



### **Cabinet Member (Health and Adult Services)**

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**Time and Date**

10.00 am on Tuesday, 9th December, 2014

**Place**

Meeting Rooms, Council House, Earl Street, Coventry, CV1 5RR

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**Public Business**

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes of the Previous Meeting** (Pages 3 - 6)
  - a. To agree the minutes of the meeting held on 11<sup>th</sup> November 2014.
  - b. Matters arising.
4. **Coventry City Council - Adult Social Care Complaints and Representations Annual Report 1st April 2013 to 31st March 2014** (Pages 7 - 22)

Report of the Executive Director, People
5. **Any other items of public business which the Cabinet Member decides to take as matters of urgency because of the special circumstances involved**

**Private Business**

Nil

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Chris West, Executive Director, Resources, Council House, Coventry

Monday, 1 December 2014

Note: The person to contact about the agenda and documents for this meeting is Lara Knight tel: 024 7683 3237 email: [lara.knight@coventry.gov.uk](mailto:lara.knight@coventry.gov.uk)

Membership: Councillor A Gingell (Cabinet Member)

By invitation Councillors K Caan (Deputy Cabinet Member), Councillor K Taylor (Shadow Cabinet Member), Councillor S Thomas (Chair, Health and Social Care Scrutiny Board (5))

Please note: a hearing loop is available in the committee rooms

If you require a British Sign Language interpreter for this meeting  
OR if you would like this information in another format or  
language please contact us.

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# Public Document Pack Agenda Item 3

## Coventry City Council

### Minutes of the Meeting of Cabinet Member (Health and Adult Services) held at 10.00 am on Tuesday, 11 November 2014

Present:

Members: Councillor A Gingell (Cabinet Member)  
Councillor K Caan (Deputy Cabinet Member)  
Councillor K Taylor (Shadow Cabinet Member)

Other Members: Councillor S Thomas (Chair of Health and Social Care Scrutiny Board (5))

Employees:

People Directorate I Merrifield, L Newell, D Watts

Resources Directorate L Knight

## **Public Business**

### **9. Declarations of Interest**

There were no disclosable pecuniary interests declared.

### **10. Minutes of the Previous Meeting**

The minutes of the meeting held on 29<sup>th</sup> July 2014 were agreed and signed as a true record.

### **11. Coventry Learning Disability Strategy "Moving forward" 2014-2017**

The Cabinet Member considered a report of the Executive Director, People, which set out the key plans and activities to be delivered in relation to supporting people with Learning Disabilities in the City, through the Learning Disability Strategy.

The Strategy brought together key policy drivers as set out in 'Valuing People Now' (2009), 'Fulfilling and Rewarding Lives' (2010), 'Think Autism' (2014), the 'Winterbourne Concordat' (2012) and 'No Health Without Mental Health' and balanced them with key priorities identified by stakeholders including people with learning disabilities, carers of people with learning disabilities, voluntary organisations and officers from statutory organisations that will be involved in delivering the Strategy.

The Strategy had been co-produced and was available as an easy read document. The co-production has taken place since 2013 and had focused primarily on working with adults and their carers.

Action plans that sat under the Strategy would be more focussed on an all age disability approach and future versions of the Strategy would have a stronger emphasis on co-production across all ranges, particularly younger people and their families. The Strategy would be implemented between 2014 and 2017.

The report had also been considered by the Health and Social Care Scrutiny Board (5) at its meeting on 15<sup>th</sup> October 2014. A briefing note detailing the Board's consideration of the report along with its recommendations to the Cabinet Member was considered. In particular, the Board requested that the Cabinet Member:

- i. Ensures that Care Act compliance is at the heart of work to implement the Learning Disabilities Strategy, and
- ii. Ensures that all agencies, staff and service users are aware of how to report safeguarding concerns and that they have a duty to do so.

**RESOLVED that the Cabinet Member (Health and Adult Services):-**

- 1. Agrees with the requests from the Health and Social Care Scrutiny Board (5).**
- 2. Approve the Strategy on behalf of the Council.**

**12. Annual Report of the Coventry Safeguarding Adults Board 2013/14**

The Cabinet Member considered a report of the Executive Director, People, which set out the annual report of the Coventry Safeguarding Adults Board 2013/14.

