

**REPORT FOR: OVERVIEW AND  
SCRUTINY COMMITTEE**

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<b>Date of Meeting:</b>	22 September 2011
<b>Subject:</b>	Adults Services complaints Annual report (social care only) 2010-11
<b>Responsible Officer:</b>	Paul Najsarek, Corporate Director, Adults & Housing
<b>Scrutiny Lead Member area:</b>	Councillor Ann Gate, Policy Lead Member for Health and Social Care Councillor Vina Mithani, Performance Lead Member Health and Social Care
<b>Exempt:</b>	No
<b>Enclosures:</b>	Appendix – Annual Report for Adults and Social Care Services Complaints for period 2010-11

**Section 1 – Summary and Recommendations**

This report sets out the statutory Adults Services complaints Annual report (social care only) 2010-11.

**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**

The handling of complaints is a key component of the Care Quality Commission's 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

At the last CQC assessment, the Council demonstrated all these characteristics to achieve the highest mark possible for complaints management.

For the last three years, CQC have specifically asked to see this report, indicating its contents are considered by CQC.

### **Environmental Impact**

N/A

### **Risk Management Implications**

Risk included on Directorate risk register? No

Separate risk register in place? No

### **Corporate Priorities**

Please identify which corporate priority the report incorporates and how:

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

### **Section 3 - Statutory Officer Clearance**

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

### **Section 4 - Contact Details and Background Papers**

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

**Background Papers:** None

## ANNUAL REPORT for Adults Social Care Services Complaints for period 2010-11

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### **1. Context**

This report provides information about complaints made during the twelve months between 1 April 2010 and 31 March 2011 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.

Unresolved complaints raised before April 2009 that progressed to Stage 2 or 3 after April 2009 fall under the Local Authority Social Services Complaints (England) Regulations, 2006.

All timescales contained within this report are in working days.

#### **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) 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.

## **2. 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 (old regulations allowed up to 20 working days)  
Organisational sign-off: Divisional Director

### 2) Mediation

Organisational sign-off: Divisional Director

### 3) Formal investigation (usually an independent investigation)

Timescale: 45 working days (old regulations allowed up to 65 working days)  
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**

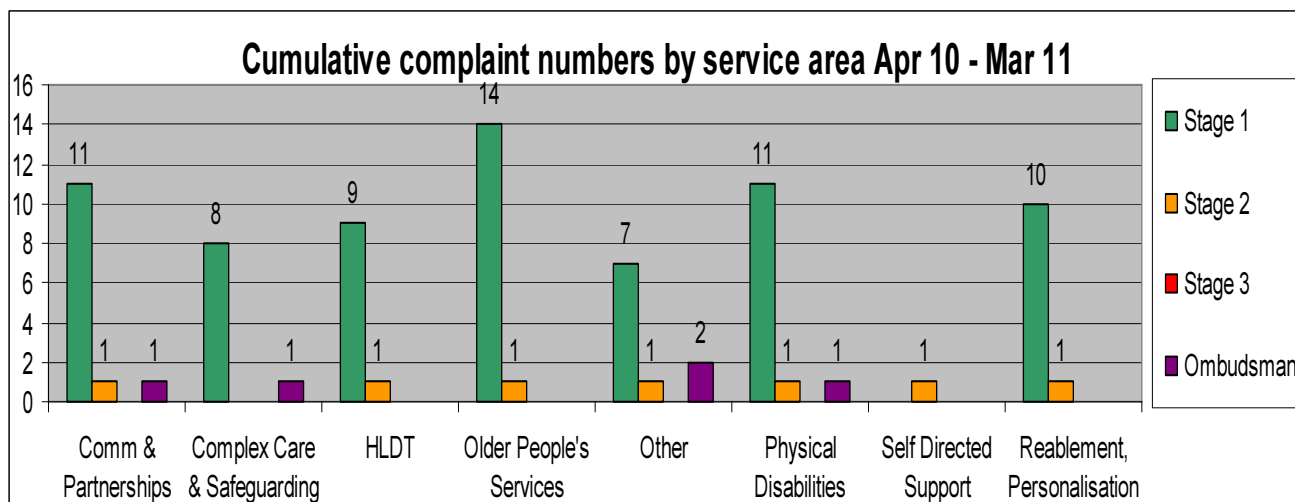
The Ombudsman is an independent body empowered to investigate where a Council's own investigations have not resolved the complaint.

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.

### 3. Summary of Activity

Between 1 April 2010 and 31 March 2011 we received and closed 70 Stage 1 complaints. 7 complaints progressed to Stage 2. There were no stage 3's. The Complaints Service dealt with 65 potential complaints that that were addressed without a Stage 1 needed.

The Ombudsman reviewed 5 complaints during this period with one local settlement of £150 compensation.

