



Adult Social Care

Complaints, Compliments and Comments Annual Report

01st April 2019 - 31st March 2020

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1. Introduction

- 1.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 require all councils with social care responsibilities to produce an annual report on the operation of the complaints procedure.
- 1.2 The Department of Health policy guidance requires that this report should include a summary statistical analysis and review of the effectiveness of the adult social care complaints procedure. It does not include complaint information relating to statutory children's social care, wider council services or any partner NHS agency.
- 1.3 The report is written and is made available for:
 - staff,
 - management,
 - the relevant Scrutiny Committee,
 - Care Quality Commission,
 - Healthwatch Gloucestershire, and;
 - the general public.

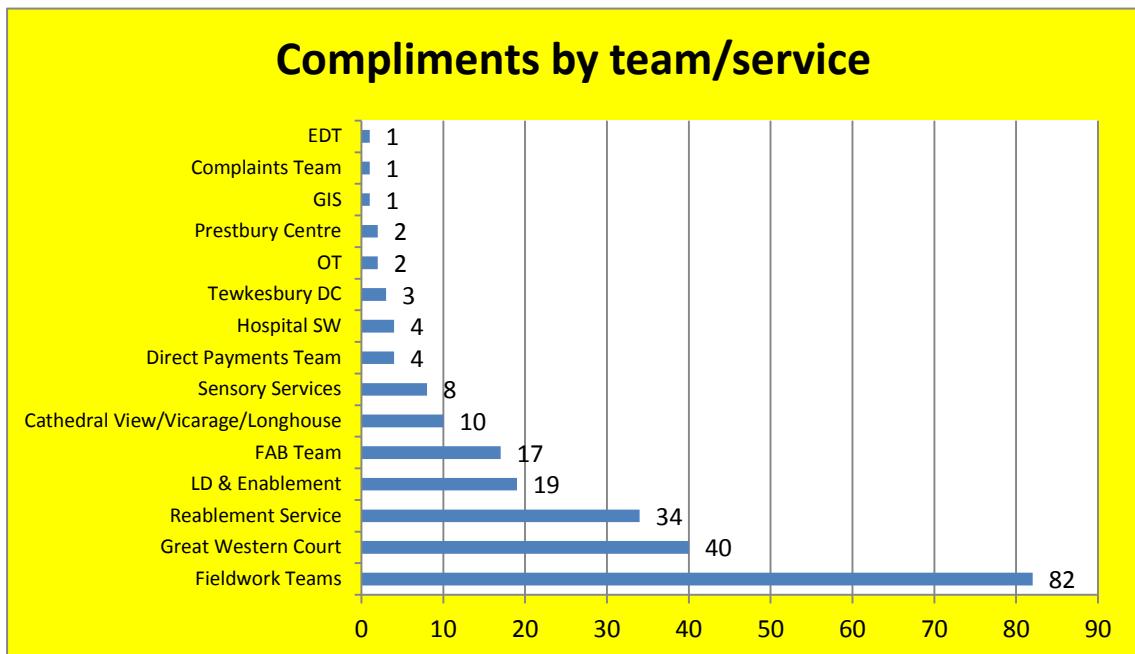
2. Summary of Activity

- 2.1 Key findings:
 - 138 adult social care complaints were received by the council.
 - All complaints were investigated and resolved internally without the need to commission external investigators.
 - Adult care received 228 compliments covering all service areas.
 - 19 complaints were referred to the Local Government and Social Care Ombudsman's Office (LG&SCO). Further detail can be seen on page 10.

3. Compliments Activity

- 3.1 This section looks at the positive feedback received. Recording compliments enables the adult care service to recognise the positive comments made about services and staff alike and it provides an opportunity for senior managers to congratulate staff where appropriate to do so.
- 3.2 There were 228 compliments recorded by adult care (table 3.3). This is an increase to the previous year when 140 compliments were received. This increase is as a result of teams proactively sending in their positive feedback centrally for recording.

