

## REPORT TO HEALTH SCRUTINY COMMITTEE

<b>Title:</b>	<b>ANNUAL COMPLAINTS REPORT – ADULT SOCIAL CARE SERVICES – FOR INFORMATION ONLY</b>
<b>Date of Meeting:</b>	<b>Strategic Management Team 5 August 2013 Health Scrutiny 28 August 2013</b>
<b>Report from :</b>	<b>Pat Jones-Greenhalgh, Executive Director Adult Care Services</b>
<b>Contact Officer :</b>	<b>Sharon Wells, Customer Services Manager (Complaints)</b>

### **1.0 PURPOSE/SUMMARY**

There is a statutory requirement to produce an Annual Complaints Report relating to Adult Social Care Complaints. This report is to update Members and provide current information in respect of complaints related to Adult Social Care Services. The report looks at the period 1 April 2012 to 31 March 2013 and the purpose in presenting the report is for Members to oversee the extent and complexity of Adult Care Services' span of activity and to receive information relating to the quality of services delivered.

Members are asked to note the content of the report.

### **2.0 INTRODUCTION**

- 2.1 In line with guidance from the Department of Health, Local Authorities are required to publish an Annual Complaints Report covering the council year.
- 2.2 This report is to update Members and provide information in respect of complaints related to Adult Social Care Services during 2012/13. More frequent monitoring is undertaken by the Adult Care Services Strategic Management Team to review performance and agree, as appropriate, any remedial action in response to concerns.
- 2.3 Members' comments regarding the report are invited.

### **3.0 BACKGROUND**

- 3.1 A complaint is generally defined as 'an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social services provision which requires a response.'

- 3.2 Complaints principally concern service issues, including the perceived standard of services and their delivery by service providers. Recorded figures however only represent a percentage of instances where people are dissatisfied as many complaints/concerns are managed and resolved at the time, avoiding the need for people to resort to the more formal statutory complaints process.
- 3.3 Within the regulations which govern the process, the Council adopts a flexible approach which prioritises local resolution of complaints although people still have the option to take their case to the Local Government Ombudsman should they remain dissatisfied.
- 3.4 It is not easy for some customers to make a complaint. The process is therefore designed to ensure that all complaints are treated seriously, in confidence, investigated and given due attention. Integral to this is the role of the Customer Services Manager (Complaints) who provides a degree of independence and support to the complainant whilst ensuring the complaint follows the statutory procedure. Customers may also make complaints through advocates (including Councillors and MPs) – providing any necessary and appropriate consent has been received which enables personal information to be shared.
- 3.5 The Complaints Procedure is not designed to deal with allegations of serious misconduct by staff. These situations are covered under separate disciplinary procedures of the Council.
- 3.6 In order to ensure any safeguarding issues which are contained within social care complaints are captured and processed through the Safeguarding Procedures, the Customer Services Manager (Complaints) and the Safeguarding Co-ordinator have an agreed protocol regarding joint working which is accessible on the Council's website.

#### **4.0 ANALYSIS OF COMPLAINTS**

- 4.1 The attached appendix 1 provides statistical data in graph format for the period 1 April 2012 to 31 March 2013 and includes:-
- A comparative study of the number of complaints received for the period 2010/11, 2011/12 and 2012/13 (Fig. 1)
  - A comparative study of the nature of complaints received for the period 2011/12 and 2012/13 (Fig. 2)
  - A comparative study of the number of complaints received by Teams for the period 2011/12 and 2012/13 (Fig. 3)
  - A comparative study of the time taken to resolve complaints for the period 2011/12 and 2012/13 (Fig. 4 )
  - A comparative study of the number of concerns raised by Local Councillors, Members of Parliament and the Local Government Ombudsman for the period 2011/12 and 2012/13 (Fig. 5)
  - The number of compliments received and the service area they relate to 2012/13 (Fig. 6)
  - The attached appendix 2 shows the number of complaints received relating to categories of Equality and Diversity

