

ANNUAL REPORT ON

ADULT SERVICES COMPLAINTS-COMPLIMENTS-REPRESENTATIONS

1 APRIL 2016 – 31 MARCH 2017

Introduction

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 came into force on 1 April 2009. This legislation sets down the procedures that Adult Social Care Services and National Health Services, (NHS), must follow when complaints or representations are made.

Representations may not always be complaints; they might also be positive remarks or ideas that require a response from the Council. Enquiries or comments about the availability, delivery or quality of a service, which are not criticisms, also constitute representations.

As part of the responsibilities set out in the Act, local authorities must produce an annual report on all complaints and representations received. This report fulfils Gateshead Council's obligations and provides information on all representations received about the Council's Adult Social Care Services from 1 April 2016 – 31 March 2017.

There are two steps to the Statutory Complaints Process;

1. Informal (Local) resolution by the Council;
2. Independent consideration by the Local Government Ombudsman, (LGO).

All complaints must be assessed and given a grading. Categories of complaint are:

- Green Low-level or minimal risk for either the service user or the Council;
- Amber Moderate or medium risk;
- Red Serious complaint graded as high risk.

There are no prescribed timescales for resolution as the quality of the investigation and outcome is significantly more important than attempting to adhere to a stipulated period for response. However, it is very important that all investigations are proportionate to the issues complained about and that the complainant is always kept up to date on the progress of investigation.

Publicity and Information

Publicity on how to complain can be provided in several formats, encouraging and facilitating easy access to the complaints process. All new service users receive a complaints leaflet in their information pack. A leaflet is also provided when a service user receives the outcome to an assessment / reassessment of need.

Independent Element

The Council operates an internal investigation procedure. Complaints administration should be fully independent of any form of service delivery to ensure fairness and impartiality.

Advocacy and Special Needs

Vulnerable people receiving a Social Care service are encouraged and supported to express their views and to access the complaints procedure if they wish. In all cases advocacy is offered if it is felt that the complainant would benefit from this service.

Individuals who wish to complain about a Public Health service can obtain free independent advocacy support. This advocacy is Government funded and is exclusively for Health Service complaints.

Training and Employee Development

Training for Investigating Officers is provided on an annual basis. All Adult Social Care Team Managers / Service Managers are expected to have undergone investigating skills training.

The Investigating Skills Training Course is facilitated by the Local Government Ombudsman. This training concentrates on defining, investigating and resolving complex complaints. It also emphasises the need to identify any improvements that may be necessary as a direct result of individual complaints.

A Local Government Ombudsman Investigating Skills Training Course has been arranged for April 2017. The training is mandatory for all Adult Social Care Managers to ensure that all are trained to the Ombudsman's investigation standards. The training will also focus on resolution and meaningful remedies for the complainant.

Equalities Monitoring

Gateshead Council recognises that equality monitoring of service delivery is crucial for effective planning and scrutiny of the services that it provides. This monitoring can identify which groups are using services and gauge their level of satisfaction. The information can then be used to highlight possible inequalities, investigate their underlying causes and address any unfairness or disadvantage.

Information about the complaints process can be made available in key languages and formats. Information for customers with sight or hearing impairment can also be provided.

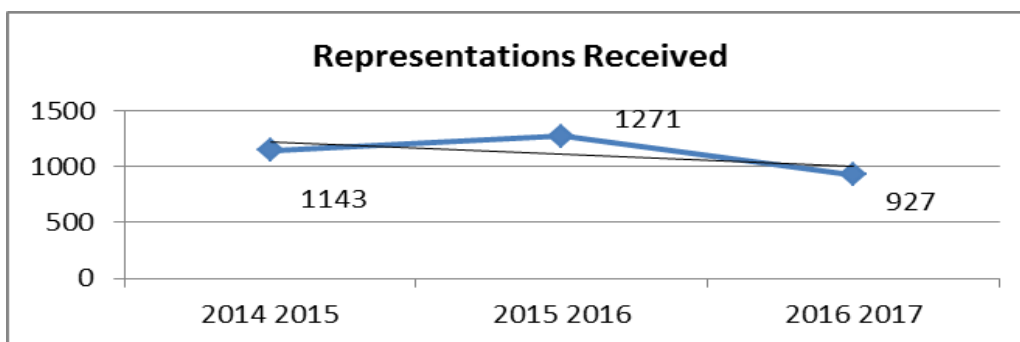
Representations Received from 1 April 2016 and 31 March 2017.