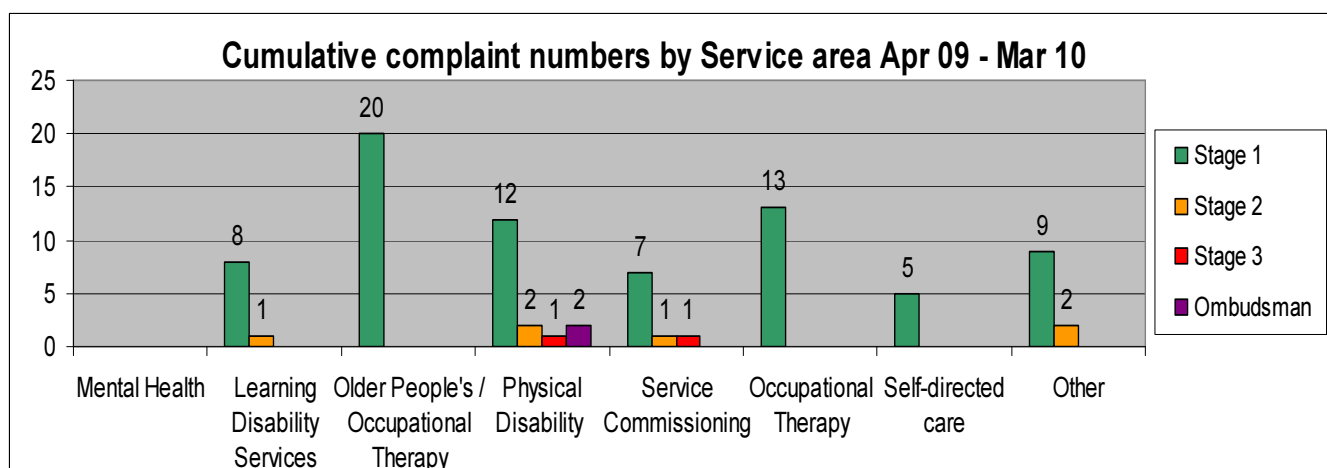


[The above chart shows all services both before and after the reablement restructure.]

**Analysis:** Restructures typically see an increase in complaints because change is unsettling. Impressively, the restructure to a reablement model in October 2010 has not seen any increase in stage 1 complaints.

The Council has trialled a reduced 10 day timescale to match the corporate target. However, given the complexity of social care complaints, this in addition to the removal of a review stage (old stage 3) has probably had an impact on increased escalations to the Ombudsman with possibly an over-emphasis on speed over quality (see section 5 for more details).

#### 3.1 Comparison with the year before



**Analysis:** The two big differences have been the reduction in occupational therapy complaints and reduced Physical Disabilities complaint escalations. The occupational therapy complaints were about delays in adaptations. The cause of these complaints was

flagged by the Complaints Service to senior management and the Portfolio Holder authorised additional monies to clear the backlog of adaptations, showing the difference using complaints intelligence to improve services can make.

### 3.2 Numbers of complaints over time

	Stage 1	Stage 2	Stage 3
2010-11	70	7	0
2009-10 (new regulations)	75	6	2
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 trend of improved escalation rates between stages 1 and 2 continues. The escalation rate from Stage 1 to Stage 2 dropped from 15% between 2003-05 to 9% between 2005-11.

### 3.3 What the complaints team do

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

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

### 3.4 Recommendations from last annual report

- To trial the reporting of outcomes against the nature of complaint. Outcome: Achieved. See 5.4
- From 2010-11 we will report on disability for equality monitoring purposes. Outcome: Achieved. See 6
- To explore ways to make complaint resolution more accessible to seldom heard groups. Outcome: Good progress and ongoing. See 6
- Continue to promote the use of advocacy when making a complaint at the Advocacy Forum. Outcome: Achieved. See 14
- To improve response times, aiming towards 70% Outcome: Not achieved. 54% achieved. See 5 for how this is being addressed.



- Maintain improved stage 1 to 2 escalation rates. Outcome: Achieved. See 7
- Maintain improved percentage of escalated complaints upheld. Outcome: Partially maintained. Increased from 17% to 33% (but still much better than 3-4 years ago)
- Reduce the number of Physical Disability complaints escalating (or at least ensure they are not upheld). Outcome: Achieved. See 3
- Implementing a 'Support for staff who are the subject of complaint' strategy. Outcome: Achieved.
- To maintain a healthy level of Stage 1 complaints (e.g. over 70). Outcome: Achieved and ongoing.
- To report on potential complaints from April 2010 so they form part of the trend analysis. Outcome: Achieved. See 5.4
- To identify if the technology for call-quality monitoring can be identified to help improve customer service staff reflection and management scrutiny. Outcome: Achieved. Senior management are interested and are deciding whether to invest in the technology.
- Exploring how to improve complaint co-ordination for multi-agency/directorate working. Outcome: Achieved. 5 joint investigations from 2 the year before.
- From 2010-11 we will report on complaints not responded to within 25 working days at Stage 1. Outcome: Achieved. See 5. It offers new insights and telling intelligence.

#### **4. Focus for 2011/12:**

- To capture and report on Councillor and MP complaints/enquiries in the next report.
- To obtain from managers confirmation that all agreed actions from complaints are carried out. To carry out a sample audit to verify the actions have been completed and provide an exceptions reports to the Quality Assurance Learning Board.
- To maintain a healthy level of Stage 1 complaints (e.g. over 70).
- Improving Commissioned Services stage 1 complaint response times (see 5.1).
- To focus on timescale achievement, embedding timescale leads for Directorates and highlighting stage 1 complaint responses over 25 working days to senior managers. If agreed, adjusting timescales (see 5.2).
- Re: Ombudsman local settlement case: A review with the staff who carried out the assessments to identify why discrepancies occurred and what can be learnt to prevent it happening again.
- Complaints Manager to raise with operational managers whether the opportunity to resolve complaints via mediation could be utilised more.
- Remind staff of the need to pass to the Complaints Service all complaints and alert us to potential complaints.
- To extend quality assurance audit to stage 2's and mediations and embed stage 1 quality assurance.
- To hold regular complaint surgeries for key services at their offices (this helps ensure all complaints are identified and treated as complaints, offers staff strategies in resolving complaints, identifies training needs and local intelligence on trends etc)
- Care management and reablement agencies to identify a strategy to re-educate client expectations that the Reablement service is not commissioned on blocks of time but is a more flexible approach.
- Timescales for domiciliary care responses by the contractor will be reported on in the next annual report.
- To ensure that the Complaints Service sees all complaints and complaints responses for both residential and domiciliary care, even if the service user is happy for the contractor to provide the response.