- 4.2 The headline statistic is that the total number of complaints received during 2012/2013 (84) has reduced from the previous year (89). Although this may be considered a small reduction in terms of numbers, it is significant given the major changes to services which have taken place within the Department over the last year. Key changes and areas of activity include:-

#### **Older Adult Short Stay, Day Services and Shared Lives Scheme**

- Upgrading of Grundy Day Centre
- Additional audits of medication within older adult short stay services
- Prevention and response to abuse operational policy introduced to all adult care services
- Review of pathways into short term care to ensure a smooth timely transition for customers using short term care services
- Audits of nurse call monitoring system to ensure buzzers which are activated are responded to within time scales

#### **Learning Disability Team**

- Improved links and accountability with Children's Services for the transition process
- Additional brokerage/commissioning and finance support provided by existing staff
- New safeguarding processes implemented and robust tracking of ongoing cases

#### **Vulnerable Adults Team**

- Improved communication with customers in explaining the way processes work and in written documents

#### **Assessment and Reintegration Team**

- Improved customer response via Triage including risk assessment
- Swifter allocation of work to social care
- Appeals process in place for customers

#### **Hospital Team**

- Reviewed and changed wording in financial booklets to ensure clarity around the charging policy

#### **Learning/Physical Disability Team**

- In July 2012 a new core base facility opened at the Haymarket alongside Adult Learning
- An Autumn Ball and Autumn Fair held to encourage greater partnership with the community
- Gardening activity for customers accessed through the Volunteering Project
- New facility to be constructed on Whittle Pike site scheduled for completion in October 2014

- A six month review of the Seedfield Day Service concluded and a plan devised for development of a new service
- A new Day Services brochure published

### **Inclusion Team**

- Community Meals service has been re-tendered

### **Carers Services Team**

- Increased support is provided for carers using their personal budgets through drop in sessions, libraries and the Carers Centre
- A number of consultations with Carers have taken place during 2012-13 on the development of the Carers Strategy, Carers Personal Budgets and Carers Forum

- 4.3 In relation to the volume of complaints, the Assessment and Re-integration Team received the highest number (21) which, as the main access route to Adult Care Services, maybe expected. However, this has significantly reduced from 32 in the previous year. This is followed by 19 complaints relating to the Vulnerable Adults Team and 10 complaints against the Commissioning and Procurement Team. The numbers of complaints against other teams are relatively small when considered over a twelve month period i.e. 8 or lower.
- 4.4 With respect to timescales, over 77% of complaints were responded to within 30 working days of the complaint being received.
- 4.5 The number of concerns raised by Members of Parliament and local Councillors has reduced by 50%, from 28 in 2011/12 to 14 last year. All these enquiries were received from the MP for Bury South.
- 4.6 10 Local Government Ombudsman enquiries were received this year – an increase of 5 or 50% on the previous year. Of these:
- 2 resulted in a write off of charges
  - 2 resulted in re-assessments/re-consideration for Disabled Parking Badges
  - 1 further enquiry was received following the information provided to the LGO about the Council's Blue Badge process
  - 1 resulted in a change of process to ensure the holistic view of a customer's home life is considered prior to arranging a care package
  - 3 required no further action by the Council
  - 1 remains ongoing
- 4.7 To put the total number of complaints in context, the Department provides services to just over 6,200 individuals. 84 complaints therefore equates to 1.3% of customers.
- 4.8 The Department also received 473 compliments about the work carried out by individuals/teams. These are also recorded and celebrated in recognition of the good work that is taking place.

- 4.9 Complaints (and compliments) can give valuable feedback and alert managers to issues with regard to service quality or delivery. The Department seeks to learn from such occurrences and recommendations made as a result of complaints made during 20012/13 have resulted in improvements or changes to services. These are listed in Appendix 3.

## **5.0 CONCLUSIONS**

- 5.1 The number of complaints has reduced despite some major changes to services.
- 5.2 The process has been designed to reduce barriers for complainants.
- 5.3 The Department monitors feedback and uses these experiences to learn and improve operations. This approach will continue and steps will be taken to minimise dissatisfaction although this will be a challenge in an environment of rising demand and diminishing resources.

**Appendices 1, 2 and 3 attached**