During 2016/17, 53 complaints were received regarding Adult Social Care Services. This is a 15% decrease on complaints received during 2015/16, (62).

The number of low level issues received have continued to decrease and 2016/17 saw a 47% decrease on the number received during 2015/16, (23 from 43). The majority of low level issues were dealt with directly by the services concerned and were resolved to the customer's satisfaction. In some cases, all that was required was a discussion between the complainant and either the Social Worker or the Team Manager to clarify issues or to identify what was required to put things right. Before closure, the complainant is always asked to confirm that they are satisfied that the issue had been resolved.

Details and numbers of Complaints and representations over the past 3 years

All Formal Contacts	2014 2015		2015 2016		2016 2017	
Commissioned Service - Own investigation	1.22%	14	1.34%	17	0.22%	2
Corporate Complaints	0.09%	1	0.16%	2	0.11%	1
Adult Services Complaints	5.60%	64	4.88%	62	5.72%	53
Complaint Related Queries	4.99%	57	3.38%	43	2.48%	23
Commissioned Services Issues	5.60%	64	4.01%	51	11.87%	110
Compliments	80.14%	916	84.50%	1074	77.67%	720
Data Breach	0.17%	2	0.00%	0	0.00%	0
Health & Social Care Joint Investigations	0.44%	5	0.24%	3	0.43%	4
HCPC Referrals	0.09%	1	0.00%	0	0.00%	0
Insurance Claim	0.26%	3	0.08%	1	0.00%	0
Inter-Agency Concerns	0.35%	4	0.16%	2	0.43%	4
Local Government Ombudsman	0.17%	NA	0.47%	6	0.00%	9
MP / Councillor Responses	0.17%	2	0.24%	3	0.97%	1
Safeguarding Alerts	0.44%	5	0.31%	4	0.11%	0
Solicitor Responses	0.09%	1	0.00%	0	0.00%	0
Whistle Blow	0.17%	2	0.24%	3	0.00%	0
		1143		1271		927



Complaint Categories	2014 2015	2015 2016	2016 2017
Green	7	4	7
Amber	56	57	45
Red	1	1	1
All	64	62	53

Key Points of Interest

- There has been a 27% decrease in all formal recorded contacts about Adult Social Care since 2015/16.
- Overall, Adult Services complaints decreased by 15% compared to 2015/16 figures.
- The number of complaints assessed as Green (minimal risk to the Council or service user) accounted for 13% of the total number of complaints received.
- Amber complaints, which are medium risk to the Council or the service user, accounted for 85% of all complaints received. This evidences that complaints received do have a degree of complexity. Amber complaints can often include a number of issues which are deemed as moderate risk to either the service user or the Council.
- The number of complaints that are assessed as Red, (high risk to the Council or the service user), has remained constant since 2014/15.
- Complaint related queries decreased by 47%. Complaint related queries are low-level representations that must be resolved within one working day after receipt.
- The main theme from low level issues received during 2016/17 was regarding the quality of worker support, in particular about the quality of the information provided or about poor communication. All low level issues were responded to by either the service concerned or by the Complaints Section.
- Almost 78% of representations made during 2016/17 were compliments and only 24% were concerns or formal complaints.

Themes of Complaints Received

There were three main themes of complaints received during 2016/17.

1. Quality of Service

Quality of service remained the main theme of complaint.

41%, (22), of complaints received during 2016/17 were regarding the quality of the services being provided.

Issues raised within complaints about quality included:

- The quality of support given to individuals;
- Lack of or poor communication from either the service or individual workers;
- Allegations that assessing officers had not informed clients or family members about the charging policy;
- Inappropriate sharing of personal information;

- Disputed care charges / invoices;
- The quality of residential care.

After investigation, 33%, (6), of complaints about the quality of the service were unjustified. 17%, (3) were partly justified and 50%, (9) were found to be fully justified. All improvements or recommendations as a result of these complaints are included within this report.

2. Staff Issues

10 complaints that were received were regarding the behaviour of individual members of staff. From this figure, 9 complaints cited the conduct of the worker as the main issue complained about.

