

## **Appendix 1**

# **Adult Social Care Annual Complaints & Representations Report April 2017 – March 2018**

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April 2018

## 1. Introduction

Every local authority with responsibilities for social care services is required to produce an annual report which outlines the working of adult complaints and representations. This report covers the period April 2017 to March 2018.

The procedure for dealing with adult social care complaints and representations is determined by the following legislation:

- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
- The accompanying guidance 'Listening, Responding and Improving: a guide to better customer care (DoH 2009).

The Regulations state that:

- Every organisation must have a Complaints Manager
- Every organisation has a single stage system to deal with complaints
- Complaints should be dealt with within a maximum of 6 months and that this can only be extended with the complainant's agreement
- Following investigation of the complaint by the Council, if the complainant remains dissatisfied, the next stage is the Local Government & Social Care Ombudsman
- Every organisation must make the complainant aware of the response period they work to and the way the response will be handled
- Where complaints involve several organisations, these organisations should discuss and agree who will take the lead
- The Local Government & Social Care Ombudsman will consider complaints from those people who fund their own social care and will liaise directly with the relevant organisation
- Complainants must approach the council to highlight their complaint within 12 months of the incident happening, or within 12 months of discovering the problem. Complaints outside of this timeframe are individually considered by the Complaints Manager and an assessment made regarding whether a fair and transparent investigation can still be carried out.

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 some services jointly with Health.

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.

## **2. Key facts**

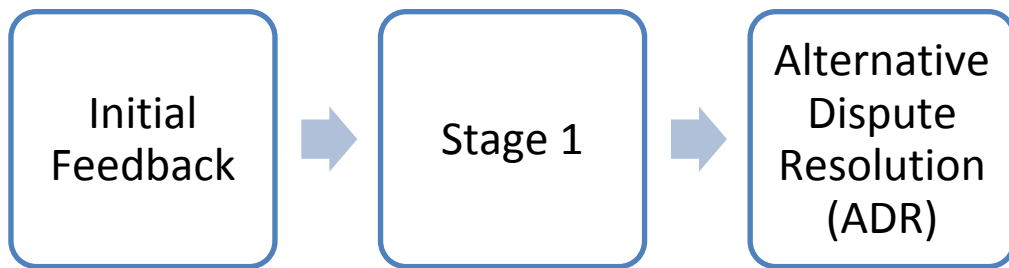
- 2.1 We believe that dealing effectively with complaints is essential to providing good services and we use feedback from complaints to improve our services.
- 2.2 In 2017/2018 we received 37 Stage 1 complaints about Adult Social Care services. This is compared to 98 received in 2016/2017.
- 2.3 In 2017/2018, the timeliness of complaints was 95% compared to the previous year of 46% of complaints responded to within time. This is a significant improvement in performance. The time frame for most complaints is 20 working days however this can increase to 3 months for complex cases.
- 2.4 Of the 37 complaints received during the year, 1 case was determined by the Local Government & Social Care Ombudsman and the decision was not to continue the investigation.
- 2.5 There is a marked improvement for responding to MP, MEP and Member enquiries within timeframe compared to previous years.
- 2.6 There has been an increase in the number of compliments received compared to previous years.
- 2.7 Service dashboards are issued to the senior management team which provide high level summaries on types of feedback received.

## **3. Statutory and Corporate Complaints**

The council may receive legitimate complaints that do not fall within the boundaries of the Statutory Social Care Complaints Procedure. These will usually fall within the remit of the Council's Corporate Complaints Process which is a three stage process with different timelines.

## **4. The Complaints Procedure**

The council also receives feedback which does not constitute a formal complaint; these are classified as 'initial feedback'. These are forwarded to the service with a request that swift action takes place to resolve the issue thereby negating the need for a formal complaint taking place. Therefore the two entry points into the complaints system are outlined below and the Statutory Complaints & Information Governance Officer monitors the progress of all cases at either entry point.



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 & Social Care Ombudsman (LGSCO) for further consideration. The LGSCO 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.

Complainants do have the right to approach the LGSCO at any time; however the Ombudsman's policy is that the local authority should be given the opportunity to consider the complaint first. It will normally refer complaints back to the council to investigation unless exceptional circumstances apply.

## 5. Alternative Dispute Resolution (ADR)

Should a complainant remain dissatisfied with the outcome of their complaint the case is initially referred to the Complaints Manager for review. It is at this stage that ADR is considered and implemented if it is appropriate to do so.

