REPORT FOR: PERFORMANCE AND FINANCE SCRUTINY

SUB-COMMITTEE

Date of Meeting: 12 September 2012

Subject: Adults Services complaints Annual

Report (social care only) 2011-12

Responsible Officer: Paul Najsarek, Corporate Director,

Adults and Housing

Scrutiny Lead Councillor Vina Mithani, Performance

Member area: Lead Member for Health

Councillor Krishna James, Policy Lead

Member For Health

Exempt: No

Enclosures: Appendix – Annual Report for Adults

and Social Care Services Complaints

for period 2011-12

Section 1 – Summary and Recommendations

This report sets out the statutory Adults Services complaints Annual report (social care only) 2011-12.

Recommendations: None. For Information purposes only.



Section 2 – Report

Financial Implications

There are no specific budget issues associated with this report. All compensation payments are agreed by Service Managers and are funded within existing budgets.

Performance Issues

There are no Adults performance indicators in the Department of Health's outcomes framework concerning complaints that has replaced the old CQC framework.

However, survey indicators of satisfaction, control etc. are now a key part of the national measures, and may be impacted if the level of complaints changes significantly.

Environmental Impact

N/A

Risk Management Implications

Risk included on Directorate risk register? No

Separate risk register in place? No

Corporate Priorities

Please identify which corporate priority the report incorporates and how:

- Keeping neighbourhoods clean, green and safe
- United and involved communities: a Council that listens and leads
- Supporting and protecting people who are most in need
- Supporting our Town Centre, our local shopping centres and businesses

Section 3 - Statutory Officer Clearance

The Corporate Director determined the report did not require Financial or Legal clearance.

Section 4 - Contact Details and Background Papers

Contact: Report author: Stuart Dalton, Service Manager, Adults & Children's Complaints, 020 8424 1927

Background Papers: None

APPENDIX

ANNUAL REPORT for Adults Social Care Services Complaints for period 2011-12

<u>Paragraph</u>	<u>Contents</u>	<u>Page</u>
1	Executive summary	4
2	Summary of Activity	4
3	Recommendations from the last annual report	6
4	Focus for next year	7
5	Stage 1 Complaints	8
6	Equalities information	13
7	Stage 2 Complaints	15
8	Commissioned Services complaints	18
9	Stage 3 Complaints	22
10	Ombudsman Complaints & Enquiries	23
11	Escalation comparison over time	23
12	Compensation Payments	23
13	Mediation	24
14	Advocacy	25
15	Joint NHS and social care complaints	25
16	Learning the Lessons/Practice Improvements	25
17	Compliments	26
18	The complaints process explained	26

3

1. EXECUTIVE SUMMARY

The October 2010 restructure to a reablement model has not seen a significant change in complaint levels or escalations. If anything escalations and serious complaints are currently lower than the structure before October 2010.

Whilst the second half of the year saw impressively low escalations or serious complaints which is positive going forward, there were a number of complaints in the first half of the year, including 2 local settlements with the Ombudsman, that justified significant compensation payments.

Response times to complaints are healthy and there have been some significant changes made as a result of the learning identified from complaints. The largest area of learning related to Safeguarding practice, which is making huge strides in improving and embedding safeguarding standards. Audit of completion of agreed actions indicates virtually all agreed actions are being completed. Outstanding actions are highlighted to senior management.

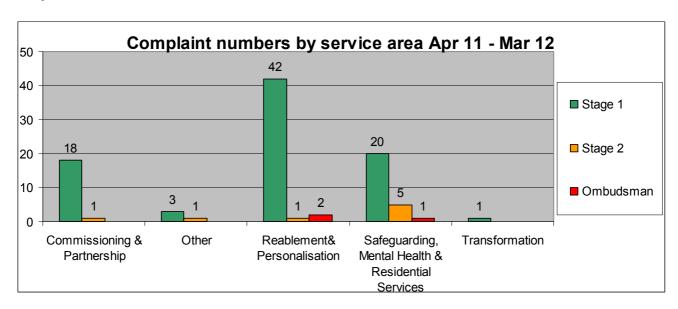
The introduction of the Fairer Charging Policy has seen an increase in policy complaints as would be anticipated. It also remains prudent to anticipate more complaints in 2012-13 in relation to the Fairer Charging Policy.

All 5 of the stage 2 Safeguarding, Mental Health & Residential Services complaints were upheld or partially upheld. Lessons were learnt and training has been offered to managers to ensure legitimate concerns are fairly identified.

2. Summary of Activity

Between 1 April 2011 and 31 March 2012 we received 84 Stage 1 complaints. 8 complaints progressed to Stage 2. There were no stage 3's. The Complaints Service dealt with 88 potential complaints that that were addressed without a Stage 1 needed.

