

Meeting:	Overview and Scrutiny Committee
Date:	3 September 2009
Subject:	Adults Services Complaints Annual Report 2008-09
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:	None

SECTION 1 – SUMMARY AND RECOMMENDATIONS

This report sets out the statutory Adults Services complaints Annual report (social care only) 2008-09.

RECOMMENDATIONS: None. For Information purposes only.

SECTION 2 - REPORT

ANNUAL REPORT for Adults Social Care Services Complaints for period 2008-09

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1. Context

This report provides information about complaints made during the twelve months between 1 April 2007 and 31 March 2009 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 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 usually 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.

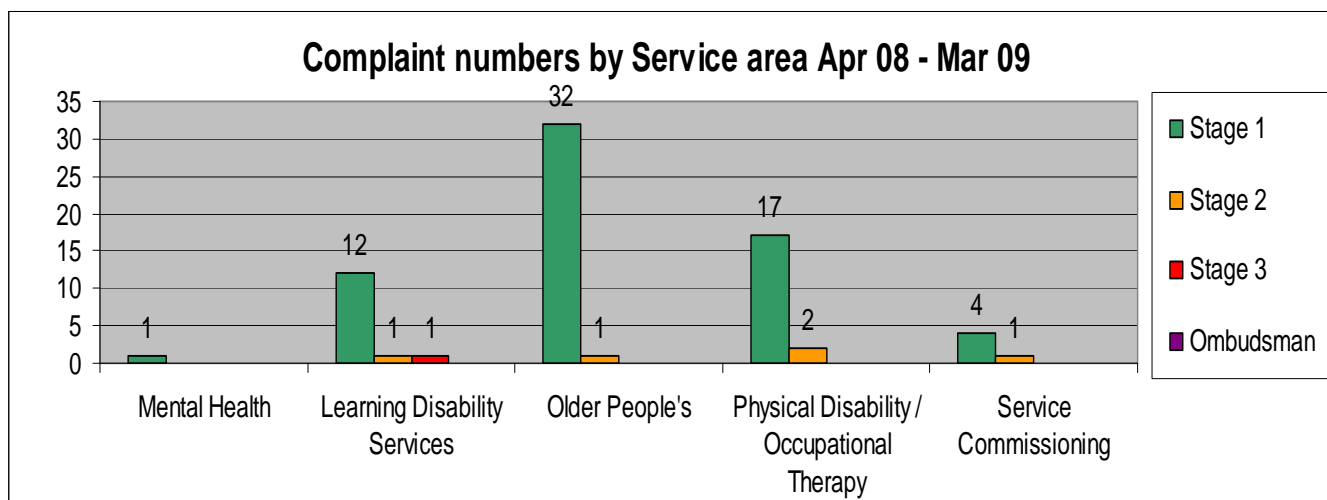
A further option for complainants is the Local Government Ombudsman (LGO) who is empowered to investigate where it appears that a Council’s own investigations have not resolved the complaint. Complainants can refer their complaint to the LGO at any time, although the Ombudsman normally refers the complaint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

3. Summary of Activity

Breakdown of complaints made:

Between 1 April 2007 and 31 March 2009 we received and closed 66 Stage 1 complaints. 5 complaints progressed to Stage 2. 1 proceeded to Stage 3.

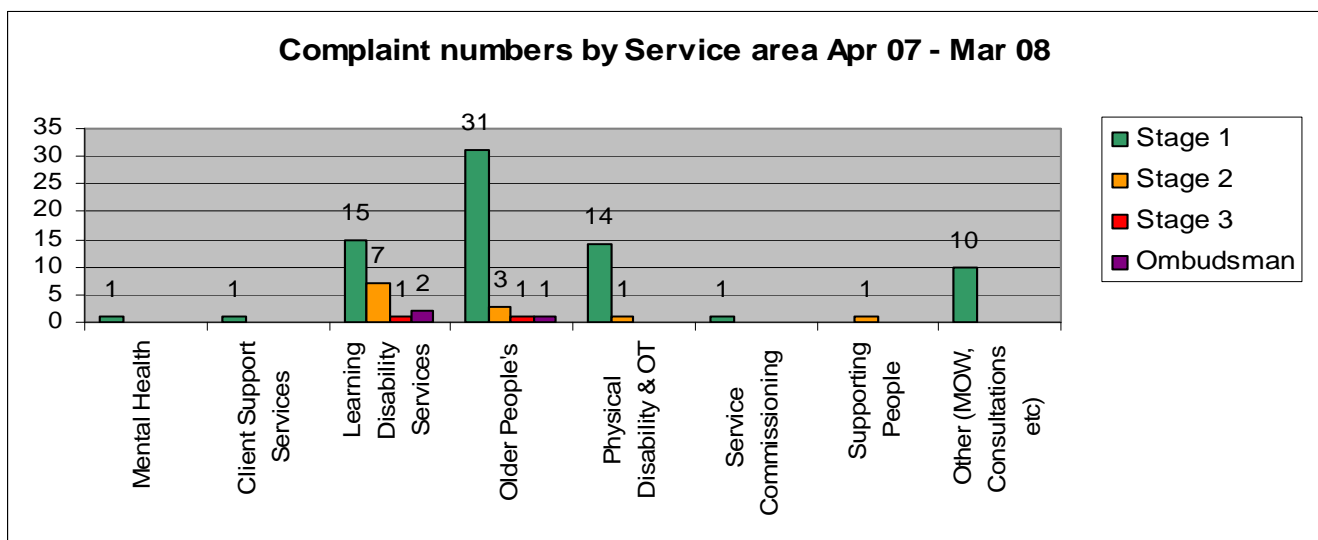
The Ombudsman reviewed no complaints that had been through the complaints procedure first during this period. This is the fourth year in a row where the Ombudsman has not issued any reports against Harrow social services which is a significant achievement.