This can include the Complaints Manager providing conciliation and mediation, in agreement with the complainant and the service, in order to resolve any further issues without the need for referral to the Local Government & Social Care Ombudsman.

In the reporting period there was one ADR undertaken:

	<b>Service Provision</b>	<b>No of hours</b>
Case 1	Early Intervention & Prevention Team	4
		<b>4</b>

## 6. Advocacy for vulnerable people

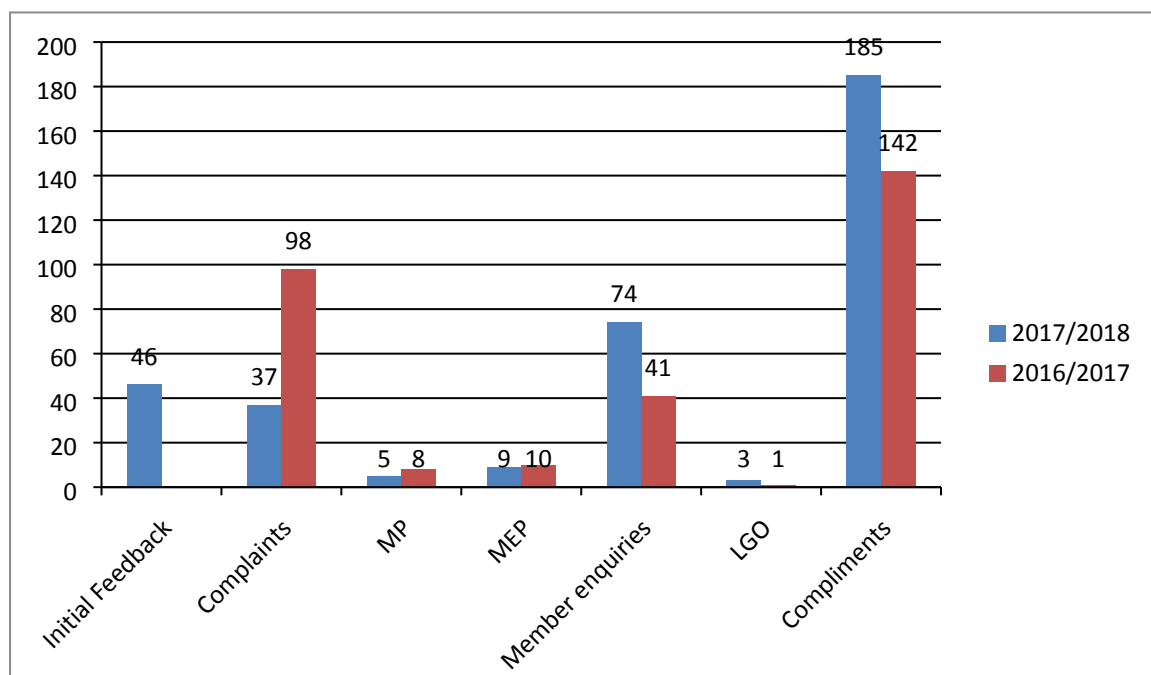
The council commissions advocacy services including Mental Capacity advocacy encompassing Deprivation of Liberty Safeguards. It is available for people who have substantial difficulty in understanding decisions that need to be made or in expressing their views, when there is no one else who can assist or speak on the person's behalf.

The scope of our contract covers older people with mental health aged 65 and over, adults of working age with mental ill health and adults who have a learning disability or sensory impaired 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 support service users with various concerns and queries across a range of services including housing, social care and debt management.

## 7. Summary of Representations

7.1 A total of 404 representations were received in the reporting period. This is attributed as follows:



7.2 During the 2017/18 financial year, Thurrock’s Adult Social Care Services received 37 new complaints. This is a decrease of 61 compared to the previous year. Data regarding Grays Hall has not been included within this figure, please see 7.4.

7.3 Of these 37 complaints, 25 were related to the council’s adult social care in-house service and 12 were concerning commissioned providers. The dashboard titled ‘Commissioning & Procurement’ illustrates a total of 14 complaints received, 2 of these related to the council’s own Contract Team and the remaining 12 were commissioned providers.