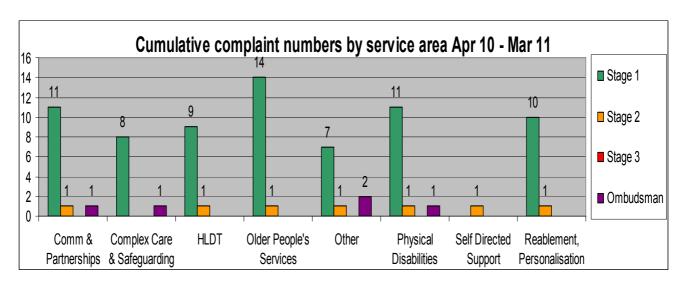
The Ombudsman reviewed 3 new complaints during this period, none of which were upheld. However, there were 2 local settlements relating to complaints that went to the Ombudsman the year before.



Analysis: All service areas deserve recognition for the hard work and good practice to achieve the current low levels of escalations. Whilst Reablement and Personalisation continue to receive the most stage 1's, these are not currently escalating any further. Only 1 stage 1 escalating to stage 2 is exceptional given the high volume of referrals they deal with.

Whilst 3 cases went to the Ombudsman, 5 potential Ombudsman cases were resolved internally following some excellent work by staff.

2.1 Comparison with the year before



Analysis: Given the Directorate has been restructured in October 2010, direct comparison is not possible. However, overall for the Directorate, the number of escalations and Ombudsman cases is similar and possibly slightly lower.

2.2 Numbers of complaints over time

	Potential	Stage 1	Stage 2	Stage 3	Councillor	MP
2011-12	88	84	8	0	31	11
2010-11		70	7	0		
2009-10 (new		75	6	2		
regulations)						
2008-09		66	5	1		
2007-08 (letter-		73	10	2		
vetting and						
mediations)						
2006-07 (letter-		118	10	2		
vetting and						
mediations)						
2005-06 (pre-letter		76	5	0		
vetting; post-						
mediation)						
2004-05 (pre-		81	12	1		
mediation)						
2003-04 (pre-		90	13	1		
mediation)						

Analysis: The trend of improved escalation rates between stages 1 and 2 continues. The escalation rate from Stage 1 to Stage 2 dropped from 15% between 2003-05 to 9% between 2005-12.

Both stage 1 and stage 2 complaints numbers are healthy and do not indicate any concerns.

3. Outcomes for key targets in 2011-12

- To obtain from managers confirmation that all agreed actions from complaints are carried out. To carry out a sample audit to verify the actions have been completed and provide an exceptions reports to the Quality Assurance Learning Board. <u>Outcome</u>: Achieved.
- To maintain a healthy level of Stage 1 complaints (e.g. over 70). Outcome: Achieved.
- Improving Commissioned Services stage 1 complaint response times <u>Outcome</u>: Partially achieved. 100% in quarter 4.
- To focus on timescale achievement, embedding timescale leads for Directorates and highlighting stage 1 complaint responses over 25 working days to senior managers. If agreed, adjusting timescales <u>Outcome</u>: Achieved.
- Re: Ombudsman local settlement case: A review with the staff who carried out the assessments to identify why discrepancies occurred and what can be learnt to prevent it happening again. Outcome: Achieved
- Complaints Manager to raise with operational managers whether the opportunity to resolve complaints via mediation could be utilised more. <u>Outcome</u>: Achieved.
- Remind staff of the need to pass to the Complaints Service all complaints and alert us to potential complaints. <u>Outcome:</u> Achieved.
- To extend quality assurance audit to stage 2's and mediations and embed stage 1
 quality assurance. <u>Outcome</u>: Partially achieved. It remains a target.
- To hold regular complaint surgeries for key services at their offices (this helps ensure all complaints are identified and treated as complaints, offers staff strategies in resolving complaints, identifies training needs and local intelligence on trends etc)

 Outcome: Partially achieved. It remains a target.
- Care management and reablement agencies to identify a strategy to re-educate client expectations that the Reablement service is not commissioned on blocks of time but is a more flexible approach. <u>Outcome</u>: See Commissioning for progress
- Timescales for domiciliary care responses by the contractor will be reported on in the next annual report. <u>Outcome:</u> Achieved
- To ensure that the Complaints Service sees all complaints and complaints responses for both residential and domiciliary care, even if the service user is happy for the contractor to provide the response. <u>Outcome</u>: Partially achieved. See Focus for 2012/13 for actions regarding residential homes.
- Targeted investigation training. The Complaints Service was asked to postpone investigation training due to work pressures but this will happen in 2011-12. <u>Outcome:</u> Achieved.

