

**DIRECTORATE OF ADULT, COMMUNITY &
HOUSING SERVICES.**

**ADULT SOCIAL CARE SERVICES
COMPLAINTS & COMPLIMENTS
ANNUAL REPORT**

April 1st 2011 – 31st March 2012

Policy Performance & Resources Division



Produced by the Quality & Complaints Team August 2012

The Quality & Complaints Team can be contacted for advice and information regarding making a Complaint, Compliment or Comment on 01384 813067 / 814724 or by email at Complaints.DACHS@dudley.gov.uk Or in writing to The Quality & Complaints Team, Ednam House, St James Road, Dudley, DY1 3JJ

1. INTRODUCTION

- 1.1 This Report provides information relating to the Statutory Adult Social Care Complaints and Compliments Procedure, during the period 1st April 2011 to 31st March 2012.
- 1.2 The Social Care procedure for Adult's complaints 2011/12 falls within The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. The procedure is designed to be compliant with the Health and Social Care (Community Health and Standards) Act 2003, the Care Standards Act 2000 and the Local Authority Social Services Act 1970. Follow the link to:-
http://www.opsi.gov.uk/si/si2009/uksi_20090309_en_1
- 1.3 Every Local Authority with a responsibility for Social Care Services is required to provide an Annual Report into the workings of the complaints and representations procedures.
- 1.4 All people who use or request an adult social care service are provided with information on how to complain, or to comment on services or make a compliment. Complaint information is displayed in all public reception areas. It is also given out at different stages by staff to adult social care service users.

1.5 THE QUALITY AND COMPLAINTS TEAM

- 1.6 The Quality & Complaints Team is part of the Quality and Commissioning Division, within the Directorate of Adult Community and Housing Services. The team are responsible for the day to day operation and management of all Social Care complaints for Adult and Children services and Housing Services complaints for the Directorate.
- 1.7 Our key objective in the management of all complaints is to achieve appropriate and effective resolutions within the shortest possible timescales, enabling the Directorate to:-
- Learn from complaints, comments and compliments, and to change, review or maintain services accordingly.
 - Ensuring that complaints and comments are properly recorded and acted upon, and that where necessary things that have gone wrong are put right promptly.
 - Ensuring that staff and service users understand their rights, and responsibilities within the complaint process.

2 THE COMPLAINT PROCEDURES 2011 - 12

2.1 In brief the procedure requires the following:-

- If a complaint is made verbally to the service concerned, every effort should be made to seek a resolution to it within 1 Working Day.
- All Complaints, other than those received verbally and resolved the same day, must be sent to and registered by the Quality and Complaints Team.
- The Quality & Complaints Team will consult with the relevant Manager or Head of Service to agree the appropriate action to take in seeking to address and resolve the complaint.
- The Quality & Complaints Team will contact the complainant to provide advice and information regarding the complaint process and explain who will be looking into the complaint.
- Written Response:- All complaints including those received verbally, must receive a written response, unless this is against the wishes of the complainant.
- The Quality & Complaints Team will continue to track the complaint to ensure a response is provided to the complainant and to follow up on any actions required and gather lessons to be learned.

2.2 Timescales:- The relevant timescales are:

- The complainant should present the complaint for a response / investigation within 12 calendar months of the incident occurring.
- The complaint must be acknowledged within 3 working days.
- The majority of complaints should be responded to and satisfactorily concluded within 10 to 20 working days. However, if the complaint is complex, requiring detailed enquiries or independent investigation, then timescale can, with the agreement of the complainant be extended to 25 working days up to a maximum of 65 working days.
- The complaint process must be completed within 6 months.
- If the complaint procedure has been exhausted and the complainant remains dissatisfied, they can, within twelve months of the final response approach the Local Government Ombudsman seeking further investigation to be carried out into the complaints by that office. If the Ombudsman determines that the complaint has not been looked into fairly and correctly by the Directorate, or that the service user has suffered an injustice in the services [S]he has received, then the Ombudsman could reach a finding of Maladministration.

2.3 CORPORATE COMPLAINTS:-

- 2.4 We also have a duty to comply with general complaints against the Council which do not fall within the boundaries of the Statutory Social Care Complaints process. These complaints will generally fall within the Council's own Corporate Customer Feedback Procedure.