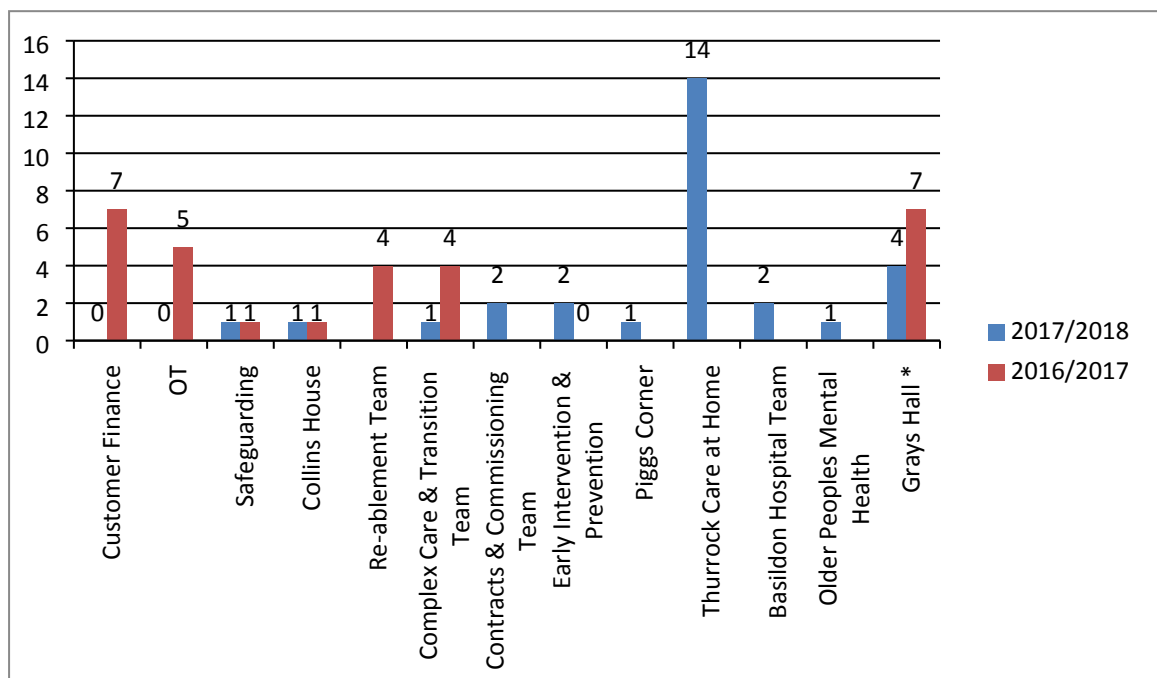
### 7.4 Adult Social Care In-House Service

Analysis on adult social care in-house services as shown that root causes relate to:

- Quality of service/care
- Staff conduct

- Decision making
- Missed appointments.
- The dashboard titled 'Day Care, Extra Care, Thurrock Care at Home & Joint Reablement Team' depicts that 16 complaints were received, 14 complaints (56%) were received for Thurrock Care at Home with the remaining 2 for the other services. Thurrock Care at Home's complaints related to the following:
  - 8 related to missed appointments,
  - 3 communication breakdown,
  - 2 staff conduct
  - 1 service delays.

In all instances for 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.



(\*Complaints regarding this service are not managed by the council and follow a different process.)

