

Adult Social Care Complaints and Representations

Annual Report 2015-16

Thurrock Council

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1. Introduction

This is the annual report for Thurrock Council on the operation of the Adult Social Care Complaints Procedure covering the period 1 April 2015 – 31 March 2016. It is a statutory requirement to produce an annual complaints report on Adult Social Care complaints. The Adult social care complaints procedure is operated in accordance with the Local Authority Social Services and National Health Service Complaints (England) regulations 2009.

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 report provides a summary analysis in relation to the number of representations received and processed in relation to adult social care, including details of the complaints received, the key issues arising and learning for the department.

2. The Complaints Process

The Local Authority Social Services and National Health Services Complaints Regulations (England) 2009 changed the process for handling complaints within Adult Social Care on 1 April 2009. The revised regulations aligned the complaint processes for Adult social care and Health to enable joint handling of complaints across both services.

The Complaints Procedure is a one stage process:

Stage 1 – Council aims to resolve a complaint using a variety of methods

Staff are encouraged to resolve issues at the first point of contact, in line with good practice as outlined by the Local Government Ombudsman.

The complaints procedure provides the Council with an additional means of monitoring performance and improving service quality, as well as an important opportunity to learn from complaints and service user feedback.

3. *Roles and Responsibilities*

The Department of Health Guidance requires local authorities to have a Complaints Manager responsible for the management of the complaints procedure.

In order to contribute effectively to service development, the complaints management function is based within HR, OD & Transformation.

The Complaints and Engagement Manager also has responsibility for Children's Social Care complaints and representations and produces a separate Annual Report for these.

4. *Leaflets and Information*

The complaints leaflet is distributed electronically to all service teams and front line services. Information on making a complaint or providing feedback is available on the Thurrock Council website.

The complaints procedure has been reviewed during 2014/15. As the statutory guidance remains unchanged for adult social care complaints, there are no fundamental changes to the process. However under the Care Act 2014, there are proposals to introduce an Appeal System for assessments and funding which may run alongside the complaints procedures. The proposals have not been finalised and therefore no changes will be made to the current complaints procedure.

Adult social care welcomes feedback about its services. This can be received via a complaints form, telephone contact, in person, writing or emailing the complaints team and through the call centre.

5. *Advocacy for vulnerable people*

Thurrock 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 18yrs.

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 received

A total of 324 representations were received during 2015-16 which is a decrease of 32 (9%) on the previous year (356), as detailed below:

Complaints	54
MP	16
Member enquiries	45
MEP	12
Concerns	23
Ombudsman enquiries	4
ILF Appeals	4
Compliments	166
Total Representations	324

Total Representations Received 2014-2016

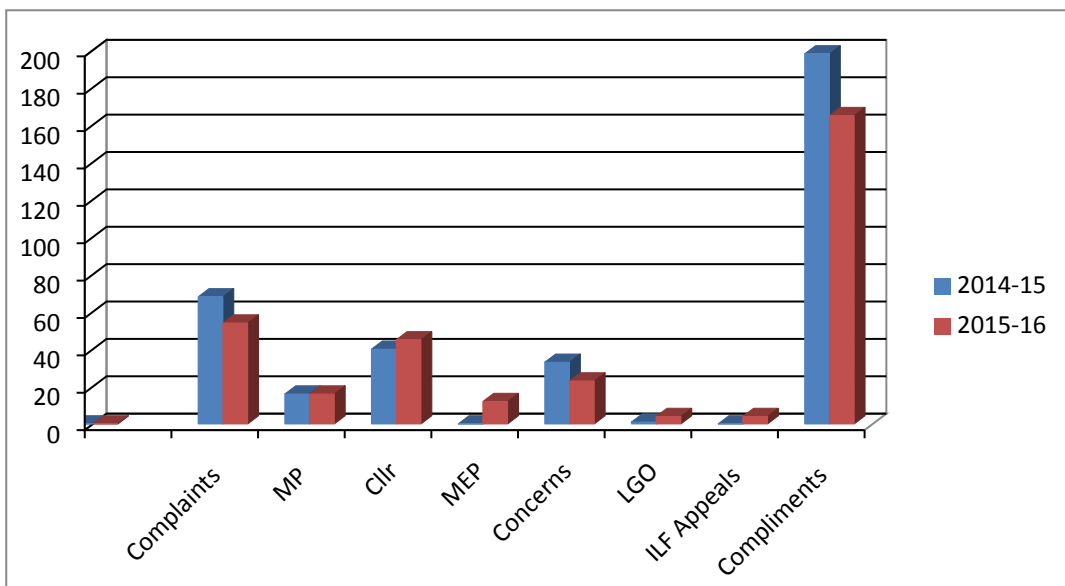


Table 1

It is essential that all teams delivering services formally capture and record complaints. This includes any commissioned services.

