

**REPORT FOR: PERFORMANCE AND
FINANCE SUB-
COMMITTEE**

Date of Meeting: 9th October 2014

Subject: Adults Services complaints Annual report (social care only) 2013-14

Responsible Officer: Paul Najsarek, Corporate Director, Community, Health & Well-Being

**Scrutiny Lead
Member area:** Policy Lead Member – Councillor
Chris Mote
Performance Lead Member –
Councillor Kiran Ramchandani

Exempt: No

Enclosures: Appendix – Annual Report for Adults Social
Care Services Complaints for period 2013-14

Section 1 – Summary and Recommendations

This report sets out the statutory Adults Services Complaints Annual report (social care only) 2013-14.

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

1. **Cleaner:** A borough where our streets are cleaned regularly and our parks and green spaces are places to enjoy.
2. **Safer:** A borough where residents feel safe to live and enjoy their lives. We will work with the police and other partners to make Harrow even safer.
3. **Fairer:** A borough where our hard working residents can bring up their families knowing they will have fair access to opportunity.

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: John Broadbent, Service Manager, Adults & Children's Complaints, 020 8424 1927

Background Papers: None

ANNUAL REPORT for Adults Social Care Services Complaints for period 2013-14

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1. EXECUTIVE SUMMARY

The overall picture remains very positive and reflects a real commitment from managers and staff to resolve complaints as effectively, and as promptly, as possible. Low levels of escalation (to secondary stages or the Local Government Ombudsman (LGO) further reinforces the fact that complainants are satisfied that their concerns are heard and dealt with appropriately.

The most notable trend appears to be a direct reversal of the increase in volume last year as a result of the Fairer Charging Policy.

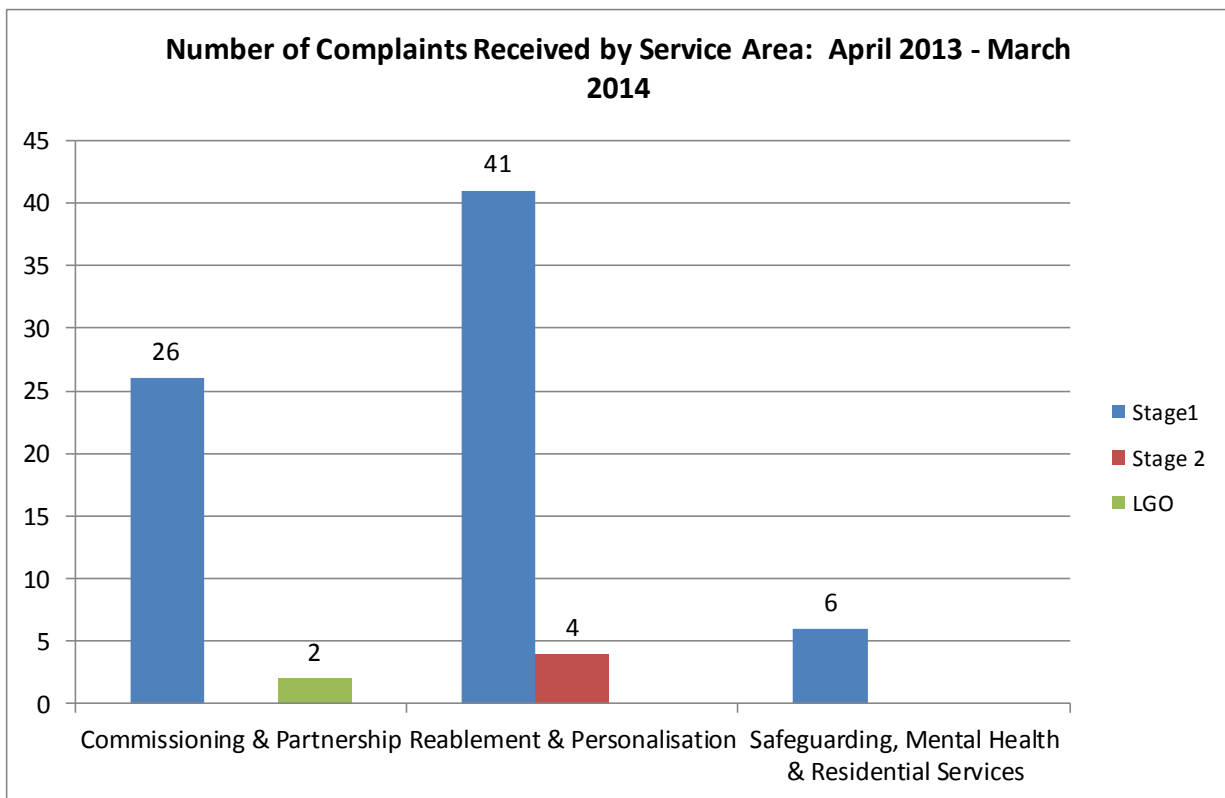
The quick action, efforts and resources dedicated by Adults management in trying to address issues sensitively as they arise during the year has resulted in remarkably few escalations.

