

**DERBYSHIRE COUNTY COUNCIL**

**CABINET MEMBER**

**16 September 2015**

**Report of the Strategic Director for Adult Care**

**ANNUAL COMPLIMENTS AND COMPLAINTS REPORT 2014/15**

**ADULT SOCIAL CARE**

**1. Purpose of the Report**

To present to the Cabinet Member for Adult Social Care the annual compliments and complaints report for 2014/15.

**2. Information and Analysis**

Adult Care is required to produce an annual report on the complaints it has received and for this report to be made public. This requirement is set out in the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and Local Authority Social Services Complaints (England) (Amendment) Regulations, 2009.

These same regulations require each department fulfilling the Social Services function to have a designated complaints manager with responsibility for administering and overseeing the complaints process. Within Adult Care this role is fulfilled by the Group Manager (Performance).

Adult Care understands the value of compliments and complaints in helping it learn from the experience of clients and carers. The report shows some of the steps which have been taken to develop practice in response to dealing with complaints. In addition, the report shows what has been achieved in following through the action plan for 2014/15 and what is proposed within the action plan for 2015/16.

**3. Other Considerations**

In preparing this report the relevance of the following factors has been considered: financial, legal, prevention of crime and disorder, equality of opportunity; and environmental, health, human resources, property and transport considerations.

**4. Key Decision**

No

**5. Is it required that call-in be waived for any decision on this report?**

No

**6. Officer's Recommendation**

That the Cabinet Member notes the findings of the Annual Compliments and Complaints Report for 2014/15.

That the report is now referred to the Standards Committee for consideration.

**Joy Hollister  
Strategic Director – Adult Care**



## **Derbyshire County Council**

### **ADULT CARE COMPLIMENTS AND COMPLAINTS ANNUAL REPORT**

**APRIL 2014 TO MARCH 2015**

#### **INTRODUCTION**

This report provides information about compliments and complaints received during the 12 months from 1 April 2014 to 31 March 2015.

For complaints, Derbyshire County Council Adult Care has a duty to meet the requirements of:

- The Care Act 2014
- Local Authority Social Services Complaints (England) Regulations, 2009
- Local Authority Social Services Complaints (England) (Amendment) Regulations, 2009
- DCC Corporate Complaints Procedure

Adult Care actively encourages feedback, both positive and negative, to allow us to continually improve the services we provide. We recognise that negative feedback does not necessarily equate to poor practice or blame.

Clients or their carers should not feel that providing honest feedback will have a negative impact on their support. Instead we will use it to accept responsibility where that is appropriate and learn from our mistakes. In addition to accessing the formal complaints procedure, people are supported to raise any issues at the time of their review. The Adult Care department's approach is non-bureaucratic, with an initial focus on supporting local staff to resolve issues quickly and flexibly. The process emphasises the need to agree a plan with the complainant of how their concerns will be looked into, how long it will take and what outcomes are reasonable to expect.

Adult Care complaints include those which, according to the NHS and Social Care regulations, relate to Social Care within the meaning of Part 1 of the Health and Social Care Act 2008.

Complaints handled within the Corporate Complaints process relate to those which fall outside of this remit, for example Blue Badge enquiries which are handled in Adult Care, but do not fall within this definition.

This report **format** was co-produced with the Derbyshire Stakeholder Engagement Board in 2013. We wish to thank them for their support. The actual **content** of the report, however, is solely that of Adult Care.

## **CONTEXT – THE WORK OF ADULT CARE**

Between 1 April 2014 and 31 March 2015, a total of 30,276 referrals were received in Adult Care. This figure includes those referrals where the universal offer and signposting rather than a full assessment were identified as the appropriate response. During this period 12,890 clients received a service to help them live in the community following an assessment.

The majority of Adult Care feedback relates to Fieldwork and Direct Care as they are the services which have the most frequent and prolonged contact with clients.

Fieldwork services undertook 6,885 assessments. A total of 15,885 reviews have been completed by a combination of Call Derbyshire (reviews of support for people receiving a single low-level service e.g. laundry or frozen meals), Fieldwork services (Support Plan Reviews) and Direct Care services (Personal Service Plan reviews).

Within Direct Care 5,321 clients received a home care service, 1,526 received day care and 1,740 received care in a council-run establishment.

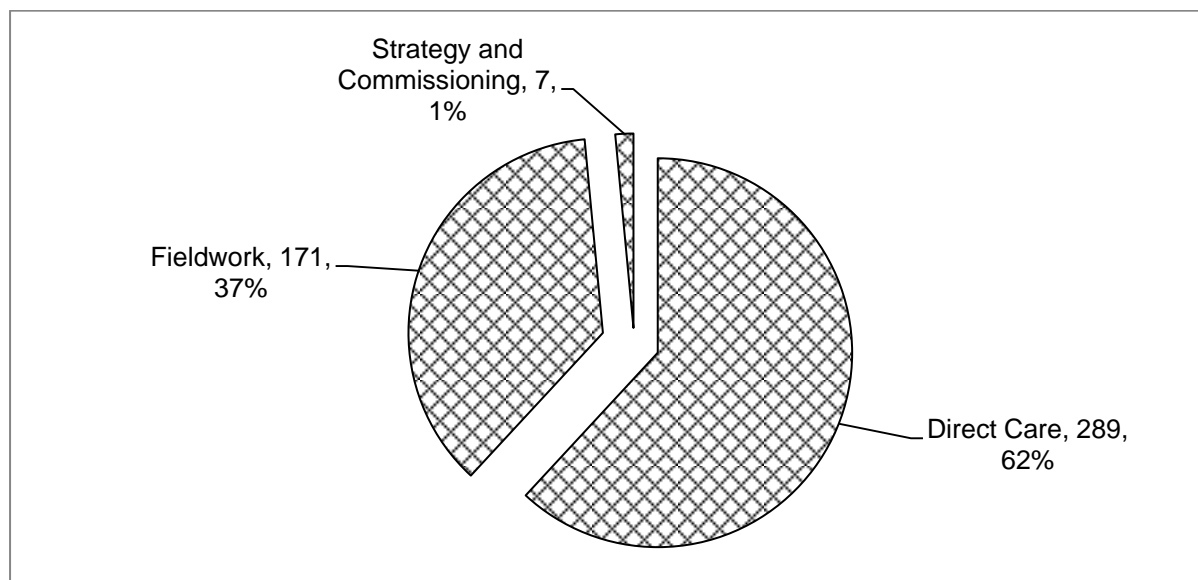
On behalf of our clients, Adult Care commissions a number of services from independent agencies. These agencies have their own complaints policies and procedures and there is an expectation that the Service Provider will investigate and respond directly to the complainant. If the complainant remains dissatisfied, then Adult Care processes the complaint within its own Complaints procedures. It is only these cases that are included in our report as 'Independent Provider' statistics.

For information about complaints that have been raised directly with Independent Sector agencies, please visit the Care Quality Commission website at [www.cqc.org.uk](http://www.cqc.org.uk).

## COMPLIMENTS

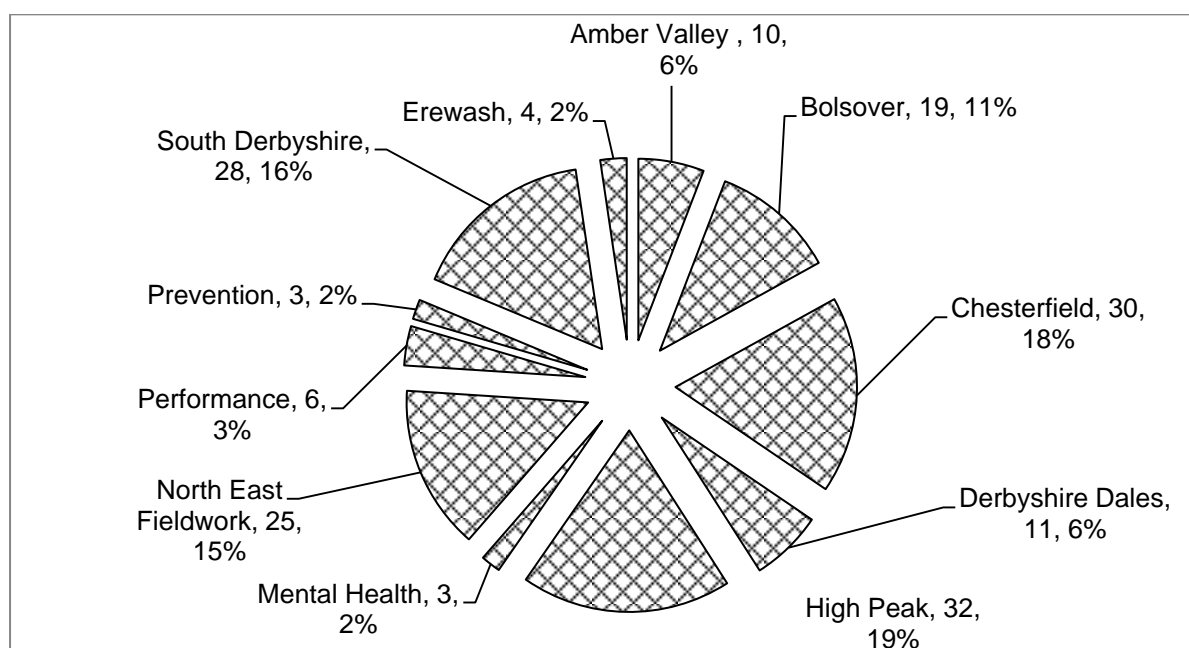
In looking at feedback from clients it is as important to recognise the good work done by our staff as well as the areas in need of improvement. This first part of the report therefore considers compliments received.

