

# **Adult Social Care Annual Complaints & Representations Report**

**April 2016 – March 2017**

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June 2017

**Thurrock Council**  
**Adult Social Care**  
**Annual Complaints Report 2016/2017**

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## **1. Introduction**

This report provides information on complaints for Thurrock Council Adult Social Care services for the period 1<sup>st</sup> April 2016 to March 2017.

Thurrock adult social care arranges and supports provision of a wide range of commissioned and in-house care, to support people to live independently in their homes and to increase levels of choice and control over the support they receive. It also supports residential or nursing care when this becomes necessary. The department also has lead responsibility for safeguarding adults and provides / commissions some services jointly with Health partners.

The complaints process provides the council with an additional means of monitoring performance and improving service quality and provides an important opportunity to learn from complaints made by service users and advocates.

We have an established IT system in place to capture a range of complaints information, including the nature of the complaint, the action taken, the outcome of each complaint and whether there has been compliance with the time periods specified in the regulations.

By publishing the annual complaints report, the Council demonstrates its commitment to transparency and a positive approach to dealing with and learning from complaints.

## **2. Key facts**

2.1 We believe that dealing effectively with complaints is essential to providing good services and we use feedback from complaints to improve our services

2.2 In December 2015 the statutory complaints service for adults integrated with the Corporate Complaints Team to enable a streamlined, transparent and cohesive complaints service to be delivered council wide.

2.3 In 2016/2017 we received 98 Stage 1 complaints about Adult Social Care services.

2.4 Of the 98 complaints received during the year, one case was determined by the Local Government Ombudsman.

## **3. Background**

Adult social care is required, under statutory regulations, to prepare an annual report for the preceding year on its performance in dealing with complaints, including the numbers received and how many were upheld.

Adult social care is required to operate a prescribed statutory complaints procedure in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and the Local Authority Social Services

Complaints (Amendment) Regulation 2009. Any complaint which does not fall under these provisions will be considered under the Council's corporate complaints procedure.

#### **4. Complaints Procedure**

This is a single stage process which provides the opportunity for the service that has primary responsibility for the case, to make efforts to resolve issues of dissatisfaction at a local level as early as possible.

The time limit for making a complaint is within 12 months of the matter being complained about; however the council can use its discretion to allow complaints that are made over the 12 month rule, where it is satisfied that the complainant has good reason and where it is still possible to investigate the complaint effectively and fairly.

Our aim is to resolve complaints within 20 working days for most complaints, and within 3 months for complex complaints.

Once the single stage process has been concluded and if dissatisfaction still remains, the complainant has the right to refer their complaint to the Local Government Ombudsman (LGO) for further consideration. The LGO is the independent organisation authorised to investigate complaints where the council's own investigation and response has not resolved the issues to the complainant's satisfaction.

The person making the complaint retains the right to approach the LGO at any time. However, the LGO's policy is that the local authority should be given the opportunity to consider the complaint first and it will normally refer complaints back to the council to investigate unless exceptional circumstances apply.

#### **5. Advocacy for vulnerable people**

The council commissions advocacy services including Mental Capacity advocacy encompassing Deprivation of Liberty Safeguards. It is available for people who have substantial difficulty in understanding decisions that need to be made or in expressing their views, when there is no one else who can assist or speak on the person's behalf. The scope of our contract covers older people, older people with mental health needs aged 65 and over, adults of working age with mental ill health and adults who have a learning disability, sensory impaired or physical disability aged over 18 years.

The service is independent of statutory organisations and service provider agencies. POHWER is the main commissioned provider for advocacy within Thurrock and supports service users with various concerns and queries across a range of services including housing, social care and debt management.

## 6. Summary of Representations

A total of 300 representations were received in the reporting period, which is a decrease on the previous year (324).

	2016/2017	2015/2016
Complaints	98	54
MP	8	16
Member enquiries	41	45
MEP	10	12
Concerns	N/A	23
Local Government Ombudsman	1	4
ILF Appeals	0	4
Compliments	142	166
<b>TOTAL</b>	<b>300</b>	<b>324</b>

## 7. Complaints Received

Adult social care received a total of 98 complaints in the reporting period. This is an increase of 44 on the number of complaints (54) received for 2015/2016. However, the concerns category has been removed and most of that previous category will now be showing under the complaints heading.