2. Summary of Activity

Between 1 April 2013 and 31 March 2014 there was the following activity:-

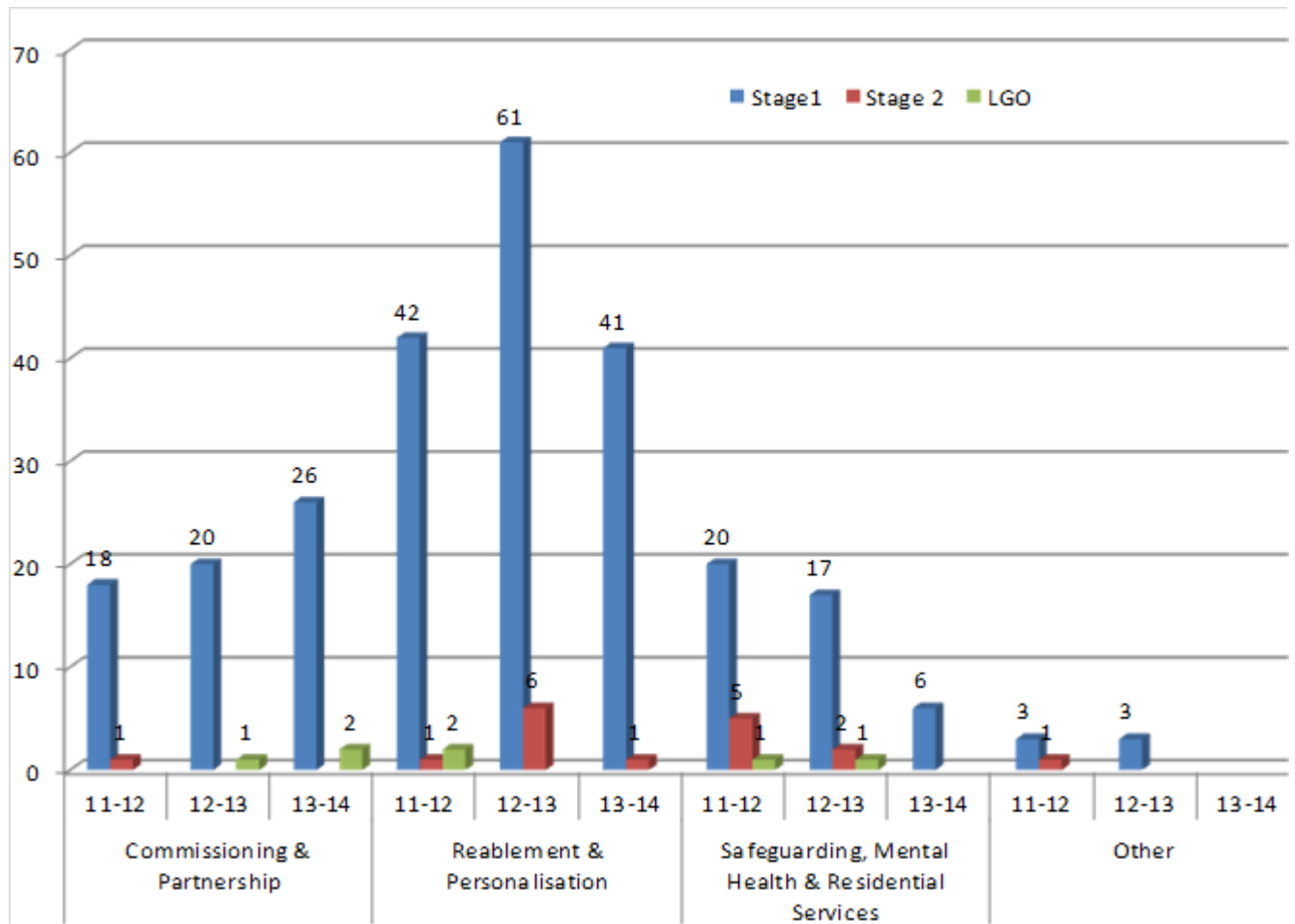
- The Complaints Service dealt with **67** potential complaints that that were addressed without a Stage 1 investigation being necessary.
- The Council received **73** stage 1 complaints.
- **4** complaints progressed to the second stage.
- The Ombudsman reviewed **2** new complaints during this period.