## 5. Stage 1 Complaints

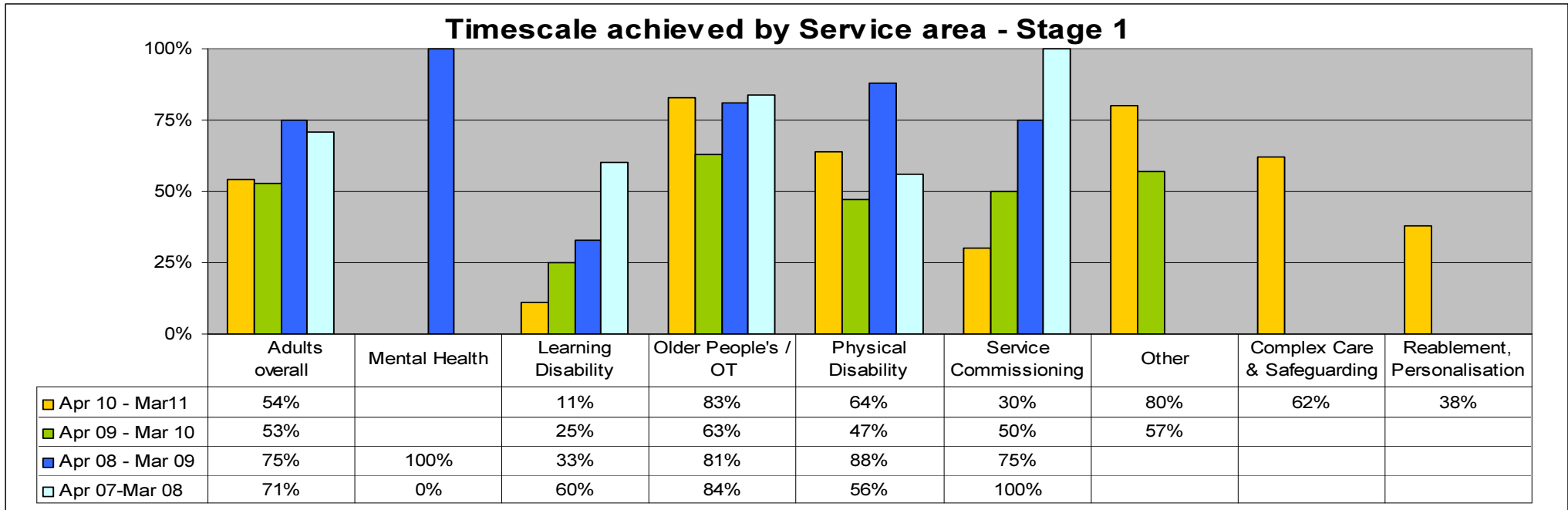
Complaints	Commissioning & Partnerships	Complex Care & Safeguarding	Reablement, Personalisation	Older People	Physical Disabilities	Learning Disability	Occupational Therapy	Mental Health	Self-directed care	Other	Total
2010-11	11	8	10	14	11	9	0	0	0	7	70
2009-10	7	N/A	N/A	20	12	8	13	0	6	9	75
2008-09	4	N/A	N/A	32	17	12	-	1	-	0	66
2007-08	1	N/A	N/A	31	14	15	-	1	-	10	73

**Analysis:** The restructure in October 2010 means services changed half way through the year and makes comparisons to previous years difficult. It is highly positive to see no occupational therapy complaints. Increased commissioning and partnership complaints reflect work to make complaints more accessible to service users of contracted services rather than any concerns over commissioned services as standards are improving in commissioned services.

There were many examples of excellent work to resolve difficult issues to everyone's satisfaction without the complaint escalating beyond stage 1. An example of this improvement was a Physical Disabilities case where solicitors stated their intention to seek judicial review. The service agreed an alternative solution of an independent re-assessment which resolved the case. This is particularly positive in the context of the last annual report which identified reducing Physical Disabilities escalation levels as a priority (see 3.4).

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

### 5.1 Stage 1 response times



**Analysis:** Response times have not deteriorated since 08-09. Rather the Council now applies a 10 day timescale, compared to the previous 20 days for complex cases before April 2009. The Assistant Ombudsman acknowledged to the Corporate Leadership Group that Adult social care cases are more complex than most Council complaints. The chart below shows timescale achievement for proposed new target timescales.

In time	Yes	No	Percentage
10 working days	37	32	54%
15 working days	49	20	71%
15 days, 25 days complex	58	11	84%

[1 of the 70 complaints were withdrawn so there was no response to provide a timescale to]

In the context of a 10 day target, Older People's 83% is a note-worthy achievement. 11% for Learning Disability is poor (see 5.2 below for further analysis). If the Learning Disability Service still existed, timescale improvement would be a key target. We have already seen early signs of improvement under the new structure. 30% for commissioned services could improve whilst recognising obtaining answers from third parties and drafting a response is exceptionally challenging in 10 working days.

**Key action:** Improving Commissioned Services complaint response times.

## **5.2 Significant delays (over 25 working days)**

This is a new reporting area, introduced because the Complaints Service were concerned significant delays have a significant impact for the service user but traditional timescale achievement analysis was not addressing exceptional delay, which is a critical customer service and reputational point.

There were 9 complaints where it took over 25 working days to respond. Physical Disabilities (2 months), Commissioning (2 months) and Mental Health (26 working days). For the Physical Disability and Mental Health cases there were genuine exceptional reasons for taking longer.