**Figure 1 – Compliments Received During 2014/15 by Service Type**

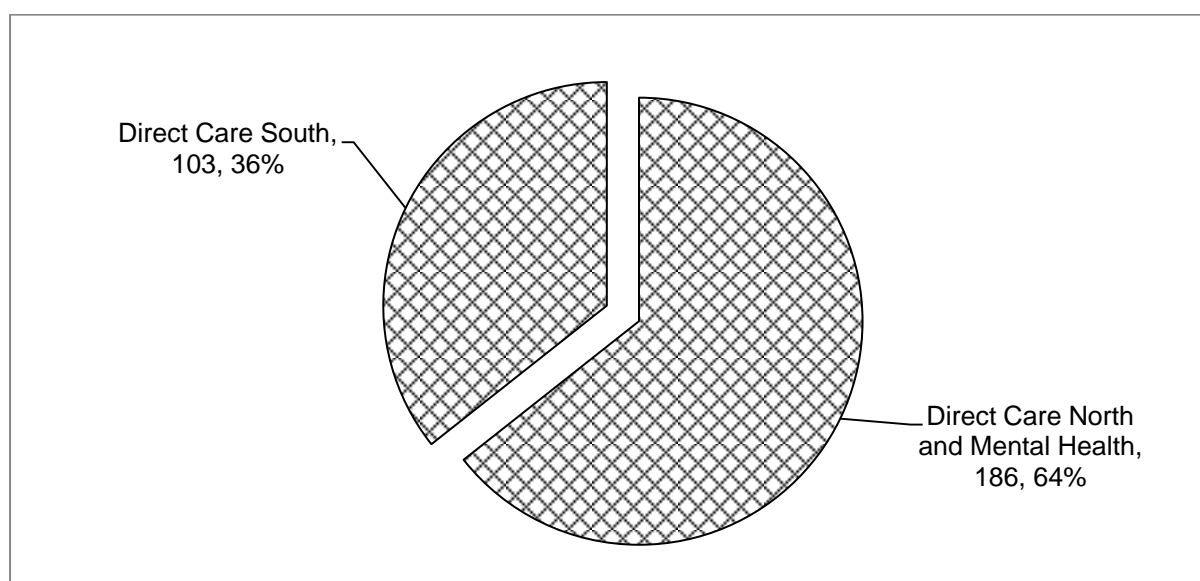


The total number of compliments recorded for this year, at 467, is 5% lower than last year's 491.

**Figure 2 Fieldwork Services – Compliments by Area**



**Figure 3 Direct Care Services – Compliments by Area**



### **Strategy and Commissioning**

Six compliments were received by the Contracting and Compliance Team, and one by the Commissioning Team.

### **What Sorts of Compliments Do We Receive?**

Some examples of compliments we have received in Adult Care within the last 12 months are:

“Each time I visit, the staff are courteous and welcoming. Often I take friends with me and we all agree when the time comes for us to need care we would like to stay there” (*Direct Care Residential Care*)

“All our worries and doubts were dispelled by the high standard of care and support received.” (*Direct Care Home Care*)

“Words cannot express how thrilled we are with shower/wet room. We would not have had this done without your professional, compassionate and thorough intervention.” (*Occupational Therapy*)

“I received an excellent service from your welfare benefits team recently. I was impressed by the worker’s knowledge of the benefits system. I truly feel that he is a credit to your team and DCC.” (*Welfare Rights Team*)

“A lady called to thank me personally for helping her find a new provider, she was over the moon with the service” (*Fieldwork Team*)

“Thanks to the carers and the Reablement Team for their ongoing support.” (*Reablement Team*)

## COMPLAINTS AND SERVICE ENQUIRIES

Definitions of complaints and service enquiries can be found in Appendix 1.

**Figure 4 Historical Levels of Complaints and Service Enquiries**

|                                       | 2010/11 | 2011/12 | 2012/13 | 2013/14 | 2014/15    |
|---------------------------------------|---------|---------|---------|---------|------------|
| Service Enquiries/<br>Representations | 82      | 105     | 82      | 159     | <b>309</b> |
| Complaints                            | 316     | 350     | 334     | 238     | <b>260</b> |

The increase in the number of service enquiries and representations can be attributed to better recording through the implementation of the Members Casework System.

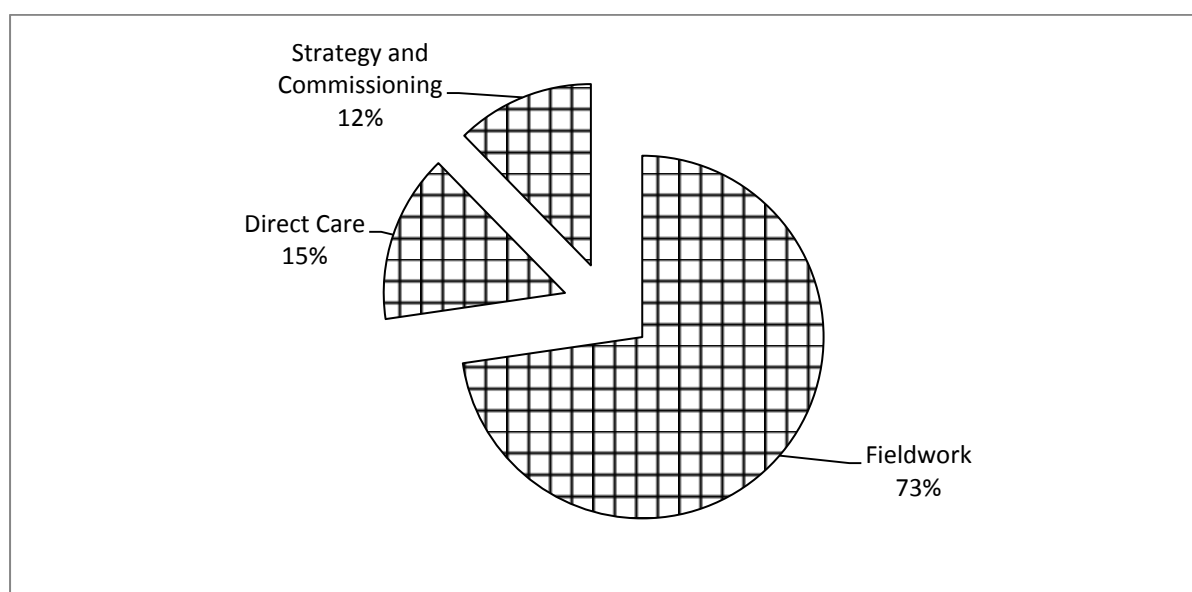
## COMPLAINTS

This year sees an increase in the number of complaints received about Adult Care services from 238 in 2013/14 to 260. Figure 5 shows the breakdown of complaints received about Fieldwork services, Direct Care and other services. The increase in complaints is matched closely by a decrease in service enquiries and representations which allows for matters to be resolved to the client's satisfaction without recourse to a complaint. A service enquiry/representation is defined as a 'request for a change or adjustment to a service or for information on how a decision has been reached.' There can be a fine line between what is defined as a complaint and what is defined as a service enquiry/representation in some cases.

For the purposes of comparison the changes in the number of complaints between Adult Care divisions year on year is as follows:

|   | 13/14 | 14/15 |
|---|-------|-------|
| <b>Direct Care</b>                                    | 56    | 39    |
| <b>Fieldwork</b>                                      | 169   | 189   |
| <b>Strategy and Commissioning (including Finance)</b> | 13    | 32    |

**Figure 5 Fieldwork and Direct Care Comparison**



In 2013/14, complaints were distributed differently across the sections. Whilst Fieldwork services have seen an increase from 69%, Strategy & Commissioning (principally Finance) previously made up only 5% of the complaints received that year.

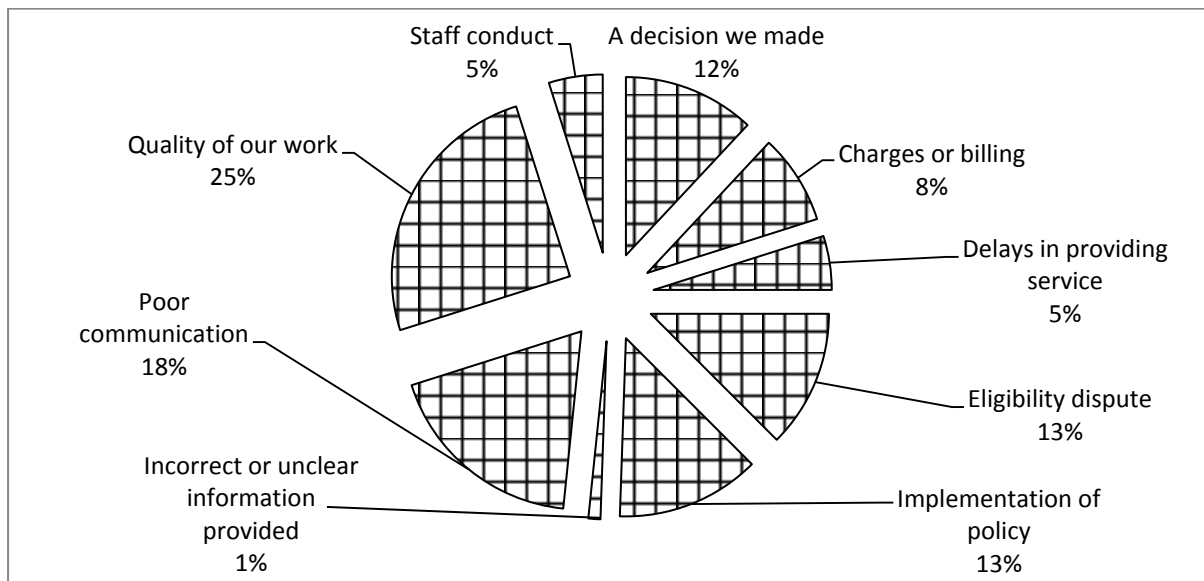
### **Complaints Categories**

The complaints categories we use are:

- **A decision we made** e.g. Admission to care home, who to involve in a review
- **Charges or billing** e.g. The billing process of a residential client or 3<sup>rd</sup> party contributions, Co-funding etc. (mainly Finance, not Fieldwork)
- **Delays in providing service** e.g. waiting for assessment start of services etc.
- **Eligibility dispute** e.g. Low level reviews, FACS criteria
- **Communication** e.g. Lack of communication between staff and client, staff and colleagues, staff and other agencies
- **Quality of our work** e.g. If not satisfied with a worker, home care service, processes, facilities etc.
- **Staff conduct** e.g. Allegations against a member of staff, specific actions/behaviour that have caused concern
- **Implementation of policy** e.g. Disagreement with policy or how it has affected the client e.g. Equipment maintenance, Co-funding
- **Incorrect or unclear information provided** e.g. Support plan content, information provided to the public – leaflets, website etc.
- **Discrimination** e.g. relating to race, gender, sexuality, age, disability etc.