Chart 1:



Analysis: Across all service areas only six complaints were escalated to secondary stages; this represents an escalation rate of 8% against all formal complaints received. Although adult complaint regulations no longer include a statutory right to escalation, it is practice within Harrow to allow escalation when so requested by a complainant: this factor is significant in demonstrating a high level of complaint resolution in all service areas.

2.1 Comparison with previous years



Analysis: Overall numbers for the current year represent a 27% fall on the previous year. Last year saw Reablement/Personalisation numbers rise by 20 on the previous year – this increase was attributed to the introduction of the Fairer Charging Policy. There has been a mirroring of the previous increase by a fall of 20 on last year, which appears to confirm that the rise in Reablement/Personalisation complaints in 2012/13 had been due to a specific policy change which has now bedded down and presents fewer challenges from complainants.

2.2 Numbers of complaints over time

	Potential	Stage 1	Stage 2	Ombudsman
2013-14	67	73	4	2
2012-13	73	101	8	2
2011-12	88	84	8	0

Analysis: Escalation levels remain impressively low with only 5.4% escalating to stage 2 this year. The low rate of escalation suggests sound practice in resolving complaints effectively, especially when linked to the fact that 67 potential complaints failed to materialise, further demonstrating that service users' concerns are being heard and resolutions found at the earliest point in the complaints process, in line with best practice

3. Outcomes for key targets in 2013-14

- To maintain timescale compliance exceeding 75%:
 - This target has been achieved with target timescales being met comfortably.
 - It should be noted that target timescales are a local target and not set put in any statutory guidance for adult complaints.
- To confirm in the next annual report, that the finance systems to implement the Fairer Charges policy are fully embedded and service users are happy with the financial information they are given:
 - Complaint levels in commissioning and partnership have returned to the level of 2011/12 suggesting that the Fairer Charging policy is now established and “bedded in”.
- Heads of Service to reflect over the cases that escalated to stage 2 and consider if they would change future strategies in light of these cases (given the success of the current approach they may be happy with no changes):
 - Only four cases were escalated to Stage 2 and none would indicate a need to change future strategies, in summary the cases related to:-
 - Complaint related mainly to health service actions.
 - Complainant not accepting of service criteria and could be considered as vexatious.
 - Complainants happy with service but wanted a change in policy which has been considered and found to be unnecessary.

- Complainant not accepting of clear service criteria, ie that his relative was not eligible for service as she was not a Harrow resident.
- All residential care home service users or next of kin are written to explaining their right of complaint to the Council. Timescale extended to 30 September 2013:
 - This has been achieved through the service providers

4. Focus for 2014/15:

- To maintain timescale compliance exceeding 75%.
- To offer awareness/refresher training to front line staff on complaint handling and resolution.
- To develop a rolling programme of liaison meetings with voluntary agencies to develop complaints awareness.
- To review recording and reporting systems for adult complaints.
- To develop feedback mechanisms for complainants about the actual process

