

Meeting:	OVERVIEW AND SCRUTINY COMMITTEE
Date:	7 October 2008
Subject:	Adults Services complaints Annual report (social care only) 2007-08
Key Decision: (Executive-side only)	No
Responsible Officer:	Paul Najsarek, Corporate Director of Adults and Housing
Portfolio Holder:	Barry Macleod-Cullinane, Portfolio Holder for Adults and Housing
Exempt:	No
Enclosures:	The report

SECTION 1 – SUMMARY AND RECOMMENDATIONS

This report sets out the Adults Services complaints Annual report (social care only) 2007-08.

RECOMMENDATIONS: None. For Information purposes only.

REASON: N/A

SECTION 2 - REPORT

ANNUAL REPORT for Adults Social Care Services Complaints for period 2007-08

<u>Paragraph</u>	<u>Contents</u>	<u>Page</u>
1	Context/Overview	2
2	Stages of the Procedure	3
3	Summary of Activity	4
4	Focus for next year	7
5	Stage 1 Complaints	8
6	Equalities information	10
7	Stage 2 Complaints	12
8	Stage 3 Complaints	15
9	Ombudsman Complaints & Enquiries	15
10	Percentage escalation	16
11	Stage 2 outcomes	17
12	Compensation Payments	17
13	Mediation	18
14	Advocacy	18
15	Joint NHS and social care complaints	18
16	Learning the Lessons/Practice Improvements	18
17	Summary of key points in 2009 regulations consultation	19
18	Ombudsman's powers widened	19

1. Context

This report provides information about complaints made during the twelve months between 1 April 2007 and 31 March 2008 under the complaints and representations procedures established under the National Health Service and Community Care Act 1990 and through the Local Authority Social Services Complaints (England) Regulations, 2006 and the Council's corporate complaints procedure relating to Adults Community Care Services.

All timescales contained within this report are in working days.

Text in quotation marks indicate direct quotations from the 2006 Regulations or Guidance unless otherwise specified.

1.1 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".

1.2 Who can make a Complaint?

"A person is eligible to make a complaint where the local authority has a power or a duty to provide, or to secure the provision of, a service for him, and his need or possible need for

such a service has (by whatever means) come to the attention of the local authority. This also applies to a person acting on behalf of someone else.”

“Where a complaint is received from a representative acting on behalf of a service user, (i.e. his advocate) the authority has the discretion to decide whether or not the person is suitable to act as a representative, in the individual’s best interests.”

2. Stage of the Complaints Procedure and statistics

The complaints procedure has three stages.

Stage 1. This is the most important stage of the complaints procedure. The Department’s teams and external contractors providing services on our behalf are expected to resolve as many complaints as possible at this initial point.

The complaints regulations requires complaints at stage 1 to be responded to within 20 working days with the aim to respond within 10 days if the complaint is not complex.

Stage 2. This stage is implemented where the complainant is dissatisfied with the findings of Stage 1. Stage 2 is an investigation conducted by an independent external Investigating Officer for all statutory complaints and an internal senior manager for corporate complaints. A senior manager adjudicates on the findings.

Under the Regulations, the aim is for Stage 2 complaints falling within the social services statutory complaints procedures to be dealt within 25 days, although this can be extended to 65 days if complex.

Stage 3. The third stage of the complaints process is the Review Panel under the statutory procedure. Under the corporate complaints process, the Chief Executive reviews the complaint.

Where complainants wish to proceed with complaints about statutory social services functions, the Council is required to establish a complaints Review Panel. The panel makes recommendations to the Director who then makes a decision on the complaint and any action to be taken. Complaints Review Panels are made up of two independent panellists and one Councillor. There are various timescales relating to stage 3 complaints. These include:

- setting up the Panel within 30 working days;
- producing the Panel’s report within a further 5 working days; and
- producing the local authority’s response within 15 working days.

A further option for complainants is the Local Government Ombudsman (LGO) who is empowered to investigate where it appears that a Council’s own investigations have not resolved the complaint. Complainants can refer their complaint to the LGO at any time, although the Ombudsman normally refers the complaint back to the Council if it has not been considered under our procedure first.