Feedback is recorded as received from service users by telephone, email and in writing as well as in person.

Other complaints and representations are referred directly to Ascfeedback as received by the Corporate Complaints team and the service teams directly. All complaints are acknowledged within 3 working days as set out in the statutory guidance.

7. Complaints

The department received a total of 54 complaints in 2015/16, which is a decrease of 21% on the number of complaints (68) received for 2014/15. During this reporting period, the department dealt with 8976 referrals and 4360 service users were receiving a service under social care, including residential and nursing care.

Trends in complaints received from 2010-2016 are detailed in Table 2.

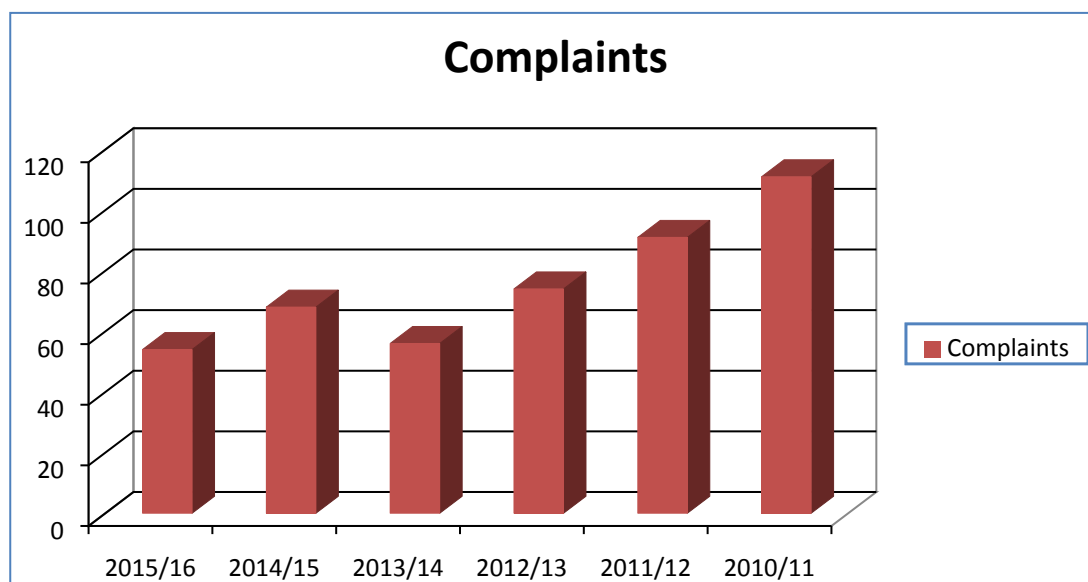


Table2

Table 2 indicates that the previous declining trend of complaints have not changed, hence this year there is a decrease of 21%. It is difficult to pin point a single reason for this decrease. However, the decrease in complaints maybe be attributed to domiciliary care providers not forwarding all the complaints to the local authority and may well be involved in dealing with it directly; front line services are able to resolve issues very quickly; complainants may be reluctant to make complaints; and in addition to the complaints team providing a satisfactory response to a service users query (at the point of contact).

8. Complaints breakdown by Service for 2014-16

Internal Provider

Service	2014/15	2015/16
Blue Badge	3	0
Customer Finance	5	6
Occupational Therapy	5	2
Safeguarding	1	0
Collins House	1	4
Reablement Team	0	4
Complex Care & Transition Team	0	4
Early Intervention and Prevention East	3	3
Early Intervention and Prevention West	1	4
Basildon Hospital	3	0
CM Mental Health	2	1
Intervention & Transition	1	0

Performance Quality	1	0
Short break Service	2	0
Emergency Duty	2	0
Kynoch Court	2	1
Legal Services	0	1
Outreach Service	0	1
Out of Jurisdiction	0	1
Locality 8	0	1
Community Solutions Team	0	1
Other**	3	0
Sub Total	35	34

Table 3 a

**Legal Services (1), SEPT (1) and Daycentre Transport (1)

External Provider:

Service	2014/15	2015/16
Triangle care	0	1
Grays Court Care	1	1
Hollywood Rest Home	1	0
Bennett Lodge	1	1
Bluebell Court	3	0
John Stanley	4	4
Grapecroft (now Willow Lodge)	2	0
Sanctuary Care	10	3
TLS	2	0
TLC	3	0
Kynoch Court	2	1
Merrie Loots	0	1
Piggs Corner	0	1
Temp Exchange	1	6
PoHwer	0	1
Balfour Court	1	0
Whitcroft	1	0
Oak House	1	0
Sub Total	33	20

Table 3 b

Table 3 a (a+b)	35	34
Table 3 b	33	20
Grand Total	68	54

9. Complaint issues

Complaint Issue	2014/15	2015/16
Assessment/Decision Making	4	4
Communication	4	2
Service Quality and Care	23	18
Delays in Service	6	4
Finance/Charging	10	6
Late appointments	0	2
Missed appointments	0	4

Safeguarding	1	2
Welfare	0	1
Staff conduct	12	10
Vexacious	0	1
Other*	8	0
Total	68	54

Table 4

- Missed carer appointments, transport issues, incorrect medication, legal issues

Table 4 shows that issues concerning staff conduct, quality of care and service quality were the main reasons for complaints during 2015/16.

10. Externally Commissioned Services

The Care Quality Commission requires all care providers to have in place clear and robust complaint procedures. Anyone who receives a service from an externally provided service will usually complain directly to the provider and these will be responded to in accordance with the provider's own complaints process. Feedback received by the Council about externally provided services is closely monitored by the Contract and Compliance team in line with the statutory Contracts Monitoring Framework. This helps to identify any areas of poor performance which require additional monitoring and support.

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 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 care home providers for service users requiring residential care, based on an assessment of their individual needs. Any complaints received regarding commissioned providers are referred to the Home provider to investigate in accordance with their own complaints procedure. The Care Quality Commission requires all providers to have effective complaint procedures in place. This is regularly monitored by the Council's Contract Compliance team.

There were approximately 736 service users receiving residential care (including nursing care funded by adult social care) during 2015/16. For the same period, 9 complaints were received by the Council which is a slight decrease of 4 on the previous year (13). Generally, the issues most frequently complained about are in relation to the quality of care received by the service user and the charges for care.

Providers have a duty to log and investigate complaints received directly by their service. There were 106 complaints registered by fifteen residential providers, which were investigated in accordance with the provider's own complaint procedure. Of those, 40 were upheld and 64 were not upheld and two complaints were still in progress at the end of the reporting period.

We will pursue a proactive policy to ensure that all complaints, its outcomes and learning identified are reported to the council. Contracts and Commissioning will monitor this vigorously.

Domiciliary care

There is a high demand for home care within Thurrock and the commissioned provider agencies work closely with Thurrock's commissioning and contract teams to ensure that service users receive care packages that directly meet their needs.

Approximately 929 service users received externally provided home care services during 2015/16. The issues raised as complaints were mainly in relation to the quality of care provided, delays to home visits, communication issues and funding. The provider agencies generally respond directly to service users and their families when responding to complaints and concerns about their service.

Complaints made directly to the Council will be investigated if the response submitted by the care provider is not satisfactory to the complainant. For complaints directly received by the commissioned services, 22 complaints were investigated directly by three home care providers. Fourteen complaints were upheld, 8 complaints were not upheld.

The Council's Contract Compliance Monitoring Team discusses all key issues arising from complaints on a regular basis with providers and ensures that any outstanding issues and key themes arising from complaints are addressed.

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.

11. Response Times

Since the introduction of the Social Services and National Health Service Complaint Regulations in 2009, the only mandatory requirement is that complainants should receive acknowledgement within 3 working days. The legislation allows flexibility, where it is negotiated that a complaint investigation be formally investigated within three months and the overall timescale for a complaint to be resolved within six months. If there is further delay, a new action plan must be negotiated. However the department's aim is to resolve most complaints within 20 working days.

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

Thirty five percent of the 38 completed complaints exceeded 20 working days. Where complaints were complex by nature or required a multi-agency response, hence the response timescale was extended. There were 13 complaints that were incomplete at the end of the reporting period and 3 were either withdrawn or outside the jurisdiction. In all cases, the complainant is kept involved and informed of the progress of the complaint.