5. Stage 1 Complaints

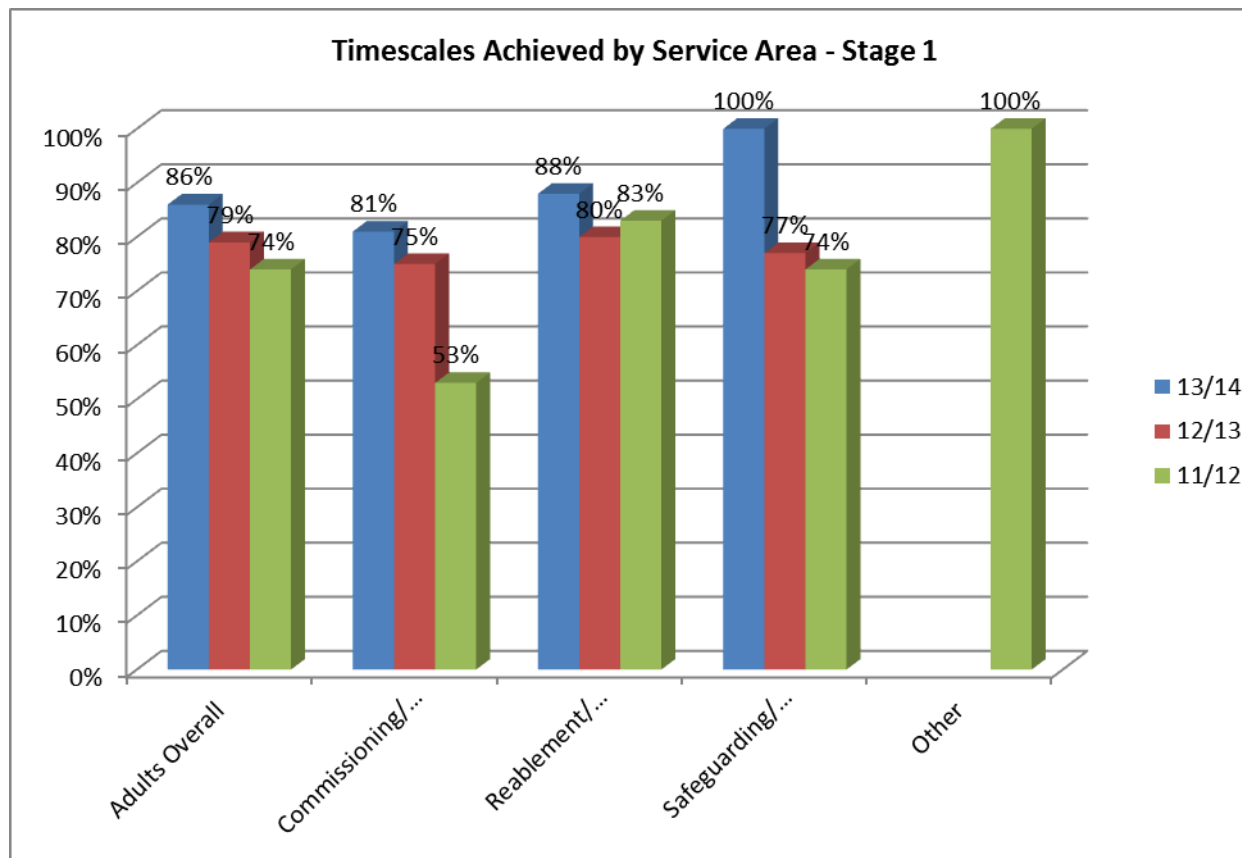
	Commissioning & Partnerships	Reablement, Personalisation	Safeguarding, Mental Health & Residential	Transformation	Other	Total
Complaints 13/14	26	41	6	N/A	0	73
Complaints 12/13	20	61	17	0	3	101
Complaints 11/12	18	42	20	1	3	84

Key message: Previous research (White & Carney 2007) suggested that councils with “high” levels of complaints tended to score highly when rated on the previous local authority star system. Although stars are no longer used to grade local authority performance the principle remains the same and as it suggests that councils capturing high levels of complaints demonstrate a willingness to hear concerns, address them and improve services as a result of them.

Analysis: Complaint numbers have remained healthy across all areas, which reflects a culture across the Directorate that is open to hearing from service users and learning from feedback. Although the volume is described in previous years as “healthy” it is important to place them in the context of service delivery levels for Adult Social Services. As at March 2014 Adult Social Services had approximately 4500 adult service users which mean that the level of complaint received represents 1.6% of the overall volume of work within the department.

Reablement and Personalisation, by the nature of the work, will always receive the largest share of complaints (this area manages all new referrals and approximately 4000 community based clients).

5.1 Stage 1 response times



Analysis: All services areas exceeded the corporate target of 75%, with an overall level of 86% of complaints being dealt with to timescale.

Key action: To maintain timescale compliance exceeding 75%.