The Coventry Safeguarding Adults' Board was a multi-agency partnership made up of statutory sector member organisations and other non-statutory partner agencies. The Cabinet Member noted that an Elected Member also attended meetings of the Board as an observer.

The role of a Safeguarding Adults' Board was laid out in the Care Act 2014. For the first time, the Act made it a statutory requirement for Local Authorities to have a local Safeguarding Adults' Board. Coventry had a Board for many years and was ahead of this Legislation. The report indicated that Board had strategic responsibility for the development, co-ordination, implementation and monitoring of multi-agency policies and procedures that safeguard and protect vulnerable adults in Coventry. Through its work, the board promoted the welfare of adults at risk and their protection from abuse and harm.

Coventry Safeguarding Adults' Board met quarterly to provide strategic leadership and direction. The work of the Board was supported by a number of Sub-Groups that were responsible for developing and managing the delivery of activity to achieve the Board's priorities.

The Annual Report covered the Board's activities for the period April 2013 to March 2014 and recorded the progress that had been made over the year, whilst acknowledging the considerable challenges in the year ahead. Each year the Board reviewed progress against actions set for the previous year and established new priorities for the forthcoming year to ensure that safeguarding arrangements in Coventry continued to be improved. The annual report provides a public record of this.

During 2013/14, the Board was chaired by Brian Walsh, Executive Director, People. In April 2014 Joan Beck, former Director of Adult Social Care in Doncaster, was appointed as Independent Chair to the Board. Joan would work closely with the Independent Chair for the Children's Safeguarding Board.

The Annual Report was appended to the report and, in summary, set out the achievements of each of the Board's Sub Groups, which included Partnership and Practice Development; Policy and Procedures; Quality and Audit; Serious Case Review; Workforce Development; and Mental Capacity Act and Deprivation of Liberty Safeguards.

The Cabinet Member was also advised of the priorities for the Board for 2014/15 within the areas of prevention; quality; Care Act 2014; domestic violence and abuse; and synergies between safeguarding boards.

**RESOLVED that the Cabinet Member (Health and Adult Services) endorses the contents of the report.**

13. **Any other items of public business which the Cabinet Member decides to take as matters of urgency because of the special circumstances involved**

There were no other items of public business.

(Meeting closed at 10.25 am)

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## Public report

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**Name of Cabinet Member:**

Health and Social Care Scrutiny Board (5)  
Cabinet Member (Health and Adult Services) – Councillor Gingell

19 November 2014  
9 December 2014

**Director Approving Submission of the report:**

Executive Director, People.

**Ward(s) affected:**

All

**Title:**

Coventry City Council- Adult Social Care Complaints and Representations Annual Report.  
1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014

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**Is this a key decision?**

No. Although the matter within the Report can affect all wards in the City, it is not anticipated that the impact will be significant and it is therefore not deemed to be a key decision.

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**Executive Summary:**

Adult Social Care Services have a statutory duty arising from the Local Authority Social Services and National Health Services Complaints Regulations 2009, to provide a system for receiving complaints and representations from people who use its services, or those acting on behalf of users. There is also a duty under the regulations to produce and publish an Annual Report.

The purpose of this report is to present the annual report on complaints and representations received in Adult Social Care from April 2013 to March 2014 (attached as Appendix A). The report provides details of the complaints and representations across Adult Social Care Services in Coventry. The report highlights the service improvements and learning from feedback and includes information on future developments in complaint handling and reporting.

**Recommendations:**

1. Health and Social Care Scrutiny Board (5) is recommended to;
  - (i) Note and consider this report and make any comments to the Cabinet Member (Health and Adult Services).
  
2. The Cabinet Member (Health and Adult Services) is recommended to;
  - (i) Consider comments from Health and Social Scrutiny Board (5)
  - (ii) Endorse the content and approve the issuing of the report.

**List of Appendices included:**

- A) Adult Social Care Complaints and Representations Annual Report 1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014.

**Other useful documents:**

This report adds to the report "Local Account" for 2013/14.