3. Summary of Activity

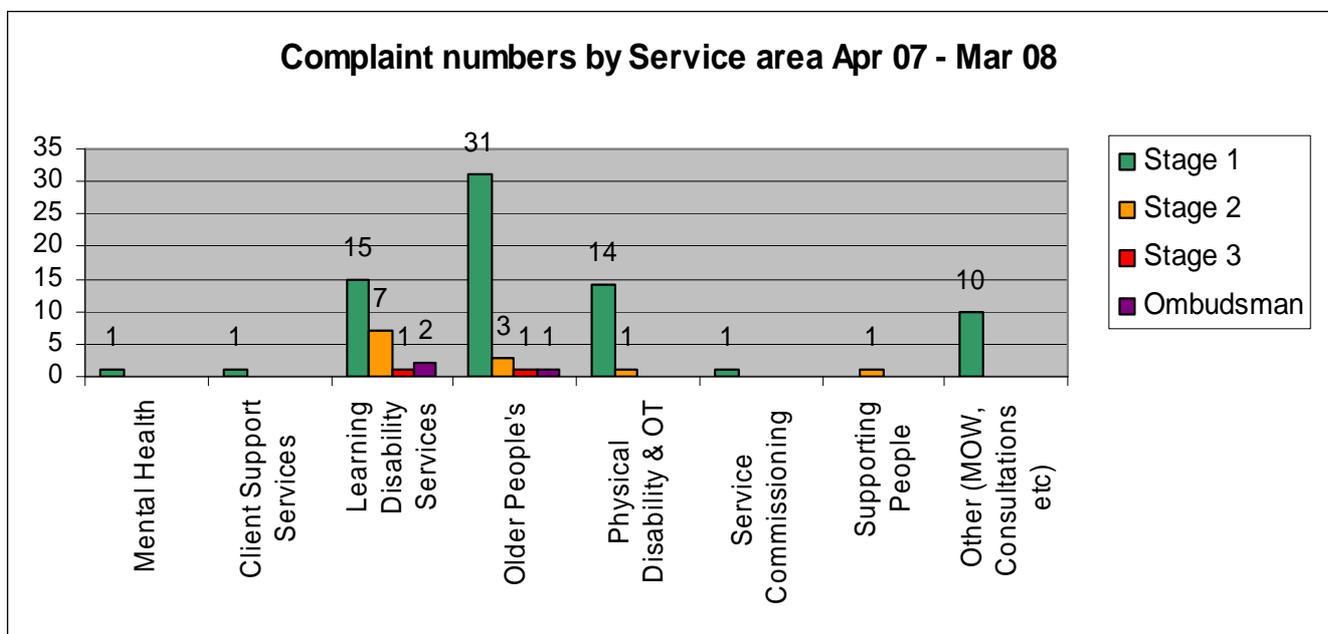
The Complaints Service recorded 90 complaints during the year 2007-08, compared with 131 the year before.

Total complaints made:

Between 1 April 2007 and 31 March 2008 we received and closed 73 Stage 1 complaints. 12 complaints initially progressed to Stage 2 but 2 were subsequently withdrawn (2 complaints went straight to Stage 2).

Of those 10 Stage 2 complaints that were investigated, 2 proceeded to Stage 3.

The Ombudsman reviewed 3 complaints during this period. This is the third year in a row where the Ombudsman has not issued any reports against Harrow social services which is a significant achievement.



3.1 Comparison with the preceding years

	Stage 1	Stage 2	Stage 3
Harrow 2007-08 (letter-vetting and mediations)	73	10	2
Harrow 2006-07 (letter-vetting and mediations)	118	10	2
Harrow 2005-06 (pre-letter vetting; post-mediation)	76	5	0
Harrow 2004-05 (pre-mediation)	81	12	1
Harrow 2003-04 (pre-mediation)	90	13	1

Key message: Council's that capture high levels of Stage 1 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: Stage 1 complaints returned to their 2004-06 levels after a spike in 2006-07. There were 73 Stage 1 complaints compared to 118 Stage 1 complaints last year which is a 38% decrease in Stage 1 complaints from 2006-07 figures. The reassessments relating to FACS most likely account for the 2006-07 spike.

