Adult social care complaints and representations annual report 2016/17

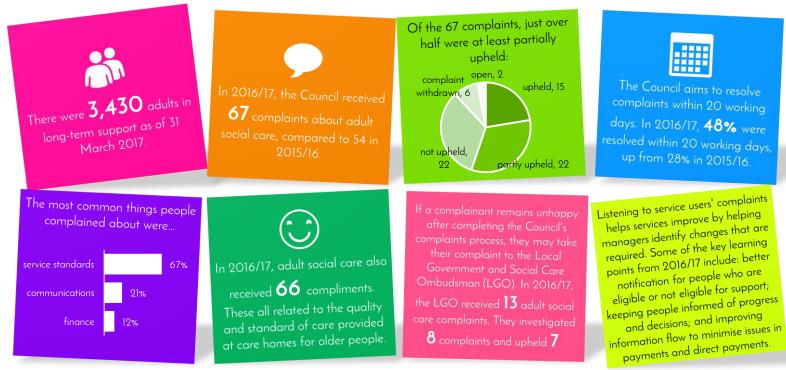


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www.coventry.gov.uk/complaints/

Adult social care 2016/17 complaints & representations key facts & figures



Comments, compliments and complaints about adult social care

You have the right to receive a good level of service. Listening to your views helps adult social care services to put things right and improve things for the future, so your comments, compliments, complaints and suggestions are important and always welcome. You can contact the adult social care complaints officer by phone to 0800 269851 or online at www.coventry.gov.uk/form_speakup/ or by email to AdultSocialCareCustomerRelations@coventry.gov.uk.

Coventry City Council

www.coventry.gov.uk/complaints/

Introduction

Local authorities are required by law, via the National Health Services and Community Care Act 1990 and the Local Authority Social Services and National Health Services Complaints Regulations (England) 2009, 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 provides information about comments, compliments and complaints received in relation to adult social care services responded to under Coventry's statutory complaints procedures, between 1 April 2016 to 31 March 2017. It makes reference to the range of representations received and any trends and issues that emerged.

Summary

There were 67 statutory complaints made within the year, compared to 54 in 2015/2016. 37 (55%) of these complaints were fully or partially upheld compared to 61% in 2015/16.

In addition to the figures above, 13 informal complaints were received during 2016/2017, compared to 14 received in 2015/2016. These are complaints resolved/handled at the point of delivery.

In 2016/17, the Local Government and Social Care Ombudsman (LGO) considered 13 complaints or enquiries to adult social care, of which eight complaints were investigated and all but one upheld (88%). This figure is included within the 67 complaints received.

Promoting access and responding to feedback

Representations from people who come into contact with adult social care and their families provide a useful source of information about quality of service delivery, professional practice and the outcome of decisions we make that affect their care and support. A key part of the complaints process is how the Council learns from negative experiences and use this to improve what we do. Adult social care services always welcomes feedback, whether this is positive or negative and there are a number of ways in which people can make their views known.

Ways in which people can provide feedback about adult social care include telephoning or emailing the contact centre; direct contact to the service area or team; or writing to AdultSocialCareCustomerRelations@coventry.gov.uk.

The Council's website also provides information on how to make a complaint, advocacy services and the statutory complaints process.

About the complaints

Number of complaints in 2016/17

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 number of complaints has increased from 54 in 2015/16 to 67 in 2016/17. There is no single identifiable reason for this increase. The number of complaints and their outcomes are detailed below.

	2016/17		2015/16		
Upheld	15	22%	13	24%	
Partly upheld	22	33%	20	37%	
Not upheld	22	33%	19	35%	
Complaint withdrawn by complainant	6	9%	0	0%	
Open	2	3%	2	4%	
Total	67			54	

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 and investigated as such. The length of time to investigate and resolve complaints depends on their complexity. Where there are particular complexities that will require an elongated period of investigation a timescale is agreed with the complainant.