Analysis: It has been a good year, especially compared to the year before with few escalated complaints. Timescale achievement and the percentage of escalated complaints upheld has also considerably improved.

Numbers of Stage 1's are slightly low. This may be explained by the Complaints Service becoming more involved in resolving concerns before they escalate into complaints. The Complaints Service identified 49 potential stage 1's that were addressed without a Stage 1 needed. 20 complainants came back to the Complaints Service following their stage 1 response where their outstanding queries were resolved without the need for a Stage 2.

3.1 Comparison with the year before



Analysis: The improvement in the last year has been considerable and impressive. The worrying numbers of escalated complaints highlighted in the last report has decreased from 17 last year to only 6 this year. Moreover, the number of escalated complaints that were upheld has reduced. This has been achieved through some key appointments/changes, some excellent work at Service level and prompt action being taken by senior management when concerns are highlighted.

3.2 Numbers of complaints over time

	Stage 1	Stage 2	Stage 3
2008-09	66	5	1
2007-08 (letter-vetting and mediations)	73	10	2
2006-07 (letter-vetting and mediations)	118	10	2
2005-06 (pre-letter vetting; post-mediation)	76	5	0
2004-05 (pre-mediation)	81	12	1
2003-04 (pre-mediation)	90	13	1

Analysis: The introduction of **mediation** in 2005-06 significantly reduced and continues to significantly reduce the number of complaints that escalate – of 61 social care complaints where mediation has been used since it was introduced in 2005, mediation has resolved the complaint in 47 or 77% of those complaints.

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. 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. This transparency may have contributed to the improvement around the number of Stage 2 complaints not being upheld discussed later in the report.

Key message: Virtually no other London borough Complaints Services offer mediation and letter-vetting. Not only has the escalation rate from Stage 1 to Stage 2 dropped from 15% between 2003-05 to 9% between 2005-09 but Members can now also be assured all complainants know their rights if they are unhappy with their complaint response.

3.3 Key improvements

- The agreement for an assistant to the Divisional Director of Community Care with a lead role in operationally contributing to complaints management to reduce the number of escalated complaints.” Outcome: Achieved. The introduction of a Head of Community Care has already started to make a profound difference.
- Addressing Learning Disability complaint repeat themes of promised actions not carried out, repeat delays and attitude of staff. Outcome: Achieved, bar delays (see Focus for the future below). Overall, an undoubted and impressive turnaround by Learning Disability in a short space of time evidenced by the dramatic reduction in escalated complaints (from 46% to 8%).

- Senior management set a new performance target of 75% for Stage 1 timescale achievement. Outcome: Achieved. 4 of 5 areas have achieved the target (from 2 of 5 last year).
- A possible need for more specialist knowledge and skills to meet Asperger/Autism service provision have been highlighted to senior management. Outcome: Ongoing. Provision is being reviewed.
- 07-08: 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. Outcome: Achieved. Only 40% this year fully or partially upheld.
- Systematically monitoring and reporting on agreed actions arising from complaints to ensure they are being carried out. Outcome: Achieved. Learning monitoring reports to senior management have been trialled during 2008-09.
- Agreeing helpful performance targets. Outcome: Achieved. 75% time target and 10% escalation rate achieved.
- To reduce the escalation rates from Stage 1 to Stage 2 to below 10% overall. Outcome: Achieved. Only 7.5% of complaints escalated from Stage 1 to 2 compared to 13.5% the year before.
- Increasing access to complaints for hard to reach communities/service users. Outcome: Not fully achieved. Despite a raising awareness campaign and producing a dedicated equalities complaints plan, complaints from BME communities have only increased from 21.5% to 24.5% so progress has not been as much as hoped for. This remains a focus for the future.
- To increase the percentage of advocacy use for Adults complaints to 33% of service users in 3 years. Outcome: Not achieved. The numbers using advocates has reduced. This is covered in paragraph 13.
- Putting in place processes to allow easy transition to the new complaints regulations due in 2009 Outcome: Achieved. The new complaints regulations were being applied from 1 April despite the regulations only being published 2 months before.
- Producing contracted services complaint monitoring reports. Outcome: Achieved. The first report is in paragraph 8.
- To build effective and constructive relationships with LINKs. Outcome: Achieved but with more work to be done. The Complaints Manager sits on the statutory liaison group and the Director gave a speech to LINKs members in April 2009.
- Mediation. The Council offers a unique mediation service that no other London Council does for complainants. 75% of Councils did not use mediation once last year.

4. Focus for the near future:

- Increasing access to complaints for seldom heard communities/service users.
- To increase the percentage of advocacy use for Adults complaints [reconsider what is an achievable target]
- Improving Learning Disability timescale management.
- Embed the new timescale standards.
- Maintain improved escalation rates.
- Maintain improved percentage of escalated complaints upheld.
- To reduce the response times for Stage 2 independent complaint investigations.
- To start complainant satisfaction surveys (A 2008 National Audit Report identified that only 25% of Councils conduct satisfaction surveys of complainants).
- Completing the portfolio of complaints training.

- Monitoring adaptations timescales.
- Produce a new format of complaints leaflets with more information and space to write complaints.
- Introduce a feedback form following mediation which staff and service users can fill in.
- Implementing a 'Support for staff who are the subject of complaint' strategy.
- Implementing the identified improvements to complaints monitoring and reporting of contracted services (see point 8).
- Identify a consistent way of reporting on Ombudsman cases.
- Addressing concerns about delays of processing Blue badges and how the badges are assessed.
- To maintain a healthy level of Stage 1 complaints (e.g. over 70).
- For the new 'learning group' to contribute meaningfully to organisational learning and co-ordinated risk management. To foster a non-blame, learning culture and monitor agreed learning actions are carried out.