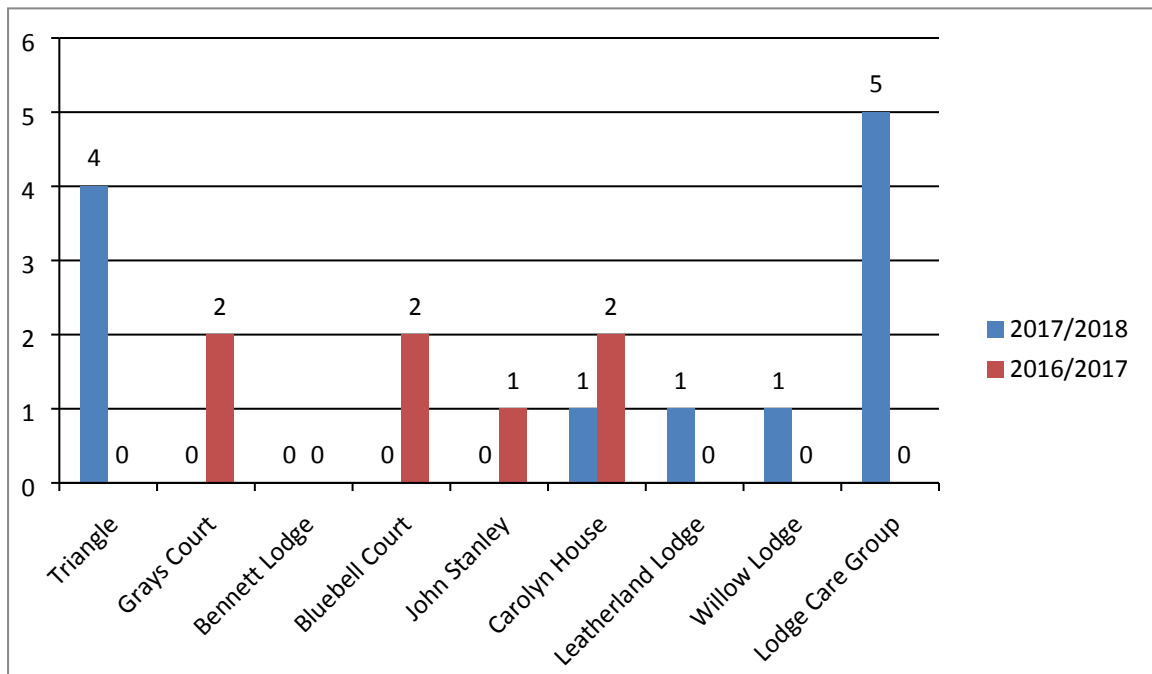
### 7.5 Commissioned Providers

Analysis on commissioned providers has shown that root causes relate to:

- Late appointments
- Quality of care
- Staff conduct
- Missed appointments
- Communication

- 5 complaints (42%) were received for Lodge Care Group:
  - 3 related to quality of care,
  - 1 missed appointment
  - 1 staff conduct
- 4 complaints (33%) were received for Triangle:
  - 3 related to quality of care,
  - 1 late appointment

In terms of monitoring and oversight of these complaints, the Contracts Team check providers' complaint policies to ensure they have procedures in place. A sample is then cross checked to ascertain whether they have been investigated appropriately and that this outcome has been communicated to the complainant. Initial feedback is also captured.



7.6 The Care Quality Commission requires all care providers to have in place clear and robust complaint procedures. Anyone who receives a service from an external provider will usually complain to the provider 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.

7.7 The council commissions independent 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.

7.8 There is a high demand for home care within Thurrock and the commissioned provider agencies work closely with Thurrock's Commissioning and Contract 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.

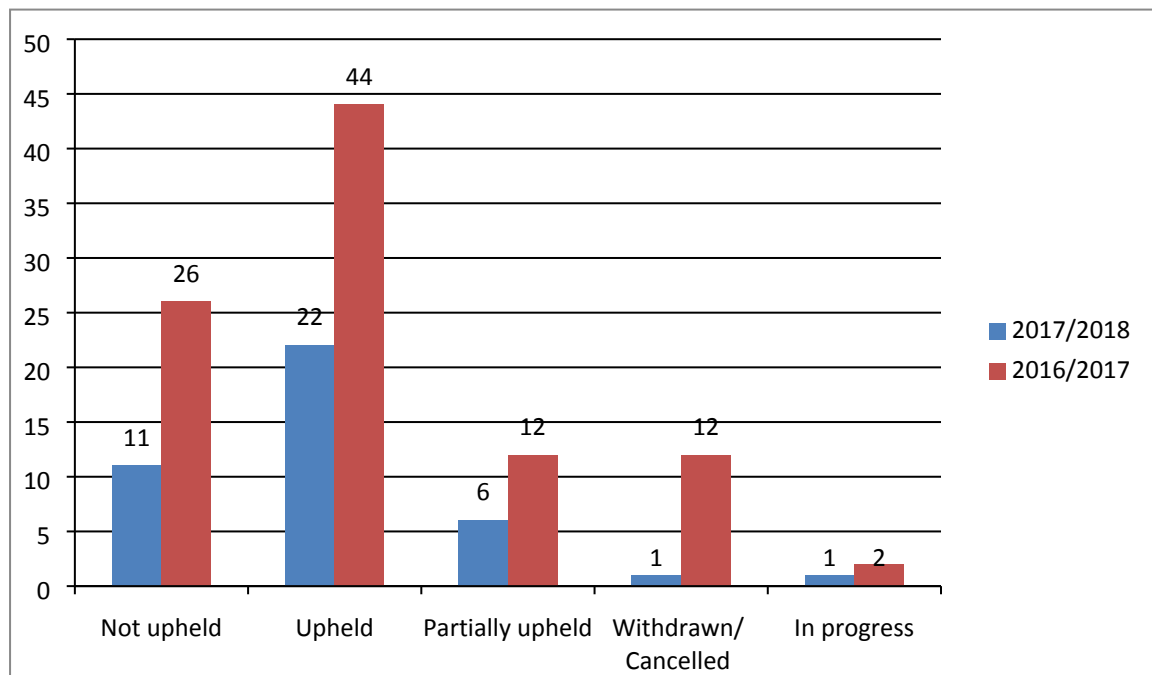
## 8. Risk assessment of complaints

8.1 The Complaints Team undertake a risk assessment of each complaint in order to ascertain the seriousness of the issues raised and to ensure the appropriate course of action is taken.