4. Focus for 2012/13:

- Report back on whether Commissioning service timescale improvement has been sustained.
- The Complaints Manager to bench-mark the numbers of residential (care home) provider complaints made to other comparable Councils to ascertain if reporting to Harrow is low or if it is the nature of care homes that complaint rates are low.
- All residential care home service users or next of kin are written to explaining their right of complaint to the Council.
- To explore uniform minimum residential care home provider complaint reporting requirements across West London Alliance.
- To explore advocacy accessibility in residential care homes.
- For the Complaints Manager to attend a monitoring meeting at a residential home to see first-hand recording of complaints and feedback and see how the complaints process is being advertised and made accessible.
- To continue to target investigation training for managers where complaints have been upheld at stage 2.
- To continue to work with reablement provider agencies to improve their response timescales.
- Analysis of delay in responding to service user complaints to be carried out with the Head of Service reviewing these complaints.
- Safeguarding, Mental Health & Residential Head of Service review the cases that have escalated to see if there is any learning. In particular, if any improvements can be identified to complaint resolution at stage 1.

5. Stage 1 Complaints

	Commissioning & Partnerships	Reablement, Personalisation	Safeguarding, Mental Health & Residential	Transformation	Other	Total 11/12	
Complaints	18	42	20	1	3	84	

Note: Due to structure changes comparison cannot be made for most areas with previous years. Next year's data will be more informative for cross-comparison.

<u>Key message:</u> Councils that capture high levels of complaints invariably achieve high Star ratings as it demonstrates a willingness to hear concerns, address them and improve services as a result of them. Whereas Council's that capture lower levels of Stage 1 complaints tend to get lower star ratings. [Source: Jerry White, Local Government Ombudsman & Steve Carney, Head of Complaints, CSCI 2007]

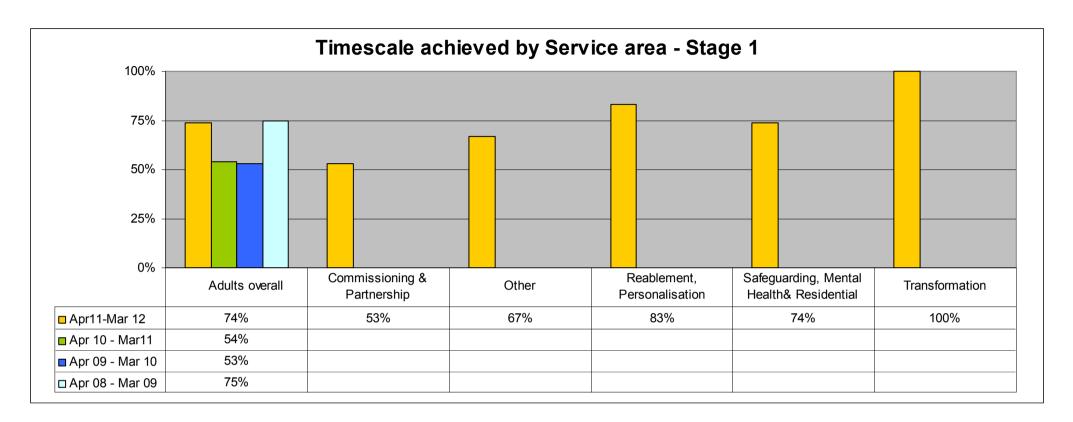
Analysis: The most significant point is the re-structure has not seen a notable change in complaint numbers.

Reablement and Personalisation receive the highest numbers of stage 1's (42) but low escalation rates (1 stage 2) which is very positive. Only 1 in 42 complaints escalating to stage 2 is an notable achievement.

Safeguarding, Mental Health & Residential received a healthy 20 complaints too.

Ensuring all Commissioned service complaints are captured was made a key target after only 1 was captured in 2007-08. This year 18 were captured (11 last year). This is positive in the context there was only one stage 2 complaint.

5.1 Stage 1 response times



Analysis The introduction of timescale leads within the Complaints Service has improved timescales for both Adults and Children's complaints with the Directorate achieving 74% after 54% the year before.

Reablement & Personalisation as well as Safeguarding, Mental Health & Residential services are both achieving a healthy compliance of 83% and 74% respectively.

Efforts to improve Commissioning timescales are starting to bear fruit. The complexity of multi-agency responses can make it harder for Commissioning and Partnerships to respond within timescale. The Complaints Manager met and agreed an action plan with Commissioning managers and delivered a presentation to providers emphasising the importance of timescale delivery. In the last quarter of the year Commissioning achieved 100% for timescales.

Key action: Report next year on whether Commissioning timescale improvement has been sustained.

5.2 Nature of complaint 2011/12

Type of Complaint	Safeguarding, Mental Health & Residential Services	Commissioni ng & Partnership	Other	Reablement & Personalisation	Transfor mation	Adults overall 2011-12	Adults overall 2010-11	Adults overall 2009-10
Breach of confidentiality			1			1	0	0
Delay / failure in taking action or replying	8	6		11		25	17	24
Loss or damage to property			1	1		2	3	1
Policy / legal / financial decision	2	4		17		23	2	5
Quality of Service delivery (standards)	4	8		1	1	14	15	14
Level of Service (e.g. opening times)						0	1	1
Refusal to provide a service	1			5		6	10	11
Staff conduct * attitude / behaviour	1		1	1		3	5	4
Failure to follow policy or procedures				3		3	2	2
Change to an individual's service - withdrawal/reduction	2			1		3	10	2
Communication - Failure to keep informed / consult	2			2		4	4	9
Discrimination by a Service						0	1	2
Staff conduct - attitude / behaviour						0	5	4
Total	20	18	3	42	1	84	70	75

Analysis: 39 of the 84 complaints relate to delay or quality of service but these numbers remain consistent with previous years.