## 8. Complaints by service

Complaints are received with regard to both internal and externally commissioned providers, detailed below are the figures for the reporting period.

Internal Provider	2016/2017
Customer Finance	7
Occupational Therapy	5
Safeguarding	1
Collins House	1
Re-ablement Team	4
Complex Care & Transition Team	4
Early Intervention & Prevention (East) / (West)	0
CM Mental Health	0
Emergency Duty	1
Kynoch Court	0
General ASC / more than one service area	43
Contracts & Commissioning	10
Community Solutions	3
Performance Quality & Information Team	4

External Provider	2016/2017	2015/2016
Triangle Care	0	1

Grays Court Care	2	1
Bennett Lodge	0	1
Bluebell Court	2	0
John Stanley	1	4
Carolyn House	2	0
Piggs Corner	7	0
Professional Care LTD	1	0

## 9. Externally Commissioned Services

The Care Quality Commission (CQC) requires all care providers to have in place clear and robust complaints procedures. Anyone who receives a service from an external provider will usually complain to the provider directly and these will be responded to in accordance with the provider's own complaints procedure. The Contract & Compliance Team closely monitor these services in accordance with the statutory contractors monitoring framework and will review all complaints as part of their Contract Compliance Visits (CCV).

### Direct Payment Scheme

Personal budgets, when taken as a direct payment, are used to pay for support for services such as homecare, or to employ a personal assistant (PA). The council has a contract with Essex Coalition of Disabled People (ECDP), for the delivery of the Direct Payment Support Service for Thurrock residents to manage the scheme and raise awareness of how social care users can have greater choice and control in relation to their care.

### Residential Care

The council commissions independent sector care home providers for service users requiring residential care, based on an assessment of their individual needs. The Home Provider investigates any complaints in line with their own complaints procedure – these are then monitored through our contract compliance visits.

### Domiciliary Care

There is a high demand for home care within Thurrock and the commissioned provider agencies work closely with Thurrock's commissioning and contracts team to ensure that service users receive care packages that directly meet their needs. The Contract, Compliance Monitoring Team are key to ensuring that any complaints received are thoroughly investigated.

In all instances of complaints regarding adult social care, the complaints procedure may be superseded by the safeguarding procedure if a referral is made which identifies safeguarding alerts. The complaint will be placed on hold awaiting the outcome of the safeguarding investigation.

## 10. Root causes and complaint outcomes

The table below shows the root causes of complaints within the reporting period together with the volume either upheld or partially upheld against each root cause. This management information provides key areas for development and learning.

It should be noted that this data does not match the data outlined in the total number of complaints received as it relates to complaints which have been closed during the course of the year – some complaints were still under investigation.

Root cause of the complaint	2016/2017	No. upheld	No. Partially upheld
Assessment / Decision Making	10	3	1
Communication	4	1	1
Service Quality & Care	33	12	6
Delays in service	9	3	0
Finance / Charging	9	5	1
Late appointments	3	3	0
Missed appointments	10	7	0
Safeguarding	0	0	0
Welfare	2	0	0
Staff conduct	16	9	3
Other	2	1	0

Complaint outcome	2016/2017
Upheld	44
Partially upheld	12
Not upheld	26
Withdrawn or cancelled	12
Out of jurisdiction	2
Ongoing	2
<b>TOTAL</b>	<b>98</b>

Of the 96 complaints completed (2 were still ongoing at 31.3.17):

46% were upheld

12% were partially upheld

27% were not upheld

(NB – the remainder were withdrawn or out of jurisdiction)

**Service, Quality & Care:** Key learning identified is improved communication; managers have confirmed that this has been addressed with teams to aid service improvements.

**Missed appointments:** Key learning identified is improved communication, a review of processes to ensure a more streamlined approach when there are staff change-overs, and also training.

**Staff conduct:** Key learning has identified training issues for some staff, including specific training courses, policy and procedure refreshers, individual 1-2-1 advice and support.

## 11. Learning from complaints

Complaints provide a vital source of insight about people's experience of social care services, and how those services can improve.

The complaints process enables us to identify service problems and make improvements to services we work in. It also helps us improve staff learning and enhance professional development.

Services are required to complete learning material for all upheld and partially upheld complaints and these are submitted to the Complaints Team. One of the priorities for the forthcoming year is to ensure that each service can identify continuous service improvements as a result of learning lessons from upheld complaints.

Attached are some case studies where learning has been identified.