5. Stage 1 Complaints

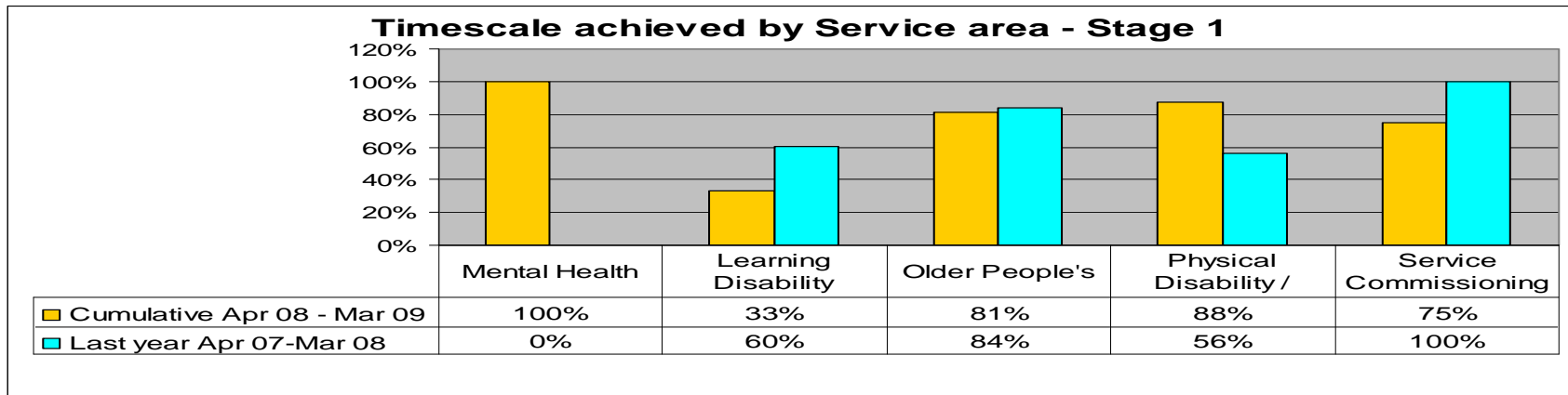
Complaints	Older Peoples	Physical Disabilities	Learning Disability (HLDT)	Mental Health	Contracted Services	Finance	Other: HART, Consultations, MOW, Supporting People etc	Total
2008-09	32	17	12	1	4	0	0	66
2007-08	31	14	15	1	1	0	10	73
2006-07	38	29	20	13	9	3	6	118

Analysis: Stage 1 complaints numbers have stayed stable compared to the previous year for the three areas most likely to receive complaints. The only significant difference is complaints that related to 'Other' which have reduced. 2006-07 numbers were higher following FACS reassessments.

The signing of the Section 75 agreement with CNWL Central & North-West London Foundation Trust has meant mental health complaints are usually dealt with by mental health services which accounts from the reduction from 13 to 1.

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]

5.1 Stage 1 response times



Analysis: There was excellent work by 4 of the 5 areas to achieve the new 75% internal performance target (compared to 2 of the 5 areas achieving 75% last year). This is only the second annual report to report on timescale adherence but it already demonstrates how valuable recording and reporting on timescales is.

Key action: Learning Disability management have identified some administrative changes to help improve their timescale management.

5.2 Nature of complaint

Type of Complaint	Learning Disabilities (HLDT)		Older Peoples		Physical Disabilities (PDSS)		Service Commissioning		Mental Health	
	08-09	07-08	08-09	07-08	08-09	07-08	08-09	07-08	08-09	07-08
Allocation / Reallocation of Keyworker										
Breach of Confidentiality			2		1					
Chg To Indic Serv - Withdrawal / Reduction	1	8	1	3	1	6				
Comms - Failure to Keep Informed/Consult			1	2		1	1	1		
Complaint Reg Freedom of Info Act										
Delay / Failure in Taking Action / Replying	3	1	5	5	5	2	1			
Discrimination By a Serv				2						
Failure To Follow Policy or Proc			1				1			
Level of Service (E.g. Opening Times)	4	2	2	4	3					
Loss or Damage to property				1	1					
Policy / Legal / Financial Decision			4	4		2				
Quality of facilities / Health Safety					1					
Quality of Serv Delivery (Standards)	1	1	5	1	2	1				1
Refusal To Provide A Service		1	8	5	2	2				
Staff Conduct - Attitude / Behaviour	3	2	3	4	1		1		1	
TOTAL	12	15	32	31	17	14	4	1	1	1

Tip: A helpful way of analysing this data is to look for high numbers of one type of complaint relative to the overall number of complaints for that service area. Another way of analysing the data is to examine a particular category because you are looking to see the impact of a change or because it is a service priority. For example narrowing criteria is likely to produce more complaints about withdrawal and reduction of service. A third way is to focus on categories that may be more serious like discrimination.

Analysis: The most noticeable trend was only 3 complaints related to withdrawal or reduction in service (compared to 17 last year).

Delay or failure to take action was the most common complaint across services (14 complaints). This reflected a pattern identified by the Council’s mystery shopper exercise.

Complaints about staff attitude have remained similar to the previous year, though any complaints of this nature are disappointing if justified.

There were 3 complaints were about breaches of confidentiality where there were none the year before. Staff have been provided with training on confidentiality during the year. Hopefully, the numbers will reduce next year as a result.

Both Learning Disabilities and Physical Disabilities have seen increases in customer service type complaints. For example, delays and level of service complaints. So it will be interesting to review levels next year.

Older Peoples have seen an increase in complaints about the quality of service. Older Peoples continue to receive the majority of complaints that relate to refusal to provide a service (8 out of 10 this year). They were also the only service to get complaints about policy/financial or legal decisions.

Key action: The Complaints Manager highlighted to senior management capacity issues in Older People’s that was creating pressure on the quality of service delivered. Impressively, within a month, an additional deputy manager was brought in.