The most noticeable increase was 23 policy/financial decision complaints (compared to 2 and 5 in previous years). Any policy change of the level of the Fairer Charges policy would ordinarily see an increase in policy complaints. There have been no adverse Ombudsman findings in relation to the policy.

Other noticeable changes include there were no staff conduct complaints (compared to 5 and 4 in previous years); a reduction in refusal to provide a service complaints (6 compared to 10 and 11 in previous years) and reduction in withdrawal/reduction on service (3 compared to 10 the previous year).

8 of Safeguarding, Mental Health & Residential's 20 complaints related to delays.

Delay and quality are always the 2 main reasons for commissioning complaints because of the nature of their duties.

On a positive note, there were no discrimination complaints this year.

Key action: Analysis of delay in responding to service user complaints to be carried out with the Head of Service reviewing these complaints.

5.3 Complaints upheld

Service	Not Upheld	Partially Upheld	Upheld	Withdrawn	Total
Safeguarding, Mental Health & Residential Services	7	8	4	1	20
Commissioning & Partnership	1	2	13	1	17
Other	1		2		3
Reablement & Personalisation	16	8	16	1	41
Transformation			1		1
Total 2011-12	25 (30.5%)	18 (22%)	36 (44%)	3 (3.5%)	82
2010-11 comparison	21 (30%)	17 (24.5%)	30 (43%)	1 (1.5%)	70
2009-10 comparison	17 (22.5%)	17 (22.5%)	41 (55%)	0	75

Analysis: All services make mistakes and it is the mark of a healthy complaints system that a proportion of complaints are upheld at stage 1.

The nature of commissioning complaints (delay and quality of service) means it is usual for the majority to be upheld.

Key message: Some of the complaints at Stage 1 involved errors but were resolved through excellent Stage 1 investigation and working sensitively with complainants/families.

6. Equalities Information – Service Users

6.1 Stage 1

Gender of Service User

	11-12	10-11	09-10	08-09	07-08
MALE	35	29	33	28	28
FEMALE	49	39	42	37	41
UNKNOWN	0	2	0	1	4

Analysis: No concerns identified.

Ethnic Origin of Service User

	11-12	10-11	09-10	08-09	07-08
White/British	47	42	48	39	47
Black British	5	4	2	1	1
Asian British	24	15	12	12	13
White Other	6	2	3	1	4
Other ethnic group	2	3	1	0	0
Unknown	0	4	9	13	8

Ethnicity of all service users for comparison:

Age 18 - 64 BME = 59.5% Age over 65 BME = 39.9%

All service users BME = 44.4%

Analysis: 43% of complaints where ethnicity was known came from service users from ethnic minorities which is in line with the 44.4%. National research indicates that members of some community groups are far less likely to complain due to cultural norms. Examples of trying to make the complaints service accessible includes paying for translators.

Complaints relating to service users with disabilities

	Total	Total
Disability	11/12	10/11
Yes	82	58
Not known	2	12
Total	84	70

Analysis: It is unsurprising the majority of service users consider they have a disability.

Stage 1 Complaint made by

	11-12	10-11	09-10	08-09
Service User	24	18	30	26
Relative/Partner (often informal carer)	56	41	40	29
Advocate –(instigated by either carer or service user)	3	8	3	9

Solicitors	0	3	2	1
Other	1	0	0	1

Analysis: It is positive to consider that 71% of service users had assistance in raising their complaints. All service users are advised how to access advocacy support in making a complaint, when they first make a complaint.

6.2 Stage 2 complaints

Gender of Service User

	11-12	10-11	09-10	08-09	07-08
MALE	2	2	3	1	7
FEMALE	6	5	3	4	3
UNKNOWN	0	0		0	2

Analysis: No concerns noted.

Ethnic Origin of Service User

	11-12	10-11	09-10	08-09	07-08
White/British	3	4	2	5	4
Black British	3	0	0	0	0
Asian British	1	2	3	0	4
White Other	0	1	1	0	1
Other	1	0	0	0	0
Unknown	0	0	0	0	3

Analysis: No concerns are apparent.

Complaints relating to service users with disabilities

Disability	11/12	10/11
Yes	8	7
Unknown	1	

Stage 2 Complaints made by

	11/12	10-11	09-10	08-09
Service User	2	1	2	1
Relative/Partner (often informal carer)	6	3	2	2
Advocate –(instigated by either carer or service	0	3	2	1
user)				
Solicitors	0	0	0	1
Other	0	0	0	0

Analysis: It remains positive that service users have someone supporting them in making their complaint and this remains constant over time.