A key priority for the forthcoming year is to ensure learning is publicly available on the You Said We Did section of the council's webpage.

## 12. MP, MEP & Members Enquiries

MP, MEP & Members enquiries are received on behalf of services users and services have 10 working days to issue a response. However, it is recognised that in some instances, particularly for complex cases, it is not always possible to meet this target and this has been identified as a work priority for the forthcoming year.

Number of enquiries received within the reporting period is outlined below together with comparable data.

	2016/2017	% on time	2015/2016	% on time
MP	9	6 (67%)	16	13 (81%)
MEP	9	5 (56%)	-	-
Members	25	17 (68%)	45	35 (78%)

## 13. Compliments

The council welcomes compliments from its services users. Compliments help to highlight good quality service and give staff encouragement to continue delivering



services of the highest standard particularly at challenging times and when faced with competing demands.

The reporting period has seen a decrease in the number of compliments recorded compared to the previous year.

	<b>2016/2017</b>	<b>2015/2016</b>
No of compliments	142	166

#### **14. Local Government Ombudsman**

The Local Government Ombudsman cannot question whether a Council's decision is right or wrong simply because the complainant disagrees with it. The LGO must consider whether there has been fault in the way the decision was reached. If there has been fault, the LGO considers whether this has resulted in injustice and will recommend a remedy, this can be monetary and/or otherwise.

The reporting period has seen a decrease in the number of formal enquiries considered compared to the previous year.

	<b>2016/2017</b>	<b>2015/2016</b>
LGO enquiries received	1	4

#### **15. Work Priorities for 2017/2018**

During the year 2017/2018 the Complaints Team will focus on:

- Supporting services by undertaking the initial assessment and subsequent complaint plan agreement with complainants to instil confidence and evidence transparency of the complaints procedure
- Improved monitoring of active complaints to ensure swift resolution where possible and supporting service areas wherever possible
- Robust monitoring of corrective actions that have arisen from complaints to ensure continuous service improvements can be made and uploaded onto the council webpage
- Working with service areas and in consultation with staff to ensure more timely responses to MP, MEP & Members enquiries
- Working with service areas and staff in social care to ensure a coordinated, effective, timely and comprehensive complaints service is embedded, including continuous review of the processes and procedures to ensure they are fit for purpose and that a cost effective service is being delivered.

- Provide advice, guidance and support through training and/or workshops as appropriate
- Ensuring that learning from upheld complaints is evidenced and made publicly available on the council's You Said We Did section of our webpage.
- Continued close liaison with the Local Government Ombudsman to ensure that enquiries are responded to and recommendations are actioned promptly.

## Complaints - case studies

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*Mr G complained that his father, who is in receipt of services, had not received a call on the scheduled day and had not been given a wash in over a week*

The investigation concluded that on the day(s) that the carer in question was not at work his shift is covered by another carer, however this carer is female and the service user did not want a female carer attending to his personal care – he wanted a male carer.

The service should have considered this as part of any cover arrangements and staff should have shared this information with others. Whilst it is recognised that there is a shortage of male carers the service accepted that there had been a breakdown in communication and an apology was extended.

The service committed to a recruitment drive for male carers and reminded staff of the importance of information sharing to ensure that the dignity and wishes of services users are respected at all times.

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*Miss M complained that her partner had received an unannounced visit by two council workers, one of which did not show their ID. He was unhappy and confused about this visit and did not know one of the officers*

The investigating officer interviewed both officers who attended the property and whilst one officer did show their ID the other didn't (although the ID badge was visible).

The officer was reminded of the importance in showing her ID so as not to cause any unnecessary distress to service users. This was also reiterated to the wider team via the team meetings.

There should be no repeat incidents of this type as a result of this corrective action.

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*Mrs V, the mother of a service user complained about the standard of care that is being provided to her daughter. Mrs V states that although her daughter only has 3 calls per week she is constantly being left or telephoned with some excuse as to why the carers are not coming or that they are going to be late. All the calls are after 11am and Mrs V thinks that this is too late in the day to arrange for cover. This appears to be a repeating theme*

As part of the investigation the officer spoke with the care worker, care coordinator and it was concluded that the care working, on this occasion, was not meeting the standards required. A change of care worker was swiftly implemented and a further management meeting took place to ensure there were no repeats of this nature.

As a result of this action there were no further reported incidents.