8.2 Any complaint that raises significant issues regarding the quality of care, safeguarding issues, denial of rights, or has clear quality assurance or risk management issues that may cause lasting problems for the organisation, or highlights the possibility of litigation/adverse local publicity, is highlighted immediately to senior management. Where appropriate, it follows the council's safeguarding procedures.

8.3 If a Safeguarding investigation is already underway, or deemed necessary in relation to the same concerns being raised by the complainant, then the Safeguarding investigation will take precedence. The complainant is then advised to refer the matter back to the Complaints Team if the investigation outcome has not resolved their concerns.

## 9. Complaint outcomes



9.1 There were a total of 39 complaints that were investigated and resolved during 2017/2018. There is 1 complaint in progress at the time of this report.

9.2 A total of 11 complaints were not upheld.

9.3 A total of 28 complaints were either upheld or partially upheld. Learning is required from the relevant service for all cases that fall into these categories.



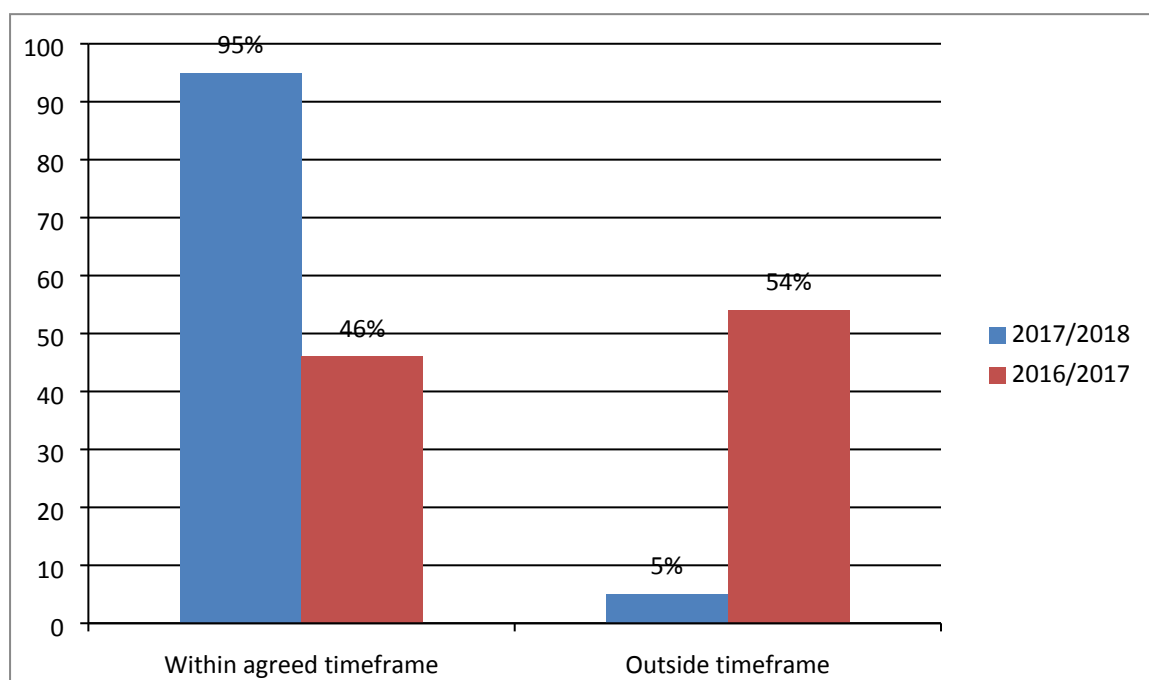
9.4 Of the 22 cases that were upheld, these related to:

- 7 for missed appointments
- 4 for communication
- 3 quality of care
- 3 for assessments
- 2 related to quality of service
- 2 staff conduct
- 1 service delays

9.5 Of the 6 cases that were partially upheld, these related to:

- 2 for quality of care
- 1 for communication
- 1 for late appointments
- 1 quality of service
- 1 staff conduct

## 10. Complaint timescales



10.1 The council remains committed to ensuring that adult care services address complaints as soon as possible and that investigation deadlines do not compromise the quality of any investigation. The Complaints Team continue to track progress of all active complaints and will provide advice, guidance and support as and when required.