7. Stage 2 complaints

There were 8 Stage 2 complaints compared to 7 the year before.

7.1 Stage 2 complaint numbers and escalation rates

Service	Stage 1	Stage 2	% escalating to formal complaints
Safeguarding, Mental Health & Residential Services	20	5	25%
Commissioning & Partnership	17	1	6%
Other	3	1	33%
Reablement & Personalisation	41	1	2%
Transformation	1	0	0%
2011-12 Total	84	8	10%
2010-11 Total	70	7	10%

Tip: As a rough indicator, for services that get regular complaints having under 10% escalating from Stage 1 to 2 is good. Over 15% indicates work needs to be done.

Analysis: Reablement & Personalisation should be congratulated on an impressively low escalation rate of 2%.

A 25% escalation rate for Safeguarding, Mental Health & Residential Services is higher than ideal. Equally, 3 of the 5 related to Safeguarding practice. With the growing role and action taken by Adults Safeguarding, it is likely to be a frequent subject of complaint. like Children's Safeguarding experience has shown that those who are subject to safeguarding investigation and interventions are far more likely than any other service users to escalate complaints.

Commissioning have only had one complaint escalate each year for the last 3 years. However, when Commissioning complaints escalate they tend to be significant.

Key action: Safeguarding, Mental Health & Residential Head of Service to review the cases that have escalated to see if there is any learning. In particular, if any improvements can be identified to complaint resolution at stage 1.

7.2 Stage 2 Complaints and outcomes

Service	Not Upheld	Partially Upheld	Upheld	Withdrawn	Awaiting Outcome	Total
Safeguarding, Mental Health & Residential Services		2	3			5
Commissioning & Partnership	1					1
Other	1					1
Reablement & Personalisation			1			1
Transformation						
Total 2011-12	2	2	4			8
2010-11 comparison	3	1	3			7
2009-10 comparison	4	1	1			6

Analysis: It is disappointing whenever complaints are upheld at stage 2 because it means that errors were not correctly identified at stage 1. All 5 of the Safeguarding, Mental Health & Residential Services stage 2 complaints were upheld or partially upheld.

Key action: To continue to target investigation training for managers where complaints have been upheld at stage 2.

7.3 Stage 2 Response Times

Service	Adults overall		Safeguarding Mental Health & Residential Services	Commissioning & Partnership	Other	Reablement & Personalisation	
Year	11/12	10/11	9/10	11/12	11/12	11/12	11/12
Within time	5	3	4	3	1	1	
Over timescale	3	4	2	2			1
Total	8	7	6	5	1	1	1

Context: The Council often uses independent investigators for stage 2 investigations given the seriousness of social care complaints and the next stage is the Ombudsman. At Stage 2, there is more emphasis on thoroughness than speed.

Analysis: 62% were in timescale. The reablement complaint went over timescale due to the time for the adjudication of the independent investigation to be done.

7.4 Nature of complaint

Type of complaint		Adults Total		Safeguarding, Mental Health & Residential Services	Commissioning & Partnership	Other	Reablement & Personalisation
Year	11/12	10/11	09/10				
Breach of confidentiality	1			1			
Delay / failure in taking action or replying	1	1		1			
Policy / legal / financial decision	2	1	1	2			
Quality of Service delivery (stds)	2	3	1	1	1		
Quality of Facilities / Health and Safety	1					1	
Refusal to provide a service		1					1
Level of Service (e.g. opening times)							
Change to Service - withdrawal/reduction	1		2				
Loss or Damage to property			1				
Failure to follow Policy or Procedure		1	1				
Total	8	7	6	5	1	1	1

Analysis: The most significant theme related to three safeguarding complaints where complaints about communication such as having the opportunity to contribute fully and being given updates and the manner in which the subject of the safeguarding enquiries was treated were upheld. Equally, Safeguarding Managers have responded positively to the feedback and standards in safeguarding practice are far more sensitive and sophisticated than they were compared even to a couple of years ago.

The other significant trend relates to increased challenges around eligibility decisions or levels of assessed need where a meeting of minds cannot be agreed so the complaint escalates. This is a reality across the country as the financial landscape for Councils leaves little flexibility in the application of eligibility criteria.

Examples of complaints that have escalated to stage 2 of this nature include a service user not being given a residential placement when the family view it as necessary; service users not being given adaptations to the home because the changes are assessed as wants rather than needs or there are more cost-effective ways of meeting the need; or a service user unhappy at the level of personal budget even following senior manager review.

8. Commissioned Services

Key message: All but one of the providers achieved good or excellent ratings from CQC meaning that 92% of people are receiving a good or excellent rated service according to the CQC rating system that is now under review. This equates to 99.5 % good or excellent according to our local QA monitoring.

Key message: Only 3 Commissioning complaints have escalated to independent investigation (stage 2) in the last 3 years. Equally, those that do escalate are invariably the most serious types of complaint.