12. Complaint outcomes

Decision	2014/15	2015/16
Upheld	15	15
Partially Upheld	10	9
Not Upheld	24	14
Withdrawn or Cancelled	15	1
Out of Jurisdiction	0	2
In progress	4	13
Total	68	54

Table 5

Of the 38 complaints completed, 39% were upheld, 24% partially upheld and 37% were not upheld. Table 5 indicates that in the previous year 2014/15, the majority of completed complaints were not upheld. For 2015/16, the majority of completed complaints were upheld, for reasons that the investigation did find a fault by the service and/or that correct processes were not followed by the service team or provider.

Further details regarding complaint outcomes and those complaints that were upheld are set out under the 'Learning from Complaints' section of this report.

13. Policy Work

Thurrock is a member of the Eastern Regional Complaints Group and Public Sector Complaints Network. Information is shared on a periodic basis in terms of key national legislative changes that affect the complaints process, in addition to any relevant key learning from specific complaints, including public reports from the Local Government Ombudsman. The complaints Manager has established positive links with the relevant colleagues and staff members and will be taking matters forward and attend future meetings.

The Complaints Manager has also established links with the London Complaints Group Managers' chair and will be attending future meetings in London to ensure any learning is captured.

Furthermore, the Complaint Manager is also aware of the National Complaints Managers Group (England) and intends to become its member in due course. So that Statutory complaints and benchmarking can be viewed in line with national perspective.

14. Local Government Ombudsman

If a complainant is not satisfied with the outcome of the investigation, they have the right to take their complaint to the local Government Ombudsman and at any time. However, the Ombudsman may refer the complaint back to the Local Authority if it has not been fully considered through the complaints procedure.

The Ombudsman investigates complaints of injustice caused by 'maladministration' or 'service failure'. The Ombudsman cannot question whether a Council's decision is right or wrong simply because a complainant disagrees with it. The Ombudsman must consider whether there was fault in the way the decision was reached. If there has been fault, the Ombudsman considers whether there has been an injustice, and if there has, a remedy will be suggested.

There were four cases received from the Ombudsman for this reporting year compared to 1 received in the previous year, as detailed below:

Case 1:

Service user's daughter complained in regards to the care received by her father. It was an agency complaint; the agency concerned was at fault. The complaint outcome: there was **maladministration and injustice** found by the Ombudsman and compensation awarded.

Case 2:

This case was a prematurely approached by the service user's solicitors to the LGO. The council have duly responded to the LGO and the case is now closed.

Case 3:

This case has been duly responded to by the council in regards to a query and is awaiting a decision from the LGO. The issues surrounding this case related to charges that the service user's solicitors are disputing.

Case 4:

This case failed to carry out an assessment of needs for the complainant's mum. The council provided apology and this was accepted by the LGO. The complaint outcome was **maladministration** but no injustice.

15. Concerns/enquiries

Apart from complaints, the complaints team recorded all other representations received about adult social care services, as it is required to do. Representations can be positive comments and feedback or queries regarding a service.

The complaints team recorded 23 concerns and issues for this reporting period which is a slight decrease on the previous year (33). Concerns are successfully resolved within the teams, without the need to record them as formal complaints. If the concern cannot be resolved, it will become a complaint and be processed in accordance with the complaints procedure.

16. MP and Member enquiries

The complaints team also records MP and Member enquiries that are received on behalf of service users regarding adult social care. Complex queries and work pressures has resulted in some responses exceeding the 10 working day timescale and response times will be a priority focus for improvement during 2016/17.

MP enquiries remained the same as previous year. Member enquiries have increased on the previous year see below:

		2013-2014	2014-2015	2015-2016
Members	Volume	39	40	45
	on time	39	36	35
Total	% on time	100%	90%	78%

MP	Volume	12	16	16
	on time	12	14	13
Total	% on time	100%	88%	81%

Table 7

17. Compliments

Compliments are expressions of positive feedback. There was a slight decrease (166) in compliments this year compared with 198 recorded last year.