3.3



3.4 The majority of compliments received about staff are related to their professionalism, the information and advice they gave and their pleasant, professional and friendly outlook. Many people also commented on how supportive staff were in a time of crisis for their family member.

4. Complaints Activity

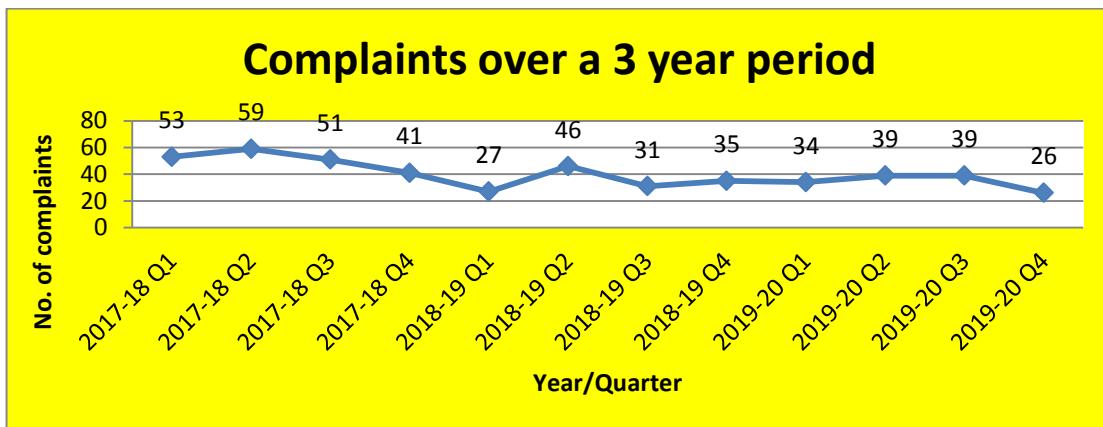
4.1 In complying with legislative requirements - the arrangements comprise of two stages:

- Local Resolution which is the responsibility of the Local Authority, and,
- recourse to the LG&SCO. (Point 5)

Trends

4.2 138 adult social care complaints were received by the council of which 18% were upheld. This number is similar to the previous year, when a total of 139 complaints were received, of which 15% were upheld. Formal complaints remain relatively low as a lot of effort is placed on resolving issues without recourse to the formal complaints procedure.

4.3



4.4 Of the 138 recorded:

- 18% were upheld
- 51% were not upheld
- 30% were partially upheld
- 1% was withdrawn after the complaint was made

A further 19 contacts from customers were received by the complaint service but were then passed to other agencies as they were not the responsibility of the council.

4.5 Within the regulations the only prescribed timescale is that of the requirement to acknowledge a complaint within 3 working days of receipt. The percentage of complaints received which were acknowledged within 3 working days was 86%. Some complaints are received elsewhere within the council other than the Complaints team and this can cause a delay in acknowledging.

4.6 Of the 138 complaints received, 71% were responded to within 20 working days which is the target for responses in line with policy. The reasons for this percentage can be attributed to the complexity of the case and waiting for information from external providers.

Analysis of Complaints

4.7 The following section looks at complaints related to Adult Social Care (ASC) Teams and then separately summarises all other complaints within the remit of adult care services.

Adult Social Care Locality Team Complaints

4.8 This section provides a summary of the complaints received by each of the 6 Locality Teams in the county.

4.9 There were a total of 63 complaints recorded for the year (72 in the previous year). It should be noted that the total number of formal complaints that are dealt within the ASC teams is very low in comparison to the number of contacts received and the number of active cases each locality holds. The number of active cases on average throughout last year for all localities was 7,629 (cases that are being funded or are open to ASC for further input). When compared to the total number of complaints received of 63, this identifies that only 0.83% of customers involved with Adult Social Care have felt the need to formally complain about the service.