3. SUMMARY OF COMPLAINT & COMPLIMENT ACTIVITY 2011 - 12

- 3.1 The number of people receiving an adult social care service during 2011 / 12 was **14,745**, from that figure we received **209** formal complaints, compared to **223** complaints during the previous year 2010/11 and compared to **134** complaints 2009/10. Therefore this year 2011/12 we saw a decrease of **14** complaints compared to 2010/11.
- 3.2 The timescales for resolving complaints during 2011/12 was satisfactory, with the majority of all complaints [70%] seeing a resolution within 10 to 20 working days. Despite the challenges we face this is a figure that we would want to see an improvement on, whilst also wishing to maintain such a high rate of resolutions as noted below in 3.3 Please refer to 10.2. for more details regarding timescales.
- 3.3 Our practice is to seek a resolution to the complaint at the first opportunity; this requires considerable time and actions in the first days / weeks of receiving the complaint by the services involved. A resolution at this stage prevents unnecessary 'formal investigations', which take on average three months to conclude and are very costly. Such action also leads to a greater likelihood of resolving matters satisfactorily for the complainant. This approach is evidenced by the fact that during 2011/12 **No** complaint proceeded to independent investigation.
- 3.4 In 2011/12 Adult Social Care maintained its long record of **No** findings of maladministration by the Local Government Ombudsman in relation to any complaints made to that office concerning Dudley Adult Social Care Services. Please see 6.4.
- 3.5 Social Care Services commission a number of external agencies to provide some of the services needed by our service users. It is important to stress that all services users continue to have the right to use the statutory social care complaint procedure if or when things go wrong. Contracts drawn up by Commissioning Services with external providers contain specific requirements for providers to comply with in relation to complaints made to them by or on behalf of service users. New leaflets have been developed this year giving advice to service users/relatives/carers about their right to pursue a complaint.
- 3.6 **Compliments:-** The total number of compliments received for 2011/12 is **119**, with **272** for 2010/2011. This figure can also be compared to **272** for 2009/10.. There are two main factors for the reduction in compliments for 2011 – 12 for this. First, the complaints service saw a member of its team retire this year resulting in less capacity to register compliments and importantly to promote sending in compliments to us. The second factor is that nationally it appears local authorities are seeing reduced numbers of compliments as services are increasingly being provided on its behalf by independent / private agencies

4. LEARNING FROM COMPLAINTS:-

- 4.1. The focus in dealing with all complaints is seeking a timely and satisfactory resolution, where lessons are learned and where outcomes from complaints can inform service improvements. The following are examples of the learning from complaints which have taken place across the Directorate during this financial year 2011 – 2012.

| Complaint | Type of Learning | Actions | Follow Up |
|--|------------------------------|--|--|
| Complaint from a husband regarding the care received by his wife. Failure by carers to keep to the agreed times in the care plan and sometimes calls are missed off the rota altogether. | Change of Procedures | All programmes for care staff now state that if they are running late they must call the office. The person receiving the service is then alerted. In addition, all programmes are checked by a Supervisor to ensure calls are covered when a carer is off sick. | The Manager will contact the complainant every six weeks to make sure that the concerns that have been raised have been rectified and that a consistent service is in place. |
| Concerns raised by Living Well, Keeping Safe regarding wrong key safe number given out to carers. | Change of Procedures | The Home Safety Team will undertake an audit of the key safe numbers across the Borough to ensure information held by providers and systems correspond. In addition there will be One contact for emergency services to obtain key safe details. | Complaints Team to follow up with Home Safety to ensure audit has taken place. |
| Complaint received regarding customer service when making contact with the Access Team. | Improve Communication | Discussion with the relevant members of staff. A Social Worker now provides direct support to customer service officers where needed | Manager is to revisit the Customer Service script, to ensure adequate details are held in seeking to respond to potential queries across a wide number of services. |

| | | | |
|---|---|---|---|
| <p>Complaint regarding the new system for Blue Badges. Difficulties in making contact with the service concerned and the length of time before an appointment can be offered.</p> | <p>Need for extra capacity/resources</p> | <p>This is a new process imposed by Government. The Team are evaluating processes and procedures to improve the service. They have increased capacity from existing resources for providing appointments - to reduce waiting times.</p> | <p>IMA Assessors have now been appointed.</p> <p>There is a Blue Badge Project Group which takes place to discuss improvements</p> <p> Badge appeal – complaint guidance agreed.</p> <p>Flyer with information to be provided to all applicants.</p> |
|---|---|---|---|

5. COMPLIMENTS 2011/12

5.1 There is a significant reduction in compliments for 2011 – 12 compared to the previous year. There are two main factors for this; first, the complaints service saw a member of its team retire this year resulting in less capacity to register compliments and importantly promote their importance; Secondly, the reduction reflects a national trend as an increased number of services are being provided by independent / private sector agencies.