5.1 Complaints upheld

	<u>Qtr 1</u> Apr – Jun 08	<u>Qtr 2</u> Jly – Sept 08	<u>Qtr 3</u> Oct – Dec 08	<u>Qtr 4</u> Jan – Mar 09	<u>Total</u>	<u>Percentage</u>
Upheld	8	5	9	6	28	42%
Partially upheld	2	7	3	2	14	22%
Not upheld	7	4	6	3 (4 awaiting outcome)	24	36%
Total	17	16	18	15	66	100%

Analysis: This is the first report to report on Stage 1 upheld complaints. All services make mistakes. The most crucial point is that managers and staff are open and transparent about mistakes and take remedial action. All managers received mandatory training in May 2009 which re-emphasised this point.

Key action: The report next year will record upheld complaints against service areas.

6. Equalities Information – Service Users

6.1 Stage 1

Gender of Service User

	08-09	07-08
MALE	28	28
FEMALE	37	41
UNKNOWN	1	4

Analysis: It is interesting to note both years have seen more complaints relating to female service users. However, this does not indicate a concern.

Ethnic Origin of Service User

	08-09	07-08
White/British	39	47
Black British	1	1
Asian British	12	13
White Other	1	4
Unknown	13	8

Analysis: The level of complaints relating to service users from Black and Asian backgrounds remains low. Only a disappointing 24.5% of complaints were from ethnic minority service users. This is a slight increase on last year where the figure was 21.5%. However, a partial explanation may be that half of complaints relate to Older People's Services where there are more White/British service users.

Key message: To improve accessibility, the Complaints Service set a target to try and increase complaints from BME communities by 100% by April 2011.

Key action: 1) A diversity plan has been added to the raising awareness complaints plan. 2) The Complaints Service to obtain diversity demographics data for individual service areas to help identify what would be proportionate levels of complaints.

Stage 1 Complaint made by

	08-09	07-08
Service User	26	23
Relative/Partner (often informal carer)	29	31
Advocate –(instigated by either carer or service user)	9	18
Solicitors	1	1
Friend, Councillor, other	1	0

Analysis: In the 06-07 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. An advocacy leaflet is now sent to all complainants which saw the 2007-08 figure increase to 24% so it is disappointing this figure has dropped back to 13%.

Key action: The Complaints Service will try to discuss advocacy with every complainant.

6.2 Stage 2 complaints

Gender of Service User

	08-09	07-08
MALE	1	7
FEMALE	4	3
UNKNOWN	0	2

Ethnic Origin of Service User

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

Stage 2 Complaints made by

	08-09	07-08
Service User	1	5
Relative/Partner (often informal carer)	2	5
Advocate –(instigated by either carer or service user)	1	2
Solicitors	1	0
Friend, Councillor, other	0	0

Analysis: The Stage 2 equalities data does not highlight any unique concerns relating to escalated complaints, not already covered by Stage 1 data.

7. Stage 2 complaints

There were 5 Stage 2 complaints (compared to 12 in 2007-08 and 10 in 2006-07)

Key message: Some of the best indicators as to how well services 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.

7.1 Percentage of complaints escalating to Stage 2

Service	Mental Health			Learning Disabilities			Older Peoples			Physical Disabilities			Commissioning		
	08-09	07-08	06-07	08-09	07-08	06-07	08-09	07-08	06-07	08-09	07-08	06-07	08-09	07-08	06-07
Number	0	0	2	1	7	3	1	3	5	2	1	0	1	1	0
% escalating to Stage 2	0%	0%	15%	8%	46%	15%	3%	9%	13%	11%	6%	0%	33%	N/A	0

Key message: 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: Escalation rates dropped from a disappointing 13.5% last year to an encouraging 7.5% this year.

The improvement made by Learning Disability is incredible. The statistics speak for themselves. The Complaints Manager highlighted last year's figure of 46% as unacceptable. To turn this around in a year to 8% is an outstanding achievement.

A figure of 3% for Older People's stage 2's is also fantastic. The only slight note of caution is the Stage 2's are creeping up for Physical Disabilities (11% this year compared to 0% two years ago) which we would not want to see continue next year.

Mental Health and Commissioning get too few stage 1 complaints to be able to use percentage escalating as a useful performance indicator.

7.2 Stage 2 Outcomes

Service	Mental Health			Learning Disabilities			Older Peoples			Physical Disabilities			Commissioning		
	08-09	07-08	06-07	08-09	07-08	06-07	08-09	07-08	06-07	08-09	07-08	06-07	08-09	07-08	06-07
Number	0	0	2	1	7	3	1	3	5	2	1	0	1	1	0
Upheld	-	-	2	-	3	1	-	2	2	-	1	-	1	-	-
Partially upheld	-	-	-	-	2	1	1	1	-	-	-	-	-	-	-
Not upheld	-	-	-	1	-	1	-	-	3	1	-	-	-	1	-
Withdrawn	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-
Awaiting outcome	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
% fully upheld	N/A	N/A	100%	0%	60%	33%	0%	66%	40%	0%	100%		100%	0%	
% fully or partially upheld	N/A	N/A	100%	0%	100%	66%	100%	100%	40%	0%	100%	N/A	0%	0%	N/A

Analysis: This year saw easily the lowest percentage of fully upheld or partially complaints compared to the two preceding years. Last year 60% of complaints were fully upheld at Stage 2 (50% in 2006-07). This year only 20% were. Crucially the Council chose to escalate the one upheld Commissioning complaint straight to Stage 2 because it was clear that there had been numerous errors by the contractor so it was not due to weak Stage 1 responses. Last year 90% of complaints were fully or partially upheld (70% in 2006-07), this year only 40% were.

The transparency about fault by Older People's in their Stage 2 should be recognised. Without this willingness to accept fault, it is highly likely the complaint would have escalated to the Ombudsman.

Key message: If Adults can achieve similar figures next year (even with a couple upheld) then it is irrefutable evidence of embedded improved practice as opposed to a short-term improvement.

