

Regulatory and Audit Committee

Title:	Making Experiences Count Annual Report – Adult and Family Wellbeing Social Care Complaints
Date:	24 th September 2013
Author:	Michelle King
Contact officer:	Michelle King
Electoral divisions affected:	All

Summary: This annual report of the Adults and Family Wellbeing Social Care Statutory Complaints Procedure, Making Experiences Count, covers the period between 1st April 2012 and 31st March 2013.

Recommendation: Members should note the content of the report.

Adults and Family Wellbeing Social Care Making Experiences Count-Annual Report 2012/2013

1. Background

- 1.1 In 2006 the Government began the process of improving the quality of complaint handling across Health and Local Government Care services under the banner 'Making Experiences Count'.
- 1.2 The reform focused on good customer care and the client/patient experience, including a simple, consistent approach to complaints across services which were person centred.
- 1.3 In April 2009 changes were made to the legislative framework regarding Health and Social Care Complaints which completed the procedural reforms. Guidance was also issued on better customer care.
- 1.4 The guide to better customer care, 'Listening, Responding, Improving', emphasises the need to listen to and learn from all types of client feedback. In 2010/11, all adult social care contacts were categorised into one of four feedback groups: complaints, concerns, comments and compliments. Those in the complaints category were subject to the full Adult Social Care complaints legislative procedure.

2. Introduction

- 2.1 This annual report covers the period 1st April 2012 to 31st March 2013 and concerns the Adult Social Care statutory complaint procedure.

- 2.2 The Local Authority Social Services Act 1970 (Section 7 and amendments to this), requires Local Authorities to have in place an effective representations and complaints procedure. This is to ensure that service users and/or their representatives are able to express their dissatisfaction about the services they have received or they feel they ought to have received. This report takes into account the requirements of relevant subsequent legislation.
- 2.3 This report deals with complaints which fall within the scope of the Adult Social Care Complaints Legislation; it does not address complaints which are proper to the Corporate Complaints Procedure including complaints made by members of the public, who are not service users or their representatives, concerning adult social care.
- 2.4 Enquiries from Members of Parliament are separately recorded and do not form part of the complaint process but for transparency these have been included in the report.
- 2.5 This report has been produced to keep Buckinghamshire County Council informed about the operation of the social care complaints procedures and to fulfil the Council's statutory obligations to produce an annual report.
- 2.6 The Procedures are publicised in a leaflet about complaints, 'Listening, Responding, Improving', which is given to all service users. It is also available online.

3. Complaints Procedure

- 3.1 The Statutory Adult Social Care Complaints Procedure is a one stage process. There is an expectation under both the legislation and by the Local Government Ombudsman that complaints will be locally resolved within reasonable time limits. Under the legislation, it is recognised that some form of response should be issued within a 6 month period unless there is an exceptional reason why this cannot be done.
- 3.2 The 2009 regulations introduced a 'Responsible Person' role, which oversees and is responsible for ensuring compliance with the arrangements made under the regulations; particularly in relation to ensuring remedial action is undertaken as a result of a complaint. This role has been delegated by the Chief Executive to the Head of Service, Commissioning and Service Improvement in Adults and Family Wellbeing. It also introduced a 'Complaint Manager' role to be responsible for the consideration and handling of complaints under the procedure. During 2012/2013, responsibility for this role had been delegated to the Customer Care Manager. Moving forward, responsibility for this role will now lie with the Complaints and Insight Analyst. The day to day duty of the role will be undertaken by the Statutory Complaints Officer.
- 3.3 Good practice guidance advises personal contact with the complainant to clarify the complaint and to agree mutually agreeable plans for consideration of the complaint and locally agreed timescales.

4. Compliments Received

4.1 All service areas continue to attract compliments and unless the Complaints and Information Team are alerted to compliments, they are unable to be centrally recorded. Overall there were 24 compliments. This figure compares with 27 in 2011/12 and 36 in 2010/11. Although the number fell in 2012/2013, the number of compliments increased in the last quarter, following a Council wide awareness campaign for 'positive feedback'. Due to the low number of recorded compliments, no meaningful statistical analysis can be measured.

Service Area	Compliments Received
Commissioning and Improvements	2
Service Provision-Learning Disabilities	2
Service Provision-Physical Disabilities	6
Service Provision-Older People 65+	8
Service Provision-Support-Communications	6
Total	24

5. Complaints Received

5.1 There were 108 formal complaints received in 2012/13; the corresponding figure for previous years is 195 in 2011/12 and 135 in 2010/11.

5.2 Multiple contacts by the same client, for example where follow up questions are asked by complainants relating to a complaint response, have been classed as one contact.

5.3 The number of complaints has decreased this year. One reason for this may be that clients are more familiar with the new ways of service delivery. 2011/12 saw a rise in complaints. It was concluded at the time that the rise was a reaction to the changes that were being made to service delivery during this period. Change can be difficult for vulnerable adults, their families and their carers.