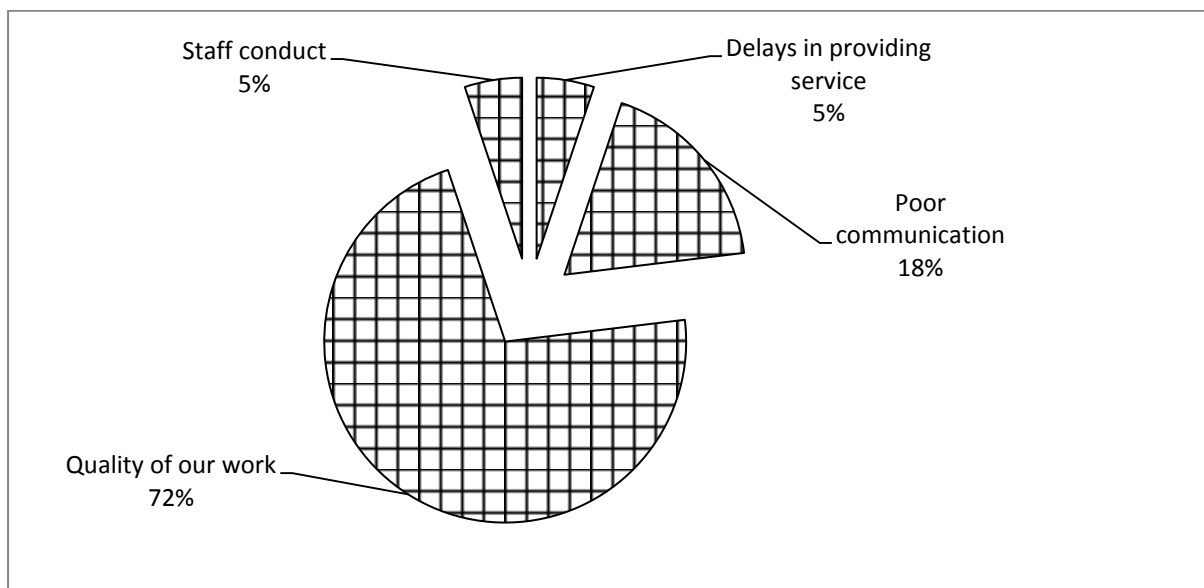


**Figure 6 Nature of Complaints Concerning Fieldwork Services**

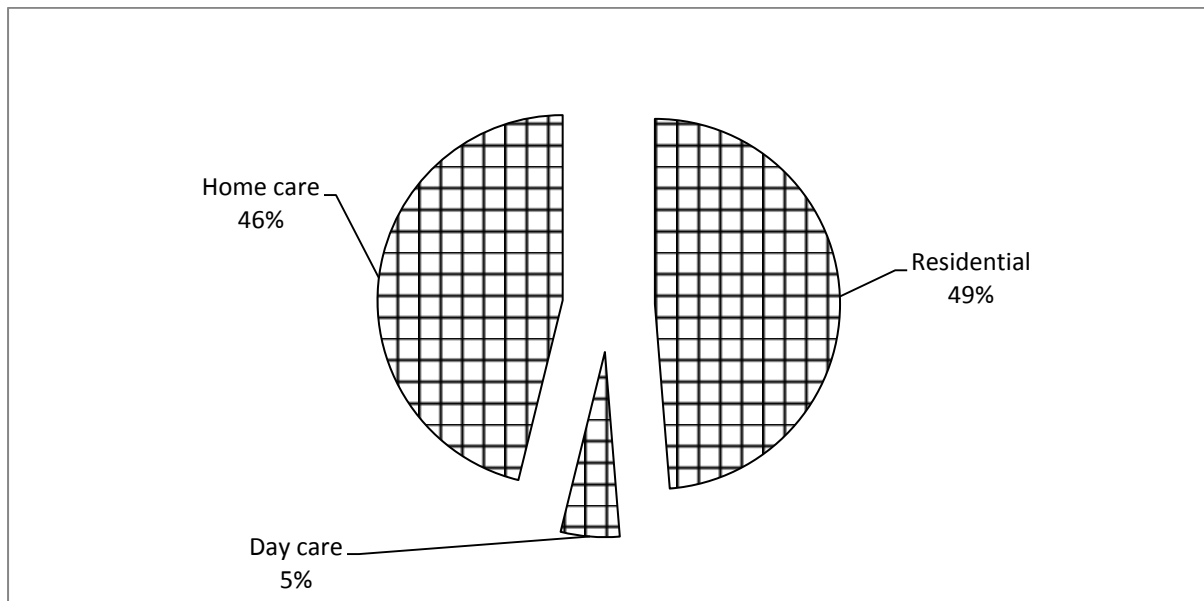


In terms of Direct Care services, the majority of complaints, as in 2013/14, relate to the quality of our work, as indicated in figure 7 below. This category encompasses home care, residential and day care.

**Figure 7 Nature of Complaints Concerning Direct Care Services**

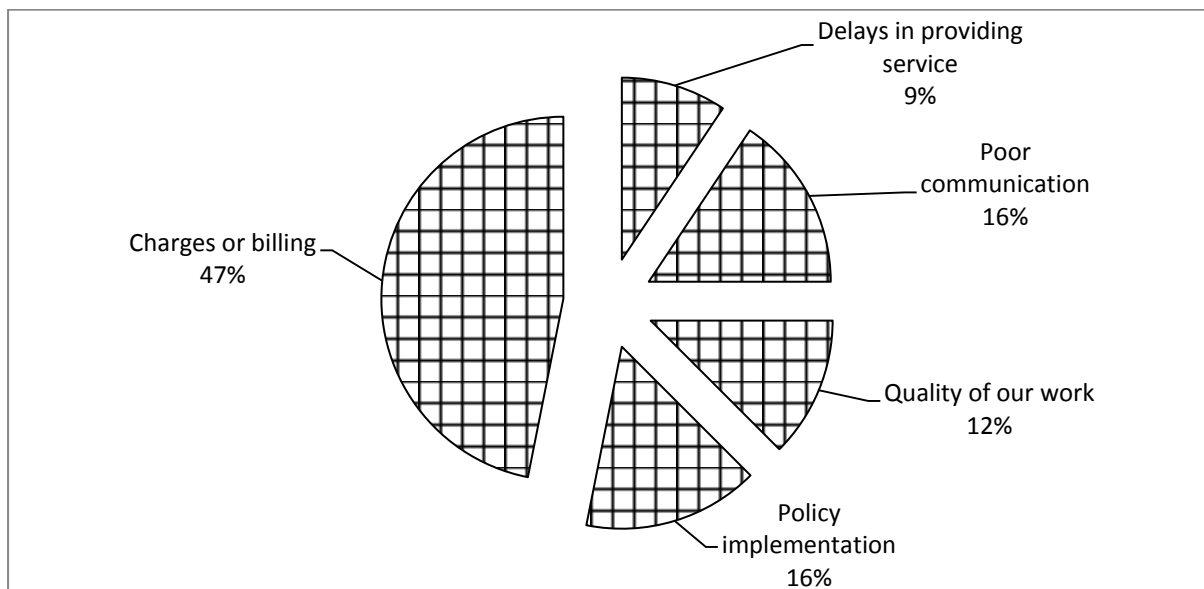


**Figure 8 Breakdown of Direct Care Complaints by Service**



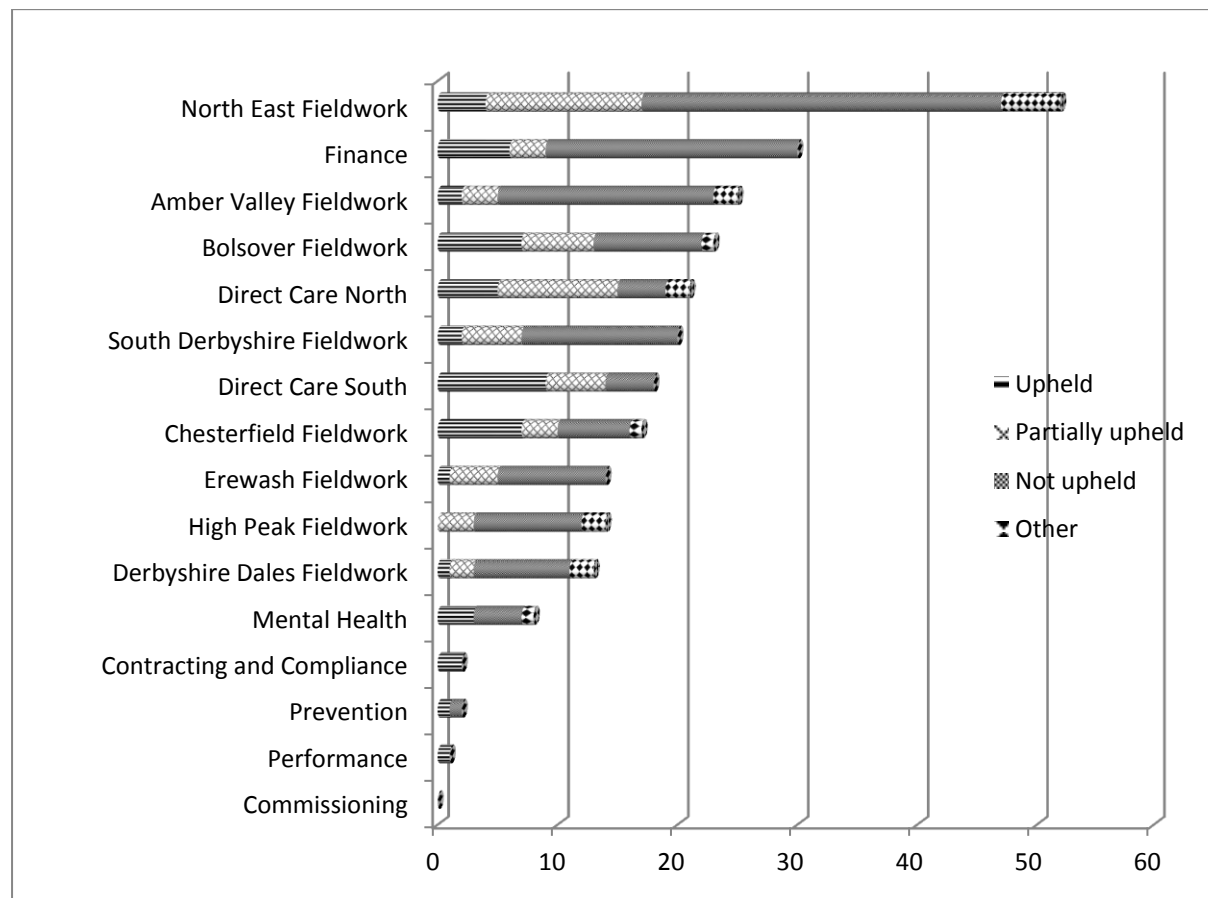
The Direct Care Quality and Compliance Group meet regularly to look at quality assuring Direct Care services. This includes a review of more serious individual complaints/serious case reviews and how best to share learning.