The complaint definition up until 2005 incorrectly stated "Complaints" should not be recorded:

- 1 When the problem is fully resolved within 72 hours.
- 2 When the problem is about day-to-day grumbles in a day-care or residential setting e.g. the biscuits provided with tea.

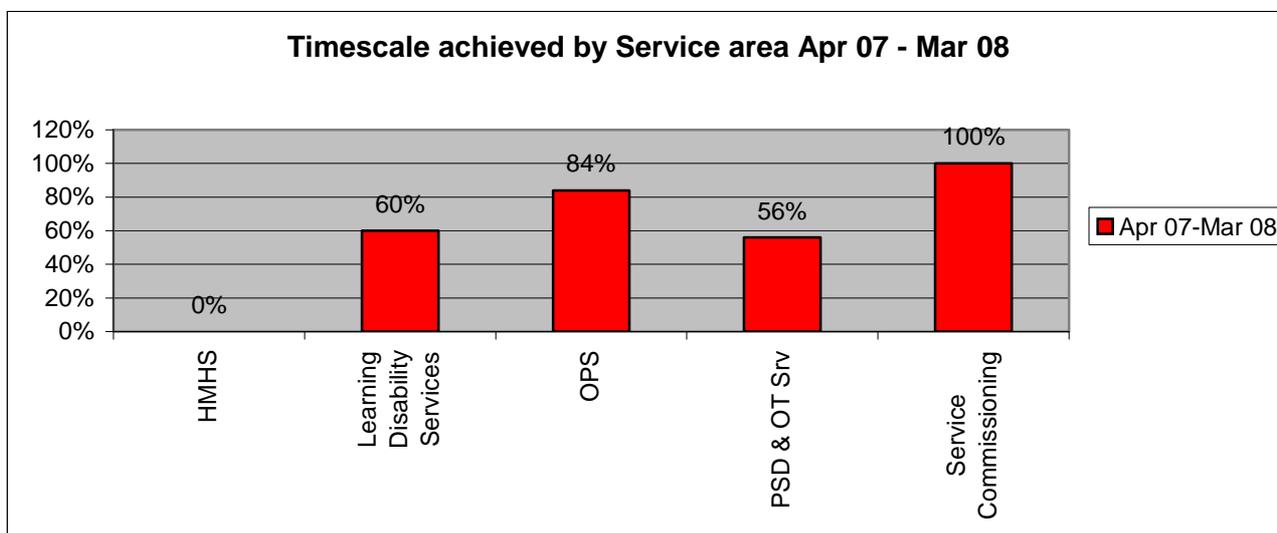
This may indicate more work needs to be done to ensure that all 'expressions of dissatisfaction' are recognised and registered as complaints. This has been highlighted to senior management.

The introduction of mediation in 2005-06 significantly reduced (and continues to significantly reduce the number of complaints that escalate – 10 complaints this year did not escalate to the next stage through the use of mediation).

The introduction of letter-vetting by the Complaints Service has meant that all complainants are informed in their written response of the right to go to the next stage if they are unhappy. Before this measure was introduced this right was not explained in probably 80% of responses which would have made our escalation rates look artificially good. Now we have a complete and true record of escalation rates.

Key action: The agreement for an Assistant Director to the Director of Community Care with a lead role in operationally contributing to complaints management to reduce the number of escalated complaints

3.3 Stage 1 response times



Analysis: This is the first annual report to report on timescale adherence. This will mean for future years we now have base data to monitor relative performance against. Overall, the Complaints Services impression is response times are better than 3 years ago.

Response times for mental health complaints/potential complaints remain slow. The Complaints team is working with mental health services to improve this.

Key action: senior management have agreed to set a testing target of 75% achievement for the forthcoming year.

3.4 Key improvements

In the last annual report the following were identified as key focus areas.