10.2 The Complaints Team continue to provide a quality checking service for all investigating officers to ensure that all of the issues have been answered, that corporate standards are followed and that the complainant is aware of the next steps available to them should they remain dissatisfied.

## 11. Learning from complaints

- 11.1 Complaints provide a vital source of insight about people's experience of social care services, and how those services can improve.
- 11.2 Services are required to outline learning from all upheld or partially upheld complaints; these are submitted to the Complaints Team who will track and monitor learning outputs. This helps improve staff learning and professional development and identifies any service improvements
- 11.3 Case studies are shaped and some are publicly available on the council's webpage for review. Some case studies are attached for information.

## 12. MP, MEP & Members Enquiries

	2017/2018	% on time	2016/2017	% on time
MP	5	5 (100%)	8	5 (63%)
MEP	9	8 (89%)	10	5 (56%)
Members	74	71 (97%)	41	31 (76%)

- 12.1 MP, MEP & Members enquiries are received on behalf of services users and as of 1 September 2017, services have 7 working days to issue a response rather than 10 working days.

The complexity of a complaint may mean that targets may not be able to be reached however the data above evidences strong commitment from services to respond within timeframes and this is a significant improvement from previous years.

## 13. Compliments

	2017/2018	2016/2017
No of compliments	185	142

Service areas	Number of compliments 2017/2018
Blue Badge Team	1
Disabled Facilities Grant Team	6
Early Intervention & Prevention Teams	12
Local Area Coordination	4
Public Health	1
Rapid Response Assessment Service	3
Collins House	23

Reablement Team	34
Thurrock Care at Home	71
Basildon Hospital Team	9
Thurrock First	5
Occupational Therapy Team	2
Social Work Intervention and Transition Team	3
Grays Court Care	1
Willows Lodge	1
Safeguarding Team	2
TLC	1
Older People's Meath Health Team	6

13.1 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.

#### 14. Local Government & Social Care Ombudsman

	2017/2018	2016/2017
LGO enquiries received	3	1

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

14.2 The reporting period has seen an increase in the number of formal enquiries considered compared to the previous year.

*Case 1: Complaint about a commissioned care home regarding managers and staff not communicating with the family, unprofessionalism, incomplete and inaccurate records about Mr B's care and not enough skilled or trained staff. The Ombudsman advised they would not investigate Mrs A's complaint as it was unlikely they could add to the care provider's response. Outcome – discontinued investigation*

The remaining two cases are ongoing at the time of this report.

#### 15. Work Priorities for 2018/2019

During the year 2018/2019 the Complaints Team will continue to 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 and initial concerns to ensure swift resolution 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 timely responses to MP, MEP & Members enquiries
- 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.
- Continuous review of data quality for all types of adult social care feedback.

## **Complaint case studies**

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*Mr A, a service user wished to have earlier morning care calls. Mr A requested that the care agency contact him to discuss this further however no contact was made.*

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The investigation concluded that one of carers was unable to facilitate an earlier appointment, due to the residential locality of another member of the team and a time specific medication call prior to Mr A's. Due to human error, the agency had overlooked contacting Mr A to inform him of this.

The service advised that moving forward Mr A's calls would be as close to his requested time as possible, however this might need to be provided by another team. An apology was extended for the breakdown in communicating this to him.

The service stated that all contact staff have been reminded of the importance of effective communication with Service Users and a new system has been implemented to track incoming correspondence/telephone calls to ensure appropriate call backs are made

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*Mrs O, a service user expressed her concerns that her care calls were being completed for the allotted time of 30 minutes*

The investigating officer reviewed Mrs O's call log records and advised that she was receiving her allocated call time. However, there was some evidence to suggest that some calls were less than 30 minutes.

The carers have been reminded that they need to deliver the full 30 minutes of care. An apology was provided for any inconvenience caused.

The above actions should ensure there are no further incidents of this nature.

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*A relative of Mrs R, a service user, complained that her medication was not administered correctly*

The investigation concluded that when the carer attended Mrs R, she refused to take her medication and informed the carer that she would take them later; the medication was left with Mrs R by the carer. The carer advised a relative of Mrs R's was present and she believed they would help her to take the medication at a later time.

The service acknowledged that the medication should not have been left with Mrs R as this does not follow the correct process.

As a result of this complaint, the carer was reminded of the important of adhering to the medication policy and this incident should not occur again.