However, 6 Learning Disability complaints of the 9 Learning Disability complaints took over 25 working days (in calendar days: 85 days; 2 months; 54 days; 69 days; 77 days and 60 days) over spring/summer 2010. The Complaints Manager highlighted this to the Head of Service and assertive action was taken by the Head of Service and timescales immediately improved and this is no longer an issue.

This demonstrates the value of monitoring not just timescale compliance but also exceptional delay. The Complaints Service intends to continue reporting against exceptional delays as an important measure to ensure complainants do not experience unacceptable delay.

Allocated Directorate complaint leads for timescale achievement were introduced in January and an increase in complaints surgeries at services. Since May 2011, the Complaints Manager attends monthly briefings with Directors which will allow for these types of issues to be addressed more quickly.

**Key action:** To continue reporting on significant delays.

## **5.3 Nature of complaint**

Type of complaint	Commissioning & Partnerships	Complex Care & Safeguarding	Learning Disabilities (HLDT)	Older People's Services	Other	Physical Disabilities	Reablement, Personalisation	Adults Overall (2010-11)	Adults (2009-10)
Change to an individual's service - withdrawal/reduction		2	3	2		3		10	2
Communication - Failure to keep informed / consult	1			1	1		1	4	9
Delay / failure in taking action or replying	2	2	2	4	2	1	4	17	24
Discrimination by a Service					1			1	2
Failure to follow policy or procedures	1		1					2	2
Level of Service (e.g. opening times)	1							1	1
Loss or damage to property					1	2		3	1
Policy / legal / financial decision		1		1				2	5
Quality of Service delivery	6		1	2	1	2	3	15	14
Refusal to provide a service		2	2	3		2	1	10	11
Staff conduct - attitude / behaviour		1		1	1	1	1	5	4
<b>Total</b>	<b>11</b>	<b>8</b>	<b>9</b>	<b>14</b>	<b>7</b>	<b>11</b>	<b>10</b>	<b>70</b>	<b>75</b>

**Analysis:** Complaints about change or withdrawal of a service rose from 2 last year to 10 this year, which is a typical trend when restructures happen, rather than a concern. It is positive to see that 5 staff attitude complaints remain relatively low (7%). 6 quality of service Commissioning complaints is normal with the most common being punctuality of homecare services. Delay (40%) and quality of service (30%) make up the majority of complaints about the new reablement/personalisation services.

Discrimination allegations justify special analysis. In this instance it was relatively low level claiming an advert aimed at older people accessing day centres was discriminatory.

Transition is an area for any Council that is prone to high level complaints and 2 of the 4 transition complaints this year were high level. A Transitions Project Manager has been appointed which is a very positive step. There were 3 complaints and one potential complaint about delays in delivery of equipment. The contract for equipment delivery has since been changed. There were two complaints about late payment of direct payments. Changes have been made to the social care database (framework-i) which has resolved this.

## 5.2 Complaints upheld

Service	Not Upheld	Partially Upheld	Upheld	Withdrawn	Total
Commissioning & Partnerships	1	2	3		6
Complex Care & Safeguarding	2	3	3		8
Learning Disability (HLDT)	2	1	6		9
Older People's Services	7	3	3		13
Other	2	2	3		7
Physical Disabilities	5	1	4		11
Reablement, Personalisation	2	3	4	1	10
<b>Total</b>	<b>21 (30%)</b>	<b>17 (24.5%)</b>	<b>30 (43%)</b>	<b>1 (1.5%)</b>	<b>70</b>
<b>2009-10 comparison</b>	<b>17 (22.5%)</b>	<b>17 (22.5%)</b>	<b>41 (55%)</b>	<b>0</b>	<b>75</b>

**Analysis:** All services make mistakes and it is the mark of a healthy complaints system that complaints are upheld at stage 1. The statistics demonstrate that the majority of complainants at Stage 1 are making wholly justified (43%) or partially justified (24.5%) complaints. Only 30% of Stage 1 complaints were not upheld at all.

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

## 5.3 Complaints upheld against nature of complaint

The last annual report committed to trialling reporting complaints upheld against nature of complaint to see if members found this informative.