- *Learning from complaints:* Action: A 'Learning' section to the database has been introduced. There have been some strong examples of significant changes/good organisational learning from complaints
- *Training for staff and members:* Action: The Complaints Service now offers training on 4 different complaints-related topics
- *Raising awareness of the complaints process* Action: Complaints surgeries for staff at team offices; complaints training advertised; an action plan for the Complaints Service to visit community groups (which has started to be implemented) etc.
- *Improved and more regular reporting* Action: Quarterly reports on complaints to the Improvement Boards started (first one in September 2007). New areas reported on (Timescale and upheld complaints)
- *Improved timescale adherence.* Action: This is the first annual report to report on timescale adherence which will allow us to set base data. We have set a timescale adherence target of 75% for 2008-09
- *Better support for staff involved in complaints:* Action: A supporting staff management project group was set up which agreed a meeting with front-line staff to explore what can be done to support staff better; A leaflet for staff who are the subject of complaints in place; a vexatious complainants process introduced
- *Improving management of the independent complaint investigators pool:* Action: The Pool has been widened to cover 7 Councils from the previous 3 which has increased capacity. We have introduced robust contracts, financial monitoring, feedback forms and regular training for the Pool. Excellent progress in a short space of time
- *Improving complaints monitoring and management within Partnership and contracted services:* Action: Council-wide Project group is being set up to agree a systematic review of Partnerships/Contracts to meet Ombudsman's minimum standards. Mark Gillett is project sponsor

3.5 Additional improvements within 2007-08

- The Access to Services report was critical of how complaints in the Council are currently managed. However, the report singled out complaints management in Children's and Adults service as exceptions of good practice
- The agreement for an Assistant Director to the Director of Community Care with a lead role in operationally contributing to complaints management to reduce the number of escalated complaints

- Mediation was used to successfully resolve 10 complaints that would otherwise have escalated
- A new complaints procedure finalised November 2007
- A complaints compensation procedure introduced – to ensure uniformity and proper audit
- Introduction of a vexatious/unreasonably difficult complaints procedure
- The social care complaints sections of the Harrow internet and intranet website have been significantly improved
- Started to record potential complaints
- Much needed improvements to the Complaints database agreed

4. Focus for the near future:

- Reviewing training for staff on complaints management to ensure it is effective
- Systematically monitoring and reporting on agreed actions arising from complaints to ensure they are being carried out
- Improved timescale adherence for Stage 2 independent investigations
- Agreeing helpful performance targets
- Increasing access to complaints for hard to reach communities/service users
- Improving multi-agency working where there are cross-boundary complaints.
- Improving support and co-ordination of managing difficult client behaviour
- Putting in place processes to allow easy transition to the new complaints regulations due in 2009
- Offering support and advice to the new corporate complaints lead to help drive forward corporate complaints management, standards, reporting and co-ordination
- Producing contracted services complaint monitoring reports
- To build effective and constructive relationships with LINKs
- To increase the percentage of advocacy use for Adults complaints to 33% of service users in 3 years
- To reduce the escalation rates from Stage 1 to Stage 2 to below 10% overall.

5 Stage 1 Complaints

Complaints	Older Peoples	Physical Disabilities	Learning Disability (HLDT)	Mental Health	Contracted Services	Finance	Other: HART, Consultations, MOW, Supporting People etc	Total
2007-08	31	14	15	1	1	0	10	73
2006-07	38	29	20	13	9	3	6	118

Analysis:

All areas have seen a reduction in the number of Stage 1 complaints.

The level of dissatisfaction evident with service users with HLDT may indicate that not all complaints for HLDT were received by the Complaints Service.

Service Commissioning have been advised that service users are entitled to complain directly to the Council without having to complain to the contractor first.