**Figure 9 Nature of Complaints Concerning Strategy and Commissioning Services**



## What Services have People Complained About?

**Figure 10 Responsibility Centres and Complaint Outcomes**



\* NB 'Other' includes matters dealt with under safeguarding procedures, or complaints which were withdrawn, unsubstantiated, or which have not yet been responded to.

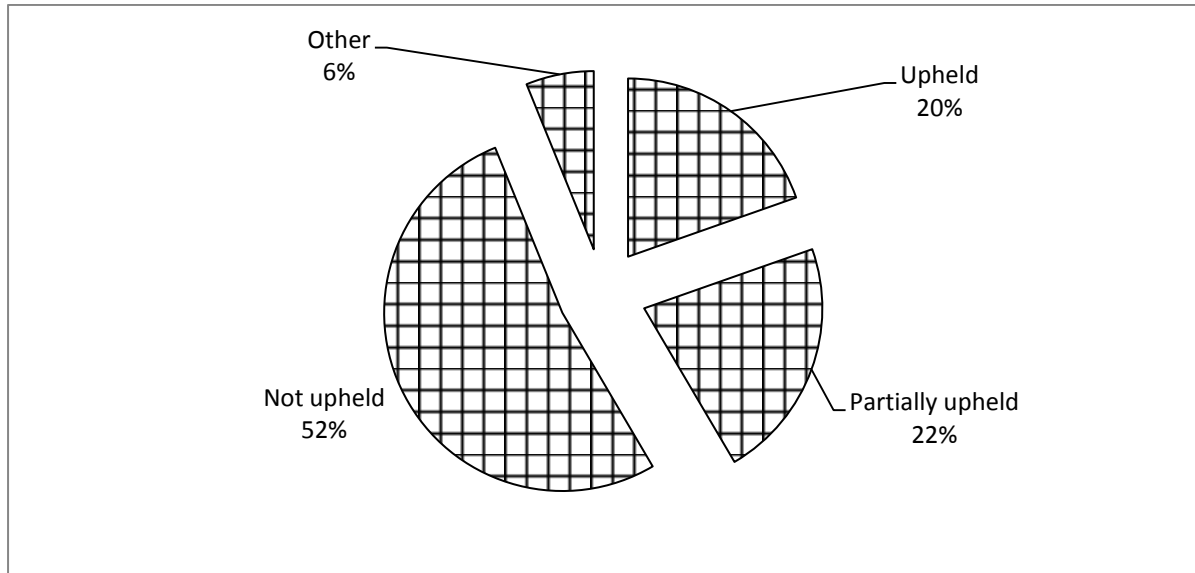
Some locality managers are responsible not just for fieldwork practice in their own area, but also for countywide services. As a result it is not possible from these graphs to draw conclusions on the relative levels of complaints about fieldwork staff based in geographical areas. Bolsover Fieldwork complaints include six which related to Hospital Discharge teams and their work across the county. The total for North East Derbyshire Fieldwork is significantly higher because it includes complaints about the countywide services for Community Lives (five) and Deaf Services (one) as well as changes to services provided at two Supported Living schemes (15).

## Complaint Outcomes

It is recognised that some people are fearful of complaining and others are mistrusting of public organisations' willingness to look into complaints in an unbiased manner. Figure 11 below shows that whilst 52% of complaints were not upheld, 42% were either fully or partially upheld, showing an

openness to admit mistakes and learn from them. Some examples of how we have improved our services as a result of a complaint are provided later in the report.

**Figure 11 Complaint Outcome – Percentages**



\* NB 'Other' refers to matters best dealt with under safeguarding procedures, or complaints which were withdrawn, unsubstantiated, or which have not yet been responded to.

Details by complaint theme are broken down further in Figure 12 below and, as last year, reflect a high proportion of complaints relating to the quality of our work and communication issues.

**Figure 12 Table Detailing Outcomes by Complaint Theme**

| Subject of complaint                             | Outcome |                  |            |        | Total |
|--|---------|------------------|------------|--------|-------|
|  | Upheld  | Partially Upheld | Not Upheld | *Other |       |
| <b>Quality of our work</b>                       | 18      | 20               | 35         | 5      | 78    |
| <b>Communication</b>                             | 10      | 13               | 22         | 1      | 46    |
| <b>Eligibility dispute</b>                       | 2       | 3                | 14         | 4      | 23    |
| <b>Staff conduct</b>                             | 3       | 3                | 5          | 0      | 11    |
| <b>Delays in providing service</b>               | 8       | 4                | 7          | 0      | 19    |
| <b>Charges and billing</b>                       | 8       | 1                | 21         | 0      | 30    |
| <b>Implementation of policy</b>                  | 0       | 10               | 16         | 3      | 29    |
| <b>A decision we made</b>                        | 1       | 3                | 16         | 2      | 22    |
| <b>Incorrect or Unclear information provided</b> | 1       | 0                | 1          | 0      | 2     |
| <b>Discrimination</b>                            | 0       | 0                | 0          | 0      | 0     |
| <b>Total</b>                                     | 51      | 57               | 137        | 15     | 260   |

\* NB 'Other' refers to matters best dealt with under safeguarding procedures, or complaints which were anonymous, withdrawn, unsubstantiated, or which have not yet been responded to.

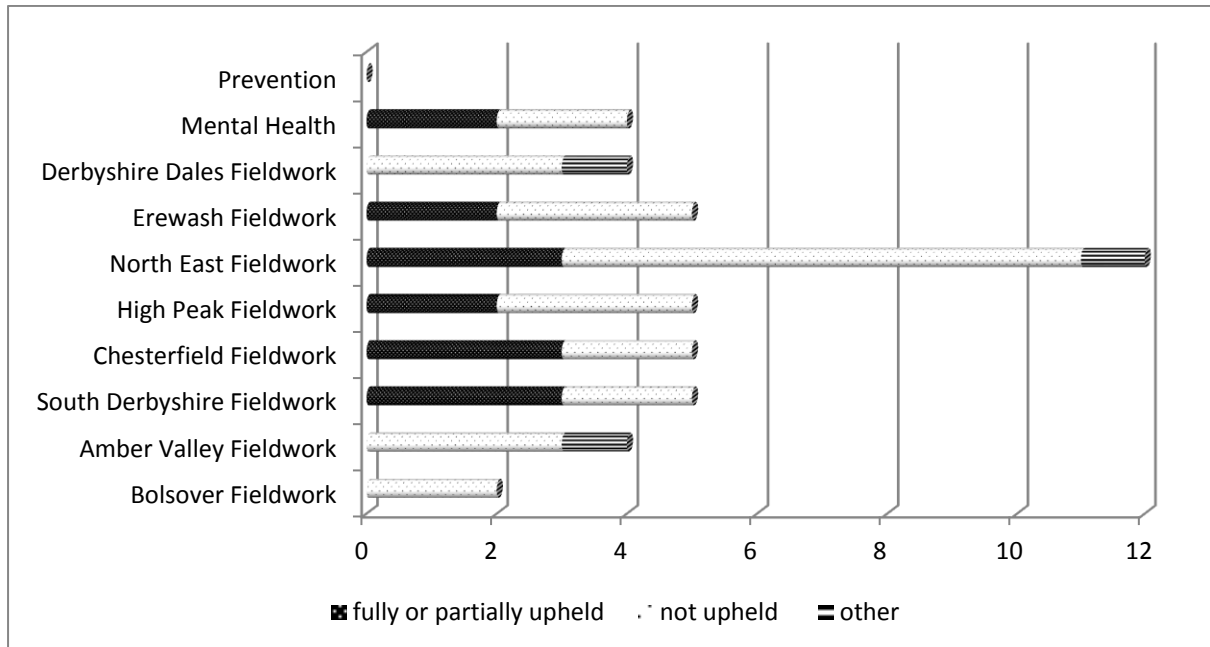
### **Quality of Work Issues**

The highest number of complaints received was on this topic. This category is a broad heading which covers issues such as: a worker not attending or being late to meetings, a perceived lack of care provided by our homecare or residential staff, the quality of the physical standards in our facilities or units. As such, a high number of complaints in this category are perhaps to be expected.

Fieldwork services generated 46 of these complaints, Direct Care generated 28 and Strategy and Commissioning generated four.

38 complaints of this kind were partially upheld or upheld whilst 35 were not upheld. The figures below show the breakdown complaint outcomes for this category.