5.4 The table below shows a breakdown of complaints received by service area.

Service Area	Complaints Received
Commissioning and Improvements	3
Service Provision-Learning Disabilities	27
Service Provision-Mental Health	9
Service Provision-Physical Disabilities	15
Service Provision-Older People 65+	45

Service Provision-Support-Communications	2
Service Provision-Support-Finance	7
Total	108

5.5 Under each of the service provision client groups, problems with the care assessment process accounts for the largest proportion of complaints received. However, it would be difficult to draw any meaningful analysis from this data as each case can be quite complex and the nature of each complaint quite different. The majority of assessment complaints are from clients or families who disagree with the outcome of a care assessment.

5.6 For a short period, there was a trend in the number of complaints regarding a delay in receiving a Direct Payment across all client groups. This type of complaint was not logged under the finance heading as it usually involved other issues pertaining to the care assessment process. The council conducted a general review of Direct Payments as there appeared to be an imbalance between the move to personal budgets and the take up of Direct Payments. New processes were embedded and consequently, we have seen fewer numbers of complaints relating to this in the last quarter of the year.

5.7 Complaints relating to mental health services, which are delivered through a section 75 partnership agreement with the Oxfordshire and Buckinghamshire Mental Health (NHS) Trust, are dealt with under a joint protocol complaints procedure. 8 Cases were considered this way in 2012/13.

5.8 The reasons and outcomes of complaints are given in the table below. The complaint outcome figures do not correspond to amount of complaints received as a result of complaints that have not been concluded within the same financial year. In 2012/13, 12 cases were withdrawn. Complaints could be withdrawn by the complainant or they could be withdrawn if we have not received consent from the client to take a complaint forward with their representative.

Issue Nature of Complaint	Number Received
Delay in Process	34
Staff Conduct/Behaviour	6
Outcome of Decision	29
Policy Decision	2
Service Quality	37
Total	108

Complaint Outcome	Number
No Comment Made	11
Not Upheld	23
Out of Jurisdiction	7
Partially Upheld	21
Upheld	30
Withdrawn	12

Total	104
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5.9 The two most prevalent areas for complaints were delay in care assessment process and outcome of decision relating to the assessment process. It is difficult to draw any meaningful analysis from the outcome of decision in relation to the care assessment process as each case differs in complexity. Adult social care are looking into the front end information provided to clients to set clear expectations to customers in respect of when a care assessment will take place. Future monitoring of this type of complaint may assist in assessing how successful changes to this process may be.

6. Complaints Received-External Agencies

6.1 There is a statutory responsibility for providers of residential and domiciliary care services to have a complaints procedure that complies with the relevant national regulations. 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 from their provider or if they do not want to engage with the provider, they have the choice to pursue the complaint through the statutory adult social care complaints process. There were 22 complaints regarding domiciliary or residential care pursued through the statutory procedure in 2012/13.

6.2 There is a concurrent project outside of the Complaints and Information Team being undertaken across Buckinghamshire County Council in respect of monitoring complaints received by contracted out services.

7. Timescales for responding to complaints

7.1 During 2012/13, the Adult Social Care Process prescribed generalised response times dependent on the category of risk given to the complaint. The principal aim of the complaints process was to actively seek a local resolution agreeable to both the client and the Local Authority. Level 1 and 2 complaints were considered to be low risk and the general target for responding was 10 days; level 3 and 4 considered to be a higher risk were target at response times within 20 days; level 5, which was very high risk did not have prescriptive response times. The table below shows the average response times during 2012/13.

Category of Response	2012/13 Average Response Time
Level 1 (Low)	None
Level 2	30
Level 3	169
Level 4	159
Level 5 (High)	None

7.2 Average response times appear to have increased. There were a significant number of cases logged where the record was not closed within an acceptable timescale. This, however, was not always a reflection on an increased response time. In many cases the complaint issues that were brought to our attention were resolved to the satisfaction of the complainant within an appropriate timescale but this action was not always recorded on our Respond system. This then led to a number of cases appearing to take an extended period of time.

7.3 Moving forward, changes have been made to the administration of the statutory complaints procedure to ensure that all complaints information is accurately recorded and that complaints are responded to within a 28 day timescale. This is explained in more detail in section 11 of this report.

8. Equalities Information

8.1 Local Authorities are asked to provide summary information in the annual report on statistical data about the age, gender, disability, sexual orientation and ethnicity of service users. Please see Appendix 1 for the statistical table referring to this.

9. Enquiries from Member of Parliament

9.1 Enquiries from Members of Parliament are not recorded as complaints. A number of clients and their families choose to write to Members of Parliament rather than log a formal complaint. During 2012/13 there were 41 enquiries from Members of Parliament. Of the Member of Parliament enquiries 62.2% were answered within 10 days. The target response time for this type of enquiry is 28 days.