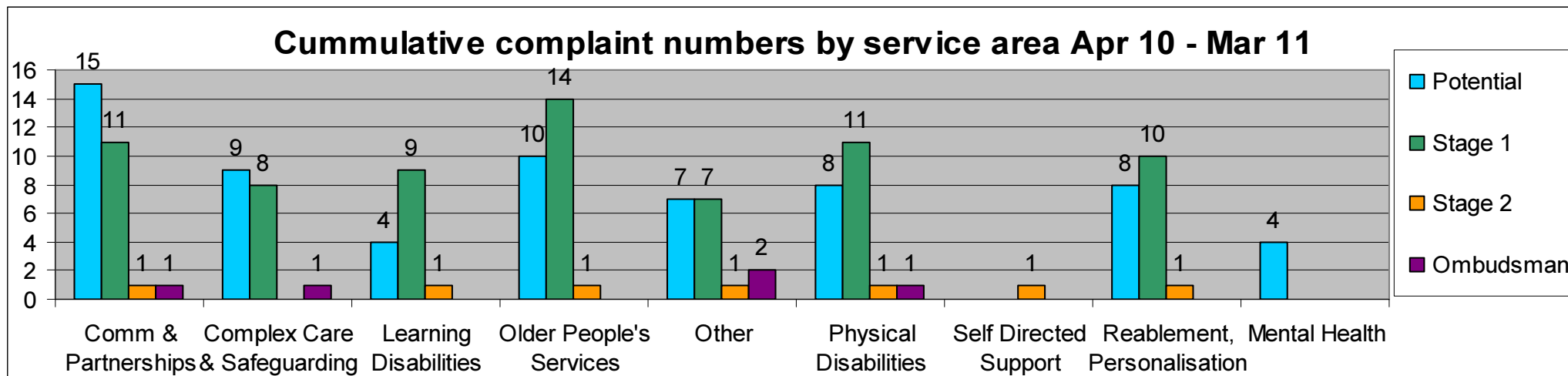
LBH Complaint Categories	Commissioning & Partnerships			Complex Care & Safeguarding			Learning Disabilities			Older People's Services			Other			Physical Disabilities			Reablement, Personalisation			Adults 2010-11			Total
	N	P	U	N	P	U	N	P	U	N	P	U	N	P	U	N	P	U	N	P	U	N	P	U	
Key: U: Upheld; N: Not upheld; P: Partially upheld																									
Change to an individual's service - withdrawal/reduction				1	1		1		2	1	1					1		2				4	2	4	10
Communication - Failure to keep informed / consult			1								1		1							1	1	1	2	4	
Delay / failure in taking action or replying		1	1	1		1			2	1		3			2			1		1	3	2	2	13	17
Discrimination by a Service														1									1	1	
Failure to follow policy or procedures			1					1															1	1	2
Level of Service (e.g. opening times)		1																					1	1	1
Loss or damage to property															1	2						2		1	3
Policy / legal / financial decision						1					1												1	1	2
Quality of Service delivery (stds)	1	2	3				1			2				1		1	1		2	1		7	5	3	15
Refusal to provide a service					1	1			2	2						1		1	2			5	1	4	10
Staff conduct * attitude / behaviour					1					1			1				1		1			2	2	1	5
<b>Total</b>	<b>1</b>	<b>4</b>	<b>6</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>6</b>	<b>7</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>5</b>	<b>1</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>4</b>			<b>70</b>	

**Analysis:** This shows the value of analysing the type of complaints that are upheld. 13 of 17 delay complaints were fully upheld. Of 10 withdrawal/reduction in services complaints, 4 were upheld and 2 partially upheld. Yet the complaints that related to customer experience/perception are least likely by managers to be upheld despite this being the customers experience (no service bar Commissioning fully upheld a quality of service complaint) and only one of 5 staff conduct/attitude complaints were fully upheld.

**Key action:** This analysis will be incorporated into investigation training.

#### 5.4 Potential complaints

This is another new area of reporting promised in the last annual report. Under the new regulations, complaints where an agreed resolution can be achieved by the end of the next working day do not need to be recorded as complaints. However, this is a waste of significant intelligence.



**Analysis:** Low potentials against higher stage 1's, as is the case with Learning Disabilities, can indicate services are either less good at resolving issues when first raised informally or that service users are not prepared to give the service the opportunity to resolve the situation informally before going straight to a complaint. The restructure has seen the level of complaints from learning disability service users improve.

#### Potential complaints – reason for dissatisfaction



Reason	Commissioning & Partnerships	Complex Care & Safeguarding	Learning Disability	Mental Health	Older People's Services	Other	Physical Disabilities	Reablement, Personalisation	Total
Allocation / Re-allocation of Keyworker			1					1	2
Change to an individual's service - withdrawal/reduction		4					1		5
Communication - Failure to keep informed / consult	1	2							3
Delay / failure in taking action or replying	3		1		1	2	5	1	13
Discrimination by a Service							1		1
Failure to follow policy or procedures								1	1
Level of Service (e.g. opening times)	1				2				3
Loss or damage to property								2	2
Policy / legal / financial decision	2	1	2		4	3			12
Quality of Facilities / Health and Safety						1			1
Quality of Service delivery (stds)	5	1			1	1		1	9
Refusal to provide a service				1	1		1	2	5
Staff conduct * attitude / behaviour	3	1		3	1				8
Total	15	9	4	4	10	7	8	8	65

**Analysis:** If Older People's still existed a recommendation would have been to look at the clarity of the literature for service users given 4 of 10 Older People's potential complaints were about policy decisions. The restructure has addressed this issue. The fact they did not progress indicates all it needed was a clearer explanation. 5 of Physical Disabilities 8 potential complaints were about delay, indicating closer monitoring of timescales would have assisted the service. 3 of the 4 potential Mental Health complaints were about staff conduct. Whilst 4 of 9 Complex Care's potential complaints were about withdrawal or reduction in care.

The Council received 6 potential complaints about debt recovery. All were resolved without the need for a complaint response. The Complaints Manager flagged the recurring themes and the agreed action plan has meant no further potential complaints have been raised.

## **6. Equalities Information – Service Users**

### **6.1 Stage 1**

#### **Gender of Service User**

	<b>10-11</b>	09-10	08-09	07-08
MALE	<b>29</b>	33	28	28
FEMALE	<b>39</b>	42	37	41
UNKNOWN	<b>2</b>	0	1	4

**Analysis:** No concerns noted.

#### **Ethnic Origin of Service User**

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

**Analysis:** 36% of complaints where ethnicity was known came from service users from ethnic minorities. This figure is about right in the context that a higher proportion of service users are older where there are more White/British service users. National research indicates that members of some community groups are far less likely to complain due to cultural norms. Examples of trying to make the complaints service accessible includes paying for translators.