Every complaint received by Adult Social Care that cites inappropriate staff conduct as the main concern is fully investigated by the service. In all cases any conduct issues that are found to be justified are addressed with the staff member concerned and processes put in place to minimise the risk of reoccurrence. These measures could include monitoring behaviour / performance via individual supervision sessions or by providing additional or refresher training. If the service felt that the issues were serious enough and found to be justified, the Council can also invoke their own internal employment procedures.

3 Appeals after Assessments / Reviews

11 complaints were received that were regarding changes to care packages after an assessment or review. To ensure that the assessment / review had been fair and had included all relevant information to inform the decision making, the service re-evaluated each individual case. As a result of the re-evaluation, the Service had reinstated either in part or in some cases, the original care packages for 4 complainants.

Complaints Service Area

Service Area	2014 2015		2015 2016		2016 2017	
Assessment & Personalisation	40.63%	26	54.84%	34	67.92%	36
Care Call	7.81%	5	6.45%	4	3.77%	2
Commissioning & Quality Assurance	23.44%	15	6.45%	4	7.55%	4
Finance & ICT	0.00%	0	3.23%	2	0.00%	0
Health & Housing Support	12.50%	8	8.06%	5	N/A	N/A
Provider Services	15.63%	10	20.97%	13	20.75%	11
Total		64		62		53

- During 2016/17, almost 68%, (36), of complaints were about the Assessment & Personalisation service.
- This is a 6% increase on the number received during 2015/16, (34).
- 31%, (11) of complaints received by Assessment & Personalisation were appeals after an assessment or review of need.
- After fully reviewing each individual case, 4 complaints were found to be justified. As a result of this, services were reinstated.
- Complaints about Council Provider Services decreased by 15% (11), since 2015/16.
- Provider Services include Promoting Independence Centres, Shared Lives Services and Council homecare.
- 27%, (3), of complaints about Provider Services were about the alleged lack of preparation when clients were transferring from Council provided home care to commissioned services.
- After reviewing each case, it was agreed to reassess one client due to a change in their personal circumstances.

All issues complained about

Issues of Complaint	2014 2015		2015 2016		2016 2017	
Appeal Changes after Care Needs Review		N/A		N/A	20.75%	11
Council Policy		N/A		N/A	5.66%	3
Delay	3%	2	6.45%	4	3.77%	2
Lack of Service	5%	3	11.29%	7	9.43%	5
Quality of Service	80%	51	53.23%	33	41.51%	22
Refusal of Service	6%	4	0.00%	0	0.00%	0
Staff Issues	6%	4	29.03%	18	18.87%	10
Total		64		62		53

- 41%, (22), of complaints were around the quality of services received. This area remains the greatest cause for complaint.
 - Quality of service involves alleged failure of service delivery, for example:
 1. Missed or delayed social work visits / appointments;
 2. Non return of telephone calls;
 3. Poor communication;
 4. Poor response after a request for service.
- 4 complaints were regarding the quality of the worker support provided.
- 3 of the complaints about worker support were upheld. Areas complained about were regarding poor communication, failure to record events on case records, and lack of action after a request for service. Any improvements as an outcome to these complaints are outlined within this report.
- 10 complaints received were regarding the conduct of individual workers.
- 9 of these complaints cited staff attitude as their main issue.
- After investigation, 6 complaints about attitude or behaviour of staff were not upheld.
- 3 were partially upheld.
- 1 was fully upheld. This complaint resulted in additional training for all of the team concerned.

Outcomes

Outcomes of complaints	2014 2015		2015 2016		2016 2017	
Outstanding		8		6		5
Closed or withdrawn	1.5%	1	12.50%	7	0.00%	0
Not upheld	41%	23	28.57%	16	52.08%	25
Partially upheld	22%	18	35.71%	20	18.75%	9
Upheld	25%	14	23.21%	13	29.17%	14
Total		64		56		53

- 52%, (25), of all complaints were not upheld after investigation.
- 48%, (23) of complaints were either fully or partially upheld during 2016/17.
- This is a 11% decrease on the number of complaints that were either fully or partially upheld during 2015/16.

Timescales

- 33 working days was the average time to investigate complaints during 2016/17. This is a 18% decrease on the response times during 2015/16, (40 working days).
- Although there are no statutory timescales for response, the Council expects all complaints to be completed within 30 working days of receipt. However, as complaints now include numerous issues across adult services and other agencies, it is often difficult to provide a full and thorough response within this timescale. However, if the complainant is regularly updated on the progress of the investigation, any extended timescales are generally accepted.