8.1 Homecare (domiciliary care) complaints and service failures

Provider	Mears (formerly Supporta Care)	Care Uk - non reablement	Care Uk - Reablement	Gentlecare – not including reablement	Gentlecare – reablement	MNA	Somali Carers	Penkz (formerly Wycare)	Carewatch	Westminster Homecare
Complaints	9	4	1	1	3	2	0	3	1	2
% of complaints/ service failures responded to in timescale	87%	65%	38%	93%	34%	100%	100%	100%	100%	100%
Service Failures	24	89	81	14	82	3	2	2	6	4
Total	33	93	82	15	85	5	2	5	7	6
Volume of provision – i.e. no. of visits in Q4	191,220	190,060	36,128	22,475	30,911	60,507	18672	44399	67537	7436
% of service failure complaints upheld per volume of provision.	0.02	0.05	0.23	0.07	0.27	0.01	0.01	0.01	0.01	0.08
2010-11 % for comparison	0.02	0.04	0.1	0.09	0.1	0.01	0.06	0.013	0.03	0.1

[Below 0.1% is the service failure rate target threshold]

Analysis: Most of the services continue to surpass the acceptable percentage contractual threshold. This includes the two cost and volume homecare contracts which deliver the majority of the commissioned homecare in the borough. MNA, Somali Carers, Penkz and Carewatch are to be congratulated for having the lowest percentages for service failures.

Regarding reablement, the contracted thresholds were agreed for the generic homecare delivery model which came before the reablement service was rolled out. The nature of reablement may justify a different benchmark for reablement.

However, even if this difference is accepted, the goal remains to bring down the reablement service failure rate. For example, the Care UK reablement service saw a particular rise in service failures in February as a result of two key staff leaving the service. Whilst this issue has been addressed and rectified, reablement service failure rates remain a focus for improvement.

Timescales are being reported on for the first time. All non-reablement providers achieved over 75% response timescales to complaints bar Care UK. 5 providers achieved 100%. Both reablement providers fell significantly below 75% for reablement complaint response times (38% and 34%).

Mandatory complaints training is being delivered to agencies to help improve the sensitivity of written responses. The effectiveness of responses will be measured by the Age UK survey. We test if service users are aware of the complaints procedure. We expect 90% satisfaction and there will be an expectation that satisfaction with the response to the complaint is at 70%.

Key action 1: For Commissioning to review if the 0.1% is a like for like comparison between reablement and non-reablement service failure rates. If legitimate significant differences are identified then a separate threshold target should be set for reablement.

Key action 2: To explore why complaint responses by reablement providers are taking longer than non-reablement complaints. Consider whether these should be viewed as complex.

8.2 Residential complaints

Year	Complaints
2011-12	3
2010-11	4
2009-10	9

Analysis: Despite efforts to encourage reporting of complaints by providers (the Complaints Manager has delivered presentations at 2 provider forums in the last 18 months to emphasise the requirement to report complaints to the Council) we still receive very few in the context of over 650 placements.

Whilst serious complaints relating to care homes have been rare, there remains a question whether all care home complaints are being treated as complaints, complainants are given their rights and all complaints are being alerted to the Council as they should be.

Key action 1: The Complaints Manager to bench-mark the numbers of residential (care home) provider complaints made to other comparable Councils to ascertain if reporting to Harrow is low or if it is the nature of care homes that complaint rates are low.

Key action 2: All residential care home service users or next of kin are written to explaining their right of complaint to the Council.

Key action 3: To explore uniform minimum residential care home provider complaint reporting requirements across West London Alliance.

Key action 4: To explore advocacy accessibility in residential care homes.

Key action 5: For the Complaints Manager to attend a monitoring meeting at a residential home to see first-hand recording of complaints and feedback and see how the complaints process is being advertised and made accessible.

9. Stage 3 complaints

There is no statutory stage 3 complaint stage. The 2009 regulations do not expect them. There were no corporate stage 3 complaints this year.

Context: The removal of review panels makes it more likely complaints will escalate to the Ombudsman, meaning it becomes even more imperative that errors are identified at an early stage and robust remedial action is taken.

10. Ombudsman complaints and enquiries

Key message: The most crucial test of successful complaints management is whether the Ombudsman issues reports of maladministration against the Council. The Ombudsman has not issued a report in the last 7 years relating to Harrow Social Services (Adults or Children's). The second test is whether the Ombudsman recommends local settlement (doing something additionally to resolve the complaint, indicating that something was missed internally).

10.1 Outcomes and commentary

Service	Outcome	Responded to the Ombudsman in time (28 days)
Reablement & Personalisation	No maladministration	Yes
Safeguarding, Mental Health & Residential Services	No maladministration	Yes
Reablement & Personalisation	No maladministration	Yes

Analysis: Since the introduction of the 2009 complaint regulations, which removed stage 3 review panels and in some instances sees just one Council response before the complainant proceeds to the Ombudsman, we have unsurprisingly seen an increase in cases proceeding to the Ombudsman.