#### **Complaints relating to service users with disabilities**

<b>Disability</b>	<b>Total</b>
Yes	58
Not known	12
<b>Total</b>	<b>70</b>

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

#### **Stage 1 Complaint made by**

	<b>10-11</b>	09-10	08-09
Service User	<b>18</b>	30	26
Relative/Partner (often informal carer)	<b>41</b>	40	29
Advocate –(instigated by either carer or service user)	<b>8</b>	3	9
Solicitors	<b>3</b>	2	1
Friend, Councillor, other	<b>0</b>	0	1

**Analysis:** It is highly positive to consider that 74% of service users had assistance in raising their complaints. All service users are advised how to access advocacy support in making a complaint, when they first make a complaint.

**Key action:** To report on Councillor and MP complaints/enquiries in the next report.

### Publicising and making the complaints procedure accessible

The complaints service has a raising awareness plan that includes a plan for outreach; information on the web; articles in newsletters; surgeries with staff; a wide training portfolio; we also monitor that leaflets are available at main service points and a complaints poster is available. Presentations have been given to service users at NRC's.

## 6.2 Stage 2 complaints

### Gender of Service User

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

**Analysis:** No concerns noted.

### Ethnic Origin of Service User

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

**Analysis:** No concerns are apparent.

### Complaints relating to service users with disabilities

Disability	Total
Yes	7

### Stage 2 Complaints made by

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

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

## 7. Stage 2 complaints

There were 7 Stage 2 complaints (compared to 6 last year). 2 of these proceeded immediately to independent investigation without any stage 1 response as the Council now has a duty to negotiate with complainants on how they wish to have their complaint responded to. In one case the complaint has still not progressed because the complainant has not finalised a statement of complaint.

### 7.1 Stage 2 complaint numbers and escalation rates

Service	Stage 1	Stage 2	% escalating to formal complaints
Commissioning & Partnerships	11	1*	9%
Complex Care & Safeguarding	8	0	0
Older People's Services	14	1	7%
Other	7	1	14%
Physical Disabilities	11	1	9%
Learning Disabilities	9	1	11%
Reablement, Personalisation	10	1*	10%
Self Directed Support		1**	N/A
<b>Total</b>	<b>70</b>	<b>7</b>	<b>10%</b>

\* no stage 1 \*\* stage 1 complaint in 09/10

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

**Analysis:** No service exceeded 15% which is very rare. Equally a number of Learning Disability complaints were significant and significant efforts were made to ensure they did not escalate. The positive is the restructure has not seen these escalated complaints. The overall average for the Directorate was 10% which is pretty good. This compares to 8% for the Directorate last year. 5 years ago the escalation rate was consistently 15% so sustained progress has definitely been made, especially considering the Council investigated 2 complaints at stage 2 immediately, when this would not have been the case before the new regulations.

### 7.2 Stage 2 Complaints and outcomes

Complaint Status	Adults total		Commissioning & Partnerships		Complex Care & Safeguarding		Older Peoples Services		Other		Physical Disabilities		Self Directed Support		Reablement, Personalisation		Learning Disabilities (HLDT)	
	10/11	09/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10
Year	10/11	09/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10	10/11	9/10
Not Upheld	3	4	1	1						1		2	1		1			
Upheld	2	1							1								1	1
Partially Upheld	1	1					1			1								
Awaiting Outcome	1										1							
Grand Total	7	6	1	1	0		1		1	2	1	2	1		1		1	1

**Analysis:** 3 complaints were not upheld. 2 complaints have been upheld. Both warranted compensation payments. One involved agreed actions from a Learning Disabilities 2007 complaint not being carried out. 33% fully upheld this year compares to 17% last year, 20% in 2008-09, 60% in 2007-08 and 50% in 2006-07.

**Key action:** 1. To obtain from managers confirmation that all agreed actions from complaints are carried out. To carry out a sample audit to verify the actions have been completed and provide an exceptions reports to the Quality Assurance Learning Board.

**Key action:** 2. Targeted investigation training. The Complaints Service was asked to postpone investigation training due to work pressures but this will happen in 2011-12.

### 7.3 Stage 2 Response Times

Service	Adults overall		Physical Disability		Learning Disability		Commissioning & Partnerships		Other		Self directed Support		Older Peoples	
	10/11	9/10	10/11	9/10	10/11	9/10	10/11.	9/10.	10/11.	9/10.	10/11.	9/10.	10/11	9/10.
Year	10/11	9/10	10/11	9/10	10/11	9/10	10/11.	9/10.	10/11.	9/10.	10/11.	9/10.	10/11	9/10.
Within time	1	4		1				1	1	2		2		
Over timescale	4	2		1	1	1	1				1		1	

**Analysis:** 2 of the complaints over timescale involved delays by the complainant. 2 were exceptionally detailed complaints. The one complaint in time was internally investigated. Independent investigations tend not to meet these timescales due to it taking more time for an external person to access staff and evidence and the detail of investigation. The advantage of independent investigations is the quality is better and the complainant and Ombudsman are far more likely to accept their findings. The downside is the time they take.

#### 7.4 Nature of complaint

Type of complaint	Adults Total		Commissioning & Partnerships		Complex Care & Safeguarding		Older Peoples		Other		Physical Disabilities		Self Directed Support		Reablement, Personalisation		Learning Disability	
	10/11	09/10	10/11	09/10	10/11	09/10	10/11	09/10	10/11	09/10	10/11	09/10	10/11	09/10	10/11	09/10	10/11	09/10
<b>Delay / failure in taking action or replying</b>	1								1									
<b>Policy / legal / financial decision</b>	1	1											1				1	
<b>Quality of Service delivery (stds)</b>	3	1	1				1								1			1
<b>Refusal to provide a service</b>	1										1							
<b>Level of Service (e.g. opening times)</b>																		
<b>Change to Service - withdrawal/reduction</b>		2										2						
<b>Loss or Damage to property</b>		1		1														
<b>Failure to follow Policy or Procedure</b>	1	1			1					1								
<b>Grand Total</b>	<b>7</b>	<b>6</b>	<b>1</b>	<b>1</b>	<b>1</b>		<b>1</b>		<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>		<b>1</b>		<b>1</b>	<b>1</b>

**Analysis:** 3 complaints related to quality of service. Even though it was not the primary point of complaint, in three instances, delay in addressing legitimate concerns saw the complaints escalate.