Breakdown

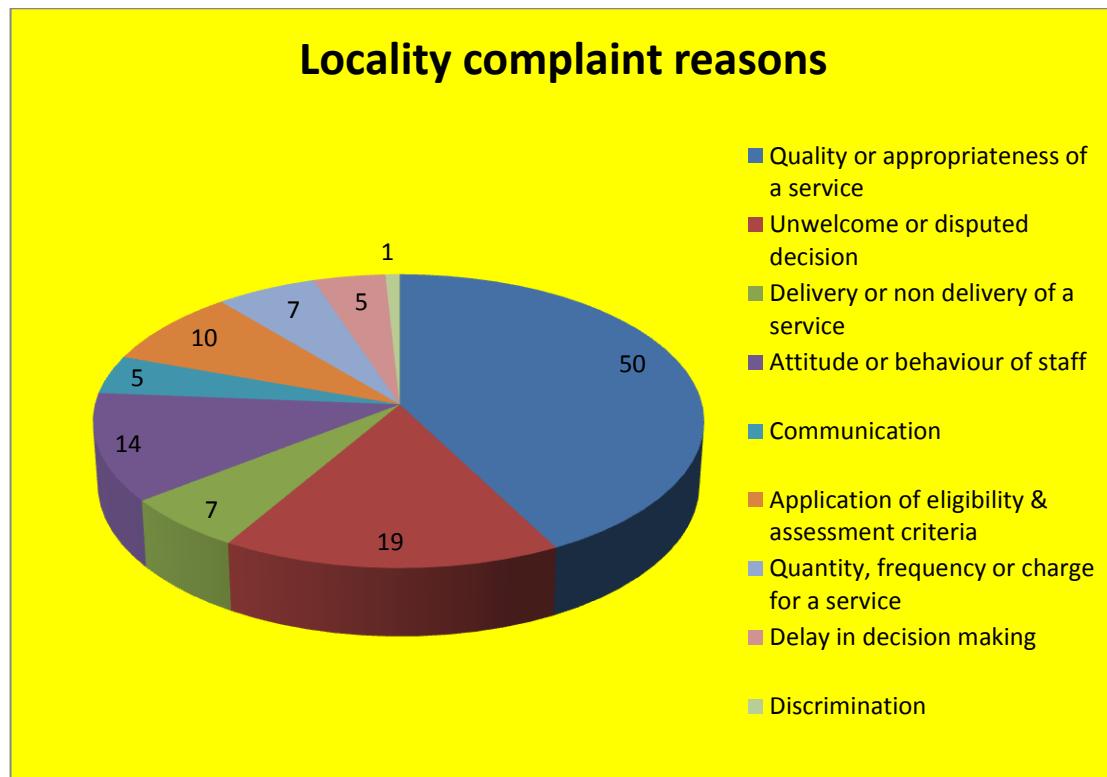
4.10



4.11 Positively the Gloucester locality reduced the number of complaints it received by nearly half compared the previous year (25 in 2018/19), this seems to be as a result of a consistent management structure in the locality compared to previous years.