5.2 Nature of complaints 2012/13

Type of Complaint	Safeguarding, Mental Health & Residential Services	Commissioning & Partnership	Other	Reablement & Personalisation	Adults overall 2013-14	Adults overall 2012-13	Adults overall 2011-12
Breach of confidentiality						1	1
Delay / failure in taking action or replying	2	5		17	24	21	25
Loss or damage to property						0	2
Policy / legal / financial decision		3		5	8	29	23
Quality of Service delivery (standards)	2	11		9	22	24	14
Level of Service (e.g. opening times)						1	0
Refusal to provide a service		1		1	2	4	6
Staff conduct * attitude / behaviour		2		5	7	5	3
Failure to follow policy or procedures	2	1		1	4	2	3
Change to an individual's service - withdrawal/reduction				1	1	4	3
Communication - Failure to keep informed / consult		2		1	3	9	4
Discrimination by a Service		1			1	1	0
Total	6	26		41	73	101	84

Analysis:

The overall pattern of complaint reasons remains largely unchanged for the past three years, with delay and quality the two main reasons for complaints. In many ways these areas can lead to challenges from service users as perceptions of service quality is often subjective, and complainants may experience some process time as delay as opposed to the necessary time for service specification and delivery. It is re-assuring that more objective areas for complaint are extremely low, e.g. breach of confidentiality, failure to follow

procedure, staff conduct and discrimination. So, whilst not wishing to be complacent the department can derive re-assurance that complaints have been lodged in areas where they might be most expected given the population served.

5.3 Complaints upheld

Service	Not Upheld	Partially Upheld	Upheld	Withdrawn/ In Process	Total
Safeguarding, Mental Health & Residential Services	2	3	1		6
Commissioning & Partnership	7	7	11	1	26
Other					
Reablement & Personalisation	20	12	9		41
Total 2013-14	29 (40%)	22 (30%)	21 (29%)	1 (1%)	73
Total 2012-13	33 (32%)	30 (29%)	38 (37%)	2 (2%)	103
Total 2011-12	25 (30.5%)	18 (22%)	36 (44%)	3 (3.5%)	82

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 that it is inevitable that some complaints will be upheld where a delay has occurred, although there may be mitigating circumstances to explain the delays.

6. Stage 2 complaints

There were four Stage 2 complaints in 2013-14 compared to eight in 2012-13, a decrease of 50%

6.1 Stage 2 complaint numbers and escalation rates

Service	Stage 1	Stage 2	% escalating to formal complaints
Reablement & Personalisation	41	4	9.7%
Total 2013-14	73	4	5.4%
Total 2012-13	101	8	8%
Total 2011-12	84	8	10%

Analysis: In previous annual report it has been accepted that, as a rough indicator, services that get regular escalation levels of less than 10% are performing well and handling complaints effectively.. Over 15% is seen as indicating a need for more work. Therefore these figures indicate a very positive position for the Directorate, at almost half the standard level of escalations. It should also be noted that regardless of the resolution at Stage 1, some complainants will decide to pursue their complaint through escalation as they see it as their right to do so.

Key message: Low escalation levels combined with a lack of repeat trends in stage 2 complaints indicate high service standards.

Key Action: To maintain escalation levels at 15% or less.

6.2 Stage 2 Complaints and outcomes

Service	Not Upheld	Partially Upheld	Upheld	Withdrawn	Awaiting Outcome	Total
Total 2013-14	1	1			2	4
2012-13 comparison	2	3	3			8
2011-12 comparison	2	2	4			8

Analysis:

Whilst there is no obligation on the Council to appoint independent investigators, all four complaints at Stage 2 were investigated by experienced professionals independent of the Council. This has a number of positive effects, e.g.:

- complainants see that the Council is not defensive about practice
- that the investigation is independent and is seen as a fairer approach
- investigations are completed promptly and with expertise
- it reduces pressure on council managers to investigate complex cases
- it minimises referrals to the LGO as complainants perceive their concerns as being heard and acted upon

Key message: Managers have continued to drive up front-line resolution standards resulting in low escalation rates. The Council invests in fair and through second stage investigations by acting beyond statutory obligations.

6.3 Stage 2 Response Times

Service	Adults overall		
	13/14	12/13	11/12
Year			
Within time	1	6	5
In Process			
Over timescale	1	2	3
Total	4	8	8

Context: The investigation which was not completed to timescales related to a complex case where most issues of complaint were in relation to health care services but where the complainant was reluctant to accept that fact. It was necessary to liaise with various health agencies before providing an adequate response which pushed the investigation beyond the deadline. Delays occurred in the two cases still in process but these were in large part due to the actions of the complainant in each case, e.g. delay in agreeing statement of complaint, addition of extra factors, failure to agree the nature of the complaints.