## 8. Commissioned Services

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

### Homecare complaints

Provider	Mears (formerly Supporta Care )	Care Uk - non reablement	Care Uk Reablement	Gentlecare – not including reablement	Gentlecare – reablement	MNA	Somali Carers	Penkz (formerly Wycare)	Carewatch	Westminster Homecare
Complaints	2	2						1		
Service Failures	37	86	19	40	31	3	7	2	13	9
Total	39	88	19	40	31	3	7	3	13	9
Volume of provision	153,916	192,750	18,600	41,304	30,800	28,360	10,914	22,986	39,654	6,037
% of service failure complaints upheld per volume of provision.	<b>0.02</b>	<b>0.04</b>	<b>0.1</b>	<b>0.09</b>	<b>0.1</b>	<b>0.01</b>	<b>0.06</b>	<b>0.013</b>	<b>0.03</b>	<b>0.1</b>
Recorded Compliments / thanks	2	1			2					

**Analysis:** All of the Agencies complaints threshold scores are within reasonable range of 0.1% acceptability which is reassuring.

Care UK's level of service failures rose in the last quarter as a result of staff leave and sickness. Quick action was taken by not placing with Care UK for two weeks until services stabilised. The result has been an improved level of service failures going into 2011-12.

It should also be noted that Care UK and Gentlecare are operating domiciliary care Reablement operations. The most notable trend has been service users feeding back they expected carers to arrive at a fixed time.

**Key action:** Care management and reablement agencies to identify a strategy to re-educate client expectations that the Reablement service is not commissioned on blocks of time but is a more flexible approach.

### **Complaints & Service Failures**

Provider	Mears (Supporta Care)		Care Uk Reablement		Gentlecare		Gentlecare Reablement	MNA		Somali Carers		Wycare		Carewatch		Westminster	
	U	NU	U	NU	U	NU	U/ NU	U	NU	U	NU	U	NU	U	NU	U	NU
<b>Level of Service (E.g. Opening Times)</b>	12	5	12	1	5	2	1						1	1	2	3	
<b>Quality of Serv Delivery (Standards)</b>	16	4	67	3	28	2	23	2	1	4	2	1		4	2	2	
<b>TOTAL</b>	28	9	79	4	33	4	24	2	1	4	2	1	1	5	4	5	

Key: U: Upheld / NU: Not upheld

**Analysis:** It is unsurprising most service failures are upheld. It would be more of a concern if they were not.

### **Timescales**

**Key action:** Timescales for domiciliary care responses by the contractor will be reported on in the next annual report.

### **Residential complaints**

Care Home Provider	Southern Cross block	Care UK block	Sancroft PFI	Other providers
Complaints	3			1
Recorded Compliments / thanks	4			

**Key action:** To ensure that the Complaints Service sees all complaints and complaints responses for both residential and domiciliary care, even when the service user is happy for the contractor to provide the response.



## **9. Stage 3 complaints**

There were no stage 3 complaints this year. The new regulations do not expect them.

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

## **10. Ombudsman complaints and enquiries**

**Key message:** The most crucial test of successful complaints management is whether the Ombudsman issues reports of maladministration against the Council. The Ombudsman has not issued a report in the last 6 years relating to Harrow Social Services (Adults or Children's). The second test is whether the Ombudsman recommends local settlement (doing something additionally to resolve the complaint, indicating that something was missed internally).

### **10.1 Outcomes and commentary**

<b>Service</b>	<b>Outcome</b>	<b>Responded to the Ombudsman in time (28 days)</b>	<b>Commentary</b>
Commissioning & Partnerships	awaiting outcome	y	
Complex Care & Safeguarding (formerly an HLDT case)	awaiting outcome	n	See compensation commentary.
Other (Helpline)	not upheld	y	Fast-tracked to the Ombudsman who dismissed the complaint.
Physical Disabilities	Local settlement - partially upheld	y	Low level local settlement of £150 compensation and agreement for an independent re-assessment (the Council offered the complainant an independent reassessment, who declined at the time)
Physical Disabilities	not upheld	y	

**Key message:** Whilst any local settlements are disappointing, indicating more could have been done internally to resolve the complaint, this is the only local settlement in Adults in the last 2 years out of 25 local settlements for the Council during this period.

**Analysis:** The new regulations mean Ombudsman investigations are more likely with some cases going to the Ombudsman with only one Council response, where the old regulations required at least 3 stages. 4 of the 5 responses to the Ombudsman were in timescale.

The reason for the £150 compensation local settlement was the service user had 3 different assessments that came to different conclusions.

**Key action:** A review with the staff who carried out the Physical Disabilities complaint assessments to identify why the discrepancies occurred and what can be learnt to prevent it happening again.