Reasons for complaint

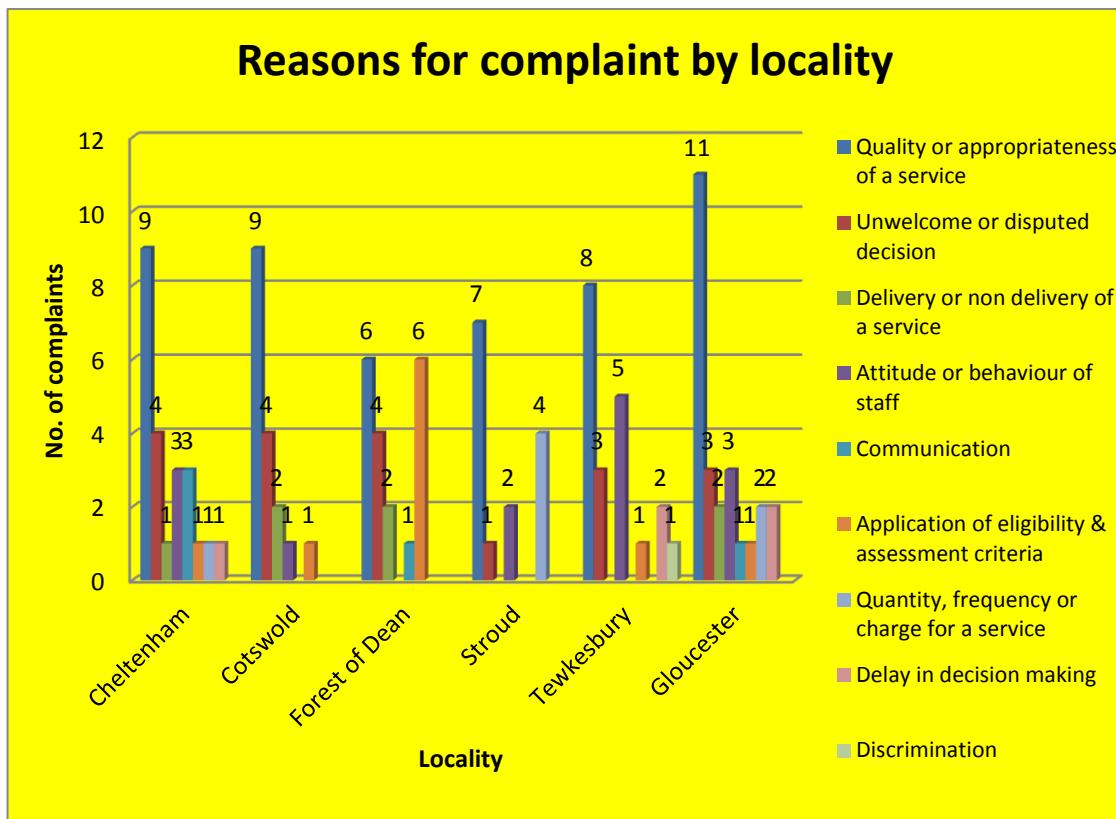
4.12 Many of the individual complaints that are received include more than one area of concern and the chart below outlines the main reasons for the 63 complaints received in the year across the 6 localities.



The main areas of concern raised relate to the quality of service from the locality teams (delay in allocating a worker, continuity of staff, quality of assessment) and disputed decisions (mainly the outcome of an assessment and someone's capacity).

Issues raised (within each locality)

4.13



Specific Themes Highlighted by Complaints

4.14 From the analysis of the data the main themes from locality complaints are:

- Delay in responding to requests for assessment when an individual's capital is approaching the threshold for council funding
- Inaccurate assessments
- Family feeling they are not included in decisions and that their views were not taken into account
- Differences of opinion between family and professionals on an individual's capacity to make decisions on their care
- The apparent reduction in support hours and individual budget compared to those previously allocated to the service user following a care assessment, review and support plan

Underpinning many of the above themes, complainant's commented about the lack of communication or that the communication from the council was not clear. Positively, fewer complaints were received than in previous years about individuals not being informed that services are chargeable.

Other Adult Care Service Complaints

4.15 For the Countywide Learning Disability Fieldwork Team there were 14 complaints made relating to the fieldwork service (10 in 2018/19). Issues raised include,

- The accuracy of an assessment x 9 (not upheld x 6, partly upheld x 2, upheld x 1)
- The level of support offered following assessment x 2 (not upheld x 2)
- Lack of communication from the social work team (partly upheld)
- The assessment process took too long and a social worker was not allocated in a timely manner (upheld)
- Family felt they were not listened to regarding the quality of an individual's placement (partly upheld)

4.16 The Finance and Benefits (FAB) Team received 13 complaints in the year (9 in 2018/19). The themes were,

- about the outcome of the assessments (not upheld x 8, partly upheld x 2)
- refusal to apply a property disregard (not upheld)
- family unhappy at having to pay a full charge after they had giving away capital (not upheld)
- the assessment not taking into account a disability related expense (not upheld)