5.2 The total number of compliments received for 2011/12 is **119**, compared to **272** for 2010/11 and **272** for 2009/10. The overwhelming majority of compliments are on behalf of older people, usually from family members.

5.3. Examples of Compliments

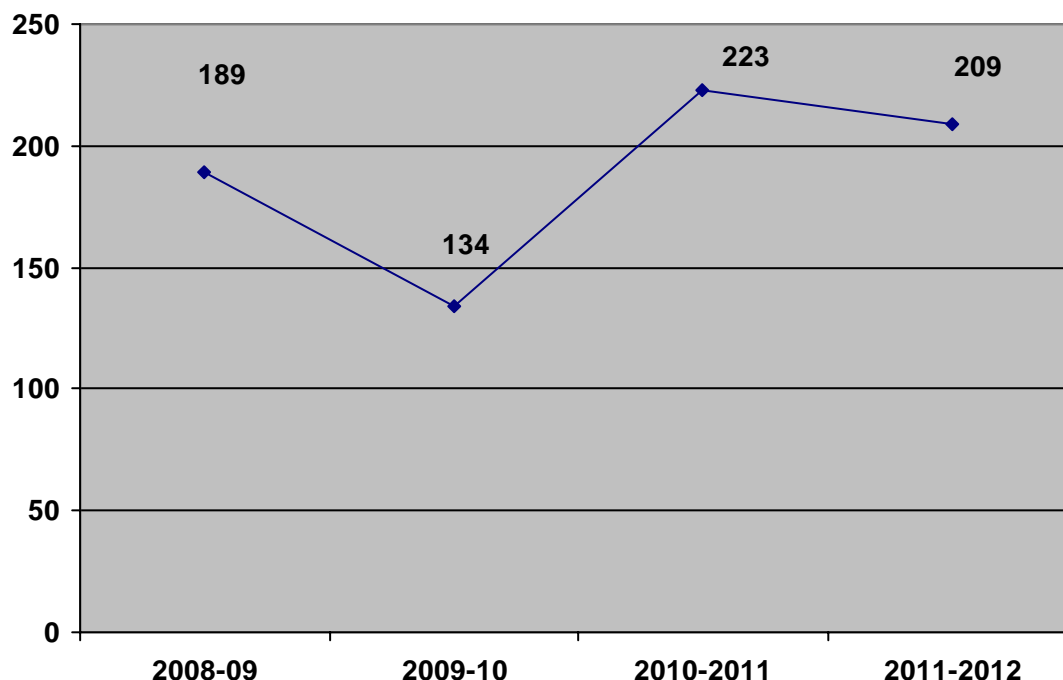
- A compliment for SC she came to visit E, she was lovely and gave us lots of help and advice. She explained everything to mom. My mom can't wait now to try out her new bell and phone adaptor. It will make her life much easier for her. Once again a big thank you.
- Thank you for the care and dedication you afforded to C during his time with you. He always enjoyed coming so much and it's a great pity it could have not been for longer. Also for all the kindness and consideration you gave to me. It was like being in a big family. When things were tough I knew you were always there. However I think what he has got now is the best solution to an awful situation. Thank you all so much....
- I am writing to thank you all for the support and help that you have given to my mother AR over the last months. The support that the Palliative Care Team provided was essential in helping her to stay in her own home over the course of her illness. While it was difficult to cope with her decline, I feel that your support was invaluable and it enabled her to manage her difficulties as well as possible at home. The care provided would seem to be a very good alternative to residential care even for people with significant disabilities and I would see it as a model for the future.
- I want to thank all the staff concerned for helping me on our visit to Eve Lane Disability Service Centre. I suffer from osteoarthritis, and a knee replacement, for their outstanding kindness and help. Keep up their good work that's really needed in our community.
- I am writing to praise and personally thank KS from Adult Disability Team for the tremendous help and support she provided to my Auntie DB and us her family over the last twelve months. KS has supported the transition to live independently in Broad Meadows and as a result

changed her life to the full and KS is to thank for this. Please pass on our thanks and praise her professionalism.

- A compliment from the family of the late EE for the carers who attended her, she really enjoyed their company and was grateful for the attention. It is nice to have people around you with good sense of humour as it does brighten the day especially when one is on their own for quite a long time.

6. COMPLAINT ACTIVITY:- 2011/12

6.1 The chart below provides a comparison with regards to the number of Adult Social Care complaints registered over the last 4 years.



6.2 This chart shows there has been a slight decrease of **14** complaints this year compared to 2010-2011. We are still seeing a higher volume of complaints from previous years and regionally / nationally the picture is of complaints becoming increasingly complex.