The Ombudsman closed 2 complaints about adaptations and one about personal budget finding no fault by the Council.

However, there were 2 local settlements relating to complaints the Ombudsman received in 2010 an 2011.

The first complaint made to the Ombudsman in 2010 about care agency staff assisting a service user access her finances which breached procedures. The Ombudsman did not upheld any more complaints. However, to resolve

the complaint the Ombudsman recommended a further £500 compensation which the Council accepted.

For the second local settlement, the Ombudsman recommended £5392.40 travel expenses reimbursement and compensation for a 2011 learning disabilities complaint. This was an example of the higher risk of Ombudsman adverse rulings. There was only one Council response before it proceeded to the Ombudsman which did not identify some key mistakes. A transportation policy is being finalised as learning from this case.

Cases which the Ombudsman keeps for a significant time tend to be the ones where a local settlement is identified. The positive, is there are no complaints outstanding with the Ombudsman.

11. Escalation comparisons over time

Year	Average % escalation rate Stage 1- Stage 2	Ombudsman local settlements	Ombudsman public report
2011-12	11.5%	2 (21)	0
2010-11	11.5%	1 (14)	0
2009-10	8%	0 (12)	0
2008-09	7.5%	2 (22)	0
2007-08	13.5%	1 (14)	0
2006-07	8.5%	0 (15)	0
2005-06	6.5%	1 (9)	0
2004-05	15%	Unknown	0
2003-04	14.5%	Unknown	1

Analysis: 11.5% going from Stage 1 to Stage 2 is healthy and does not indicate any concerns.

7 local settlements out of 107 local settlements for the Council in 7 years (7%) indicates it is very rare for the Directorate to miss errors or not take sufficient remedial action for identified errors.

The Council is making more early referrals to the Ombudsman, particularly in relation to disagreement with decision complaints.

12. Compensation Payments

Payments related to the following service areas.

Service	Stage	Amount	Basis
Reablement &	1	£630	Reimbursement for over-
Personalisation			charge
Commissioning &	1	£50 + care home	Inconvenience
Partnership		fees subsidy	
		backdated	
Other	1	£5	Reimbursing for a lost
			present

Commissioning & Partnership	2	6 counselling sessions	To assist a grieving daughter
Safeguarding, Mental Health & Residential Services	2	£3,065	Distress for not being able to see wife
Safeguarding, Mental Health & Residential Services	2	£2,000 (CNWL paid a further £2,000)	For manner of safeguarding enquiries
Safeguarding, Mental Health & Residential Services	Ombud sman	£5,392.40 local settlement	Transportation costs reimbursement and compensation
Safeguarding, Mental Health & Residential Services	Ombud sman	£500 local settlement	To recognise the level of distress experienced by the brother

Analysis: In all the cases where there were significant compensation payments, system and practice improvements have been identified.

11.1 Total compensation comparison to previous years

2011-12	£11,642.40
2010-2011	£4,016.65
2009-10	£5,466
2008-09	£4,432.86
2007-08	£11,200

Analysis: This has been a relatively high compensation year. On the other hand it is positive that 2 significant settlements have been agreed without the case needing to escalate to the Ombudsman.

13. Mediation

Analysis: In 5 of the 6 cases where mediation was used, the mediation meeting successfully resolved the complaint (compared with 4 of 5 the previous year). This shows how effective it is as an option in resolving even the most escalated and distressing cases.

Key message: The introduction of mediation in 2005-06 significantly reduced and continues to significantly reduce the number of complaints that escalate. Of 112 social care complaints where mediation has been used since it was introduced in 2005, mediation has resolved the complaint in 86 or 77% or those complaints.

Key message: The complaint escalation rate has reduced by a third since the introduction of mediation in 2005 from 15% to 10% of complaints escalating to Stage 2 since mediation has been used. This is doubly impressive given few responses prior to the introduction of letter-vetting in 2006 informed complainants of their right to a Stage 2 so escalation rates should have increased if anything.

14. Advocacy

Advocacy is an important protection for vulnerable service users who may otherwise not be able to easily raise or address concerns. Harrow has a number of local advocacy services covering the full spectrum of service user groups. Harrow Law Centre is now embedded as a further protection and provides free legal advice to service users.

All complainants are advised in writing about free independent advocacy and advocacy is also offered when the Complaints Service speak to complainants.

Analysis: 71% of service users had support from someone else in making a complaint, usually a family member.

15. Complaints dealt with by the local authority and NHS Bodies

There were 2 complaints investigated and responded to jointly (compared to 5 and 2 in previous years). One proceeded to the Ombudsman. However, the Ombudsman did not find any fault.

16. Learning Lessons/Practice Improvements

The Complaints Manager carries out an annual audit of agreed actions. Of the 74 cases where actions were identified from 2011-12 only 3 are outstanding and 2 carried over to the next year, which demonstrates complaints are being used effectively to drive service improvements. Outstanding actions have been highlighted to senior managers.

