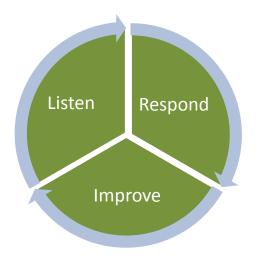


Hertfordshire County Council

Annual Compliments & Complaints Report

Adult Care Services

1st April 2016 – 31st March 2017



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1. Purpose and Summary of Report

- 1.1 To report on the numbers, themes and learning points arising from complaints received in respect of Adult Care Services (ACS), between 1st April 2016 and 31st March 2017.
- 1.2 To meet the requirements of the <u>Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 ("The Complaints Regulations")</u> for Councils with Statutory Social Services responsibilities to produce a Public Annual Complaints Report.
- 1.3 This report provides analysis and commentary for ACS on all complaints managed under the <u>Statutory Complaints Procedure</u> or the <u>Corporate</u> Complaints Procedure
- 1.4 The main objective of the Complaints Team is to ensure that service users' complaints are handled appropriately and to ensure that ACS resolves them wherever possible. In addition to this, the Complaints Manager and Complaints Officer highlight key trends that emerge each year and any recommendations that would improve how the department operates. The Adult Care Services Department retains overall responsibility for implementing any such improvements, with assistance from the Complaints Team.

2. Key Statistical Summary (Figures in brackets refer to the previous year)

- Number of Compliments recorded increased by 18% to 268 (228).
- Overall complaints increased by 1% to 442 (437).
- 95% (92%) of complaints were acknowledged in time.
- **84%** (87%) of all complaint responses were completed within agreed timeframes **75%** (74%) were responded within 25 working days.
- **44** complaints were dealt with as joint complaints with Health Partners. This represents a decrease of **32**% in relation to the previous year when the number of joint complaints were 65.
- Complaint Findings: **23**% (23%) were Fully Upheld, **17**% (16%) Partially Upheld, **49**% (49%) Not Upheld, **4%** (0) Refused and **4%** (0) Withdrawn. The remaining **3%** (12%) of the complaints were still awaiting response when this report was completed.
- 9 (10) Area Manager Reviews (AMR's) were undertaken.
- 29 (19) LGO enquiries or decisions were received.

2.1 The main themes identified through the complaints process were:

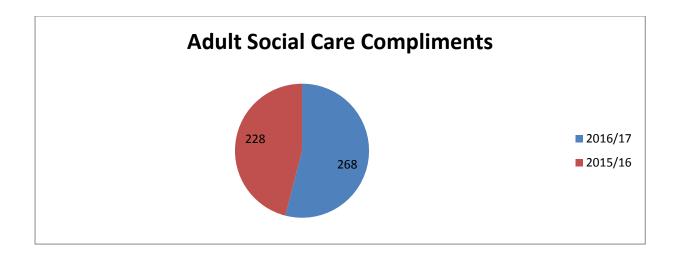
- Communication issues/delays and/ or behaviour staff.
- Dissatisfaction with care plans, assessments or reviews.
- Disputed charging/Cost of service.

3. Background

- 3.1 Statutory social services complaints are defined as expressions of dissatisfaction about social care staff or social services policies and procedures. The current Complaints Regulations were introduced in April 2009. These place a duty on both the Council and NHS partners to coordinate one response if a person's complaint crosses more than one organisation.
- 3.2 The Complaints Regulations also promotes the use of complaint plans for more complex cases, which may require more time to investigate and resolve. Actions and timescales are agreed with the complainant at the start of the process and are completed by designated officers.
- 3.3 All complaints are taken seriously by the Complaints Team on behalf of Adult Care Services, which has robust processes for considering and implementing learning from them.
- 3.4 The Complaints Team promotes complainants' rights to be heard whilst bearing in mind the Local Authority's duty to ensure the effective and proportionate expenditure of public funds.
- 3.5 There is a statutory 12 month time limit on making a complaint to the Local Authority. The Complaints Manager may exercise the discretion to consider a complaint made outside of this time frame on a case by case basis, but this is not guaranteed.
- 3.6 From October 2010 the jurisdiction of the Local Government Ombudsman (LGO) was extended such that the LGO can now consider complaints from self-funding service users about independent care providers. The LGO works closely with the independent regulator of all health and social care services in England, the Care Quality Commission (CQC).
- 3.7 Recurring issues Complaints will not be accepted if they are the same as or substantively the same as complaints that have already been investigated and responded to.
- 3.8 The Complaints Team liaises carefully with:
 - Complainants
 - Advocates
 - Operational Service Managers
 - Health Partners for Joint Complaints
 - The Council's Legal Department
 - Learning and Organisational Development (L&OD) Section