[http://www.coventry.gov.uk/downloads/download/1882/adult\\_social\\_care\\_local\\_account](http://www.coventry.gov.uk/downloads/download/1882/adult_social_care_local_account)

Report on "Complaints to the Local Government Ombudsman 2013/14"

<http://democraticservices.coventry.gov.uk/documents/s19283/Complaints%20to%20the%20Local%20Government%20Ombudsman%20201314.pdf>

**Has it been or will it be considered by Scrutiny?**

Yes on 19<sup>th</sup> November 2014.

**Has it been or will it be considered by any other Council Committee, Advisory Panel or other body?**

No

**Will this report go to Council?**

No



**Report title: Adult Social Care Complaints and Representations Annual Report  
1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014**

**1. Context (or background)**

1.1 Adult Social Care Services have a statutory duty to provide a system for receiving complaints and representations from people who use its services, or those acting on behalf of users. The system provides a means for resolving issues and listening to the views of those who use or are affected by our services. Where things have gone wrong it enables us to put things right, learn from the experience and make the necessary service improvements.

**2. Options considered and recommended proposal**

2.1 The Local Authority Social Services and National Health Services Complaints Regulations (England) 2009 changed the process for handling of complaints within Adult Social Care. The purpose of the revised regulations was to align the complaints processes for Adult Social Care and Health to enable joint handling of complaints across health and social care where appropriate. This also meant that the process for dealing with complaints via the statutory procedures was streamlined from a three stage process to a one stage process.

2.2 The 61 formal complaints received in relation to Adult Social Care represent less than 1% of the 9,208 people who contacted Adult Social Care in 2013/14 and the 7,227 people who received support. Where possible issues/complaints are handled at the point of delivery, and it is only when a person feels that they are still not satisfied that it is recorded as a formal complaint. The length of time to investigate and resolve complaints depends on their complex nature. The process involves agreement of a complaint resolution plan and jointly agreed timescales.

2.3 The overall number of representations has decreased from 81 to 61 and analysis of feedback indicates that service delivery and effective communication are still the most common topics with 82% of the complaints and issues being dealt with at a local service level rather than needing to be escalated further.

2.4 The Local Government Ombudsman offers an independent, impartial and free service to any member of the public dissatisfied with the way a Council has dealt with their complaint. Sometimes people also go direct to the Local Government Ombudsman with enquiries and not involving the Local Authority.

2.5 Once a formal statutory complaint response letter has been issued the complainant has the right to contact the Local Government Ombudsman (LGO) if they remain dissatisfied with the outcome of their complaint. During 2010/11 the LGO's powers were extended to deal with complaints about maladministration causing injustice or service failure – this is generally how The Local Government Ombudsman describes what people can complain about connected to adult social care services. The greater use of direct payments and personalised budgets meant that they were able to deal with complaints irrespective of whether the Council arranged the care or the individual. The increasing numbers of people who will arrange and pay for their own social care now have the right to an independent and impartial examination of any complaints and concerns they may have about their care provider. The Local Government Ombudsman also changed procedures and now decides which to investigate, based on their merits. They also publish most of their decisions on their website.

- 2.6 It should be noted that the Local Government Ombudsman now has an open publication scheme where they publish on their website the final decision statements on complaints. The annual letters are available through the Local Government Ombudsman's and can be found at;

<http://www.lgo.org.uk/CouncilsPerformance/?letter=C>

The way the Local Government Ombudsman has recorded information has changed through the year. The Local Government Ombudsman Annual Letter indicates they received 13 complaints/enquires relating to Adult Social Care of which 5 were fully investigated of which 3 were upheld, 2 of which we had already agreed to the resolution and one upheld with a formal report of maladministration been issued by the ombudsman no details are included as the ombudsman required that it was a private finding and not for publication. Wherever possible the LGO publishes decision statements on its web pages although this would not happen where the content of the report could identify the individual complainant. See appendix A for further details.

### **3. Results of consultation undertaken**

- 3.1 No specific consultation was undertaken in 2013/14.

### **4. Timetable for implementing this decision**

- 4.1 Once approved, the Annual Report will be published on the Council's internet pages. Areas for development and improvement will be included within the divisional and relevant team plans.

### **5. Comments from the Executive Director, Resources**

#### **5.1 Financial implications**

There are no direct financial implications arising from the report.