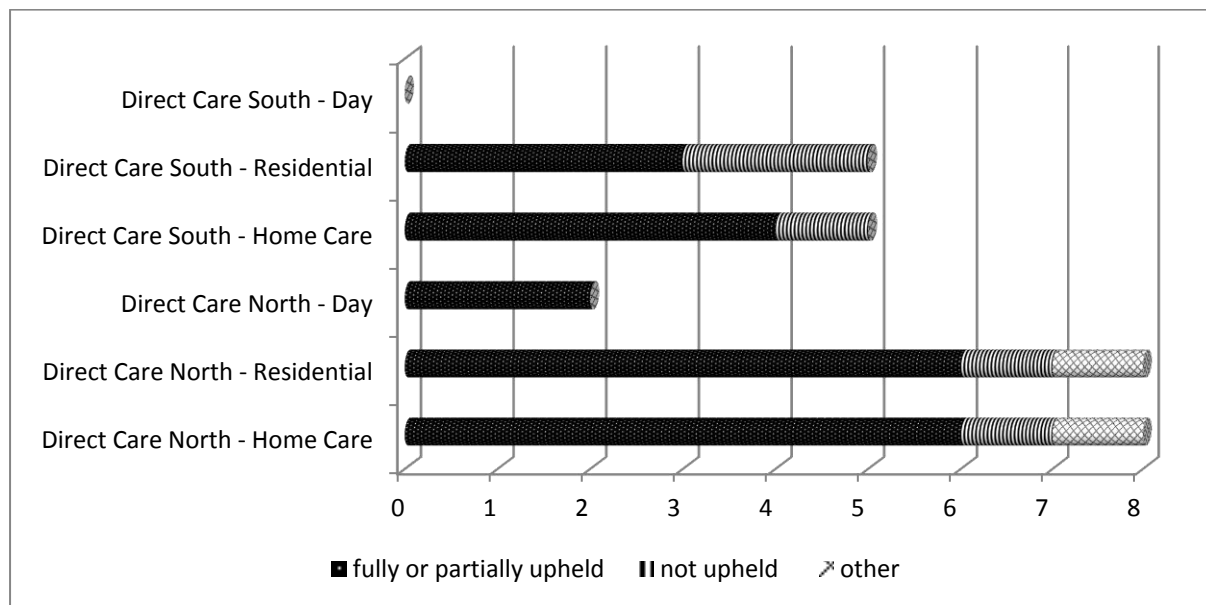
**Figure 13 Breakdown of Quality of Work Complaints by Fieldwork Team**



\*NB 'Other' relates to those complaints which were not yet responded to, withdrawn or unsubstantiated.

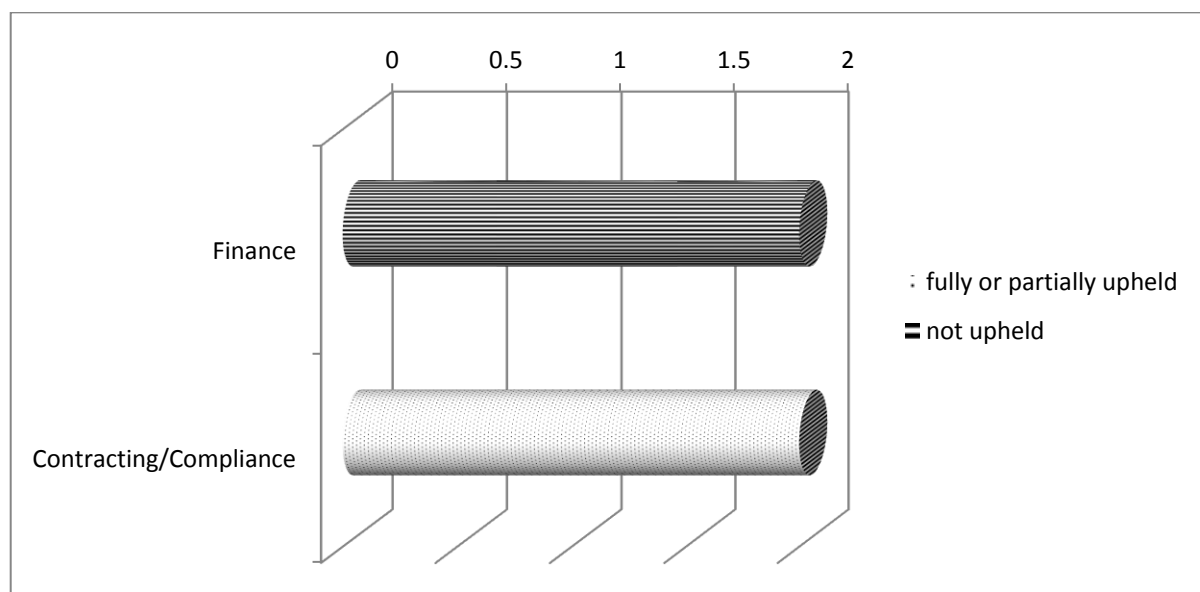
North East Derbyshire Fieldwork includes five Community Lives complaints, none of which were upheld

**Figure 14 Breakdown of Quality of Work Complaints by Direct Care Team**



\*NB other relates to those complaints which were not yet responded to, withdrawn or unsubstantiated.

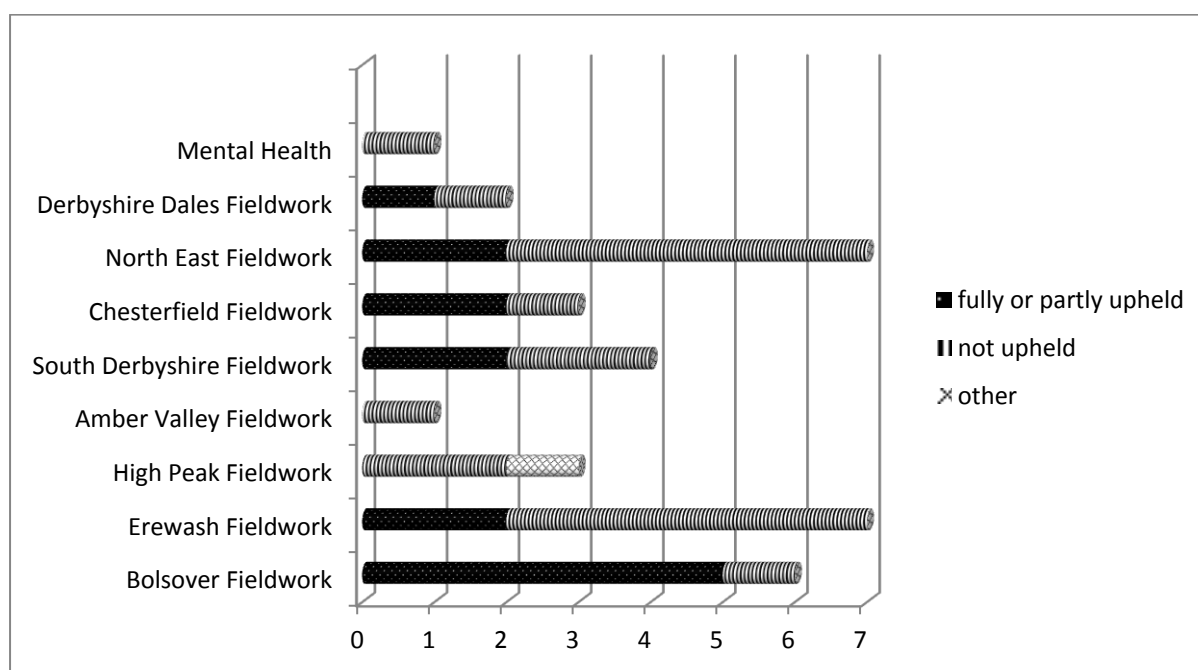
**Figure 15 Breakdown of Quality of Work Complaints by Strategy and Commissioning Team**



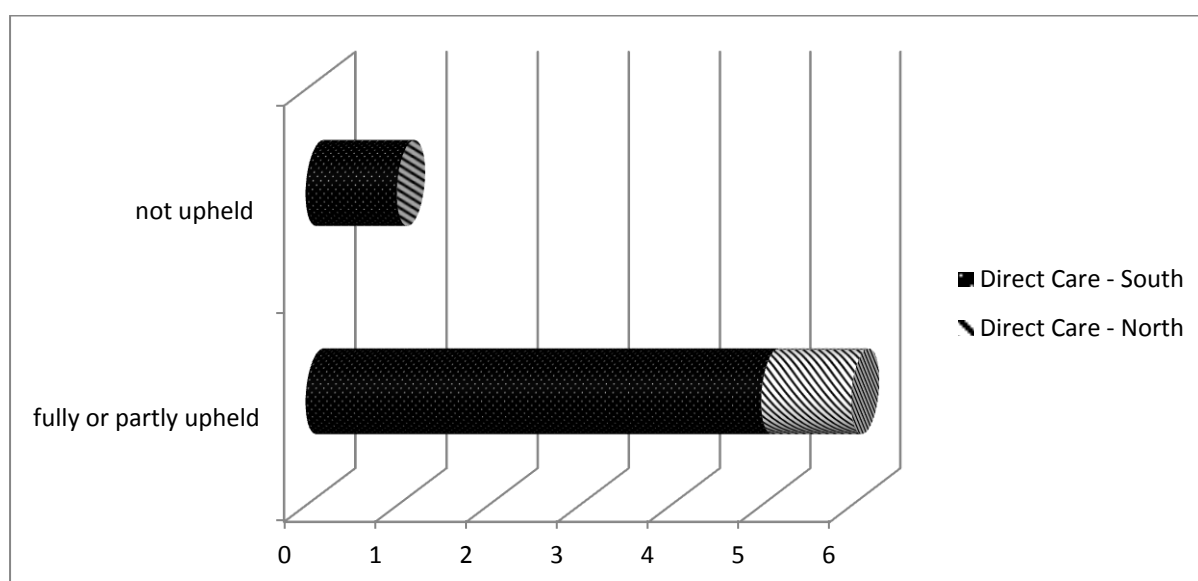
## Communication Issues

The second highest number of complaints received was on this topic. Of the 46 complaints about communication, 23 were partially or fully upheld. Fieldwork services generated 26 of these complaints, with Direct Care generating seven. Three of the five received by the Finance team were upheld or partly upheld.