6.3 Our intention is to carry out a bench-marking exercise regionally in order to compare complaint activity and outcomes.

6.4. **Local Government Ombudsman.**

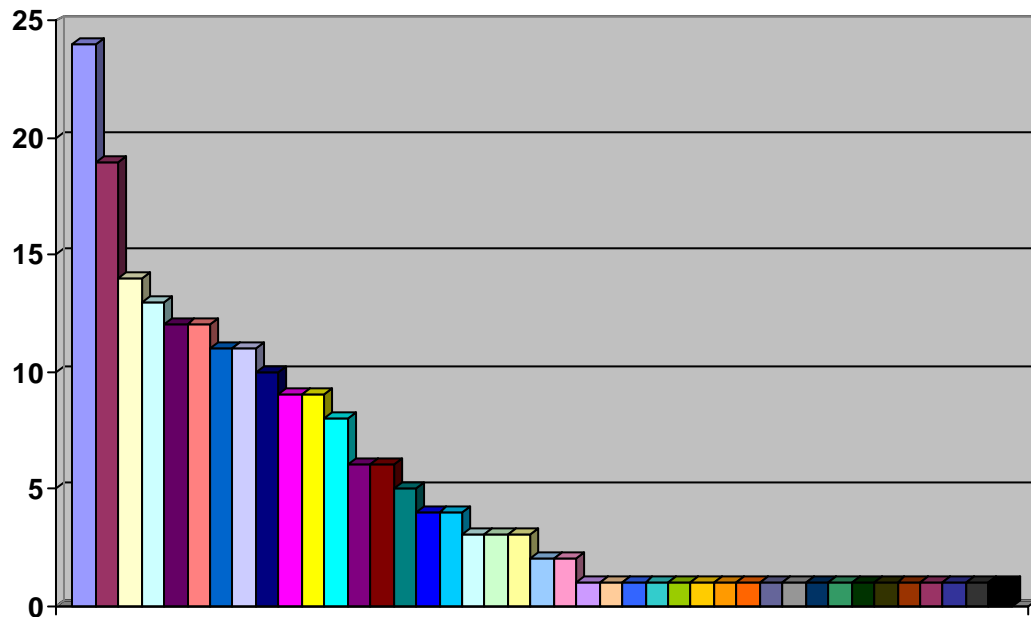
In 2011/12 Adult Social Care maintained its long record of no formal findings of maladministration by the Local Government Ombudsman (LGO) in relation to any complaints made to that office concerning Dudley Adult Social Care Services. The nature of complaints, their complexities makes it increasingly difficult to maintain this record.

6.5 The numbers of complaints that the LGO becomes involved in for Dudley are relatively low. However, it appears that the Local Government Ombudsman is becoming involved much more quickly when people are unhappy about how their complaints are dealt with. This is tied in with the position that complainants are increasingly likely to want to challenge decisions by going to alternative organisations whom they see as having the power to progress matters on their behalf – again a national trend.

- 6.6 During 2011 – 12, the Ombudsman formally investigated two complaints in relation to Adult Social Care Services. The first in relation to the different costs incurred by a person in residential care i.e. the cost was lower whilst she was funded by Adult social care – the costs increasing at a point where she became a self – funder. The second complaint relates to a family in dispute regarding the amount of financial assistance provided to them in looking after their father. In both cases no maladministration was found. The second case required reimbursement of some of the care costs.
- 6.7 In addition we received cases from the Ombudsman where the Council had not had an opportunity of looking into matters first or where the complaint process had not been exhausted.
- 6.8 One complaint involved a lady who had been a Dudley resident but moved to residential care in a neighbouring authority. The issue arose regarding who the responsible authority was in terms of funding the placement. Contact was quickly established with the neighbouring authority who accepted responsibility, the complaint was resolved.
- 6.9 We are awaiting the decision of the Ombudsman in relation to Mr L. this involves a gentleman who wanted the authority to find a residential placement for his Mother in another part of the U.K.. It was established that his mother is a self funder and therefore assistance was offered whilst encouraging Mr L to seek a placement in the area of his mother's choice. Mr L has complained to the Ombudsman that Dudley did not provide sufficient assistance to him.
- 6.10 **Unreasonable Complainants.**
The vast majority of people who complain do so reasonably, whilst often displaying an understandable level of frustration, annoyance, despair. However, we are seeing a clear increase in the numbers of complainants who demonstrate challenging behaviours that can at times prove unreasonable. They are relatively few but they require a considerable amount of time and attention. Despite the challenges faced we have as yet only had one case that has required written notification to the complainant that their approach is formally being viewed as 'unreasonable –vexatious'.