How people complained

This is how people chose to complain to the Council:

Method	2016/17	2015/16
Email	53	17
In person		23
Letter	8	
Not categorised		3
Online form	6	
Phone		11
Total	67	54

Summary of complaints by service area:

The number of complaints received broken down by service area is as follows:

Service area	2016/17	2015/16
Adult commissioning	10	5
All age disability	13	19
Axholme services		1
Community services 65+	9	
Deprivation of liberty safeguards	1	
Elsie Jones House	1	
Emergency duty team	1	1
Finance	1	2
Front door & Intake	10	12
Hospital social care service	3	
Independent living team	1	
Knightlow Lodge	1	
Mental health	7	3
Monitoring and response services (formerly ESU)	1	
Occupational therapy services	1	
Older people and physical		4
Opal	3	

Service area	2016/17	2015/16
Review and brokerage		2
Safeguarding	2	1
START Team	1	
Therapy and engagement	1	4
Total	67	54

Statutory complaints regarding 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 stipulated by the Care Quality Commission. There is an expectation that the client pursues a complaint with provider organisations through the providers 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. Where possible, we encourage complainants to utilise the providers' complaints procedures in the first instance as this enables the complaint to be dealt with at source as opposed to through the Council.

Complaints regarding external providers are monitored through contract monitoring processes and, where required, providers produce action plans to deliver service improvements.

Timescales

There are no externally prescribed timescales for the resolution of complaints. The only stipulation within the regulations is that timescales should be reasonable and that the complaints process should be concluded within six months. It is acceptable to extend this deadline with the agreement of the complainant.

As there is no specific required, the approach taken is to agree a timescale with the complainant. On occasion, for instance, due to unforeseen circumstances, the originally agreed timescales may need to be extended, in these instances the complainant is contacted with an explanation for the delay and the likely revised timescale.

As a benchmark for monitoring the timescale for completion of complaints adult social care has an internal guideline that complaints should be completed within 20 working days.

Complaint stage	Timescales	2016/17	2015/16
Stage 1	Within 20 working days	32 (48%)	15 (28%)
	Over 20 working days	35 (52%)	39 (72%)
Total		67	54

Performance against this target is shown in the table below.

Where the 20 working days timescale has been exceeded this is generally in association with the more complex cases, a number of which include safeguarding issues across more than one agency.

Timeliness of complaints (within 20 working days) have improved with 48% of complaints resolved within 20 working days in 2016/17, compared to 28% in 2015/16.

Ombudsman enquiries

The Local Government and Social Care Ombudsman (LGO) considered 13 complaints or enquiries to adult social care, of which eight complaints were investigated and all but one upheld (88%). This is an increase from four in 2015/16 (of which 50% upheld) to eight in 2016/17 (of which 88% upheld). This compares to a West Midlands average of 73% and a national average of 64%.

Messages, learning points and service improvements

Adult 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.

Compliments

66 compliments were received in 2016/17. These were all related to the quality and standard of care provided at care homes for older people. Compliments came from service users and their family members, thanking individual members of staff and teams for the ongoing support and care provided by social workers, care teams and departments. Compliments received by forms of thank you cards, letters and emails.

Most common areas of feedback

A complaint will usually cut across multiple themes and will have more than one complaint category recorded. The themes of these complaints can be summarised as follows:

Category	2016/17		2015/16		
Standards of service	45	67%	40	83%	
Communication	14	21%	8	15%	
Financial issues	8	12%	11	19%	

Standards of service

67% of complaints received were related to standards of service. This is a reduction from 83% in 2015/2016. This includes service delivery, assessment of eligibility for services and timeliness in receiving services. A challenging element of working in adult social care is notifying people that they are not eligible for support, or explaining to them that their needs can be met in other ways to support being provided by the Council. These are often emotive and challenging situations which can stimulate complaints where people do not agree with the social workers views. Also, where people are eligible for support from the Council there can be a delay in support being put in place due to service availability, this again, is an area that can stimulate complaints.