4. Compliments

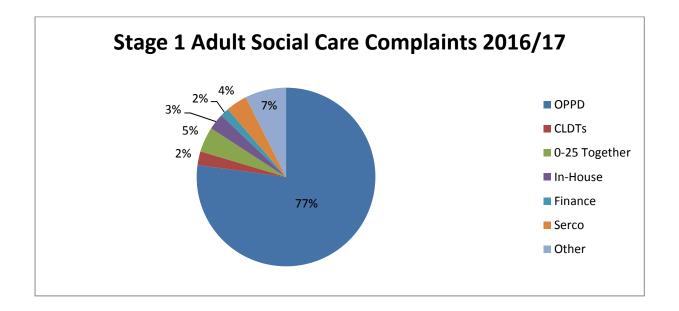
4.1 Service users and external professionals are actively encouraged to register any positive feedback that they have about Children's Services. This forms part of the reporting process to highlight the good work undertaken by officers and teams. Compliments are shared with teams and across the wider department to highlight good practice and appreciation from service users.



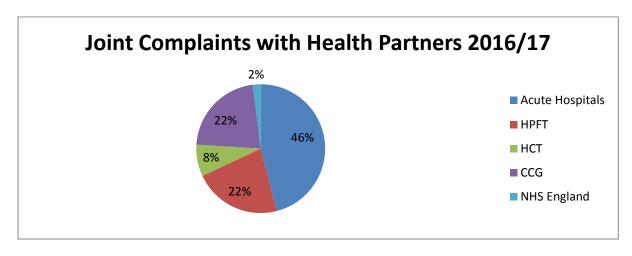
- 4.2 A total of **268** compliments were received in respect of Adult Care Services during 2016-17. This was an increase of 18% on the previous year (2015-16) when a total of 228 compliments were received.
- 4.3 The vast majority of compliments were praise for individual workers and services and how their actions had improved outcomes and prospects for service users.
- 4.4 The main reason for the rise in compliments is increased awareness amongst teams across Adult Care Services of the importance of registering them so that they may be reported and celebrated.

5. Stage 1 Complaints

Services Area	2016-17	2015-16
Older People & Physical Disability (OPPD)	341	324
Community Learning Disabilities (CLDTs)	11	19
0-25 Together (Adults)	20	-
In-House Services	13	16
Finance	7	25
Social Care Access Service (Serco)	17	21
Other (Customer Service, Equipment Service &	33	32
Commissioning)		
Total	442	437



- 5.1 There were a total of **442** complaints received in respect of Adult Care Services. This represents an increase of **1%** from the previous year when **437** complaints were recorded.
- 5.2 The increase in referrals and people receiving services will have an impact, as well as increased media and political focus on standards of care. Focus on access to complaints may also have led to the increase along with improved recording
- 5.3 The number of complaints dealt with as joint with **NHS Partners** totalled **50**, representing a decrease of **23%** from the previous year, when **65** joint complaints were dealt with under the Hertfordshire Joint Protocol. The reduction in the number of complaints is due to the creation of the new integrated discharge team who are better managing low level complaints informally.