7. THE SERVICE AREAS IN RECEIPT OF A COMPLAINT:-

7.1 The 209 complaints received involved 41 separate service areas.

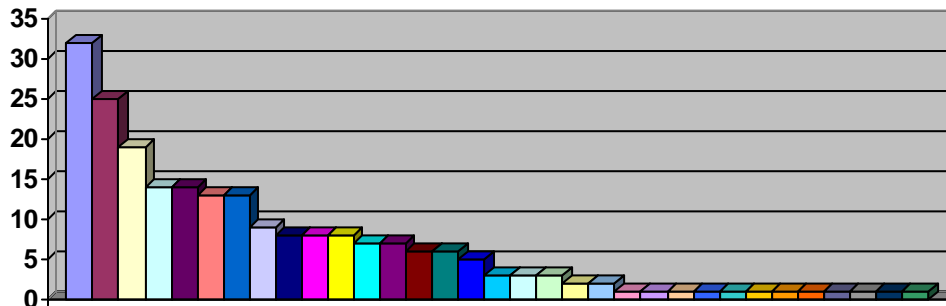


| | |
|--|-------------------------------------|
| ■ Related to closure of establishment (24) | ■ L.I.T. (19) |
| ■ Adult Services South (14) | ■ Netherton Locality Team (13) |
| ■ Adult Services North (12) | ■ Accountancy & Finance (12) |
| ■ External Direct Payments Services (11) | ■ Occupational Therapy (11) |
| ■ External Domiciliary Agencies (10) | ■ Halesowen Locality Team (9) |
| ■ Brierley Hill Locality Team (9) | ■ External Residential (8) |
| ■ Access Team (6) | ■ Dudley Telecare (6) |
| ■ Stourbridge Locality Team (5) | ■ Blue Badge Team (4) |
| ■ Sedgley Locality Team (4) | ■ Halesowen CTLD (3) |
| ■ Sedgley CTLD (3) | ■ Directorate Policy (3) |
| ■ New Bridge House (2) | ■ START (2) |
| ■ Local Authority Transport (1) | ■ Woodside Day Centre (1) |
| ■ Dudley CMHT (1) | ■ Halesowen Administration (1) |
| ■ Shenstone (1) | ■ Directs Payments Co-Ordinator (1) |
| ■ Brettell Lane Day Centre (1) | ■ New Swinford Hall (1) |
| ■ Dudley Home Safety Team (1) | ■ Autism Support (1) |
| ■ Tiled House (1) | ■ Safeguarding Team (1) |
| ■ Stourbridge CTLD (1) | ■ Russell Court (1) |
| ■ Community Care Mainstream Dudley (1) | ■ Community Transport (1) |
| ■ Brett Young Day Centre (1) | ■ Commissioning (1) |
| ■ Policy Performance & Quality (1) | |

- 7.2. No area or service received a disproportionate amount of complaints, the complaints being spread across 41 separate services
- 7.3. The largest 'single' issue involving complaints that were received was in respect of the proposed closure of a residential care home. No complaints were received regarding the service provided by the establishment concerned.
- 7.4. The numbers of complaints in relation to the external service providing support to people in managing direct payments dropped to 11 this year compared to 27 the previous year.
- 7.5. The numbers of complaints in relation to the Blue Badge scheme increased from April 2012 and therefore not covered in this report.
- 7.6. This chart also demonstrates there has been an increase in complaints in respect of external domiciliary agencies. This is in fact a 'positive' development in that users of services retain the right to complain under the social care complaint process even where the service is being provided by an external agency, on behalf of the Local Authority. We need to ensure that people who use those services are therefore aware of this right. In addition, the Complaints Team attended a Carers Forum headed by our Commissioning Team to raise awareness amongst external providers that people who receive their service may still use the statutory complaint procedure.

8. THE SERVICE ISSUES

8.1 This is the 'issue' being raised by the complainant. There have been **219** issues recorded this year over **41** service areas. The largest number of issues recorded were in respect of 'service inadequate' with **32**.