**Figure 16 Breakdown of Communication Complaints by Fieldwork Team**



**Figure 17 Breakdown of communication complaints by Direct Care team**



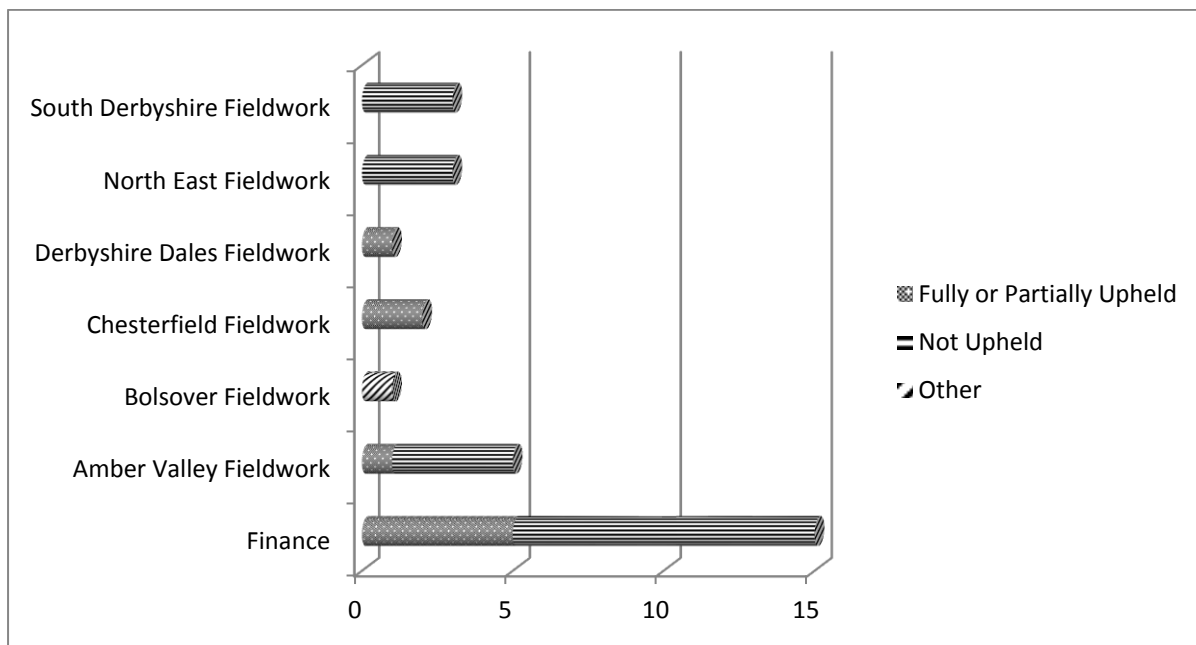
Within Strategy and Commissioning, three of the five complaints in Finance on this theme were upheld. No complaints were received about Communication in Contracting and Compliance.

## Charges and Billing

For the first time charges and billing have figured highly. Figure 18 below shows the spread across teams. Of all 30 charging and billing complaints received, finance activities represent 50% and of these five were upheld.



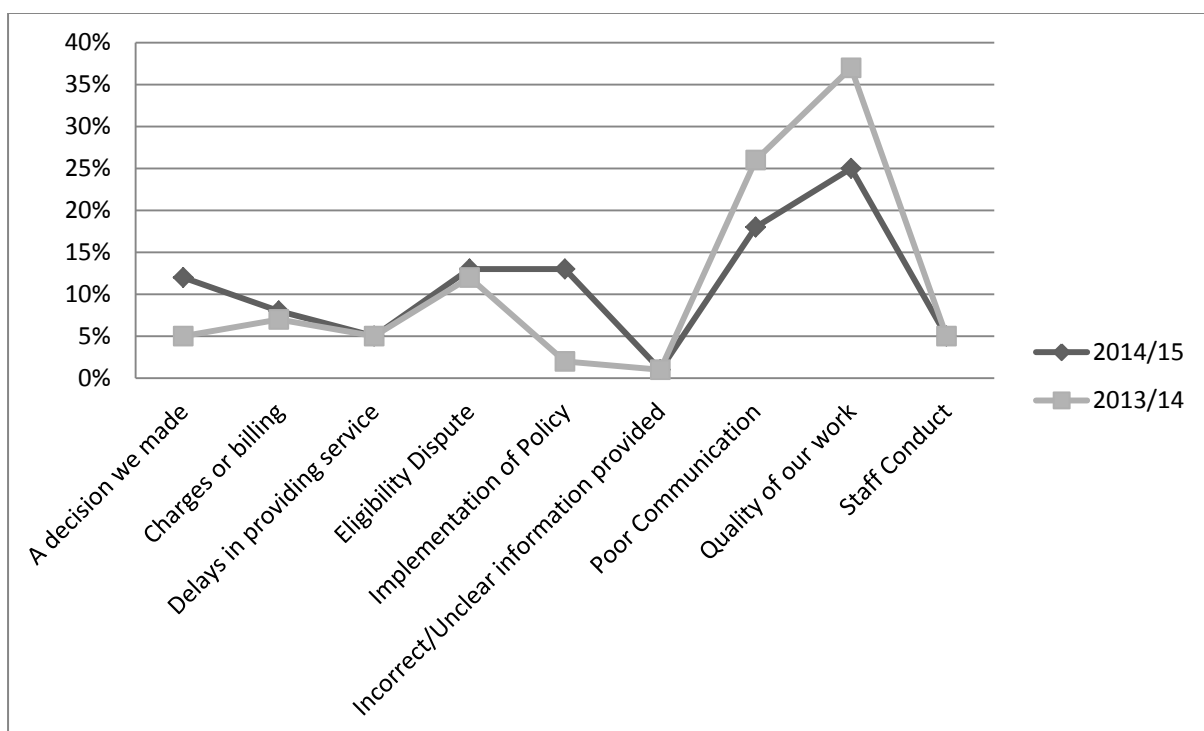
**Figure 18 Breakdown of Charges and Billing Complaints by Team**



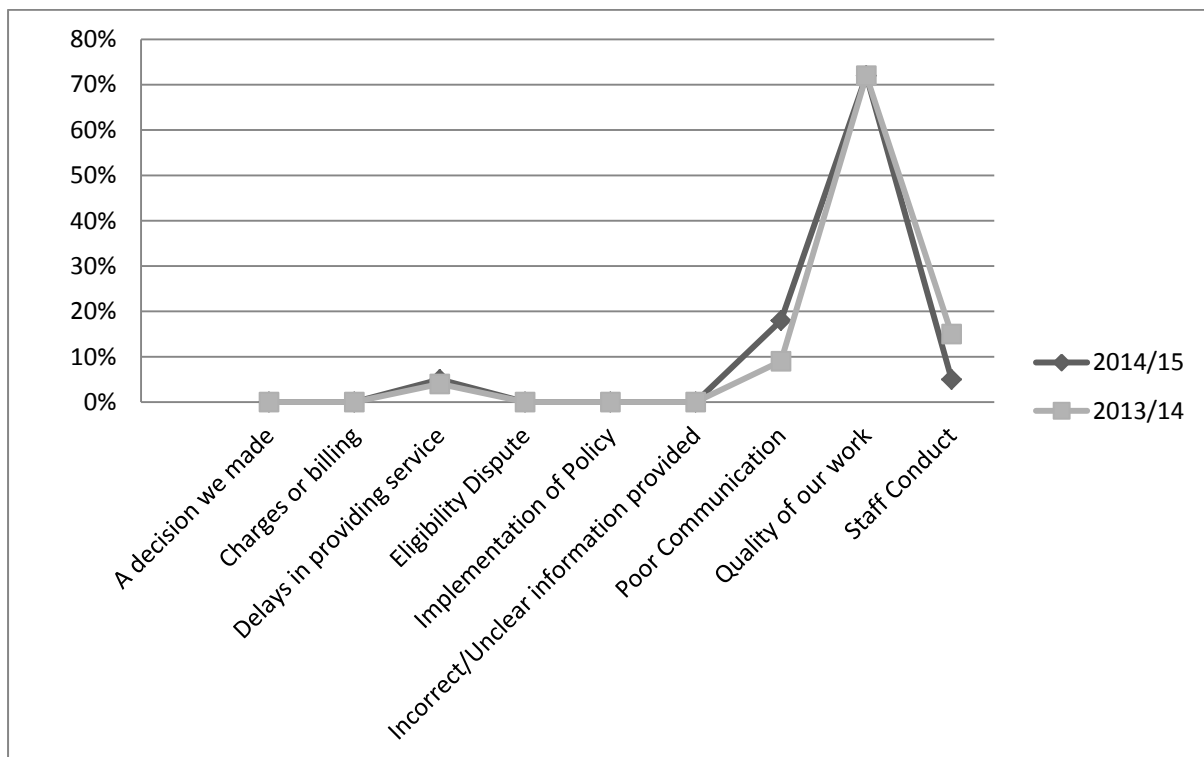
## Complaints Trends

At the start of 2013/14 new definitions were adopted for recording the types of complaints Adult Care receive. As a result it is only possible to show trends in the types of complaints received over the last two years.

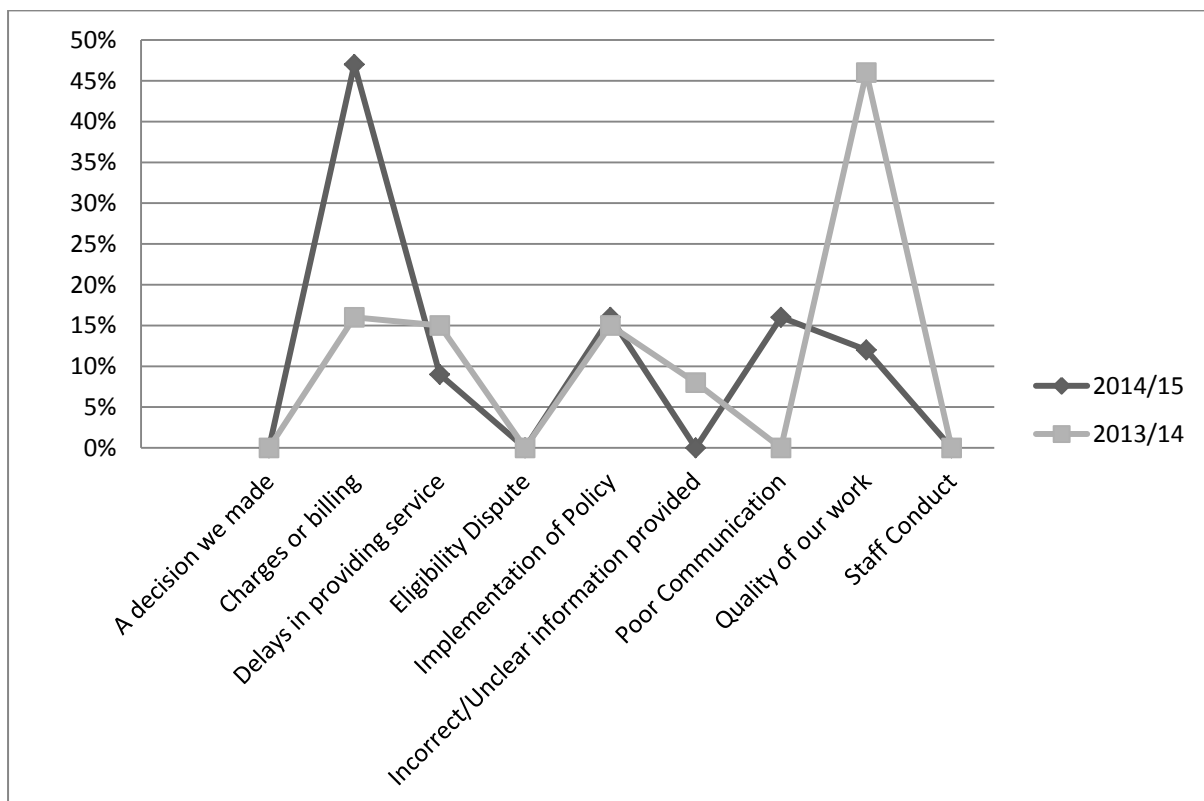
**Figure 19 Fieldwork Complaint Trends**