7.3 Stage 2 Response Times

Service	Older Peoples	Physical Disability	Mental Health	Learning Disability	Contracted Services	Supporting People	TOTAL
Within 25 days (simple complaints)							0
Within 65 days (complex)	1			1			1
Over timescale		2			1		3
Withdrawn							

Analysis: National Audit Office report: extract “In 2006-07, Stage 2 investigations took an average of 63 working days for all local authorities”

All of the investigations were complex cases (i.e. 65 day target to complete). Of the three that did not meet the timescale, one was due to the postponement by the complainant. The other two were due primarily to the time it took for the Council to formulate a response following independent investigation. This delay was one of the reasons the Complaints Manager recommended the need for a Head of Community Care.

The National Audit Office statistics show that Stage 2 investigations are often lengthy so Harrow’s figures are not unique but also indicates more work needs to be done.

Key message: The time the Council takes to consider and respond to the independent investigations has improved beyond recognition with the introduction of a Head of Community Care.

Key actions: 1) To reduce the response times for Stage 2 independent complaint investigations the Complaints Service will carry out a Lean Kaizen analysis; 2) Independent investigators have been asked to provide updates as a minimum of every two weeks; 3) The Complaints Service is exploring the benefits and work involved in reporting on end-to-end timescales for complaints to be resolved.

7.4 Nature of complaint

Type of Complaint	Learning Disabilities (HLDT)		Older Peoples		Physical Disabilities (PDSS)		Service Commissioning		Mental Health	
	08-09	07-08	08-09	07-08	08-09	07-08	08-09	07-08	08-09	07-08
Allocation / Reallocation of Keyworker					1					
Breach of Confidentiality										
Chg To Indic Serv - Withdrawal / Reduction		1		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	1								
Loss or Damage to property										
Policy / Legal / Financial Decision										
Quality of facilities / Health Safety										
Quality of Serv Delivery (Standards)		2	1	1			1			
Refusal To Provide A Service		1		1						
Staff Conduct - Attitude / Behaviour										
TOTAL	1		1		2			1		

Analysis: From the small number of Stage 2 complaints, there are no apparent trends. The Council chose to independently investigate a complaint about Care UK straight away at Stage 2 given the level of failures involved in the complaint.