6.4 Nature of complaint

	Adults Total		
	13/14	12/13	11/12
Year			
Breach of confidentiality			1
Delay / failure in taking action or replying			1
Policy / legal / financial decision	2	5	2
Quality of Service delivery (standards)	2		2
Quality of Facilities / Health and Safety			1
Refusal to provide a service			
Level of Service (e.g. opening times)		1	
Change to Service - withdrawal/reduction		1	1
Loss or Damage to property			
Failure to follow Policy or Procedure			1
Total	4	8	7

Analysis: In terms of escalated complaints the four in question are somewhat unusual and do not reflect lack of investigation at previous stages.

One related to a policy issue which had been addressed at Stage 1 but which the complainants nevertheless wished to pursue, this was also within the context of the complainants praising the professional approach of all Harrow Officers encountered.

Two complaints related to areas which were either wholly or partly outside of Harrow's remit but which complainants insisted on pursuing, eg impact on social services of health decisions, an issue.

The final complaint was from a complainant who may be deemed vexatious in future; she was difficult to engage with, insistent on adding numerous other issues of complaint and refused to accept mediation.

7. Commissioned Services

7.1 Residential complaints

The Council was made aware of 18 complaints against residential homes during the year, 7 regarding physical or learning disability and 11 regarding older people.

Analysis: It remains an issue that residential homes are not supplying complaint data systematically.

Key Action: To work with care homes to increase feedback on complaint issues and resolutions.

7.2 Home Care Complaints

Only 260 service users still received a directly funded service, provided by any of six local agencies. Due to changes in service provision this report provides figures from Quarter 3 of 2013/14 to demonstrate activity:-

Total Number of Notifications:	23	These are in respect of service failures and/or complaints. In some instances notifications will fall into both category.
Responses from agencies to timeframe:	16 (69%)	
Reported service failures:	12	
Reported complaints:	15	
Number of complaints upheld:	9 (60%)	
Total number of visits:	67,270	Estimated figure which will be revised upwards once all invoice are processed by the agencies

Analysis: Clearly the level of dissatisfaction is extremely low when expressed as a fraction of overall provision. The Number of complaints/service failures reported during the period represent 0.03% of visits completed which reflects an excellent level of satisfaction with service delivery.

8. 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.

9. Ombudsman complaints and enquiries

The Ombudsman considered two referrals this year – one was a re-referral which the LGO declined to investigate. In part this decision was due to a very thorough investigation previously by Adult Services which highlighted that the issues were beyond the control of the council.

The second referral investigated by the LGO but there no finding of fault against the Council's actions.

10. Escalation comparisons over time

Year	Average % escalation rate Stage 1- Stage 2	Ombudsman local settlements	Ombudsman public report
2013-14	5%	0	0
2012-13	8%	0 (Unknown)	0
2011-12	11.5%	2 (21)	0

Analysis: The rate of escalation is consistently falling but it may be unrealistic to expect any future reductions. The low rate however does reflect a commitment to finding resolutions and listening to service users and their families when concerns are raised.

11. Mediation

Mediation was offered on at least three occasions. Only one complainant took up the offer when a successful resolution was achieved. In addition to formal mediation meetings there were numerous informal meetings with complainants as a way to assist them with the process or engage with them to discuss specific issues. One example was a complaint against Adult Safeguarding – whilst the complaint was unfounded it was helpful to discuss the issues informally with the complainants who felt listened to, understood the process and decided not to pursue the complaint on the basis of the discussion.

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

There were no joint investigations between harrow Council and NHS bodies during the year.

13. Learning Lessons/Practice Improvements

One of the strengths of the adults complaints model is all learning is centrally captured and completion monitored.

Problem Identified	Lesson Learnt - Action required
Duplication of case recording which could lead to information missed during an intervention	Access Harrow staff to be reminded to check Framework 1 before creating new identifications
Perception of staff attitude	Individual officer advised of the need to be courteous at all times.
Delay in response to urgent situation	OT duty to be reminded that urgent situations should be dealt with in a timely manner.
Concerns regarding assessment process	Social worker provided with support and training to be more open and transparent when assessing and how the information gathered is to be used.
Officers not providing clear ID on home visits	Remind all workers in the team to ensure that they provide Identification when visiting people at home.