#### **5.2 Legal implications**

The local authority must prepare an annual report for each year which must—

(a) specify the number of complaints received;

(b) specify the number of complaints which were decided to be well-founded;

(c) specify the number of complaints which the responsible body has been informed have been referred to the Local Commissioner to consider under the Local Government Act 1974; and

(d) summarise (i) the subject matter of complaints that the responsible body received; (ii) any matters of general importance arising out of those complaints, or the way in which the complaints were handled and (iii) any matters where action has been or is to be taken to improve services as a consequence of those complaints.

### **6. Other implications**

- 6.1 How will this contribute to achievement of the Council's key objectives / corporate priorities (corporate plan/scorecard) / organisational blueprint / Local Area Agreement (or Coventry Sustainable Community Strategy)?**

This Annual Report demonstrates the progress of Adult Social Care in maintaining and improving outcomes for the population of Coventry and contributes to the priorities in the Council Plan to protect the city's most vulnerable residents.

## **6.2 How is risk being managed?**

A range of risks are presented in the delivery of adult social care services which are managed through the directorate and corporate risk registers, in conjunction with partners across the city. Regular reviews of each risk are undertaken, and mitigating actions put in place to ensure the overall risks are reduced as much as possible. A review of the processes took place during the year and a complaints officer post was recruited to with effect from the 1<sup>st</sup> October 2014 to overview all complaints received within the People Directorate including those relating to Adult Social Care and to enhance the lessons learnt.

## **6.3 What is the impact on the organisation?**

The feedback received is used to promote best practice, reinforce policy and procedural requirements and to identify training needs. Where matters of professional conduct are reported the City Council's Disciplinary Procedure were invoked. As the Council has to tackle reduced resources staff will also need to be supported to deliver messages in the most appropriate way as it is expected that further complaints will arise as expectations will be greater than the services that can be delivered or delivered in a way people are not expecting.

## **6.4 Equalities / EIA**

Equalities Impact Assessments have been built into the delivery of work within Adult Social Care. There has been a continued drive to embed equality and diversity within operational practice and performance monitoring.

## **6.5 Implications for (or impact on) the environment**

N/A

## **6.6 Implications for partner organisations?**

There are no direct impacts for partner organisations. The Annual Report together with other reports provides an overview of Adult Social Care's performance.

### **Report author(s):**

#### **Name and job title:**

Simon Brake, Assistant Director, Communities and Health.

#### **Directorate:**

People

#### **Tel and email contact:**

Simon Brake on (024 7683) 1652 or [simon.brake@coventry.gov.uk](mailto:simon.brake@coventry.gov.uk)

Enquiries should be directed to the above person

<b>Contributor/approver name</b>	<b>Title</b>	<b>Directorate or organisation</b>	<b>Date doc sent out</b>	<b>Date response received or approved</b>
<b>Contributors:</b>				
Simon Brake	Assistant Director, Communities and Health	People Directorate	28/10/2014	28/10/2014
Mark Godfrey	Deputy Director, Early Intervention and Social Care	People Directorate	03/11/2014	6/11/2014
John Teahan	Business Manager	People Directorate	28/10/2014	28/10/2014
Liz Knight	Governance Services Officer	Resources	28/10/2014	29/10/2014
<b>Names of approvers for submission: (officers and members)</b>				
Finance: Ewan Dewar	Finance Manager, Community Services	Resources	28/10/2014	29/10/2014
Legal: Julie Newman	Children and Adults Legal Services Manager	Resources	28/10/2014	28/10/2014
Director: Brian Walsh	Executive Director,	People Directorate	03/11/2014	7/11/2014
Members: Councillor Mrs Gingell	Cabinet Member (Health and Adult Services)	Coventry City Council	03/11/2014	10/11/2014

This report is published on the council's website:

[www.coventry.gov.uk/meetings](http://www.coventry.gov.uk/meetings)

## **Appendices**

**Adult Social Care Complaints and Representations Annual Report  
1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014.**

**Appendix A**  
**Coventry City Council**  
**Adult Social Care**

**Complaints and Representations**

**Annual Report 2013/14**

**Coventry City Council**  
**Adult Social Care Complaints and Representations Annual Report**  
**1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014.**

**1. Introduction**

Local Authorities are required by law (National Health Services and Community Care Act 1990) to have a system for receiving representations by or on behalf of people in need of Adult Social Care support who have a range of support needs due to a disability or frailty. Services cover assessment and case management, direct service provision or the arrangement of a range of services, including: support at home, day opportunities, supported housing, intermediate, residential and nursing care or provision of equipment.

