

OUTCOME	COMPLAINTS
Supporting family carers	1
Choice & control	2
Fulfilling Lives	1
Housing	1

### Physical Disability Service

OUTCOME	COMPLAINTS
Independent	
Safe	2

### Learning & Physical Disability Services

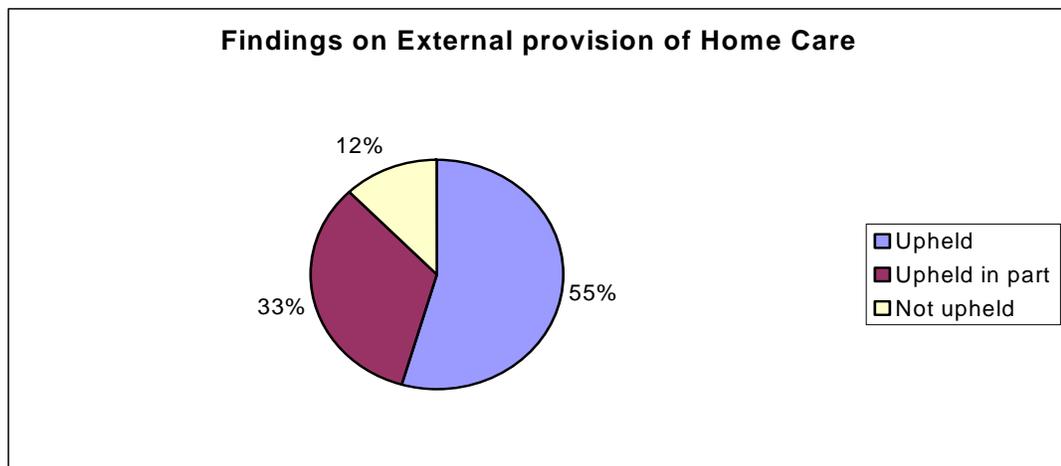
ISSUE	COMPLAINTS
Service delivered/not delivered	3
Service quality	2
Attitude & approach	
Information & consultation	3

In response to the above we were able to:

- Work to put a requested service in place
- Give an explanation of decisions made
- Develop protocols around lines of responsibility and communication.
- Change admissions procedures for respite care to ensure improved monitoring of residents wellbeing during their stay.

### External provision of home care

Fig 10



The majority of complaints about externally provided home care have been upheld at least in part. This higher proportion of upheld complaints reflects the nature of concerns expressed, which are often prompted by an event such as the home carer being late or that certain tasks have not been carried out correctly.

**Fig11**

ISSUE	NUMBER
Missed calls	3
Timeliness of calls	3
Quality of service	3
Not following correct process	3
Information/communication	1
Attitude/approach	2

In response to the above complaints we were able to:

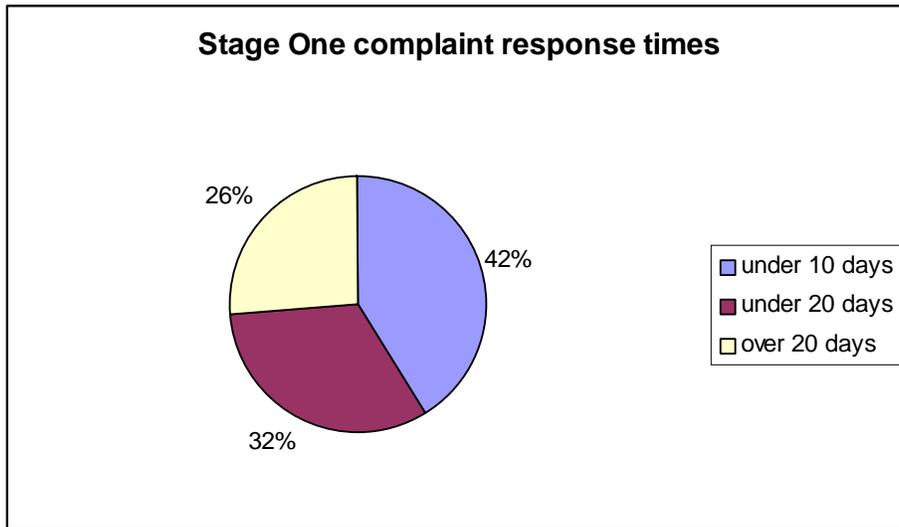
- Provide staff training in relation to specific issues raised in complaints e.g medication procedures, call monitoring procedure.
- Introduce improved mechanisms for staff supervision
- Ensure close monitoring of some contracts
- Change of procedures to ensure that handover's from one provider to another are handled properly and that the new agency has good information about the service required.
- Amending rota's to ensure consistency of care workers
- Revise procedures to ensure that amendments to care plans were correctly recorded and acted on.

### **The Procedure**

This year is the first full years operation of the revised complaints procedures introduced in September 2006. Under these new procedures timescales at stage one were changed, allowing ten working days, up to twenty, for a response.

The following diagrams illustrate the percentage of complaint that were dealt with at stage one within the new timescales. .

**Fig 12**



Almost three quarters of complaints were responded to in less than twenty working days and of the remainder half were dealt with just outside the twenty day period and extensions were sought in others.

### **Training**

We continue to offer complaints training as part of the core training programme in Adults Services, training is targeted at three levels, front line staff, staff responding to complaints at the first stage and for those who complaints at stage 2. Staff training is an important feature in ensuring that our services feel confident in the process and recognise the value of dealing with complaints in an open and positive way.

### **Helping service users to complaint**

We want to make our complaints procedure as accessible as possible and training our staff as above is key in this. We also make sure that information about the procedure is readily available in our leaflets, which are handed to all service users at the start of any service. Service users are also asked at review if they are aware of the procedure. Complaints can be taken at any point of contact, by any member of staff, and electronically via e.mail or the council's website.

### **Learning from Complaints**

It is important that we address complaints in a way that will reach resolution for the complainant but it is equally important that we look at what this tells us about the delivery of our services in terms of their quality and appropriateness. We have to make sure that whenever it is indicated that improvements need to be made that those improvements are clearly

identified and implemented. Such areas for development are reported to adults services SMT through the Learning from Experience group.

### **Investigations**

We have had a small increase in complaints that have not been resolved at the first stage and so have progressed to investigation. These complaints have been investigated by investigating officers who are independent of the Local Authority. This gives complainants additional reassurance about the independent and objective nature of the investigation into their complaint. Independent Persons have also made an important contribution to the consideration of complaints in the two panel reviews that have been held this year.

### **Future developments**

The statutory complaints procedures for adults social care services are again under national review with a view to aligning them with procedures that apply within the National Health Service. As these two organisations work increasingly closely it is felt that a single complaints process will lead to more effective, straightforward and person centred complaint handling. It is anticipated that these new procedures will come into force on 1 April 2009