Key message: Council's 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]

5.2 Nature of complaint

Type of Complaint	Learning Disabilities (HLDT)	Older Peoples	Physical Disabilities (PDSS)	Service Commissioning	Mental Health	Client Supp Services
Allocation / Reallocation of Keyworker						
Breach of Confidentiality						
Chg To Indic Serv - Withdrawl / Reduction	8	3	6			
Comms - Failure to Keep Informed/Consult		2	1	1		
Complaint Reg Freedom of Info Act						
Delay / Failure in Taking Action / Replying	1	5	2			
Discrimination By a Serv		2				
Failure To Follow Policy or Proc						
Level of Service (E.g. Opening Times)	2	4				
Loss or Damage to property		1				
Policy / Legal / Financial Decision		4	2			
Quality of facilities / Health Safety						
Quality of Serv Delivery (Standards)	1	1	1		1	1
Refusal To Provide A Service	1	5	2			
Staff Conduct - Attitude / Behaviour	2	4				

Analysis: The categories have been changed to hopefully produce more meaningful data. For example in 2006-07 53% of complaints related to the action or lack of action which did not greatly help identify where work needs to be done.

2007-08 analysis: 17 complaints related to withdrawal or reduction in service (8 out of 15 Learning Disabilities complaints and 6 out of 14 for Physical Disabilities). Older Peoples had 5 out of the 8 complaints about refusal to provide a service. Any complaints that relate to failure to keep clients informed (4) and staff conduct (6) is disappointing. It is positive that few complaints (5) were made around quality of service or facilities.

The Complaints Service noticed HLDT complaints have repeat themes of promised actions not carried out, repeat delays and attitude of staff. Please note significant efforts have been made to address this and a dramatic improvement has been noticed by the complaints service over the last 6 months.

6 Equalities Information – Service Users

6.1 Stage 1

Gender of Service User

Male	28
Female	41
Unknown	4

Analysis: No concerns evident

Ethnic Origin of Service User

White/British	47
Black British	1
Asian British	13
White other	4
Unknown	8

Analysis: The level of complaints relating to service users from Black and Asian backgrounds remains low.

Key message: To improve accessibility, the Complaints Service has therefore set performance targets to increase complaints from BME communities by 100% within 3 years.

Stage 1 Complaint made by

Service User	23
Relative/Partner (often informal carer)	31
Advocate –(instigated by either carer or service user)	18
Solicitors	1
Friend, Councillor, other	0

Analysis: In the last annual report it was highlighted only 13 out of 118 complainants (11%) utilised an advocate which was disappointing given the expertise of an advocate is one of the most effective tools of empowering a Service User to resolve a complaint quickly and fairly. By the Complaints Service offering advocacy to every complainant this has been increased to 18 (24%). We are exploring how we can increase this figure still further.

6.2 Stage 2 complaints

Gender of Service User

Male	7
Female	3
Unknown	2

Ethnic Origin of Service User

White/British	4
Black British	0
Asian British	4
White other	1
Unknown	3

Stage 2 Complaints made by

Service User	5
Relative/Partner (often informal carer)	5
Advocate –(instigated by either carer or service user)	2
Solicitors	0
Friend, Councillor, other	0

Analysis: The Stage 2 equalities data does not highlight any unique concerns relating to escalated complaints.

7. STAGE 2 COMPLAINTS

There were 12 Stage 2 complaints (compared to 10 in 2006-07)

Outcomes of Stage 2 complaints 2007-08

Service	Older Peoples	Physical Disability	Mental Health	Learning Disability	Contracted Services	Supporting People	TOTAL
Number	3	1	0	7	0	1	12
% escalating to Stage 2	9%	6%		46%		N/A	
% upheld (fully or partially)	100%	100%		100%		0%	

[2 HLDT complaints withdrawn]

2006-07 figures for comparison

Service	Older Peoples	Physical Disability	Mental Health	Learning Disability	Contracted Services	TOTAL
Number	5		2	3		10
% escalating to Stage 2	13%		15%	15%		
% upheld (fully or partially)	40%		100%	66%		

Key message: The best indicators as to how well a team are managing complaints are the percentage of complaints that escalate from Stage 1 to Stage 2, whether Stage 2 complaints are upheld or not and what learning is identified from complaints.

Analysis: Continuing excellent work by the Physical Disabilities teams to resolve complaints has meant only 1 complaint has escalated to Stage 2 out of 43 Stage 1 Physical Disabilities complaints in the last two years. Older People's has also seen an improvement in the percentage escalating which is encouraging.