**Figure 20 Direct Care Complaint Trends**

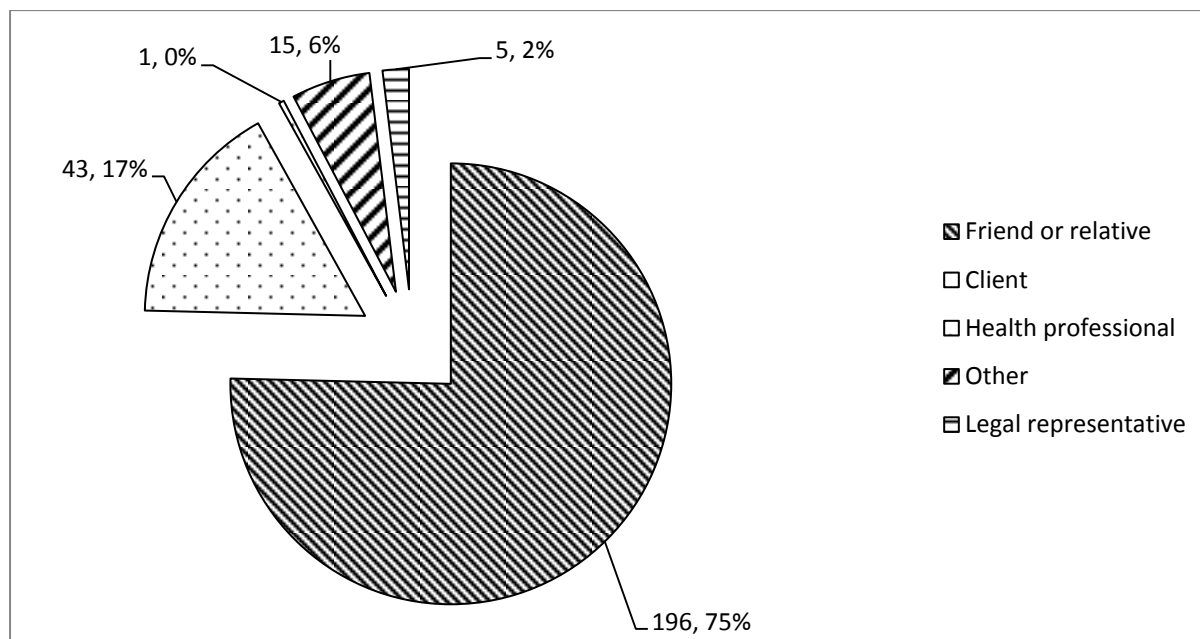


**Figure 21 Strategy & Commissioning Complaint Trends (Including Finance)**



## Analysis of Complainants

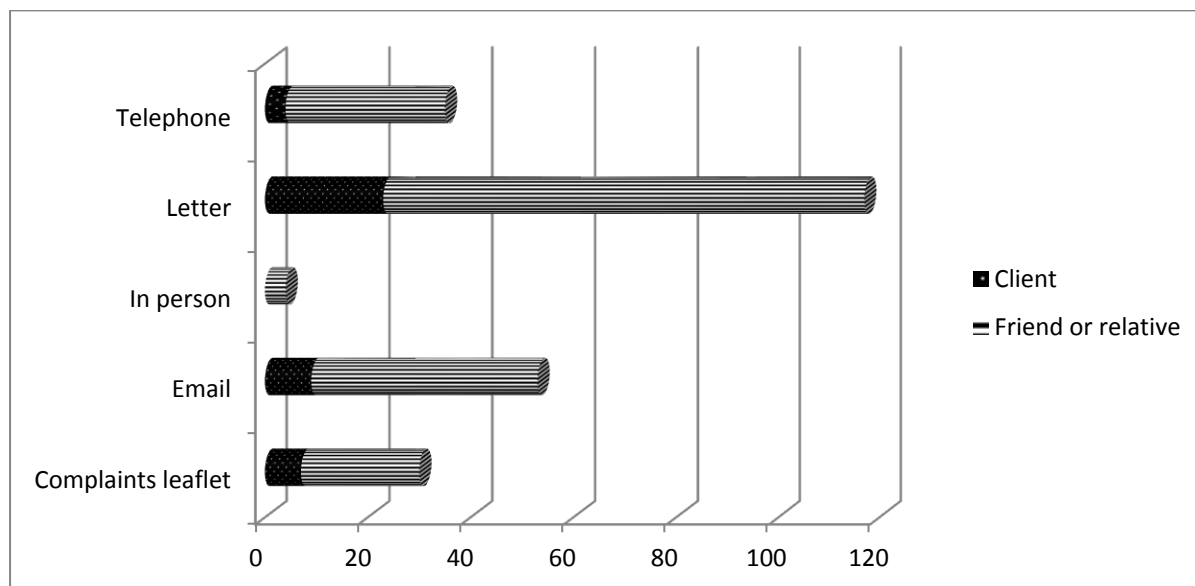
**Figure 22 Who has Complained?**



The overwhelming majority of complaints continue to be from friends and relatives of clients. It is disappointing to see that the number of clients complaining for themselves has decreased to the level of previous years as a percentage of complainants from 23% last year to 17% this year.

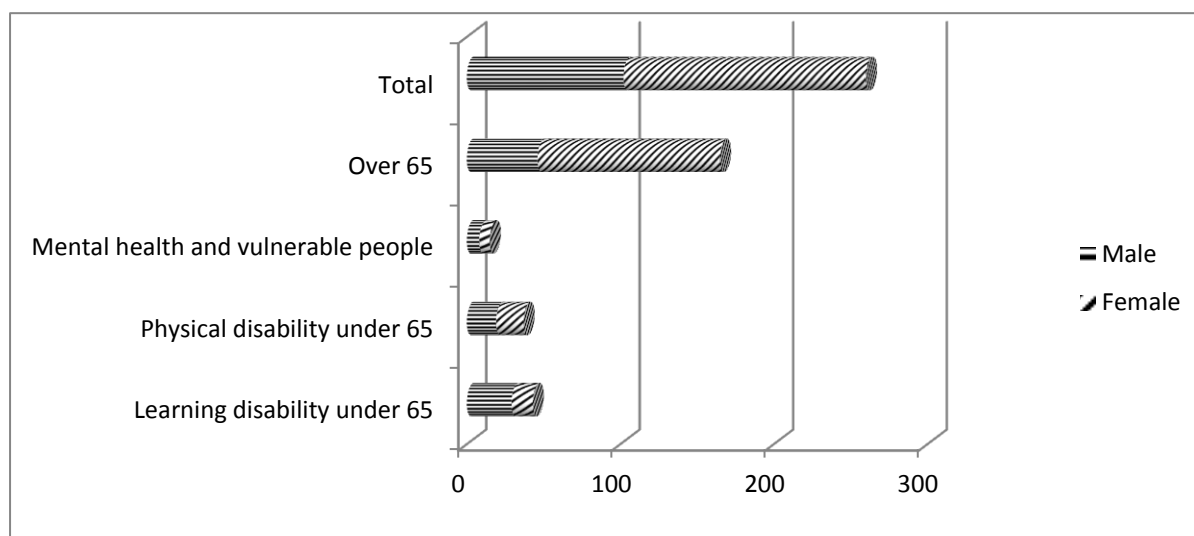
As can be seen from figure 20 below, written complaints continue to be the preferred method of contact for clients and relatives, with more letters being sent than the corporate complaints leaflet. Only three complaints were made in person this year compared with six last year.

**Figure 23 How Clients and Friends or Relatives have Complained**



## Equalities – Statistics and Analysis

**Figure 24 Clients – Age, Gender and Disability**



\*Please note that some Clients have more than one Primary Support Reason.

**Figure 25 Equalities Information – Analysis**

| Protected Characteristic Group | Findings   |
|--------------------------------|--|
| Ethnicity                      | One client identified as being of mixed or multiple ethnicities, one has not stated and four are unknown. The remainder of clients are white. The number of non-white British clients as a percentage of Adult Care clients is 5.1%.   |
| Age                            | 165 complaints related to clients known to be over the age of 65 years. Given the volume of services provided to this age group this is to be expected.  |
| Gender                         | 158 women and 102 men complained in total. The proportion of women receiving services in older age is greater than men in that group and so the higher level of complaints in this age group is not significant.   |
| Disability                     | Services are provided to people with all types of disability or age-related conditions. 43 complaints were related to clients with a learning disability, 15 were about Mental Health services and 37 from people under the age of 65 with a physical disability.<br>The increase in complaints from people with a learning disability (just 28 last year) is mainly due to the changes in day opportunities support in 2013/14. |

|                     |   |
|---------------------|---|
| Sexual orientation  | Again, there have been no complaints explicitly related to discrimination or any with reference to people's sexual orientation; as such it must be assumed that this is not an area of significance.  |
| Religion and belief | 86 of the clients who had complaints raised regarding their care were Christian, 21 have no religion, three stated their religion as 'other' and the remaining 150 have either not stated or their religion is unknown. There is no suggestion that any of the complaints have arisen because of discrimination on the grounds of religion. |

## **Acknowledgement and Response Times**

This year the department has achieved an improved 91% (from 87% in 2013/14) success rate in acknowledging complaints within the regulatory three working days of receipt. However it remains 10% lower than the most successful year of 97% in 2012/13, so further improvements are required.