| | |
|--------------------------------------|---------------------------------------|
| Service Issue - Inadequate (32) | Closure of Establishments (25) |
| Not Provided/Withdrawn (19) | Delay in Assessment (14) |
| Service Issue - Delay (14) | Staff Behaviour (13) |
| Poor/Inaccurate Information (13) | Delay in Funding (9) |
| Care Plan in dispute (8) | Resource Allocation Service (8) |
| Service Issue - Quality (8) | Funding (7) |
| Poor/Inaccurate Communication (7) | Increase in Charge (6) |
| Transfer of Care (6) | Financial Loss (5) |
| Internal to External Transfer (3) | Eligibility/Assessment Criteria (3) |
| Failure to Protect (3) | Reduction in Care (2) |
| Restriction on Resource/Capacity (2) | Decision following Direct Payment (1) |
| Damage to Property/Equipment (1) | Change of Carers (1) |
| Other Service Users (1) | Fairer Charging Policy (1) |
| Reduction in Direct Payment FACS (1) | Information Issues - Access (1) |
| Financial Assessment (1) | Behaviour of Service User (1) |
| Standard of Physical Environment (1) | Assessment (1) |
| Abuse by family member (1) | |

8.2 Examples of Individual Issues of complaints:-

- Complaint from the son of G W, not happy that his mother had been in respite for 9 weeks, awaiting funding to be released to make the placement permanent.
- A complaint from the daughter of Mrs L regarding the funding of services for her mother in law advising she is struggling to pay for her own care.
- Dispute that Direct Payments had not been backdated to the date when care commenced.

- Complaint regarding the proposed - indicative budget following assessment.
- Complaint from relative of a Resident of a care home placed in a new room the previous day and was not given a bed with Cot Sides. The lady subsequently fell out of the bed and suffered an injury. Pursued through safeguarding.
- Complaint received regarding the external service providing support to people in managing direct payments. Mrs P had received two letters from the Inland Revenue demanding overdue tax, which should have been paid directly by the service. Mrs P found the letters distressing together with the difficulties in communicating with the service. Matters were looked into and resolved, an apology was provided and the tax bill was subsequently correctly dealt with.
- Complaint made by service user in receipt of Direct Payments regarding non-receipt of payslips after sending in time sheets. Repeatedly unable to get through to speak to anyone at the company's Head Office to check that the time sheets had been received. Complaint resolved.
- Complaint re possible time taken to construct a ramp outside a service user's property.
- Complaint regarding poor level of personal care provided by a care agency carers, concern regarding administration of medicines.
- Complaint regarding restrictions on the use of a temporary blue badge whilst waiting for the new one to be processed, can only be used in Dudley MBS.
- Complaint regarding change of carer from internal provision to external agency.

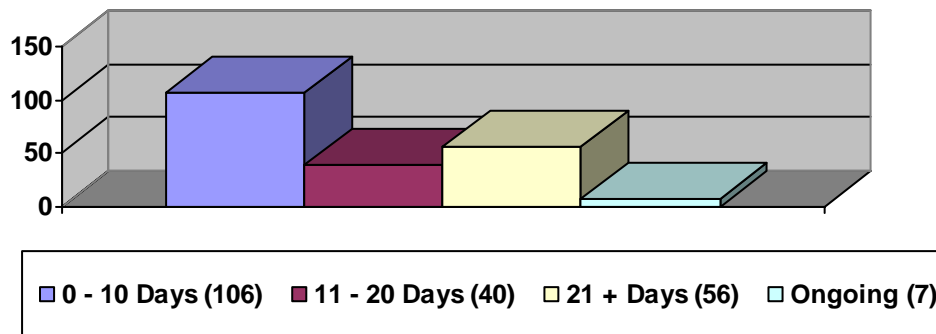
9.1. **HOW RECEIVED:**

- 9.2 A regulatory requirement exists for all adult social care complaints to be registered; this is carried out for the Directorate by the Quality & Complaints Team. There are a variety of access points to the complaint process. The largest number of complaints received for this year were received directly to the Quality & Complaints Team by leaflet, letter, telephone or email with **101**. Managers received the second largest amount of complaints by letter, telephone, in person or email with **33**.
- 9.3 All complaints, however received, are acknowledged within three working days, before a Manager, Snr Manager is tasked with looking into and responding to the complaint. The Quality & Complaints Team is responsible for tracking each complaint to ensure it receives a speedy, effective written response.

10. TIMESCALES

- 10.1 Our ability to conclude complaints satisfactorily within agreed timescales is increasingly difficult to achieve for the following reasons:-
- The complexities involved
 - Less scope for early resolution due to demands on resources
 - Capacity for Managers to look into and respond to the complaint
 - Issues which involve external agencies requiring additional time to chase and seek quality responses.