Below are examples of where the Directorate are effectively extracting meaningful actions from complaints to improve services for our service users and families:

- Reablement eligibility policy to be finalised and circulated to staff and put on web.
- All service users due annual review and Personal Budget for their talking book service will have a telephone review and their Personal Budget can be renewed at same time.
- A transportation policy emphasising the need to consider DLA before determining FACS eligibility.
- Training on producing accurate FACS assessments and common errors that are creating unnecessary liability for the Council.
- The form to process Personal Budgets was changed it can be done prior to financial assessment.
- Where service users have a care manager in the Long Term Team and need a personal budget, the casework responsibility will remain

- with their allocated care manager whilst the personal budget is being processed by the Personalisation Team.
- The need for an emergency payment process for personal budgets to be raised with senior managers.
- Care managers reminded that they should offer commissioned services where a service user is waiting for a personal budget.
- Default notice issued to a care provider as a result of trend analysis.
- Signature box added to financial assessment form for service user and assessment officer to confirm what information is presented during assessment.
- Information leaflet to be produced explaining charges that apply after reablement finishes.
- Produce a worked example / template to show staff how to set out an assessment after 3 separate OT assessments all came to slightly differing conclusions.
- Training available on how to set out an assessment and reduce risk of challenge.
- Financial information to be amended to address Ombudsman feedback for all Councils that identified a common gap in Council information is how service users/relatives can access independent financial advice for self-funders.
- Changes to safeguarding meeting form re 'person causing harm' communications to ensure effective and courteous communication.
- To extend the post re-direct after a service users letter was never received because it was sent to the old Buckingham Road address.
- All chairs of safeguarding meetings must attend training before chairing safeguarding meetings.
- To use a template outcome form to record the adaptation decision which ensures the rationale for the decision is clearly set out to the service user.

17. Compliments

There have been 27 compliments this year passed on for formal recording. Care UK received 4 compliments. Allie Brice the Carer Lead received 3.

Reablement received the most compliments with 7. An example was a wife appreciative of the 'terrific' reablement service for her husband who had just passed away and in particular for showing great kindness and patience.

18. The Complaints Process explained

This report provides information about complaints made during the twelve months between 1 April 2011 and 31 March 2012 under the complaints and representations procedures established under the Health and Social Care (Community Health and Standards) Act 2003 and through the Local Authority Social Services and National Health Service Complaints (England) Regulations, 2009 and the Council's corporate complaints procedure relating to Adults Community Care Services.

All timescales contained within this report are in working days.

18.1 What is a Complaint?

An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult's social services provision which requires a response.

18.2 Who can make a Complaint?

(a) a person who receives or has received services from the Council; or (b) a person who is affected, or likely to be affected, by the action, omission or decision of the Council.

18.3 Stages of the Complaints Procedure

From April 2009, regulations removed the traditional 3 stage complaints procedure for statutory complaints, replacing it with a duty to provide a senior manager organisational sign-off to every complaint response. The Council is expected to negotiate with the complainant how their complaint should be managed, including agreeing a timescale. If a verbal issue can be resolved by the end of the next working day, the regulations state this does not need to be recorded as a complaint.

Many complainants prefer a defined process and prefer to rely on the Council to identify a process to manage their complaint. To assist such complainants the Council produced a model procedure which complainants can use if they prefer. It is also used where complainants cannot be contacted to discuss how they want their complaint managed. Complainants are always advised in writing of their right to agree a different process if they prefer.

The stages of the Model procedure:

1) Local resolution

Timescale: 10 working days. 20 working days for complex Organisational sign-off: Divisional Director

2) Mediation

Organisational sign-off: Divisional Director

3) Formal investigation

Timescale: 25 working days. 65 working days if complex e.g. requiring

independent investigation.

Organisational sign-off: Corporate Director

For ease of understanding, the report uses a traditional stages reporting format. Local resolution being a Stage 1 and formal investigation a Stage 2. It

is important to emphasise that these stages are very fluid so it is not uncommon to go immediately now to mediation or independent investigation.

Corporate complaints

A traditional 3 stage complaints process still applies.

Local Government Ombudsman

The Ombudsman is an independent body empowered to investigate where a Council's own investigations have not resolved the complaint.

The person making the complaint retains the right to approach the Local Government Ombudsman <u>at any time</u>. However, the Ombudsman's policy is to allow the local authority to consider the complaint and will refer the complaint back to the Council unless exceptional criteria are met.

18.4 What the complaints team do

- Letter-vetting
- Liaising with services to try resolve the issue informally
- Mediation
- Training
- Surgeries/raising awareness
- · Learning identification and agreed actions monitoring
- Advocacy commissioning and support
- Chasing complaint responses

The introduction of letter-vetting in September 2006 by the Complaints Service has ensured that all complainants are informed in their written response of the right to go to the next stage if they are unhappy.