How complaints were received

Method of Complaint	2014 2015		2015 2016		2016 2017	
Service Feedback Form	7.9%	5	4.84%	3	1.89%	1
Complaints Form	0%	0	3.23%	2	0.00%	0
Email	31.3%	20	33.87%	21	24.53%	13
Letter	39.1%	25	27.42%	17	32.08%	17
Personal Visit	4.7%	3	9.68%	6	1.89%	1
Telephone	17.2%	11	20.97%	13	39.62%	21
		64		62		53

- Letters and emails continue to be the main method of referral accounting for 57%, (30), of all complaints received.
- Personal visits are now rare, with complainants preferring to either submit written complaints or complain by telephone. Complaints received by telephone are generally in response to immediate issues, such as missed care visits or disputes regarding invoices for care.
- Relatives, including relative carers, continue to make the most representations, and accounted for 75%, (40) of complaints made.

Equalities Monitoring

Ethnic Status	2014 2015		2015 2016		2016 2017	
White British	96.88%	62	98.39%	61	94.34%	50
Black/ Black British	0.00%	0	1.61%	1	0.00%	0
Chinese	0.00%	0	0.00%	0	0.00%	0
Mixed	0.00%	0	0.00%	0	0.00%	0
Asian / Asian British	1.56%	1	0.00%	0	3.77%	2
Other White	1.56%	1	0.00%	0	1.89%	1
		64		62		53

- 2 formal complaints, 2 complaint related queries and 7 compliments were raised by members of the BME community.
- All compliments were regarding the quality of the services provided by Adult Social Care.

Specific Areas of Complaint within Adult Social Care

Commissioned Care Services – All issues received

Commissioned Services	2014 2015	2015 2016	2016 2017
Formal Complaints	10	1	4
Complaint Related Queries	8	7	2
Commissioned Service Issues	64	51	110
Commissioned Service – Own Response	14	19	2
Compliments	N/A	4	6
Insurance Claim	1	0	0
Moved to Safeguarding	Na	3	0
Whistle Blows	2	2	0
Total	99	83	124

- During 2016/17 representations regarding commissioned services increased by 49%, (124).
- 4 formal complaints were received, which were investigated by Contract Management Officers.
- 2 were regarding a home care provider, 1 regarding the Direct Payment Support Service and 1 about the quality of care provided by a commissioned care home.
- After investigation, both complaints about commissioned home care were upheld.
- The complaint regarding a commissioned care home was partially upheld
- In all cases, Contract Management Officers carried out additional monitoring of the service to ensure that they were complying with their contractual obligations with the Council.
- The complaint regarding the Payroll Service was not upheld.

Commissioned Service Issues are concerns received by other professionals on behalf of service users, which are shared with the providers. The providers are then responsible for looking into the issues and providing effective resolution for the client concerned. During 2016/17, 110 commissioned service issues were received. This is a 116% increase on the number received during 2015/16, (51). All responses received direct from the provider are shared with the relevant Contract Management Officer to ensure that all issues have been fully addressed.

- During 2016/17, 77 commissioned services issues were received about commissioned home care.
- Concerns about late, missed or short home care visits remains the main theme of issues received.
- 32 commissioned services issues were about commissioned care homes.
- Issues received regarding care homes highlight;
 - hygiene / housekeeping concerns;
 - Lack of action after requests by residents or family members;
 - The quality of the food provided

Once complaints are resolved, Contract Management Officers are expected to ensure that any proposed actions or improvements to service are carried out and fully monitored. Any feedback, which includes dissatisfaction, is helpful to inform the Commissioning Team of how the current care services are operating and how they could be commissioned in the future.

- During 2016/17, 6 compliments were received about the quality of the work carried out by individual Contract Management Officers.

Health & Social Care Joint Investigations

The statutory complaints process covers NHS and Social Care Services.

All complaints that are received which are about services provided by both Health and Social Care are co-ordinated by either the Council's Complaints Manager or the Complaints Manager responsible for the Health Service area subject to the complaint. The organisation responsible for the majority of the complaint will take the lead in the investigation and will ensure that a combined response letter is sent to the complainant within the agreed timescales.

During 2016/17, 4 complaints were received which included concerns about services provide by Health and Social Care during 2016/17. This is an increase of 33% (3), since 2015/16.