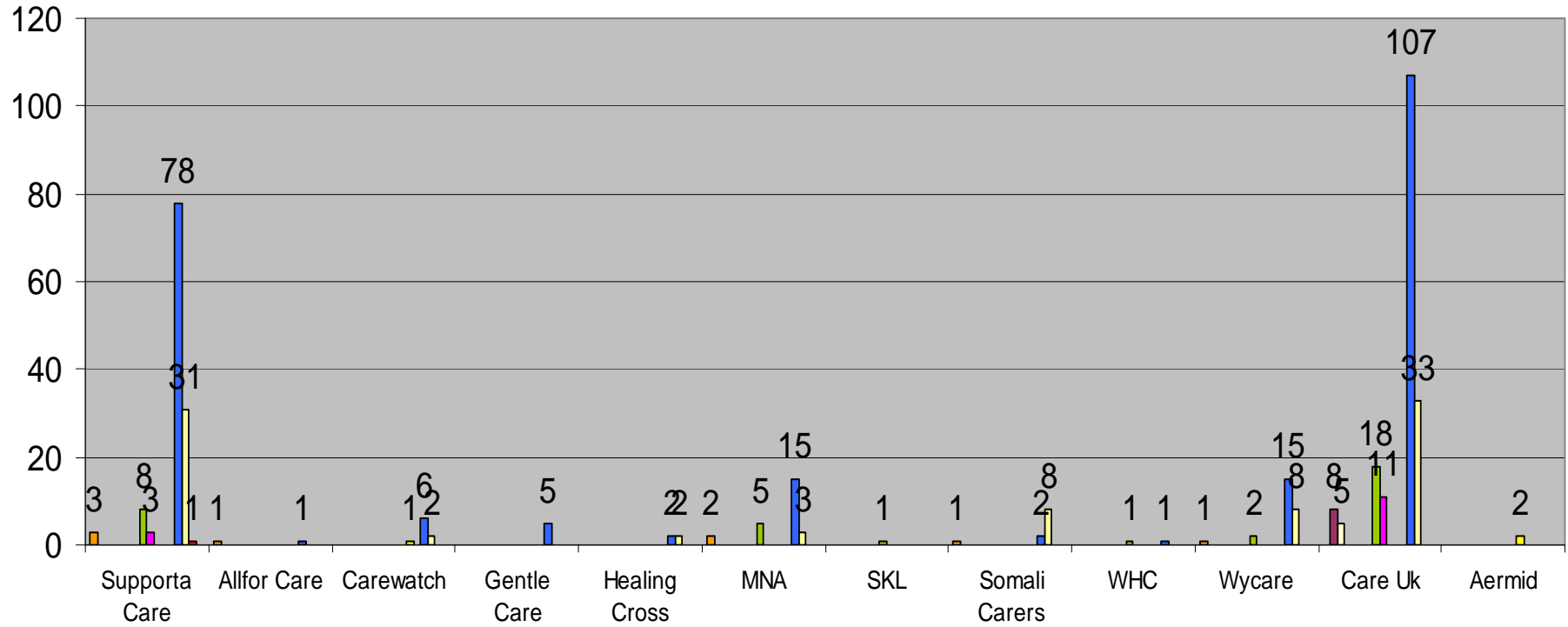
8 Commissioned Services

8.1 Domiciliary Care service failure and complaints nature of complaint and outcome

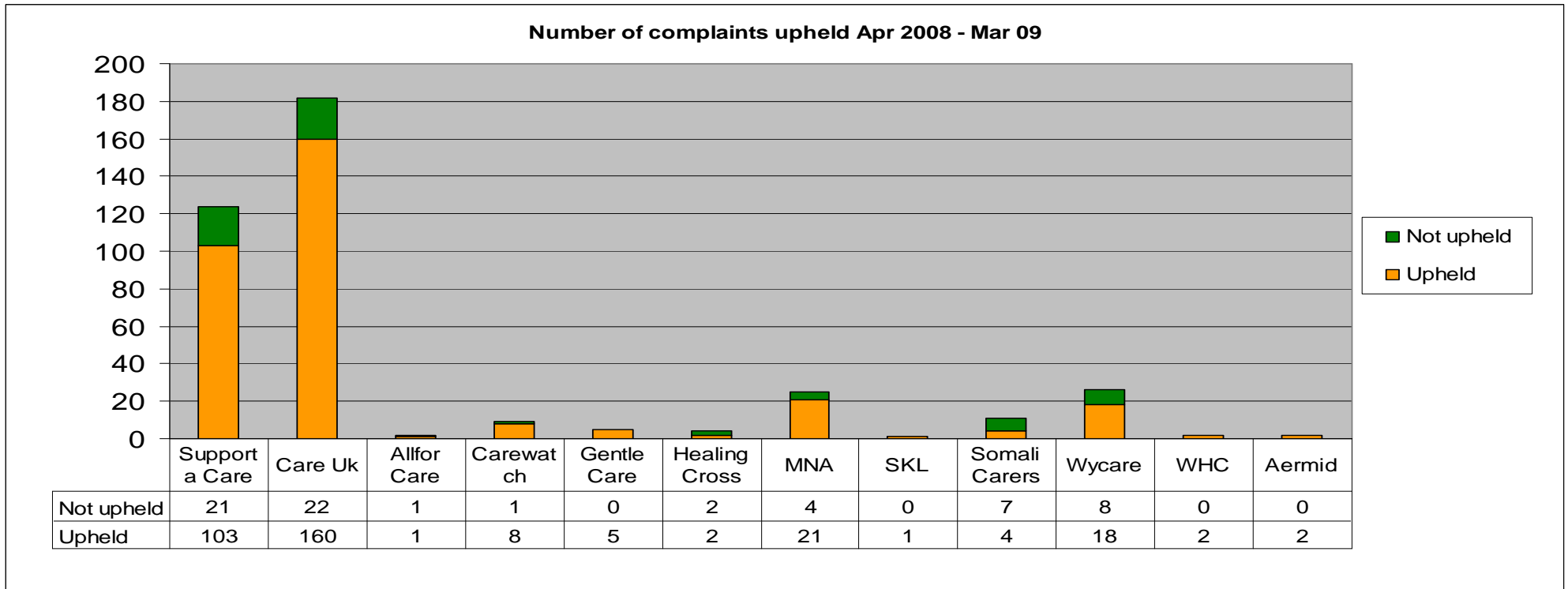
	Supporta Care	Upheld (U)	Not Upheld (NU)	Care UK	U	NU	Allfor Care	U	NU	Carewatch	U	NU	Gentle Care	U	NU	Healing Cross	U	N U
Failure to follow policy or procedures	3	3					1	0	1									
Loss or damage to property				8	5	3												
Quality of Facilities/Health and safety				5	2	3												
Allocation ? Re-allocation of Keyworker																		
Breach of confidentiality																		
Discrimination by an individual																		
Discrimination by a service																		
Staff conduct - attitude/behaviour	8	0	8	18	16	2												
Communication - Failure to keep informed/consult	3	1	2	11	8	3												
Refusal to provide a service																		
Change to an individual's service - withdrawal/reduction										1	0	1						
Delay or failure in taking action or replying																		
Level of service (eg opening times) Timings - missed calls	78	73	5	107	103	4	1	1	0	6	6	0	5	5	0	2	0	2
Quality of service delivery (standards) Incomplete tasks - continuity	31	26	5	33	26	7				2	2	0				2	2	0
Policy/Legal/financial decision	1	0	1															
Freedom of Information Act																		
Totals	124	103	21	182	160	22	2	1	1	9	8	1	5	5	0	4	2	2

	MNA	Upheld (U)	Not upheld (NU)	SKL	U	NU	Somali Carers	U	NU	WHC	U	NU	Wycare	U	NU	Aermid	U	NU
Failure to follow policy or procedures	2	2	0				1	0	1				1	1	0			
Loss or damage to property																		
Quality of Facilities/Health and safety																		
Allocation ? Re-allocation of Keyworker																		
Breach of confidentiality																		
Discrimination by an individual																		
Discrimination by a service																		
Staff conduct - attitude/behaviour	5	2	3	1	1	0				1	1	0	2	1	1			
Communication - Failure to keep informed/consult																		
Refusal to provide a service																		
Change to an individual's service - withdrawal/reduction																2	2	0
Delay or failure in taking action or replying																		
Level of service (eg opening times) Timings - missed calls	15	15	0				2	2	0	1	1	0	15	12	3			
Quality of service delivery (standards) Incomplete tasks - continuity	3	2	1				8	2	6				8	4	4			
Policy/Legal/financial decision																		
Complaint regarding the Freedom of Information Act																		
Totals	25	21	4	1	1	0	11	4	7	2	2	0	26	18	8	2	2	0

Type of complaints Apr 08 - Mar 09



- Failure to follow policy or procedures
- Quality of Facilities/Health and safety
- Breach of confidentiality
- Discrimination by a service
- Communication - Failure to keep informed/consult
- Change to an individual's service - withdrawal/reduction
- Level of service: Timings - missed calls
- Policy/Legal/financial decision
- Loss or damage to property
- Allocation ? Re-allocation of Keyworker
- Discrimination by an individual
- Staff conduct - attitude/behaviour
- Refusal to provide a service
- Delay or failure in taking action or replying
- Quality of service delivery (standards) Incomplete tasks
- Complaint regarding the Freedom of Information Act



Key message: This is the first annual report to provide statistics on domiciliary care complaints.