4.17 The Telecare team had 4 complaints about the service (5 in 2018/19).

- The length of time it took from equipment activating until the monitoring centre called to check on the individual (partly upheld)
- Equipment incorrectly set up by engineer x 2 (not upheld x 2).
- Monitoring centre did not follow the correct procedures following a fall activation (not upheld)

4.18 The Blue Badge team received 8 complaints about their service (3 in 2018/19).

- A member of staff was rude on the telephone (upheld and learning actioned for the team)
- Information and communication from the team was substandard (not upheld)
- Despite being informed by family that a person had passed away, some weeks later a blue badge was received (upheld and learning actioned)
- Delay in issuing a blue badge and communication around its progress x 2 (partly upheld x 2)
- Individuals unhappy at decision not to issue a blue badge x 3 (not upheld x 3)

4.19 The Adult Safeguarding team responded to 2 complaints (1 in 2018/19).

- Concerns raised that a safeguarding investigation was inadequate and that the team could not share details with a 3rd party (not upheld)
- The approach taken to a safeguarding referral left the individual feeling accused of wrongdoing (partly upheld)

4.20 The Hospital Social Work team dealt with 5 complaints, the same as in the previous year.

- That a Social Worker provided incorrect advice (upheld)
- That a person was discharged without full consideration for their ongoing care and home situation x 2 (partly upheld x 1, not upheld x 1)
- That there was a lack of communication, with the suggestion that a family were not informed that a service put in place following discharge would be chargeable x 2 (not upheld x 2)

4.21 The Client Affairs team responded to 1 complaint (3 in 2018/19). This involved the belief that a person's inheritance had not been used to their benefit and subsequently then being overpaid Housing Benefit as it had not been declared (partly upheld).

4.22 There were a total of 15 complaints made about externally commissioned services for adults (28 in the previous year), 2 for permanent residential placements (1 x upheld, 1 x partly upheld), 3 for residential respite care (2 x partly upheld, 1 ongoing outstanding due to Covid-19 restrictions) and 9 for domiciliary care services (all partly upheld). All these complaints concerned the quality of the care provided by individual providers. As in previous years the complaints service work closely with the Commissioning Team to try to resolve these issues and to work with the providers to ensure that any actions taken by the agency or home are monitored to minimise repeated complaints and to improve that service.

4.23 The Shared Lives service received 7 complaints from carers on a variety of issues (None in 2018/19). The majority of concerns centred on historic agreements and contracts, these complaints were upheld and as a result many Shared Lives Carers were reimbursed financially for incorrect payments they had received.

Changes to Practice as a Result of Complaints (All Service Areas)

4.24 Many of the actions resulting from complaints involve improving things for individuals. However, some complaints highlight shortfalls in a whole service. On a number of occasions there is individual learning for staff and a small number result in reflective discussions and further training and supervision.

4.25 When it has been identified that we have failed one of our customers and when this has resulted in a financial impact to them, good practice dictates that we apply the principle of restitution. In the last financial year for a small number of complaints we have either reimbursed customers for fees that should not have been applied, waived outstanding debt because of the quality of the service provided, or have compensated customers when standards of service have not been acceptable.

4.26 The following represent the actions taken, or changes to practice implemented that were identified through the complaints procedure in 2019/20.

Locality Teams

- All social care staff in the locality teams were reminded of the importance of accurate and effective communication when explaining the support available
- All staff were reminded about the importance of completing assessments before making decisions on eligibility for care services
- All staff were reminded about making referrals to FAB and other teams or, advising families if this is no longer necessary

Blue Badge

- The team were reminded about using appropriate responses when explaining decisions
- The process for recording information relating to death was reviewed and shared with the team