2 complaint investigations were led by Adult Social Care managers and 2 investigations were led by colleagues at the Queen Elizabeth Hospital.

Adult Social Care issues complained about mostly focused on the discharge process. However, 1 complaint included an element which was regarding the Council's home care workers.

All 4 complaints were fully responded to by the relevant managers within Adult Social Care. After investigation, all of the issues regarding Adult Social Care, which had been included within all 4 complaints, were found to be unjustified. In each case, it was evidenced that workers or the service had acted appropriately and followed standard social work practice.

Local Government Ombudsman

During 2016/17, 9 complaint referrals were received from the Local Government Ombudsman. This is an increase of 80% on the number received during 2015/16, (5). However, this is in line with the increase in Ombudsman referrals across the region.

During 2016/17, the Ombudsman requested information about 9 complaints, which had previously been responded to through the statutory complaints procedure.

- 6 referrals were regarding services provided by Assessment & Personalisation;
- 1 referral was around the management of the Safeguarding Adults Process;

- 2 referrals were around the aids and adaptations process, in particular the refusal of major building works.

Detailed information and responses for each individual case was provided to the Ombudsman to allow them to investigate the circumstances and to make a decision on whether the Council had followed processes and procedures.

The Ombudsman has since provided their decision on 7 referrals;

- 2 referrals were closed after initial investigation:
- 2 were closed after the Council offered the complainant local resolution to the issues complained about;
- 2 were closed after investigation. The Ombudsman did not find any injustice to the complainant or any malpractice by the services concerned;
- The findings from 1 investigation resulted in a judgement of maladministration with injustice.

Although the main issue of complaint was found to be unjustified, the Ombudsman did feel that the communication with the complainant had been poor and that this had caused unnecessary uncertainty and misunderstandings. The Council accepted the Ombudsman's findings and agreed a financial disbursement of £250.00 for the injustice that had been caused to the complainant.

- 2 referrals regarding the refusal of major building work are still under Ombudsman investigation

Public Health Complaints

During 2016/17, there were 2 formal complaints received by the Council regarding Public Health Services. 1 was investigated and responded to through the Public Health Complaints Procedure and 1 complaint was dealt with through the Council's Corporate Complaint Procedure. Both complaints were not upheld.

All services commissioned by Public Health are required to have their own complaints procedure and are responsible for the management of any complaints that they receive. The numbers of complaints and compliments for each service are forwarded to the Council on a quarterly basis.

During 2016/17, there have been 3 concerns and 65 compliments received by services commissioned by Public Health.

Public Health Concerns & Compliments	2015 - 2016		2016 - 2017	
	Compliments	Concerns	Compliments	Concerns
Gateshead Evolve	11	3	5	1
Platform Gateshead	3	0	0	0
South Tyneside Foundation Trust	123	7	21	0
Integrated Sexual Health	62	7	0	1
Live Well	0	2	18	0
Rape Crisis	Na	Na	21	1
	199	19	65	3

Learning from Complaints: 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 the Council to improve services where possible. Changes can include policy, procedure or employee development.

Complaints about individual practice or failure to follow procedures are dealt with by reinforcement of processes and reiterating customer care standards through service / team meetings or individual supervision sessions.

In all cases, any justified issues regarding attitude or conduct of staff are dealt with in line with the Council's internal employment procedures.

Improvements after a complaint include:

- The Shared Lives Service now ensure that all service user's or their representatives are formally advised that in the event that a service or Shared Lives session needs to be cancelled, that they must inform the Council as soon as possible as failure to do this may mean a charge is still imposed.
- Bereavement training sessions have been arranged for the Adult Social Care Direct Team so that staff are better prepared and more able to understand and consider the wider needs of the family in times of crisis. Part of the session will focus on communication skills to ensure the ASCD Team provide a high level customer service.
- To ensure that service users' case files are up to date, all Adult Social Care workers should ensure that all significant events, incidents or difficult conversations are recorded on service user's case files as soon as possible.
- Team Managers have improved the handover procedure for when agency workers leave the Council. This will ensure that Care and Support Plans are not returned to workers who may have since left. The Care and Support Plan can then be allocated to another worker in a timely manner.
- It has also been reiterated to all staff of the need to update their own, or in the event of leave, another Team Manager, of the priority of their Care and Support Plans to ensure that all service users receive an outcome as quickly as possible.
- When it is identified that the service user has capacity, family members and friends should still have a level of involvement in an individual's care if the service user consents to this. A form has been developed so workers can ask service users who they would like to be involved and informed about their care. The service user's views will then be formally recorded and placed on their case file.