Communication

When users and their families are referred for support, they require information on subjects they may have not encountered before. They also need to be kept informed of progress and decisions in processes that often appear confusing. 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, when there has been a delay to information being provided, or feel officers are not getting back to them or they do not have a direct line of communication to the person they have been dealing with.

21% of complaints received were about communication and information, as compared to 15% in 2015/16.

Financial issues

The complaints received around financial issues were varied. These included continuation of payments being received when services had ceased and direct payments missed. Although varied complaints commonly related to a breakdown in information flowing from one team to another and system errors which impacted on finance processing. Where this occurred matters were rectified and payments were amended accordingly.

Conclusions

The number of complaints has increased from 54 in 2015/16 to 67 in 2016/17. Early indications show that this higher level of complaints is continuing in 2017/18. It is important not to draw too many conclusions from

the volume of complaints as this is as much an indicator of people feeling more able to complain as it is of an overall declining standard of service. It should also be noted that a recent report of the Local Government and Social Care Ombudsman (review of adult social care complaints 2015/16) reported an increase in the volume of complaints relating to adult social care.

Service improvement and learning for 2017/18

The following improvement initiatives are being progressed to ensure representations are better used to deliver improvement:

Compliments

Compliments around adult social care were not routinely sent to the relevant team for recording. Going forward compliments will be captured by the complaints team and sent on a monthly basis to the principal social worker.

Responding to and learning from complaints

The learning elements from complaints are captured in service areas on a regular basis as part of the business management process.

Issuing social workers with business cards to be given to clients so there is a direct line of communication.

There is a need to implement a formal learning process from the outcome of complaints and a quality assurance framework for adult social care, to include complaints, in under development. A way to review this and have oversight has been introduced in the all age disability and mental health teams in Q2 of 2016/17.

There needs to be a consideration of an achievable and deliverable timescale for responses to complaints with monitoring of achievement against this, with the continuation of the RAG reporting process which should further improve timeliness in 2017/18.

Adult commissioning

Of the ten complaints that were about standards of commissioned services, seven had elements that were either upheld or partially upheld. There were no clear themes to the issues that were upheld as the matters were quite disparate. In each case the strategic commissioning team laid down expectations of the provider which were subsequently monitored for compliance. There has been some learning from a complaint submitted by a provider in relation to clear communication around reasons for placement stops which has been incorporated into commissioning practice

Community social care (65+), hospital social care and equipment and therapy services

Within these areas the following service improvements are identified and implemented: Improving the management of waiting lists for assessment; developing standards to ensure that the service is as responsiveness as it can be; ensuring waiting times for a service are as short as possible; increasing the level of assurance that people are charged correctly for home support services according to the services they actually receive; improving systems for collecting equipment once it is no longer required; and ensuring that the Council is compliant with its statutory duties in funding services for people pending the outcome of disputes with other local authorities.

All age disability and mental health

In all age disability and mental health the last 12 months have seen a considerable improvement in the management of complaints. There had been significant delays in responding to complaints and this generated a queue of complaint investigations and responses. This is now rectified; team leaders are familiar with process and the need to respond in a timely way and oversight of this is delivered via the General Managers Governance Meeting that takes place every four weeks. The meeting is extended to include the Complaints Officer so that any issues that arise can be addressed directly.

Delays in response: the service had backlogs and staffing issues during the time of complaints and high volume of work, however since the complaints audits of views have been in place and processes have been reviewed. This includes systems for improvements and processes in relation to management of cases when staff are out of office.

Interface between service areas to determine correct pathway for cases, causing delays to response to service user: - Pathway work currently being undertaken between All Age Disability and Mental Health.

Advocate not used as part of assessment process: staff have been reminded that this is a process that must be followed as part of the care act.

Complaints relating to services not being provided: staff have been clearly assessing as per applying eligibility under the care act which has led to some complaints. Public expectation that social care provided tasks/services which would not be a social care responsibility has led to complaints. Work may need to be considered in relation to re-education of the public/relook at expectations. Currently work being done on pathways with children's services and education which will assist in the information sharing of social care eligibility which will assist in managing expectations.

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