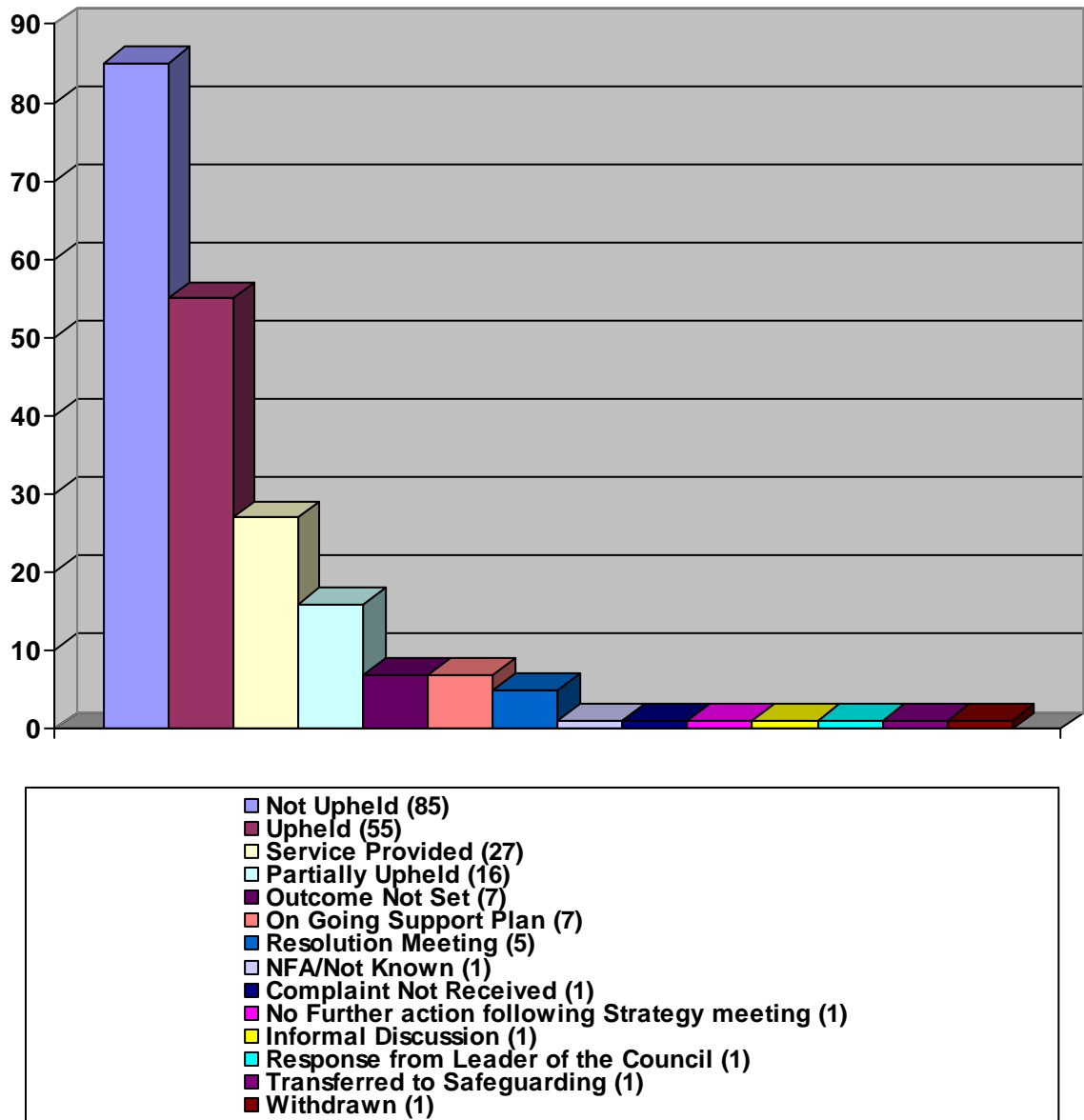
- 10.2 The timescales for resolving complaints during 2011/12 remains satisfactory, with the majority of all complaints seeing a resolution within 10 to 20 working days. **106** complaints have been resolved/responded to within 10 working days; a further **40** were concluded within 20 days during this year. **56** were responded to after the 21 days and 7 are still ongoing



- 10.3 There are currently 7 complaints still ongoing, they are still ongoing due to the complexity of the concerns raised i.e. they were received as complaints and have gone to further investigation or they are now under the safeguarding procedures or awaiting the deliberations of the Ombudsman.