Our departmental performance target is to respond to complaints within ten working days of this acknowledgement being sent. However, in some cases, a detailed investigation into the matter or liaison with other agencies will be necessary. In these cases, a 20 day timescale will be given at the time of acknowledgment. Over the past year we have encouraged investigating officers to provide a more honest and realistic timescale at the time of acknowledgement, to manage our complainants' expectations.

Of the 258 complaints that were responded to, 211 were given an expected timescale of ten working days. 106 of these (50%) were responded to within the ten days. 47 were given an expected timescale of 20 days. 30 (64%) were responded to within the 20 days. Overall, 136 complaints (53%) were responded to within the timescale given at the time of acknowledgment. This is 15% lower than last year's figure of 68% and reflects a big drop against the standard of 80% being responded to within the agreed timescale.

The delays in response can in part be attributed to reductions in leadership capacity in Adult Care as it makes cuts to reduce expenditure to meet targets. Complaints also increasingly involve the need to seek views or gain documentation from providers or other statutory agencies involved in individual cases. On occasions this has resulted in the response to the complaint being delayed until all the facts have been gathered from sources outside Adult Care.

## LEARNING AND IMPROVING

The following table gives some examples where lessons learnt from complaints have led to service improvements:

| Service Area               | Complaint and Outcome   |
|----------------------------|---|
| Direct Care – Residential  | Following a complaint received from a relative about the care and support provided to a resident around nutrition and diet, the practice for recording information about fortified drinks has been standardised. Attempts made by staff to monitor weight, which are refused, as well as actual weight have also been introduced. |
| Finance – Co funding       | A complainant identified a lack of information about financial contributions to care and support on the DCC website aimed at young people at residential colleges. This has since been addressed by improved information and advice in this area.   |
| Occupational Therapy       | The process for adaptations in the Chesterfield area has been reviewed and an unnecessary stage in the procedure has been removed leading to a reduction in delays.   |
| Communication              | A 'Communication passport', developed for people with autism by The National Autistic Society has been introduced to help our staff communicate with people who contact the department with specific communication needs. This is accessible immediately once the client's details are known.                                     |
| DCC Day Care               | Liaison with the local council has meant that more notice is now provided about closures for day services operating in Coal Aston, allowing relatives and carers more time to plan.   |
| Fieldwork                  | A complaint about the lack of support made available to a relative in dealing with an Independent Sector provider complaint has led to the development of guidance on how this should be done.  |
| Contracting and Compliance | Following an LGO investigation relating to a complaint from an independent sector provider, a named individual has been assigned to deal with all requests from people looking to set up provider services and guidance has been circulated within the staff practice bulletin.   |
| Finance                    | Amendments are being made to the way protected income is calculated after a re-evaluation of the Council's interpretation of DH guidance following a complaint from a carer.  |
| All services               | A complaint from a carer was unduly prolonged in reaching resolution through a reliance on written communication between the parties involved. Managers have been reminded of the need to consider a more active role in resolving complaints through meeting the complainant or discussing the complaint by phone.               |

## **LOCAL GOVERNMENT OMBUDSMAN COMPLAINTS AND ENQUIRIES**

Complainants who approach the Local Government Ombudsman (LGO) are asked to raise their complaint with the Council before the LGO will consider it. Once we have investigated the matter following our complaints procedures, if the complainant is not satisfied with our response, the Ombudsman will look into how we handled the complaint and comment on our findings.

Nationally, there was an increase in the number of complaints considered by the LGO, but the number of complaints considered about Adult Care in Derbyshire fell this year.

11 complaints were completed by the LGO during the year.

- The LGO found no fault on the part of the Council in four cases
- The LGO decided not to investigate five cases
- The LGO found fault on the part of the Council in four cases

Six further complaints were considered to be “premature” by the LGO. These were passed to the Council by the LGO for investigation as we had not yet been given the opportunity to do so through our complaints process.

Adult Care is awaiting decisions in seven cases.

The following compensation payments were made as recommended by the LGO:

- £250 was paid to the complainant. The Council did not intervene when the client was denied access to the residential care home where her father, Mr Y, was being looked after. The Council has now apologised and has revised its procedures
- £250 was paid to the complainant. There was also a failure to ensure that Mrs B was consistently given her prescribed medication or fortified drinks to prevent weight loss. The payment was made to acknowledge her time and trouble in bringing this complaint, and a further £500 was paid to a charity of the complainant’s choice, in line with the LGO’s recommendation.
- £900 was paid to the complainant. Council staff gave incorrect advice that the Council had accredited a business as an approved provider before correcting this. The payment was a refund of the costs incurred by the provider due to the inaccurate advice.

For further information regarding the Local Government Ombudsman, please visit [www.lgo.org.uk](http://www.lgo.org.uk)

## **SERVICE ENQUIRIES**

This refers to requests for a change or adjustment to a service or for information on how a decision has been reached. Correspondence from MPs and Elected Members will usually be categorised under this heading unless most appropriately listed as a complaint.

The number of Service Enquiries has significantly increased from 152 last year to 309 this year. The 2014/15 Service Enquiry statistics include enquiries which have been directed to Adult Care via local councillors on behalf of their constituents. Although these enquiries have always been handled, a newly developed Members Casework System has been in place to log, monitor and report on them since November 2013. 180 cases have been logged on the system relating to Adult Care this year. The significant increase can be explained by better recording and increases in constituent contact arising from campaigning in anticipation of the 2015 parliamentary elections.

83 service enquiries were from MPs on behalf of their constituents. This shows a slight decrease from 85 MP enquiries in 2013/14.

## **CORPORATE COMPLAINTS**

Adult Care complaints include those which, according to the NHS and Social Care regulations, relate to Social Care within the meaning of Part 1 of the Health and Social Care Act 2008.

Complaints handled within the Corporate Complaints process relate to those which fall outside of this remit, for example Blue Badge enquiries and the Derbyshire Discretionary Fund, which are handled in Adult Care but do not fall within this definition.

In addition to the complaints described already in this report which have been dealt with under the Adult Care Complaints procedure, a further 35 Corporate Complaints were dealt with, up from 27 the year before. 14 of these were upheld (seven relating to staff conduct). Two were partly upheld (one relating to the quality of our work and one to the implementation of policy).



## ACTION PLAN 2014/15

Every year the department draws up an action plan to make positive changes as a result of learning from complaints. Figure 22 shows progress on the action plan for the period last year (2014/15) is as follows:

**Figure 26 Table Showing Action Plan for 2014/15 and Progress**

| Action  | Target Date and Activity  |
|---|---|
| Review training methods to increase range of options available for raising awareness of effective complaints handling practice                                      | Completed with improvements to case study and overall presentation  |
| Review the joint complaint arrangements with colleagues in other agencies to address the changed structure within the NHS e.g. Clinical Commissioning Groups (CCGs) | A meeting held in May this year has successfully identified a final revision for approval.  |
| Ensure that the Adult Care Complaints Policy and processes are fit for purpose in the context of the Care Act   | Draft guidance has been subject to Department of Health consultation and the final guidance will not be available until October 2015 – defer to 2015/16 plan. |
| Improve acknowledgement times   | Review guidance for colleagues on how to identify complaints and responsible services – this needs still further work – defer to 2015/16 plan.                |
| Improve recording of equality information for Adult Care clients  | Work jointly with Call Derbyshire and operational colleagues to improve the recording of vital equality information – completed.                              |
| Improve the process for identifying learning and improvements made  | This is now part of routine monthly monitoring by the Service Manager for Performance.  |
| Promote the importance of communication, which continues to be a major ground for complaints  | Publicity campaign on the values of good customer services throughout the year. This was led by the Service Manager for the Information Team                  |
| Improve speed of response   | Achieve target of 80% of complaints being answered within the timescale set out – not achieved – this requires further work in 2015/16                        |

## LOOKING FORWARD

### Action plan 2015/16

**Figure 27 Action Plan 2015/16**

| <b>Action</b>   | <b>Target Date and Activity</b> | <b>Responsible Officer</b>   |
|---|---------------------------------|--|
| Ensure that the Complaints policy, processes and reporting are compliant with the proposed Appeals System, should it remain in the final guidance being prepared by the Department of Health as part of the implementation of the second stage of the 2014 Care Act | March 2016                      | Complaints Manager   |
| Attend Direct Care workshops to highlight and share the learning gained in the LGO's "My Expectations" report on how to make complaints systems more user-friendly  | September 2015                  | Service Manager for Performance  |
| Maintain a high quality Complaints Administration service during changes to personnel   | Ongoing                         | Service Manager for Performance  |
| Review process for determining timescales for response to complaints  | October 2015                    | Service Manager for Performance  |
| Ensure that the Adult Care Complaints Policy and processes are fit for purpose in the context of the Care Act   | October 2015                    | Service Manager for Performance  |
| Improve response times to complaints  | Continued process               | All Managers   |
| Produce monthly data by group manager on compliance with response times   | Continued process               | Service Manager for Performance  |
| Review the internal publicity campaign on the importance of communication, which continues to be a major ground for complaints  | January 2016                    | Service Manager for Performance and Service Manager for the Information team |
| Review the degree to which complaints are reported against individual elements of a service   | August 2015                     | Complaints Manager   |

## APPENDIX ONE

***Complaint:*** An expression of dissatisfaction by a client or their representative.

***Service enquiry / representation:*** A request for clarification, change or adjustment to a service. Not necessarily an expression of dissatisfaction and will usually be dealt with to the satisfaction of the user at the time of the request. Service enquiries may progress to complaints if not dealt with to the satisfaction of the client, and are usually brought to us by MPs and Elected Members.

***Derbyshire County Council Corporate Complaints Procedure:*** These are complaints which are outside the legal scope of the NHS and Community Care Act.

For further definitions and information regarding our Complaints Procedure, please right click and open the link: [DCC Adult Care Complaints](#).