Key:

HPFT: Hertfordshire Partnership University NHS Foundation Trust

HCT: Hertfordshire Community NHS Trust **CCG**: Clinical Commissioning Groups

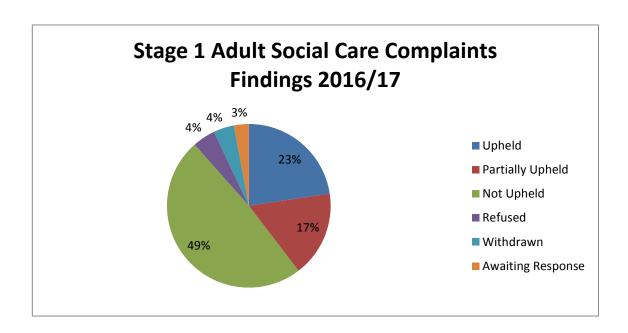
5.4 Joint complaints cover a broad range of issues including:

- Care availability/suitability on discharge from hospital
- Procurement of commissioned services, including home care and respite for service users
- Poor or delayed communications
- Issues relating to charging for services post health interventions

6. Area Manager Reviews (AMR's)

6.1 9 (10) Complaints were escalated on to the Area Manager for review. AMR's is a further stage within the Stage 1 Complaints Process that applies in circumstances where the initial Stage 1 response may not have addressed all of the issues raised. This help resolve complaints as swiftly as possible and to avoid delays at the first point of contact.

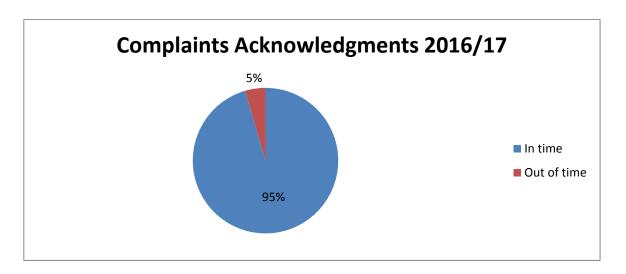
7. Stage 1 Complaints Findings



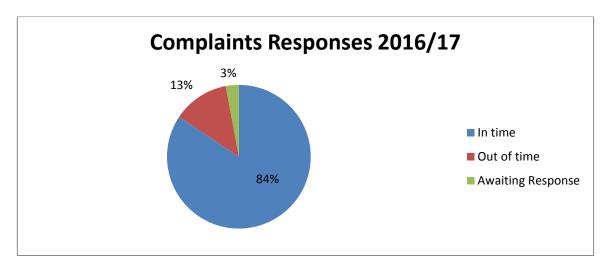
Finding	Number
Upheld	100
Partially Upheld	75
Not Upheld	216
Refused	20
Withdrawn	18
Awaiting response	13

7.1 The reasons for the significant number of complaints being refused was due to a lack of consent from the service user to complain on their behalf and matters that were out of jurisdiction.

7.2 Acknowledgment and Response timescales



7.3 **95%** (92%) of acknowledgements were completed within the 3 working days statutory requirements.



- 7.4 The timescale for resolution of a Complaint as set out in the Best Practice Guidance is 5 weeks (25 working days). However, some complaints, due to their complexity, will have had a complaints plan agreed which often includes a revised timescale for response.
- 7.5 The percentage of complaints responded to within 5 weeks (25 working days/agreed timescales) decreased by 3%, compared to the previous year. This can be explained by an increased number of complex complaints being received.

8. Local Government Ombudsman Complaints and Financial Remedies

LGO's	2016-17	2015-16
Total of enquiries/ decisions received	29	19
Financial remedies paid	£9,163.12	£5,750.00

- 8.1 A total of **29** enquiries or decisions were received from the Local Government Ombudsman. This represents an increase of **53**% compared to the previous year, when **19** enquiries or decisions were received from the LGO.
- 8.2 The main reason for this significant increase is because a greater number of complainants approaching the LGO without having exhausted the Council's complaints procedure first and in a number of these cases the LGO decided to investigate immediately.
- 8.3 Out of the 29 complaints, 6 necessitated a financial remedy in recognition of fault, injustice, distress or time and trouble. These cases saw a total of £9,163.12 being paid out. This is £3,413.12 more than the previous year when the total amount paid out was £5,750.00
- 8.4 All financial remedies paid out during 2016-17 featured LGO involvement
- 8.5 Overall, Local Government Ombudsman findings against the Council have remained low. Accordingly, the complaints processes in Adult Care Services are broadly robust and fair