This report will provide information from comments, compliments and complaints in relation to Adult Social Care services responded to under both the Statutory and the Corporate Complaints Procedures, during the period 1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014 with specific reference to:

- The range of representations received and responses to them
- Specific trends and issues that emerged in the reporting year

The Local Authority Social Services and National Health Services Complaints Regulations (England) 2009 changed the process for handing of complaints within Adult Social Care on the 1<sup>st</sup> April 2009. The purpose of the revised regulations was to align the complaints processes for Adult Social Care and Health to enable joint handing of complaints across health and social care where appropriate. This also meant that the process for dealing with complaints via the statutory procedures was streamlined from a three stage process to a one stage process. The Corporate process is driven by specified timescales whereas the statutory regulations focus on regular dialogue and mutually agreed timescales.

**2. Summary**

Where possible issues/complaints are handled at point of delivery it is when a person feels that they are still not satisfied then it is recorded as a formal complaint. The feedback indicates that:

- The most common main themes represented were:
  - Service - 37
  - Communication and Information-13
  - Professional Conduct-5

Details of the numbers and types of other complaints at each stage are shown in Appendix 1: Statistical Data.

- 104 Compliments were received, mainly for in-house provider services.
- for the service about professional conduct outnumbered complaints with received
- The Local Government Ombudsman during 2013/14 had 13 enquiries/complaints of which 10 were identified as being referred to the local authority in relation to Adult Social Care. Whilst the Local Government Ombudsman changed during the year the categories in overall terms it was higher than the previous year when 7 enquiries/complaints were made by the ombudsman. A report "Complaints to the Local Government Ombudsman 2013/14" was received by the Cabinet Member (Policy and Leadership) on 5<sup>th</sup> September

2014 and the Audit and Procurement Committee on 20<sup>th</sup> October 2014, Analysis of the 13 enquiries/complaints is shown below;

### Ombudsman Enquiries/Complaints

Category	Count
Upheld	3
Not Upheld	2
Not to initiate an investigation	1
Enquiry	6
Premature	1
<b>Total</b>	<b>13</b>

### 3. Promoting Access and Responding to Feedback

Representations from people who use our services and their families provide a useful source of information about quality of service delivery, professional practice and the outcome of management decisions. A key part of the complaints process is how, as an organisation, we learn from negative experiences and use this to improve service delivery. Adult Social Care Services always welcomes feedback. There are a number of ways people can make their views known. These include:

- Telephoning or emailing the main City Council Contact Centre
- Telephoning the Community Services Directorate Office
- Direct from the service if the issue has not been resolved.
- Writing or E-mail to the Adult Social Care Customer Relations Team
- The Coventry City Council Website (accessible via the home page and social care page) provides information on how to make a complaint, advocacy services and the statutory complaints process
- The corporate Speak Up We're Listening leaflets are available at all Council reception points and made available off site on request

As with previous years, most complaints have been received through the Contact Centre.

#### 3.1 Compliments – 104 compliments were received in the year

Compliments tell us what people appreciate about the support they receive and the way it is provided to them. They are a valuable source of feedback and importantly can be used to encourage and motivate staff. Every compliment reported to the Customer Relations Team is registered. By their nature, compliments are generally unexpected and considered to be an 'extra', and as such there is (unless actively prompted) a tendency for individuals and teams to underreport their compliments to the Customer Relations Team. The majority of compliments were for the in house provider services.

#### 3.2 Complaints – 61 complaints were received in the year

The number of complaints decreased, from 81 the previous year to 61, of these in overall terms 28 % were upheld and 29.5% partly upheld.

##### 3.2.1 Complaints investigated

The 61 formal complaints received in relation to Adult Social Care represent less than 1% of 9,208 people who contacted Adult Social Care in 2013/14 and the 7,227 people who received support. Where possible issues/complaints are handled at the point of delivery,

and it is only when a person feels that they are still not satisfied that it is recorded as a formal complaint. The length of time to investigate and resolve complaints depends on their complex nature. The process involves agreement of a complaint resolution plan and jointly agreed timescales.