Commissioned Permanent and Respite Care

- A provider produced a clearer protocol for staff to ensure the safety of residents when visitors arrive
- A provider has retrained its staff on hydration and nutrition protocols
- A provider reviewed its process for itemising and accounting for personal possessions
- A provider ensured it now has a suitable process in place for transferring residents to hospital and advising residents' families
- A provider ensured it has weight charts in place where required and is using this information appropriately
- A provider ensured it has a robust system for noting health appointments and ensuring people attend
- A provider ensured it is taking appropriate action when fluid intake drops

Commissioned Domiciliary Care Agencies

- A provider ensured all carers undertook refresher training in Dementia Awareness and that this subject was added to the agenda for every monthly team meeting
- An agency reminded all carers about the need to accurately record the client engagement undertaken by writing detailed care notes
- An agency reminded all carers to wear their identification badges at all visits and to report any issues encountered with family members as soon as they occur

- A provider ensured all carers undertook training on Recognising the Unwell or a Deteriorating Patient

5. Local Government and Social Care Ombudsman

5.1 If a complainant is dissatisfied with the response to their complaint, the complaint can be referred to the Local Government and Social Care Ombudsman (LG&SCO). The LG&SCO will usually only accept referrals that have previously been considered through the Local Authority's complaint procedure. However under the regulatory reforms, the LG&SCO now has the discretion to investigate if it is considered that there is no benefit in the Local Authority firstly considering the case.

5.2 In 2019/20, the council received 19 referrals from the Local Government & Social Care Ombudsman regarding Adult Social Care, in the previous year it received 10.

5.3 Of the 19 referrals, 10 led to full investigations. The table below sets out the decisions made on each case by the Ombudsman. Of the 3 cases where the Ombudsman has yet to make a final decision, 2 are still being investigated and 1 is still at the assessment stage with Covid-19 delaying these, with the Ombudsman suspending casework for a period of approximately 3 months from April 2020.

LG&SCO Decision received in year ending 31 March 2020				
Closed after initial inquiry	Premature	No fault	Fault/Injustice	No decision made
6	0	5	5	3

5.4 Of the 5 cases that had a finding of fault, the remedies provided by the council were,

- A written apology to an individual for difficulties experienced in having their financial situation reassessed and to write off backdated adjustments to their assessed contribution to their care
- A written apology to an individual for the standard of care they received whilst in a commissioned residential setting and for the council to monitor and review specific processes within the residential setting that led to the fault identified
- A written apology for delaying a care needs assessment, compensation of £500 for the resultant distress caused by the delay, and the council reviewed its assessment paperwork
- A written apology for delaying a care needs assessment, compensation of £2,700 as a symbolic payment to acknowledge the time an individual was left without support due to the delay in completing their assessment
- A written apology for failing to apply a 12 week property disregard, compensation of £2,700 as a symbolic payment to acknowledge the time an individual was left without support due to the delay in completing their assessment. Adult Care staff were also reminded about the importance of completing assessments before making eligibility decisions and about making referrals for a financial assessment in a timely way.

6.0 Comments and Member of Parliament contacts

- 6.1 In addition to managing the statutory complaints procedure and administrating the compliments process the Complaints Team also deal with a number of other letters and contacts which are usually classed as comments. These contacts are usually concerns or requests for information that can be dealt with without recourse to the formal complaints procedure. In most cases these are dealt with within 1-2 working days of receipt.
- 6.2 In the reporting period there were 177 comments dealt with by the team. Of these 11 were made via MP's offices around the county.

7. Summary

- 7.1 The Complaints Team received in total 315 contacts (177 comments and 138 complaints relating to customer's dissatisfaction with the council's Adult Social Care Service, all with varying degrees of complexity. 19 cases were referred to the LG&SCO where, in only 5 cases, the LG&SCO found fault. These figures suggest that the Adult Care Service is in a strong position when dealing with customer complaints and comments.
- 7.2 To support the Adult Social Care Complaint process there is 1 full time Complaints and Compliments Coordinator and 1 full time Complaints Manager who also has dual responsibility for managing the Corporate Complaints process.

Colin Davies
Complaints Manager

Gary Liddington
Complaints and Compliments Coordinator

September 2020