We have seen far fewer Mental Health complaints this year and no Stage 2 complaints which is also positive. This may reflect the S.31 agreement becoming operational.

As a rough indicator you would hope that no more than 10% of complaints escalate from Stage 1 to Stage 2. The escalation rate for HLDT of 46% is unacceptable and was highlighted to senior managers at the time and via Improvement Boards at the time. In the first 6 months of the year 6 HLDT complaints escalated to Stage 2. HLDT became an area of significant senior management focus. A new temporary Service Manager was brought in, resulting in only 1 complaint in the last 6 months of the year escalating to Stage 2.

Stage 2 Response Times:

Service	Older Peoples	Physical Disability	Mental Health	Learning Disability	Contracted Services	Supporting People	TOTAL
Within 25 days (simple complaints)	1			2			3
Within 65 days (complex)	2	1		2		1	8
Over timescale				1			1
Withdrawn				2			

Analysis:

1 HLDT complaint exceeded the statutory timescale. This was due to the member of staff being sick for a significant period and therefore was unavailable for interview.

Key target for the Complaints Service: To reduce the response times for Stage 2 independent complaint investigations.

5.2 Nature of complaint

Type of Complaint	Learning Disabilities (HLDT)	Older Peoples	Physical Disabilities (PDSS)	Service Commissioning	Mental Health	Supporting People
Allocation / Reallocation of Keyworker						
Breach of Confidentiality						
Chg To Indic Serv - Withdrawl / Reduction	1	1				
Comms - Failure to Keep Informed/Consult						
Complaint Reg Freedom of Info Act						
Delay / Failure in Taking Action / Replying	2		1			
Discrimination By a Serv						
Failure To Follow Policy or Proc						
Level of Service (E.g. Opening Times)	1					
Loss or Damage to property						
Policy / Legal / Financial Decision						
Quality of facilities / Health Safety						
Quality of Serv Delivery (Standards)	2	1				
Refusal To Provide A Service	1	1				
Staff Conduct - Attitude / Behaviour						1

Analysis: It was pointed out in the last annual report that one trend in HLDT complaints was the delay or failure to take action. 5 of HLDT's Stage 2 complaints this year relate to basic customer service standard areas (Delay/Failure to take action; Quality of Service and Level of Service). These should be easy complaints to resolve if managed correctly. The fact they escalated to Stage 2 is informative.

8. STAGE 3 COMPLAINTS

There were 2 review panels held this year [the first statutory stage 3 panels in 3 years]

8.1 Stage 3 complaints by Service Area, Timescales and Outcome.

Service Unit	Setting up Panel (30 day timescale)	Panel report produced (5 day timescale)	Council Response (15 day timescale)	Outcome
1 Older Peoples	N (at request of complainant)	Y	Y	OPS upheld
1 HLDT	Y	Y	Y	HLDT not upheld further from partially upheld Stage 2

Analysis: OPS case: related to a FACS reassessment. The Panel concluded and senior management agreed the assessment incorrectly judged the client's needs as moderate. Some significant recommendations were made to alter the assessment documents and amendments to the Care Manual.

HLDT case: This and other complaints has highlighted a possible lack of specialist knowledge and skills in service provision relating to Aspergers/Autism provision which has been highlighted to senior management. The client wanted to transfer to mental health services and this has been arranged.

9. Ombudsman complaints and enquiries.

During the year, 3 complaints were considered by the Local Government Ombudsman. The conclusions reached by the Ombudsman are detailed below.

9.1 Complaints made to the Ombudsman and Decision

Service Area	Ombudsman Ruling
Older People's	Rejected – Council actions sufficient to address upheld Stage 2
Learning Disability (HLDT)	Ombudsman not investigating but judging level of compensation following admission of liability at Stage 2 (complainant wants £70,000. Council offered £3,000)
Learning Disability (HLDT)	Ombudsman still reading paperwork as of 13 August 08

Analysis: 3 complaints escalating to the Ombudsman is quite high (only 1 complaint went to the Ombudsman in the previous two years). That 2 of the 3 relate to HLDT is unsurprising.