The overall number of representations has decreased from 81 to 61 and analysis of feedback indicates that service delivery and effective communication are still the most common topics with 82% of the complaints and issues being dealt with at a local service level rather than been escalated to a formal complaint.

### 3.2.2 Statutory Complaints about external providers.

There is a statutory responsibility for providers of residential and domiciliary care services to have a complaints procedure that complies with the Care Homes Regulations 2001, the Care Standards Act 2000 and the National Minimum Standards. There is an expectation that the client pursues a complaint with provider organisations through their own complaints procedures. However, if the client is dissatisfied with the response of the provider or if they wish to pursue the complaint through the statutory adult social care complaints process, they have the right to do so. This was previously through case law, but in October 2009 this was embedded in the regulations. Where possible, we do encourage complainants to utilise the providers' complaints procedures in the first instance.

In relation to external providers, the Adult Social Care Commissioning Team investigates these complaints and, where required, action plans are put in place to ensure service standards were improved. In some cases the representations are routed via the safeguarding procedures and not dealt with as a complaint.

### 3.2.3 Satisfaction with Complaints Handling

It is hard to measure satisfaction with complaints considering the nature of the situation however the decision by the local government ombudsman against what the council had already investigated was only 1 in the last year. However a review has now identified a post, as from 1<sup>st</sup> October 2014 dedicated to co-ordinating the complaints process across the Directorate including Adult Social Care complaints and therefore improve our current systems in relation to complaints handling.

### 3.3.4 Timescales

There are no prescribed timescales for resolution. The only stipulation within the regulations is that timescales were reasonable and that the complaints process should be concluded within 6 months. It is acceptable to extend this deadline with the agreement of the complainant. The focus is on mutually agreed timescales by the Investigating Officer and the Complainant. Responses are often more complex and have to be more comprehensive and meaningful and take some time to investigate. Where originally agreed timescales have been extended, the complainant has been contacted and given an explanation for the delay.

The timescales for responding to corporate complaints remain unchanged. For details of the timescale performance on Complaints see Appendix A.



## **4. Messages, Learning Points and Service Improvements**

Social Care services are committed to learning from customer feedback. Where complaints highlight that things have gone wrong, managers must identify any remedial and developmental action required to improve service delivery. Feedback from compliments provides an equally valuable message; clearly affirming when services make a difference and personal qualities have added value to the outcome for users and carers.

Complaints are classified in terms of specific areas of activity including, Adult Protection, Communication and Information, Discrimination, Environment and Equipment, Management Decisions, Professional Conduct and Service Delivery. However complaint often have several elements within them This section reflects users views on the 3 most common areas of feedback, which represent 90% of the mentioned items within the complaints.

### **4.1 Most Common Areas of Feedback**

Similar to last year the top 3 most common areas of feedback are:

- Service Delivery,
- Communication and Information
- Professional Conduct.

#### 4.1.1 Service Delivery

Central to the Adult Social Care function, standards of care and service delivery, eligibility for services, timeliness in receiving services, characterise the feedback in this category. In keeping with previous years, the majority of feedback falls into this group. 61% of complaints received were in some way related to service delivery and this has to be considered against the impact of meeting or exceeding user and carer expectations and timeliness.

#### 4.1.2 Communication and Information

When users and their families are referred for support, they require information about things they have not encountered before. They also need to be kept informed of progress and decisions. Representations of this nature are categorised in terms of the provision, quality, method and timelessness of information as well as accuracy. The most common complaints are from users or family members who feel they have not been kept informed or when there has been a delay to information being provided or feel officers are not getting back to them.

21% of complaints received were about communication and information. This aspect of work needs constant attention by managers and staff, as the importance of quality and timely communication can never be underestimated and to keep service users and other stakeholders informed is often an additional contributing factor in the other recoded areas such as service delivery and professional conduct.

#### 4.1.3 Staff Conduct/ performance

This represents a significant decrease from last year, from 12 (12%) down to 5 (8%) in this category. However when people complained in this category it also involved other

elements, the major additional contributing factor being communication. This has to be looked at in the context of the overall number of cases involved and the amount of compliments received which is credible evidence of the difference an individual can make to outcomes. Where fault was found, supervision, training and where necessary Human Resources procedures enacted were the most common actions taken by managers.