What they have said:

"Thank you to all the staff for all the love and care you have all given Mum during her stay, thank you very much." **Collins House**

"A call from the above SU who said she wanted to speak to the manager of Community Solutions. She said that you were very very professional and very nice. She said that you were very kind and you were not patronising. Mrs D also said that you were professional and really helped. Well done Jo, good job - Steve." **Community Solutions Team**

"Thank you so much Christina for all the support you have given to S and me! We really do appreciate all that you have done for us." **Complex Care & Transition Team**

"Just to let you know I spoke with Mr B today who cares for his Mother, he wanted to thank you for all your help he said you have saved him, he knows now he is doing a good job caring for his Mum, and he said he can't thank you enough for all your help and advice. He says he was "broken" until you came along to help him." **Early Intervention and Prevention East**

"Mrs S telephoned to say that the team are brilliant and she has no complaints. Also, the carers are all lovely." **Joint Re-ablement Team**

"Just wanted to make you aware of a compliment that I received today about the whole of ASC from a family member of a SU in Kynoch Court. This gentleman has memory issues and was found wandering around the complex 1 week ago. He said that the staff at Kynoch responded well and called out the RRAS team. The RRAS team responded in 20 minutes and all equipment was in place within a week and a re-assessment had happened. The son said that he was impressed with the service and made him feel more secure that dad was there as he lived in Kent." **Kynoch Court**

"My mother has now received a trolley and toilet frame which she is finding most helpful. Thank you to all concerned in organising this." **Occupational Therapy Team**

"Can I just add what a great chap Francis is and what a great job he is doing for our lonely people." **Local Area Co-ordinator**

Mrs W's daughter of Service User, comments as follows: Thank you for your help and support. It has been much appreciated. I would like to thank you for suggesting the Extra care scheme. Mum and I both feel that Piggs Corner is a very happy place and are confident that she will be well cared for by the team working there. They are so dedicated to the elderly. This is evidenced by their happy smiles as they work, in their conversations with and overt care of other residents and EVERY resident looks happy and is keen to recommend the place - you can't get better feedback than that! Once again Les, thank you

so much for your support.” **Piggs Corner**

“Absolutely fantastic - your email has brightened up my Monday no end! I've copied Baroness Finlay, the new Chair of the National Mental Capacity into this email just for information. Baroness Finlay - an example of some great innovative local MCA work. The kind we hope the Forum might spark in those parts of the country where implementation is currently poor.” **Safeguarding Team**

Service User's daughter, as follows: "Thank you for letting me know and thank you for all your hard work." **Basildon Hospital Team**

18. Learning from Complaints

Complaints that are upheld or partially upheld identify areas of learning for the service or provider involved. These are recorded on a learning log and actioned. The learning is highlighted in the quarterly reports for Senior Management and cascaded to service teams. Listed below is the learning that was identified from 3 different case studies during 2015-16.

Case study 1

This complaint centred on a Residential Care Home; an assessment was carried out by their social worker, and it concluded that the service user could be moved to a Supported Living Accommodation. Thus a substantial savings can be made as soon as this policy was implemented.

Once the parents became aware of the assessment and council's possible plan to place the service user to a Supported Living Accommodation; they made a complaint stating that it would be detrimental to move the service user due to their medical condition. However, the complaint was mainly due to the lack of information and not knowing the differences between Residential Care Home and Supported Living Accommodation.

The complaints team arranged an alternative dispute resolution (ADR) meeting. The meeting was attended by the parents of the service user, direct line manager of the social worker involved in the case, and the team manager for the service area.

The ADR meeting was an opportunity to have a face to face discussion between the parents, team managers and the complaints team to clarify some of the misunderstandings and this aided towards a positive resolution.

The resolution meeting clarified some of the issues and identified key action points that needed to be taken forward in order to resolve this complaint:

- a) By agreeing to provide a written policy between the differences of the two services i.e. as in paragraph 2 above.
- b) To complete outstanding assessments so that professional and medical evidences are up to date.

Upon receiving the written policy and medical assessment reports by the parents; they were able to compare between the two services and were inclined in favour of the Supported Living Accommodation, as this was more beneficial to the service user.

- The key learning from this complaint is to have a face to face discussion through a meeting.
- It is imperative to have a written policy document highlighting the differences between the two approaches as in paragraph 2.
- Thirdly, by engaging with the service user's parents; thus prevented further escalation to the LGO.

The complaint was resolved and the family were happy with the approach undertaken.

Case study 2

Service user's mother complained about several issues:

- To change current social worker and the team manager as the mother felt the family was not being listened to.
- Lack of communication.
- Family disagreed with moving the service user from current Hospital placement.

A service manager was requested to investigate this complaint from Adult Social Care and met up with the mother. Various aspects were discussed about the complaint. The meeting produced some positive results see below:

Firstly, it allowed establishing sound rapport with the family and the council; gained a good insight into the reasons why the complaint was made. It also allowed the building of trust between the family and local authority. It facilitated a better communication and tackled any misunderstanding.