Promoting Independence Centres

- That when arranging a service user's discharge from a Promoting Independence Centre, (PIC), the Service will ensure that written correspondence is sent to the service user's primary carer to advise of discharge arrangements including the date, time and transport arrangements.
- The PIC Standard Operational Procedures has been updated to reflect the requirement to identify an appropriate professional within discharge planning meetings. The identified professional will then be required to facilitate a coordinated discharge.
- That minutes from multidisciplinary planning meetings will be sent to all attendees as soon as possible. This will help to clarify any individual actions that may be required or agreed.
- All PIC staff have been instructed to ensure that they always use up to date agreements and documentation.
- A review of residency agreements has been undertaken. This review has ensured that the documents for both intermediate care and assessments clearly state the current charging rates. The admitting officer must also verbally explain fees and charges to service users and/or their carers.
- All service users and/or their carers must be given a copy of the signed residency agreement for their own records at the time of admittance.
- That PICs should ensure that all who attend Planning meetings receive a copy of the minutes as soon as possible after the meeting has taken place.

START, (now PRIME) Service

- START now have a formal handover process to ensure continuity of care when taking over either in part or in full, a care package from a long term commissioned provider.
- A medication risk assessment is now completed for all service users of START who require support with their medication, irrespective of whether there are identified concerns at the point of referral.
- All START care staff will be reminded in team meetings and formal supervision sessions that if they record recommendations, (in particular about necessary equipment identified to support service users), within the daily feedback reports, they must bring this to the attention of the Reablement Officer.

Care Call

- Care Call Client reports will now be cross referenced against Carefirst records after Care Call staff have been notified of the death of a service user. This check will determine if other family members are still living at the property who may be receiving a home care service. This will then ensure that key safes or other equipment are not removed in error.
- Care Call staff will also attempt to contact any known next of kin or carers prior to the removal of a key safe wherever possible.

Disabled Facilities Grant

- The Service have reviewed all processes in relation to the appointment of contractors who undertake major adaptation work on behalf of the Council. This review also analysed the contract between the Council and the contractor to ensure that all areas are legally compliant in line with the appropriate procurement and Social Care legislation.

Direct Payment Process

- The Direct Payment Service have now reviewed their systems in respect of how direct payments are transferred. The process now ensures that where clients have separate bank accounts for additional grants or payments, a separate creditor reference is created to guarantee that the direct payment is always paid into the correct account.

Compliments

Information about compliments is fed into all Adult Social Care Services, including the Commissioning Team, to highlight good practice and to identify opportunities for improvements to services.

During 2016/17, Adult Social Care received 720 compliments, which accounted for 78% of all representations received.

- 42% (305), of compliments were regarding the Assessment & Personalisation Team;
- 10%, (31) of the Assessment & Personalisation compliments were regarding the Adult Social Care Direct Team;
- 27%, (172) were about the Physical Disabilities Team.
- 53%, (384) of compliments were about Provider Services;
- 61%, (235) of these compliments were about Council provided home care;
- 39%, (149) of Provider Service compliments were about the care provided by the Councils Promoting Independence Centres.

Conclusions

Adult Services complaints decreased by 15% compared to 2015/16 figures. However, the number of appeals after an assessment or review have increased. This is due to Social Workers or Reviewing Officers robustly applying the eligibility criteria. This is to ensure that those most in need receive appropriate support. In response to the appeals, the service re-evaluated each individual care packages to ensure that they were fair and objective. As a result, 36% (4) of appeals were upheld and the original assessment / review decision was adjusted.

Commissioned Care Services continue to be highlighted in the press and national media and because of this, families and professionals are more vigilant in identifying and highlighting any poor or inappropriate practice or processes. This has resulted in an increase in concerns being shared with the Council's commissioned services. It has also resulted in more stringent monitoring of commissioned services to ensure that they continue to comply with the requirements set out within their contract with the Council

Gateshead Council's Adult Social Care have recently completed a restructure of services and teams to ensure that the Council are able to manage current and future demand for adult social care. The new team and service areas will be reflected within the complaints management system and all future reports will be based on the new service areas.