## **4.2 Conclusions**

Whilst the numbers are low we are striving to improve services and have analysed the complaints received and drawn the following conclusions;

### 4.2.1 Volume

The number of complaints is lower and the complaints are more complex and normally there is more than one issue to be resolved. This is reflected in the time taken to respond to a complaint. In certain cases investigations were started but the issues were found to be already being dealt with. In certain circumstances they have not been recorded as complaints as people needed redirecting to other organisations or were taken down the safeguarding processes.

### 4.2.2 Learning

Timely and clear communication is important to delivering an excellent service as maintaining a sense of support and empowerment. Communication can have a significant impact on the user and carer perception of service delivery and can be the catalyst for overall dissatisfaction whilst the user sees it as a lack of service delivery. This area of practice needs constant reinforcement for all managers and staff. This is also now being taken on board in work on work in relation to the customer journey and in connection with implementation of the care act.

### 4.2.3 Resolution

Apologies and explanations are a standard basis for resolution and a feature of formal responses. Outcomes in 2013/14 have included Re-assessment, reimbursement, change of worker, change of care provider, changes to a leaflet, reassessment of Direct Payment, and improving collection of data within commissioning.

Other resolutions have identified training needs for staff within an agency in relation to certain conditions as well as reviewing its procedures, and also indicating the need for an increase in Electronic Care Monitoring and in certain cases referral to other outside bodies.

### 4.2.4 Service Improvement/Developments

As part of a review of the complaints process an officer has been identified to co-ordinate complaints across the People Directorate including Adult Social Care complaints with effect from October 2014. An internal target of 20 working days to complete investigations has been included for Adult Social Care statutory complaints. Consideration will also have to be given to any changes that will be required as part of the Care Act. There were indications in the draft regulations that there could be changes and it has been noticed that changes have already taken place in relation to Social Services Complaints Procedure (Wales) Regulations 2014 involving adding an independent role before escalating to the ombudsman.

**Appendix 1 – Statistical Data**

**Adult Services Data**

Complaints received

<b>Total</b>	<b>61</b>
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Main reason for Complaint.

<b>Category</b>	<b>Count</b>	<b>%</b>
Standards of Service	37	60.7%
Communication	13	21.3%
Staff Conduct/Performance	5	8.2%
Finance-assessments	3	4.9%
Other	3	4.9%

Please note that a complaint can have more than one reason code, the above is given to reflect the major conclusion within the complaint.

Decisions overall

<b>Decision</b>	<b>Upheld</b>	<b>Part Upheld</b>	<b>Not Upheld</b>	<b>Withdrawn/already in process /Referred elsewhere</b>
Complaints	17	18	20	6
%	27.9%	29.5%	32.8%	9.8%

Timeliness

a) Complaints acknowledged on time,

<b>Timeliness</b>	<b>On time</b>	<b>Not on time</b>
Complaints	41	20
<b>Total</b>	67%	33%

b) Completed

<b>Timeliness</b>	<b>In 20 days</b>	<b>Over 20 days</b>
Complaints	26	35
<b>Total</b>	42%	58%

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**To: Cabinet Member (Health and Adult Services)**

**Date: 9<sup>th</sup> December 2014**

**Subject: Coventry City Council- Adult Social Care Complaints and Representations Annual Report 1st April 2013 to 31st March 2014**

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**1 Purpose of the Note**

- 1.1 To inform Cabinet Member (Health and Adult Services) of the outcome of the Health and Social Care Scrutiny Board consideration of the Adult Social Care Complaints and Representations Annual Report at their meeting on 19<sup>th</sup> November 2014.

**2 Recommendations**

- 2.1 The Scrutiny Board noted the Annual Report. The Board did not make any additional recommendations to Cabinet Member (Health and Adult Services).

**3 Information/Background**

- 3.1 Health and Social Care Scrutiny Board discussed the Adult Social Care Complaints and Representations Annual Report at their meeting on 19<sup>th</sup> November 2014.
- 3.2 The Board asked that future reports include detailed information about the nature of the complaints and any changes introduced as a result of lessons learnt.

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