10. Local Government Ombudsman

10.1 In 2012/13 the Local Government Ombudsman looked into 3 cases regarding Buckinghamshire County Council's Adult Social Care. Of those 3 cases, 2 were not pursued and the other was remedied during the investigation. The Local Government Ombudsman did not make any findings of maladministration regarding Adult Social Care complaints.

11. Review of past year and future plans

11.1 As mentioned previously, the response time for complaints has been considerably longer than the agreed standard for responding. It was also noted that there were a significant number of complainants who were unhappy with the initial response and investigations that took place in respect of their concerns. This led to further, protracted complaints. In recognition of these areas of concern, a new procedure has been designed to facilitate complaints through the statutory procedure. The new process seeks to try and locally resolve complaints where possible whilst setting out a maximum 28 day response time which can be efficiently monitored. It will also make sure that all considerations in respect of capacity and safeguarding are taken into account prior to the investigation of the complaint and that appropriate acknowledgments and holding responses are delivered in line with the legislation.

11.2 In 2012, the Complaints and Information Team came in to effect. The centralised team has specialist officers dedicated to the Adult and Children's Statutory Procedures as well as the Corporate Complaints Procedure. The Freedom of Information and Data Protection Officers also sit with the Team and offer guidance where applicable. It is expected that the centralisation of the team will lead to a consistency of timely and well informed responses to be delivered by all Council services. This will also assist in minimising the risk in maladministration findings against the Authority by the Local Government Ombudsman. The team also provides resilience for each process and no one role is solely conducted.

- 11.3 The main aim of the centralised team is to collate data in a consistent format in respect of all complaints. Once this data has been collated, we hope to analyse the information and provide valuable customer insight to services which can improve the customer experience. There is also a requirement within the Adult Social Care Complaints regulations to report on the learning achieved from the Complaints received. The new process has been implemented to assist in the delivery of customer insight. As part of this work, we are continuously reviewing the way we as an authority communicate with all stakeholders. We are also reviewing the way in which we capture information to deliver the most valuable and accurate learning to all services. It is expected that the delivery of this information can begin to take shape in the coming year.
- 11.4 Over the next year, we will begin to undertake training to both frontline staff and senior level staff on the complaints process. We would like to improve across the authority the recognition of complaints and the delivery of timely, well-informed and reasoned responses. We would also like to improve the communication between customers and staff to help resolve concerns before they become formal complaints. We also want to ensure that there is a consistently high level of customer service for those who wish to complain.
- 11.5 The Statutory Complaints Officers will review the process for dealing with enquiries made by Members of Parliament and Councillors to minimise the risks involved in the provision of responses which fall out of the same considerations that would be made when dealing with complaints. An example of this would be taking forward enquiries made without the consent of the client.
- 11.6 Buckinghamshire County Council is part of the North West London Complaints Managers (NWLCM) Group which uses a pool of Independent Officers. In practice, the team commission these officers in respect of an Adult Social Care Complaints when it is felt the risk of the complaint is significant. It has been found that the framework contract agreement has been beneficial as there are mutually agreed standards, working practices and costs. The pool has been expanded over time to include mediators and other professionals who can deliver resolution services. Over the coming year, the Centralised Complaints Team is looking at ways we can manage the time taken over independent investigations to help reduce costs without jeopardising the results achievable by way of an independent investigation. It is also in discussions with the other members of the NWLCM group to improve the quality and costs of the pool.

12. Recommendations and Management Actions

- 12.1 We have implemented a new complaints procedure and this was taken forward from April 2013. It is hoped that the new process for dealing with complaints will lead to a more robust approach to complaint management with an emphasis on dealing with concerns within 28 days of receipt.
- 12.2 We will be making changes to our Respond database with the aim of providing more insightful data to the Adult Social Care service to help shape service delivery. We will also be working closely with the Senior Management Team to help identify trends and make recommendations. The changes will also allow us to capture a more complete audit trail when dealing with complaints and ensure that appropriate legislative complaint requirements are completed.

12.3 We will be engaging with and training staff on complaint investigations and providing appropriate responses. This will lead to a consistent standard of customer service across the Adults and Family Wellbeing portfolio.

Appendix 1

	No of Complaints				
	Older People	Physical & Sensory Disabilities	Learning Disabilities	Other ¹	Total
No. of complaints	45	15	27	21	108
Male	13	7	16	10	46
Female	31	8	11	10	60
White British	38	11	22	17	88
Any other White background	3		1	3	7
Indian (Asian or Asian British)		1	1		2
Pakistani (Asian or Asian British)		2			2
Other (Asian or Asian British)					
Caribbean (Black or Black British)					
African (Black or Black British)					
Other (Black or Black British)			1		1
Chinese			1		1
Mixed White and Asian					
Mixed White and Black Caribbean					
Mixed White and Black African			1		1
Other ethnic group					
Not Stated	2	1			3

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1. Commissioning and Service Improvement, Mental Health, Communications and finance.
2. The figures may not correspond to complaints received figures as this data may not have been available in every case.