

# CARE, HEALTH & WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

Date: 15 September 2015

TITLE OF REPORT: Annual Report on Adults Services Complaints and

Representations, April 2014 – March 2015.

**REPORT OF:** David Bunce, Strategic Director, Care, Wellbeing &

Learning.

## Summary

Cabinet considered the attached report on 23 June 2015.

Cabinet approved the referral of the report to a meeting of the Care, Health & Wellbeing Overview and Scrutiny Committee, in line with procedure.

It is a statutory requirement that the report is considered by a formal committee to ensure the Council has an effective complaints procedure that follows the legislation set out in The Local Authorities Social Services and National Health Service Complaints (England) Regulations 2009.

# **Background**

- 1. The Health & Social Care (Community Health and Standards) Act 2003 requires that Councils with Social Services responsibilities produce an annual report of their Statutory Adults Services Complaints Procedure. This annual report sets out details of the complaints and representations made during the period April 2014 March 2015, (Appendix 1).
- 2. Information contained in the report provides a summary of the statistical information of all representations received, together with a review of the effectiveness of the procedure. Some examples of service improvement are also included.

## **Annual Report Complaints and Representations**

- 3. The report is consistent with the Sustainable Community Strategy Vision 2030 and the Council's Corporate Plan. In particular the report supports the Corporate Priority for serving our customers by continuously improving services and targeting areas of under achievement.
- 4. The report covers the period from 1 April 2014 31 March 2015.

The complaints procedure derives from The Health and Social Care (Community Health & Standards Act) 2003 and The Local Authorities Social Services and National Health Service Complaints (England) Regulations 2009. These acts set down the procedures that councils and social services have a legal responsibility to follow when a complaint is made.

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5. The report focuses primarily on statutory complaints for Adults Social Care Services, with information on complaint related queries and compliments that are received about staff or services.

## **Operation of the Procedure**

- 6. The Adults Care Complaints Process procedure has two stages:
  - Local Resolution by a Team or Service Manager
  - External Consideration by the Local Government Ombudsman.

## **Statistical Analysis**

- 7. In 2014/15 the number of complaints dealt with was as follows:
  - 64 statutory complaints.
  - 7 complaints were graded as green complaints low level issues, small risk either to the service user or the Council.
  - 56 complaints were graded as amber complaints moderate issues with medium risk to the service user or the Council.
  - 1 complaint was graded as a red complaint serious issues which are high risk for either the service user or the Council.

## **Points of Interest**

- 8. The following points may be of interest:
  - 80%, (51) of complaints were around the quality of services received and remains the greatest cause for complaint.
  - Quality of service involves alleged failure of service delivery, for example:
    - Home carers not turning up;
    - Non return of telephone calls;
    - Late or missed social work visits;
    - Poor response after a request for service.
  - 41% (23) of complaints were not upheld after investigation.
  - 47% of complaints were either fully or partially upheld.
  - 29 working days was the average time to investigate complaints.
  - The Council expects all complaints to be completed within **30** working days and this timescale has again been achieved.

## **Learning from representations: Examples of Service Improvements**

Learning from complaints is critical to prevent recurrence of the cause(s) of the
original complaint. It is important that we make sure that people's experiences help
us to improve services where we can. Changes can include policy, procedure or
employee development.

## Examples of improvements identified during 2014/15:

#### **Quality of Mental Capacity Assessments**

 Due to a lack of clarity around mental capacity assessments, it is now mandatory for all Assessment and Personalisation Social Workers to undertake Mental Capacity Act refresher training.

# Inadequate communication between Hospital Social Work Teams and Hospital Ward Staff

 Regular meetings between hospital ward staff and hospital social workers are now held to share any relevant information and to help develop better communication between health and social care workers. This will identify what barriers are preventing effective communication and how they can be overcome.

# Concerns about the quality of the information regarding direct payments

As a result of this complaint:

- Direct Payment training is now mandatory for all relevant staff.
- The booklet, which informs on the Direct Payments process, has now been reviewed.

## **Charging Issues**

A concern was received regarding the obligatory standard 4 hours support within an Extra Care setting.

 As a result of this complaint, the contract between the Council and the provider has been reviewed.

# Quality of service provided by Promoting Independence Centres, (PIC)

- Training and development needs of PIC staff, particularly around case recording, are identified, monitored and reviewed as part of the Council's formal supervision process.
- Quality assurance measures are strengthened to ensure records validate a true
  account of a person's experience and care and support needs during their stay in
  a PIC.
- Carer consultations are carried out on a regular and timely basis to ascertain satisfaction with the care that had been provided.

#### **Adaptation Process**

Clients who are going through the adaptation process are now kept fully informed of any significant developments. Applicants are also provided with regular updates on the progress of their application.

# Suitability of Day Services Activities for Individual Service Users

- Users of day services are now provided with a form to register specific requests for activities during the week. These requests will now be included in the day services weekly activity plan.
- Recording and evaluation of individual service user's care plans are now completed with the person present and regularly audited by managers.
- Quality assurance measures have now been implemented to ensure that the aims and objectives of day care services are being met for all service users.
- 10. Compliments continue to be received about the quality of the Adult Care Services provided by Gateshead Council. Some compliments are about individual members of staff or about whole teams and services. Compliments reflect the high regard in which our customers have for employees and the services provided to them. Information is always fed into operational services including the Commissioning & Business Development Team to highlight good practice and possible improvements to services.

## **During 2014/15:**

- 34% of compliments, (313), received focused on the care provided by the Councils Promoting Independence Centres.
- 20%, (182) were regarding Council Domiciliary Care.

- 91% of Council Domiciliary Care compliments were about the START service.
  The START Service is a short term re-ablement team who concentrate on
  providing service users with the skills to remain at home. This service can help
  prevent the need for larger or more long term packages of care.
- 2% (16) of compliments received were from families of services users who were at the end of their life. These compliments expressed the gratitude of family members for the services or individuals involved in their care.
- 80% (916) of all representations received during 2014/15 were compliments.

#### Recommendation

11. The committee is asked to consider and comment on the effectiveness of the Adult Social Care Complaints and Compliments Procedures and the details of all complaints and representations received during 2014/15.