9. Independent Care Providers - Compliments, Concerns and Complaints

Summary of Records for Independent Care Providers				
Records	2016-17	2015-16		
Homecare concerns	77	172		
Homecare complaints	889	1363		
Homecare compliments	96	39		
Residential complaints	12	21		

9.1 Homecare complaints have decreased by 35%, compared to the previous year. This is because care providers are encouraged to resolve concerns at the first point of contact before they are escalated to the local authority.

- The close monitoring and auditing of the providers by the commissioning teams is also preventing escalations.
- 9.2 The number of compliments recorded in 2016-17 is more double than in relation to the previous year.
- 9.3 Independent Care Providers are required to consider and respond to complaints using their own complaints procedure, under the Care Standards Act 2000. The Council must be satisfied that the provider responds to complaints promptly and appropriately. If the service users are dissatisfied with the care provider's response, then they may approach the Council for further advice and review.

10. Learning points arising from Adult Care Services Complaints & actions to improve services

- 10.1 The learning points identified below have already been discussed with individual officers, within Team meetings. This is also part of the staff complaints training delivered by the Complaints Manager (CM) across ACS, covering the complaints process and letter writing guidance.
- 10.2 The CM meets quarterly with the Learning and Development Manager to discuss trends in complaints so that training can be identified to meet the needs highlighted through complaints.
- 10.3 Quarterly reports are produced in addition to the annual report to look at trends and identify learning to avoid repeat complaints. These reports are discussed and presented to Senior Board.
- 10.4 Learning Action plans have been developed by the Complaints Manager and implemented on all LGO cases where fault has been found. This will ensure learning is followed through with evidence

Communication issues/delays and/or behaviour of staff: Lack of clarity and contact not being made either when promised or in a timely way.





- Officers reminded to follow through agreed actions in a timely manner and to only agree actions that are reasonable.
- Process implemented to inform Service Users when key staff are away.
- Staff to adhere to customer service standards in respect of response timescales.
- Issues addressed in 1:1 meetings as well as team meetings to ensure that learning is undertaken.

Assessments/Reports Issues: Records not being made or updated correctly.





- Individual training and/or performance measures have been put into place where errors have occurred.
- Issues addressed in 1:1 meetings as well as team meetings.

Disputed charging/Cost of Service: Incorrect advice given; charging errors.





- Check list produced to ensure invoices processed correctly.
- Review property disregard eligibility cases.
- Review charging process.
- The funding position in respect of care provision must be made clear.
- A checklist for care staff to refer for financial issues is being piloted.

11. Complaints Developments in 2016/17

11.1 Review of the Adult Care Services Statutory Complaints Process.

- 11.2 Staff training provided to staff.
- 11.3 Health & Communities department name changed to Adult Care Services.
- 11.4 Call over meetings with Senior Officers to discuss complex complaints management.
- 11.5 Quarterly reports produced and presented to Senior Board to look at trends and learning.

12. Future Complaints Developments for 2017-18

- 12.1 Staff training to be provided to all ACS Staff at all levels. Training to include learning from complaints and good letter writing techniques. To include reminder to staff to record compliments.
- 12.2 Review of the Adult Care Services Statutory Complaints Process.
- 12.3 Review of call over meetings to include discussion of all data to identify trends and learning from complaints.
- 12.4 Quarterly reports to be reviewed and presented to Senior Board.
- 12.5 Review of ACS complaints database to improve recording.
- 12.6 Develop an overview process to ensure better management of complaints within individual services.
- 12.7 Continue to promote alternative dispute resolution, notably to complainants seeking escalation.

Link to overview of ACS Complaints Procedure: Factsheet Have your say