## **11. Escalation comparisons over time**

<b>Year</b>	<b>Average % escalation rate Stage 1- Stage 2</b>	<b>Ombudsman local settlements</b>	<b>Ombudsman published adverse ruling</b>
<b>2010-11</b>	<b>11.5%</b>	1 (13)	<b>0</b>
<b>2009-10</b>	8%	0 (12)	0
<b>2008-09</b>	7.5%	2 (22)	0
<b>2007-08</b>	13.5%	1 (14)	0
<b>2006-07</b>	8.5%	0 (15)	0
<b>2005-06</b>	6.5%	1 (9)	0
<b>2004-05</b>	15%	Unknown	0
<b>2003-04</b>	14.5%	Unknown	1

**Analysis:** Unlike many London Councils, Harrow complainants are always advised of their right to go to the next stage if they are unhappy so 10% going from Stage 1 to Stage 2 is a decent position.

5 local settlements out of 85 local settlements for the Council in 6 years (6%) indicates it is very rare for the Directorate to miss errors or not take sufficient remedial action for identified errors.

## **12. Compensation Payments**

Payments related to the following service areas.

<b>Service</b>	<b>Stage</b>	<b>Amount</b>	<b>Outcome</b>
Learning Disabilities (HLDT)	1	£1,899.60 reimbursement	Accepted and received payment but proceeded to Ombudsman claiming more.
Other (Helpline)	1	£147.05	Resolved
Other (Stores)	2	£1,320.00	Resolved
Physical Disability	Ombudsman	£150.00	Local settlement
<b>Total</b>		<b>£4,016.65</b>	

**Analysis:** In the Other (Stores) case the complainant initially challenged the compensation figure wanting, £5,000 where it took 154 days from the assessment to order and deliver a specially-built chair to allow a service user to move from her bedroom. Whilst the complaint was legitimate, by carefully setting out how the compensation was calculated she accepted the figure.

The Learning Disability case arose because the assessment did not take into account the service users DLA mobility component. If this had been done then significant compensation would not have been needed.

**Key action:** In the Learning Disability case, the Complaints Manager highlighted to management the risk of agreeing settlement figures with complainants directly without seeking advice from the Complaints Manager or Legal on how to make it binding. Effectively, the service paid out money without committing the service user to the settlement.

### 10.1 Total compensation comparison to previous years

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

**Analysis:** The figure is lower than the previous 3 years. However, for the Learning Disability stage 2 the independent investigator is recommending significant reimbursement and compensation to be calculated once a fresh assessment identifies what should have been provided, so the figure will go up but is not yet known.

## **13. Mediation**

**Analysis:** In 4 of the 5 cases where mediation was used, a mediation meeting successfully resolved the complaint. This shows how effective it is as an option in resolving even the most escalated and distressing cases.

The introduction of mediation in 2005-06 significantly reduced and continues to significantly reduce the number of complaints that escalate. Of 97 social care complaints where mediation has been used since it was introduced in 2005, mediation has resolved the complaint in 76 or 78% of those complaints. However, there were only 5 mediations this year (compared to 10 last year).

**Key action:** Complaints Manager to raise with operational managers whether the opportunity to resolve complaints via mediation is being fully utilised.

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

## **14. Advocacy**

Advocacy is an important protection for vulnerable service users who may otherwise not be able to easily raise or address concerns. Harrow has a number of local advocacy services covering the full spectrum of service user groups. A law centre has opened in Harrow Weald which will offer a new and invaluable means of free legal advice to service users.

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

**Analysis:** 74% of service users had support from someone else in making a complaint, usually a family member (up from 60% last year). 8 service users at stage 1 and 3 of the 7 stage 2 complainants took up the offer of free independent advocacy support.

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

There were 5 complaints investigated and responded to jointly (up from 2 last year). The most serious involved the hospital not informing social services of the service user's discharge resulting in missed domiciliary care calls, leaving the service user in a potentially vulnerable position.

## **16. Learning Lessons/Practice Improvements**

Staff in the Directorate are getting more used to viewing complaints as a positive feedback tool to drive service improvement. Below are examples of learning/service improvements identified from complaints in 2010/11:

- Producing a Policy and Procedure for the letting of premises
- Review of Helpline installation & financial procedures to offer better advice and quicker responses
- Agreement to produce a written transport payment cost policy across Adults
- Trialling using an independent assessment agency for blue badge assessments
- The Ombudsman highlighted the following good practice model Physical Disabilities management applied when reducing care: a) meet with the service user/family b) reduce it in staggered way c) build in a review – this was fed back to staff in the Director's newsletter
- Introducing a consent form to be used to prove service user agreement for house clearance
- An in-depth review of autistic/asperger provision resulted in approval for a revised joined-up care pathway and clear criteria identifying which organisation leads & guidance on the Autism Act

- Producing a checklist for when concerns are raised about services commissioned by direct payments to ensure the Council has fulfilled its duty of care (e.g. Direct Payment review carried out on time)
- A care agency agreed to implement cultural awareness training
- The social care database HOST adjusted to include a case summary for easy reference so intelligence is not overlooked and risks are assessed correctly
- The blue badge policy/practice amended for 4 points including the Council should always give reasons specific to the service user's condition for a blue badge being rejected.
- A separate vendor account will be set up so the Complaints Manager can directly process authorised compensation payments for speed.
- Producing a separate 2 stage appeals process for Safeguarding complaints/appeals to ensure legitimate process issues are addressed whilst not undermining critical safeguarding interventions.

## **17. Compliments**

There have been 51 compliments this year. 9 of these were for Millman's Day centre with service users complimenting on 'support and encouragement' and how 'wonderful and attentive' the staff were. There have also been compliments for individual members of staff including several to Carer lead Ali Brice stating her kindness, courtesy and professionalism and to the Service User Engagement Officer Una Taylor thanking her for organising the HAFTA award.