Analysis

Quarter 1: 103 Quarter 2: 97 Quarter 3: 237 Quarter 4: 66

The sharp rise in quarter 3 complaints/service failures was largely due to the knock-on effect of trying to deliver services during exceptional adverse weather conditions.

Missed calls accounted for the majority of complaints/service failures (over 60%), with quality of service (incomplete tasks or poor continuity) the second most common complaint at c.15%.

There was significant service user dissatisfaction with Care UK. For the year, Care UK received more complaints about staff attitude than all the other service providers put together. Care UK had 8 upheld complaints about poor communication (failure to keep service users

informed) compared to only 1 upheld for all other providers. Care UK was also the only provider to have complaints relating to loss/damage to property and health and safety issues. Equally, it is important to put the volume of complaints context. There were only 182 complaints or service failures arising from 164,000 Care UK service user visits in 08-09.

If there is a positive in this it is Care UK will clearly uphold complaints/service failures that are justified given 160 of 182 complaints/service failures were upheld which is a critical cultural requirement if Care UK is to improve and learn from its mistakes.

The situation improved significantly in the last quarter with the level of complaints about Care UK dropping significantly following a default notice (improvement notice) being served on them by the Council.

Since the default was issued to Care UK in November 2008 there has been a marked increase in performance including:

- Care UK have agreed an improvement plan that introduces penalties for Care UK if they do not meet the improvement targets, including becoming a 2 star service by September 2009.
- From a high point in August 2008 of 111 missed calls in 1 month to only 4 missed calls in total for the 3 months of March, April and May 2009.
- The volume of provision that Care UK deliver has increased as new staff have been recruited and new work has been taken on in a measured way;
- % of calls delivered within 15 minutes is running at 79%;
- Only 0.07 % of visits delivered result in a service failure or complaint for May 09. There were clear improvements in the levels of service failures/ complaints in Quarter 4 of 08-09;
- The national Homecare survey identifies satisfaction levels at 81.3% for Care UK;
- The independent Age Concern Harrow survey shows 94% satisfaction with Care UK;
- There has also been an improvement in the CQC rating of the service from poor to adequate.

Somali Carers was the only provider to uphold fewer complaints/service failures than it rejected (4 upheld, 7 not upheld). So overall, it would appear providers are open about accepting fault. However, it is interesting that Supporta Care rejected all 8 complaints about staff attitude/behaviour which is a trend worth monitoring in future reports. This is crucial because being open about fault is the first step to learning from complaints.

There is no previous year report to compare to. However, anecdotally there were more complaints this year compared to last, particularly immediately following the change of provider for the large block contracts. However, this has stabilised and the final quarter's figures are encouraging.

Future reports

This is the first year a report has been produced on domiciliary care which has highlighted a number of ways that monitoring and reporting can improve. In particular Contracts & Brokerage and the Complaints Service will explore:

- Reporting on the volume of services delivered against each service provider to help inform if complaint volumes are disproportionate;
- Distinguishing between service failure and complaints;
- Reporting on timescales to respond to complaints;
- Learning from complaints is not evidenced to the Council currently. Monitoring arrangements need to review how this is done;
- Reports on residential care complaints need to be considered;
- Standardising monitoring of Spot and Cost and Volume contracts.

8 Stage 3 complaints

There was 1 review panel held this year [compared to 2 last year].

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 Learning Disability	Y	Y	Y	No further points of complaint upheld

Analysis: The one Stage 3 related to level of service. Lawyers were challenging the Council's Asperger Syndrome arrangements. The independent Panel concluded the Council was meeting minimum statutory requirements but made a number of recommendations to achieve best practice. There have been similar previous complaints about Asperger Syndrome assessment and provision. A multi-agency group has been set up to explore services for autism with the first meeting in May.

9. Ombudsman complaints and enquiries

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 4 years relating to Harrow Social Services (Adults or Children's).

Analysis: During the year, no complaints were considered by the Local Government Ombudsman that had gone through the Council's complaints procedure first. The Council chose not to investigate one complaint because the complaint was about a decision that was based on national guidance. The Ombudsman confirmed this position and chose not to formally investigate this complaint.

3 complaints escalated to the Ombudsman in 07-08 having been through the Council's complaints procedure so it demonstrates good progress that no complainants chose to proceed to the Ombudsman this year.

Key message: Adult social care's strong record for handling complaints is evidenced by the following: Of 120 complainants who approached the Ombudsman about Harrow Council services in 2008-09, only 3 related to Adult social care (i.e. two premature complaints and the one mentioned above). Only 3 out of 120 is a remarkable statistic.

10. Percentage escalation

The following table indicates the percentage of complaints that have escalated from Stage 1 to Stage 2 and from Stage 1 to Stage 3. By measuring these figures as a percentage we can gauge customer satisfaction with our responses to their complaints. By measuring the level of Ombudsman adverse rulings we can gauge how well the Council identifies fault and adequately addresses it.

Year	Average % escalation rate Stage 1- Stage 2	Average % escalation rate Stage 1- Stage 3	Ombudsman published adverse ruling
2008-09	7.5%	1.5%	0%
2007-08	13.5%	2.7%	0%
2006-07	8.5%	1.7%	0%
2005-06	6.5%	0%	0%
2004-05	15%	1.2%	0%
2003-04	14.5%	1.1%	1.2% (1)

Analysis: Unlike most London Councils, Harrow complainants are always explained the right to go to the next stage if they are unhappy so 7.5% going from Stage 1 to Stage 2 is a very healthy position.

11. 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
Learning Disability	1	£100
Older Peoples	2	£4, 332.86
	Total	£4, 432.86

Analysis

Learning Disability case: £100 was paid in compensation for unacceptable delays in responding to an access to records request (please see trend in 5.2 about delays and the identified action in 3.3 to improve response times in Learning Disabilities).