Three factors seem most likely. Firstly, service-wide reassessments in 06-07 led to an increase in complaints (further complaints are unlikely given the time that has passed). Secondly, the difficulties in HLDT (if present progress continues, we should not see a repeat of the number of escalated HLDT complaints). Thirdly, senior and middle management time to proactively manage, adjudicate on and resolve Stage 2, 3 and Ombudsman complaints was stretched (agreement has been reached for an Assistant Director, Community Care to be employed partly to address this gap)

Key message: The fact the Ombudsman has not carried out a full investigation and issued a report against Harrow Council in the last 3 years is a significant achievement.

Key action: The agreement for an Assistant Director to the Director of Community Care with a lead role in operationally contributing to complaints management to reduce the number of escalated complaints.

10. Percentage escalation

The following table indicates how many complaints have escalated from Stage 1 to Stage 2 and how many have progressed from Stage 2 to Stage 3. By measuring these figures as a percentage we can gauge customer satisfaction with our responses to their complaints.

Average % escalation rate Stage 1- Stage 2	Harrow Council (2007-08)	13.5%
	Harrow Council (2006-07)	8.5%

Analysis: HLDT escalation rates increased from 15% in 2006-07 to 46% in 2007-08 and accounts for the jump from 8.5 to 13.5%.

Unlike most London Councils, Harrow complainants are always explained the right to go to the next stage if they are unhappy so 13.5% is not that high especially considering the escalation rate would have been 23% without the successful mediations.

However, the target should be 10%. The fact 9 out of 10 investigated Stage 2 complaints were upheld or partially upheld at Stage 2 indicates some significant improvement is needed in investigation at Stage 1.

Average % escalation rate Stage 2 - Stage 3	Harrow Council (2007-08)	20%
	Harrow Council (2006-07)	20%

Analysis: 20% is an acceptable escalation rate from Stage 2 to 3.

Key message: The most crucial test of success is whether the Ombudsman issues reports of maladministration against the Council. The Ombudsman has not carried out a full investigation and issued a report in the last 3 years

relating to Harrow Social Services (Adults or Children's). 3 of the other 6 North-West London Councils have had reports issued against them by the Ombudsman in the last year.

11. Stage 2 Outcomes

Service	Older Peoples	Physical Disability	Mental Health	Learning Disability	Supporting People	TOTAL
Upheld	2	1		3		6
Partially upheld	1			2		3
Not upheld					1	1
Withdrawn				2		2

Key message: The best indicators as to how well a team are managing complaints are the percentage of complaints that escalate from Stage 1 to Stage 2, whether Stage 2 complaints are upheld or not and what learning is identified from complaints.

Analysis: 9 out of 10 investigated complaints being fully or partially upheld indicates some complaints are escalating unnecessarily to Stage 2 because mistakes/fault are either not being recognised at Stage 1 or there is a reluctance to admit fault at Stage 1.

12. Compensation Payments

The Council provides compensation if after a complaint has been investigated or as part of an Ombudsman's investigation, it is concluded that:

- the Ombudsman would find that there has been maladministration by the Council causing injustice to the complainant; and
- he would recommend that compensation should therefore be paid to the complainant.

Payments related to the following service areas.

Service	Stage	Amount
HLDT	2	5,000
HLDT	Ombudsman	6,000 (Ombudsman estimate)
Older People's	2	200
	Total	£ 11,200

Analysis

The fact the compensation payments relate to HLDT reflect the problems HLDT were experiencing (but have or are addressing).

Key message: A complaints compensation procedure has been introduced to ensure consistent management of compensation and proper audit

13. Mediation

Harrow Council continues to deliver pioneering work in this field. The success of internal mediation noted in the last two annual reports at resolving complaints and thus preventing complaint escalation continues.

10 of 13 Adults mediations successfully resolved the complaint in 07-08 (8 out of 9 Children's). The message is the more we mediate, the fewer complaints escalate.

Without mediation, Stage 1 to Stage 2 escalation rates would have run at 23%.

Key message: The DoH has indicated that mediation will form a crucial part of the new 2009 regulations. Harrow Council, with mediators in the Complaints Service, is therefore one of the best positioned London Council to meet the requirement of the new regulations because most other London Councils do not have mediators.