Service Manager's view was that whatever the circumstances we must appreciate people's feelings and emotions, and help them channel in an appropriate manner. The complainant felt that she was being listened to and her concerns were being addressed; hence, this is one of the best ways of resolving complaints.

- The learning from this complaint is not to become defensive when a complaint is made.
- Ensure good communication is established through face to face meeting.
- If there is a genuine reason for a request to change a social worker, this should be looked at very carefully and necessary action should be undertaken to resolve matters. However, every case is different and it should be judged on its merits. In this case, which was high risk, a decision was taken to change Social Worker to support both the worker and the family.

As a result of the above meeting and by undertaking necessary actions, this complaint was closed on the basis that the complainant was happy with the outcome and the social worker was changed.

Case study 3

This complaint centred on an invoice that was issued “incorrectly” according to the service user’s family for the following reasons:

- A meeting was arranged in January 2016, for the service user’s care funding to be transferred to the NHS.
- The scheduled meeting was attended by the NHS and Care Home, but the social worker from Adult Social Care was unable to attend the meeting.
- The same meeting was re-arranged in February 2016, and the care funding was transferred to the NHS.

This is a complex area of funding based on the Decision Support Tool (DST), even if the social worker had attended the first meeting in January, there was no guarantee that the care funding would have been transferred to the NHS. Conversely, the family was fully aware of the deteriorating health condition of the service user, and they were correct in saying that had the meeting went ahead in January, the care funding would have been transferred, as this is what had materialised in subsequent meeting in February.

Upon investigating this case a bit further, it transpired that the service area responsible for this area of work was immensely under resourced. Hence, it was perhaps very difficult to attend the meeting in January and this had led to the complaint.

At present the service area does not have a dedicated staff for the DST work and there are a large number of cases which is causing bottle neck. Additionally, if a staff member becomes sick, there would be a similar sort of problem in the future. Hence, this is an area of immense interest and needs further investigation. Appropriate SWOT analysis of the service area concerned and by undertaking a balanced approach may save the LA resources and funding as well as future complaints.

However, the learning from this complaint can be summarised in the following:

- Although there is a shortage of resources and this will be the future way forward given the current reality the whole country is facing.
- Any meeting arranged by the social worker, should be cascaded to the relevant team and other members should be aware of such meeting.
- If one person cannot make the scheduled meeting, then this should be attended by another staff member in order to make a swift decision.
- This will allow the smooth transition of care funding to the NHS on time and the LA does not have to foot the bill for another month on this occasion.
- This approach will surely save the council from future complaints and save money.

The complaint was resolved by cancelling the invoice issued for January as the family had a valid point.

19. Training

Teams will receive complaints handling training sessions throughout the year. This is to highlight good customer care, responding to complaints, meeting timescales, the

importance of learning from complaints and compliments and to promote the expertise available from the Complaints Manager (in assisting complaints management).

The Workforce Planning and Development team also provides an e-learning course on handling complaints.

Face to face and telephone advice is regularly provided to team managers in order to respond to complaints and concerns in a timely manner, in addition to identifying appropriate learning.

20. Going Forward

- The complaints' team will provide ongoing training and advice to teams in regards to complaints handling through regular emails, writing policy documents, telephone advice and face to face meetings; (as this is an ongoing policy).
- Any learning from complaints will be identified and thus lead to service improvement. The complaints' team will monitor this on a monthly basis by keeping an up to date spreadsheet and copies of Complaints Learning Forms and Investigation logs.
- The introduction of 'alternative dispute resolution' has been implemented and proving to be quite successful. This will improve the working relationship between service users and service providers.
- The Complaints team intend to provide training to all new managers, deputy managers and senior practitioners through regular workshop.
- Work closely with operational services to ensure that all new service users are aware of complaints.
- The Complaints Manager will continue to work closely with community and user groups to ensure all feedback about adult social care is captured and to engage user participation regarding the changes to services and their experiences.
- Working closely with external partners such as Health, advocacy groups and relevant stakeholders will remain a key focus for 2016/17.
- Complaints activity and learning will continue to be reported to the department throughout the year and disseminated to all staff.
- Response times and quality of responses will be the primary areas for staff training and monitoring.
- A new response template has been introduced to improve the quality of responses in order to achieve better outcomes, consistency, and standardisation.
- A new process map has been introduced for learning from complaints.
- The complaints manager has engaged in meeting services managers and their team managers in order to understand each service in a better and informed

manner, so that a robust complaints management service can be provided to our service users.