Older Peoples: Reimbursement of the cost of an incorrect placement in a Nursing home rather than a cheaper residential care home that would have met the service user's needs. Early acknowledgement and willingness to

reimburse these costs resolved this case, which otherwise would most likely have ended up at the Ombudsman.

For comparison; £11,200 was paid in compensation in 2007-08.

12. Mediation

Key message: The new complaint regulations makes mediation critical. 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.

Analysis: There were only 4 mediations (2 of the 4 were successful) in 08-09 for Adults social care (compared to 9 for Children's Services). In comparison 10 of 13 Adults mediations successfully resolved the complaint.

Harrow Council continues to deliver pioneering work in this field. Given mediation has resolved 77% of the 61 complaints where it was used in the last 4 years, it is crucial we continue to utilise mediation as much as possible.

The complaint escalation rate has almost halved since the introduction of mediation in 2005 from 15% to 9% 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.

13. Advocacy

Harrow has a number of local advocacy services covering the spectrum of services. Concerted efforts are being made to build closer working ties with non-professional and local community groups.

Analysis: In the 06-07 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. In 2007-08 the figure increased to 24% (an advocacy leaflet is now sent to all complainants). It is disappointing this figure has dropped back to 13%.

Action point: 1) The Complaints Manager is helping produce a joint Council-NHS advocacy policy and vision. 2) Exploring requiring all commissioned advocacy services to provide a quality mark. 3) The Complaints Service is encouraging services to have regular meetings with the relevant advocacy services that relate to them.

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

There were 3 joint investigations. Three Stage 1 complaints relating to Older Peoples and the Hospital Trust. None of this highlighted partnership concerns.

15. Learning Lessons/Practice Improvements

The Corporate Director approved in June 2009 a cross-directorate 'Learning Group' to oversee learning from complaints. This should make a significant difference moving forward.

- The idea of a reciprocal Occupational Therapy (OT) re-assessment arrangement is being taken to the London Councils OT Group so the Council can access cheap and quick independent OT re-assessments.
- Training on confidentiality for all social care staff following 3 breaches of confidentiality complaints.
- The Complaints Manager highlighted to senior management capacity issues in Older People's that was creating pressure on the quality of service delivered. Within a month, an additional deputy manager was brought in.
- The Council and Harrow PCT & CNWL looked at proposals to develop a specialist Aspergers assessment service.
- The 'no response' procedure was amended and reissued.
- Blue badge appeal template letter adjusted on HOST (social care) to provide correct appeal information.
- Direct Payment leaflet adjusted/updated.
- Training for staff on assessing Aspergers clients agreed.
- Review of the current discharge planning procedure for those who are self-funders.
- Joint discharge planning training for Health and Social Care Staff.
- Increasing the involvement of service users & families in reviews with the outcomes formally recorded on care plans (to be addressed through staff training).
- Information given to service users & relatives regarding the 12 week disregard updated.
- Review of how carers' details can be input into the system.
- Processes amended in Physical Disabilities to ensure all letters are responded to.
- Training for health & social care staff on discharge procedures.
- Following loss of important documents in the post, the procedure for sending important documents was changed.

16. Update on new 2009 regulations

The new regulations came into effect from 1 April 2009. The key changes are:

- It is a joint procedure with the NHS (combined responses are expected)
- The previous 3 stage procedure is replaced by a requirement for a single organisational sign-off
- A report is required for every complaint
- No review panels
- No fixed timescales. Timescales are to be negotiated with complainants
- A duty to discuss and agree an individual Complaint Plan for every complaint
- A duty to risk assess each complaint
- If complaints can be resolved by the end of the next working day there is no need to record them

The Complaints Service has produced a provisional model procedure to reflect the new requirements which is on the website.

Key message: The Complaints Manager has worked to 7 different sets of statutory complaints procedures in social care and in the NHS and these are the most radical. The reduction in the number of stages before complaints go to the Ombudsman means adverse rulings and negative publicity are more likely. The Ombudsman has been given an extra £23 million to manage the anticipated increase in complaints from the new regulations.

Harrow is relatively well-placed being the only London Council to have internal mediators. However, it is likely more complaints will escalate to the Ombudsman under the new arrangements.

17. Ombudsman's role change

From 1 April 2009, the Ombudsman's official policy has changed so he will only accept complaints that have been through all the stages of the local authority's complaints procedure. However, the Ombudsman retains the power to make exceptions and has set out a number of examples of exceptions including:

- Complaints about more than one body
- Complaints where referral to the Council would disadvantage an already disadvantaged complainant
- Where there has been unreasonable delay by the Council
- Complaints about homelessness (where the complainant is currently, or will imminently be, homeless).
- Complaints made by children
- Complaints about education (apart from transport).

It is unlikely that significantly more complaints will be investigated straight away by the Ombudsman but the exceptions are quite wide so the Ombudsman has left himself a great deal of latitude to do so.

Stuart Dalton

Complaints Service Manager, Adults & Children's
Date: 10 June 2009

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

The handling of complaints is a key component of the Care Quality Commission's new outcomes framework for adult social care. To be judged as 'performing well' the service must be able to demonstrate the following characteristics:

- the complaints system is accessible to service users and carers
- advocacy support is provided to assist people with complaints
- complaints are dealt with promptly and lead to satisfactory outcomes
- service users and carers are confident that making a complaint will not prejudice the support they receive
- the service acts upon and learns from complaints

SECTION 3 - STATUTORY OFFICER CLEARANCE

Name: Donna Edwards	<input type="checkbox"/>	on behalf of the* Chief Financial Officer
Date: 17 June 2009		
Name: Sharon Clarke	<input type="checkbox"/>	on behalf of the* Monitoring Officer
Date: 5 August 2009		

SECTION 4 - CONTACT DETAILS AND BACKGROUND PAPERS

Contact: STUART DALTON, SERVICE MANAGER, ADULTS & CHILDREN'S COMPLAINTS (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>