14. Advocacy

The DoH have indicated it is likely advocacy for adult social services clients will become a statutory right under the 2009 new complaint regulations and will be a key focus under the new arrangements. Advocacy is already available to all service users and carers through Council funding to local voluntary groups representing all client groups. The Council may need to review the standards of advocacy being provided once the new regulations are made available by DoH.

Complainant use of advocacy has increased from 11% to 24% in the last year by the Complaints Service ensuring every complainant is made aware of advocacy support available to them.

Action point: To increase the percentage of advocacy use for Adults complaints to 33% of service users in 3 years

15 Complaints dealt with by the local authority and NHS Bodies

Please note that there were no joint investigations during this financial year.

16 Learning Lessons/Practice Improvements

The DoH consultation states organisations will be expected to achieve “a demonstrable change in the quality of services as a direct result of what people tell organisations through their complaints.”

Examples of learning include:

- A Stage 3 Review Panel concluded that the Council's guidance regarding FACS eligibility incorrectly advised staff not to provide certain services (drop-in's etc). The Care manual was revised to reflect the correct position.
- The FACS assessment form was changed
- A possible need for more specialist knowledge and skills to meet Aspergers/Autism service provision have been highlighted to senior management
- The Complaints Service has highlighted multi-agency cases (Social care, PCT, Acute, care agencies, Mental Health, Housing) where the lack of systems to ensure joined up working is apparent. For example addressing the complex multi-service needs of service users, difficult behaviour and addressing risk and serious untoward incident avoidance (vulnerability/mental health deterioration)
- The need for more support for staff who are the subject of complaints
- Amendment to the complaints procedure to clarify that service users of contracted services have the right to complain directly to the Council at Stage 1 without having to complain first to the service provider/contractor
- Agreement to introduce quarterly contract complaint monitoring reports for the Improvement Boards
- Improved multi-agency working to deal with a difficult complainant
- Changes to the direct payments procedure around kinship carers
- A complaints compensation procedure introduced to ensure uniformity and proper audit
- Introduction of a vexatious/unreasonably difficult complaints procedure to better manage difficult complainants

17. Update on new 2009 regulations

The Department of Health is planning to introduce an uniform NHS/adults social care complaints procedure in 2009 with only a single stage before complaints proceed to the Ombudsman (we currently have a 3 stage procedure). The DoH has not currently published specific details beyond indicating an expectation that every complainant should receive a complaints plan, the need to risk assess all complaints when they arrive and mediation and advocacy should be used more often.

Key message: The new regulations presents a significant challenge. If a single stage process is introduced then front-line complaint investigation standards will need to improve (please see paragraph 11 – for analysis on the number of Stage 2 complaints upheld).

18. Ombudsman's powers widened

The Ombudsman's powers of investigation have been widened to allow the Ombudsman to investigate new areas e.g. procurement; to carry out joint

NHS/Council investigations; to investigate matters of interest that are not complained about but come to light as part of their investigations.

Stuart Dalton

Complaints Manager, Adults and Housing

Date: 13 August 2008

Financial Implications

There are no specific budget issues associated with this report. All compensation payments are met by the appropriate service within base budgets.

Performance Issues

No PAF or BVPI indicators. However, complaints has a significant impact on the customer satisfaction KPI.

SECTION 3 - STATUTORY OFFICER CLEARANCE

Name: John Stansfield	<input type="checkbox"/>	on behalf of the* Chief Financial Officer
Date: 14 th August 2008		
Name: Helen White	<input type="checkbox"/>	on behalf of the* Monitoring Officer
Date: 14 th August 2008		

SECTION 4 - CONTACT DETAILS AND BACKGROUND PAPERS

Contact: STUART DALTON, PEOPLE FIRST COMPLAINTS SERVICE
MANAGER (020 8424 1578)

Background Papers: NONE

IF APPROPRIATE, does the report include the following considerations?

1.	Consultation	YES/ <u>NO</u>
2.	Corporate Priorities	YES / <u>NO</u>