Concerns regarding care provision in a private care home	Catalogue of necessary changes in procedures to ensure better service provision in future

14. Compliments

There have been 44 compliments this year passed on for formal recording (compared to 27 in 2011-12). Examples include:

- “She has been a pillar of strength for both of us and we shall always be grateful for all she has done.”
- “Your input was invaluable and we appreciated your humane and sympathetic approach towards my mother’s healthcare needs. It was largely down to this that we arrived at a positive result for my mother. Thank you also for your kind words about how the case for my mother continuing to be eligible for continuous healthcare was presented.”
- “He understood all in a most competent and helpful fashion.”
- “Thank you so much for your help, you are a diamond.”
- “Carer was a breath of fresh air, who set to work & explained everything, got everything in place. Could not have wished for a better service.”
- “You are doing a great job.”
- “Everyone enjoyed your talk and said how informative it was, so hope you will come back again.”
- “Thinks you are brilliant! The family have been really happy with the support they received from you.”
- “Thank you very much for all your support and effort, Mum and I are truly grateful and I'm not sure where we would be without all of your help.”
- “Thank you for your invaluable help in contacting the medical profession, advice and general support.”

- “Acted in a professional, courteous and compassionate manner. You must be very proud of her.”
- “Amazing level of care that she offered, she has been an integral part of our support network working in a highly professional manner whilst also being immensely sympathetic to our own personal emotions. She has truly been our “Rock within the System”. My company have Hero Awards on a quarterly basis and she is definitely on our rating for Super Hero recognition!”
- “Thank you personally for all your efforts & the help that you have provided in our quest to improve our mum’s wellbeing. Both my sister & I are extremely grateful & are most pleased that you are working with us. You should be proud of what you do & of the comfort that you bring to people like us, I am certain that we are not the only relatives of your care patients that feel this way.”
- “He was very efficient and very nice to deal with, and if you rang him with a query he would get back to you either with an answer or his assurance that he was on the case. If he said he'd help he actually did. That's not always the case these days in large organisations.”
- “The team was very professional, people who really did care, I felt they were not just words. Their approach was caring in a very stressful time. They were superb.”

15. Equalities Information – Service Users

15.1 Stage 1

Gender of Service User

	13-14	12-13	11-12	10-11	09-10	08-09	07-08
MALE	30	62	35	29	33	28	28
FEMALE	43	37	49	39	42	37	41
UNKNOWN	0	2	0	2	0	1	4

Analysis: No concerns identified.

Ethnic Origin of Service User

Ethnic Origin 2013-14	Total
African	1
Any other Asian Background	1
Black or Black British	6
Asian or Asian British*	9
Caribbean	1
English	11
Indian	2
Irish	2
Mixed*	
Not known	3
Pakistani	1
White or White British*	30
White Other*	1
Grand Total	73

Complaints relating to service users with disabilities

Disability	Total 13/14	Total 12/13	Total 11/12
Yes	69	92	82
No	3	1	
Not known	1	8	2
Total	73	101	84

Stage 1 Complaint made by

	13-14	12-13	11-12
Service User	15	23	24
Relative/Partner (often informal carer)	55	73	56
Advocate –(instigated by either carer or service user)	3	4	3
Solicitors		0	0
Other	73	1	1

15.2 Stage 2 complaints

Gender of Service User

	13-14	12-13	11-12
MALE	1	2	2
FEMALE	3	4	6
UNKNOWN	4	2	0

Analysis: No concerns noted.

Ethnic Origin of Service User

	13-14	12-13	11-12
White/British	1	1	3
Black British		0	3
Asian or Asian British	1	3	1
White Other		1	0
English	1	1	N/A
Other		0	1
Unknown	1	2	0

Analysis: No concerns are apparent.

Complaints relating to service users with disabilities

Disability	13/14	12/13	11/12
Yes	3	7	8
No	1		
Unknown	1	1	1

Analysis: No concerns are apparent.

Stage 2 Complaints made by

	13/14	12/13	11/12
Service User		4	2
Relative/Partner (often informal carer)	4	3	6
Advocate –(instigated by either carer or service user)		1	0
Solicitors		0	0
Other		0	0

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

16. The Complaints Process explained

This report provides information about complaints made during the twelve months between 1 April 2012 and 31 March 2013 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.

16.1 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.

16.2 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.

16.3 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: Director of Adult Social Services

2) Mediation

Organisational sign-off: Director of Adult Social Services

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 at any time. 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.

16.4 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 identification
- 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.