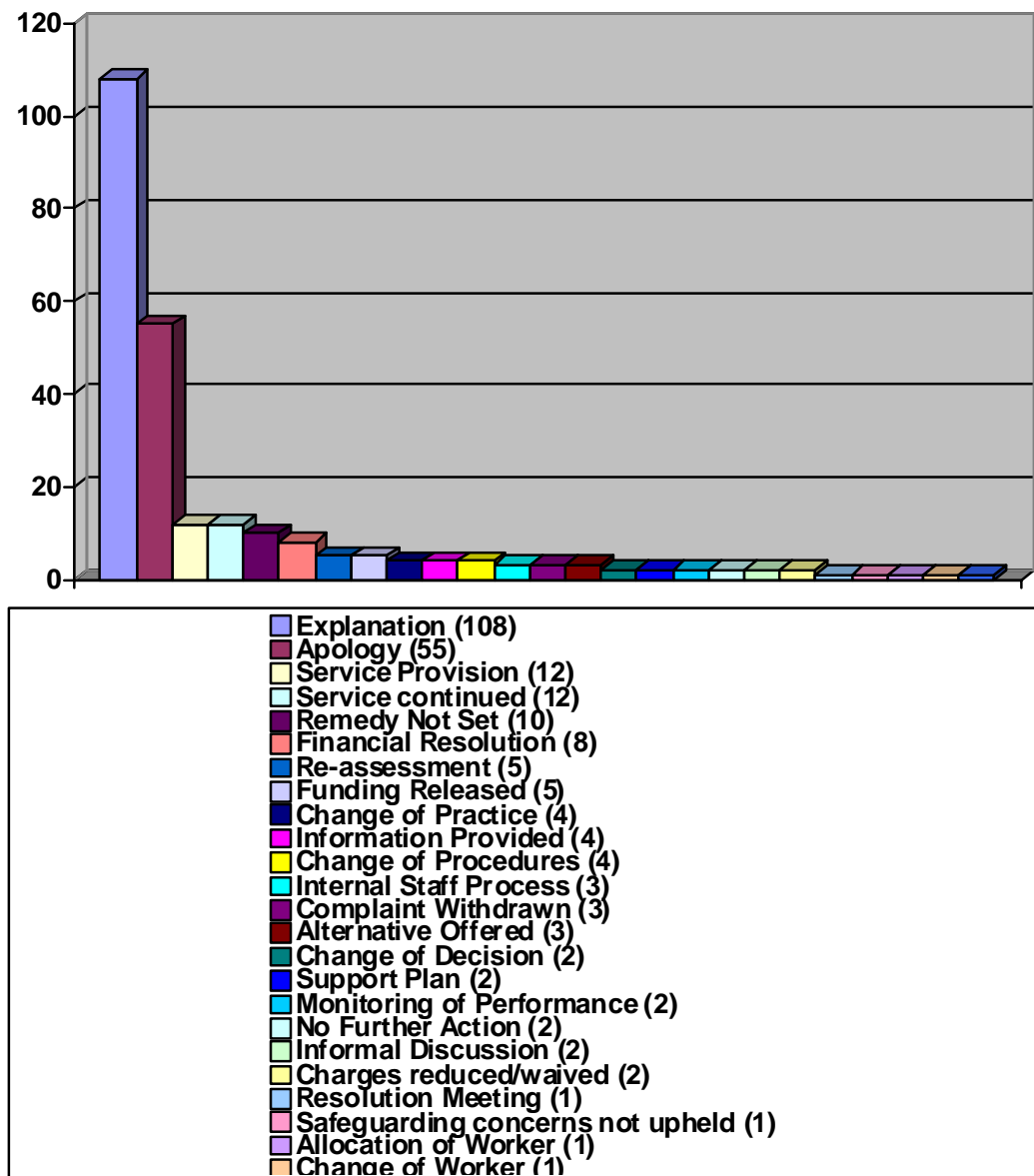
- 10.4 Those complaints that fell outside the 20 day timescale did so for reasons such as:-
- Mediation
 - Informal meeting with complainant
 - Awaiting response from external provider
 - Extension agreed with complainant
 - Complaint re-opened
 - Working on support plan
 - New information from complainant

11. OUTCOMES IN TERMS OF FINDINGS:-



11.1 The above chart indicates that majority of complaint for the year 2011-2012 were not upheld amounting to **85**. With **55** complaints upheld. **7** complaints have no outcome set.

12. REMEDY:-



12.1 This indicates the action taken in resolving the complaint. There have been **253** remedies recorded in respect of **209** complaints. Complaints can receive more than one remedy for each complaint i.e., an apology and explanation.

13. ETHNICITY

- 13.1 As in previous years the majority of people who used the complaint process are British/White. During 2011/12 the Quality & Complaints Team carried out visits to community groups to develop and circulate new publicity material, and to raise awareness of the complaint process. The Quality & Complaints Team will continue to try to raise awareness and improve accessibility to the complaint process for all Adults in receipt of a service during 2011/12.

End of Annual Complaint Report 2011/12.