

**DERBYSHIRE COUNTY COUNCIL**

**CABINET MEMBER**

**7<sup>th</sup> August 2013**

**REPORT OF THE STRATEGIC DIRECTOR - ADULT CARE**

**ANNUAL COMPLIMENTS AND COMPLAINTS REPORT 2012-13**

**ADULT CARE**

**1. Purpose of the Report**

To present to the Cabinet Member for Adult Social Care the annual compliments and complaints report for 2012-13.

**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.

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 2012-13 and what is proposed within the action plan for 2013-14.

The format of this year's annual report has been revised with assistance of the Stakeholder Board, made up of clients who provide invaluable assistance to Adult Care through their input into aspects of the way Adult Care functions and the literature it produces.

**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/S**

That the Cabinet Member notes the findings of the Annual Compliments and Complaints Report and the proposed action plan and the Stakeholder Board is thanked for its contribution to the revised format of the report.

**Bill Robertson  
Strategic Director – Adult Care**

**County Hall  
MATLOCK**



## Appendix 1

### Derbyshire County Council

### ADULT CARE COMPLIMENTS AND COMPLAINTS ANNUAL REPORT

APRIL 2012 TO MARCH 2013

#### INTRODUCTION

This report provides information about compliments and complaints received during the 12 months from 1st April 2012 to 31st March 2013.

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

- The National Health Service and Community Care Act 1990,
- Local Authority Social Services Complaints (England) 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 do not necessarily equate negative feedback 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 access to the formal complaints procedure, people are also encouraged 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 with the complainant a plan 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** has been co-produced with the Derbyshire Stakeholder Engagement Board. We wish to thank them for their support. The actual **contents** of the report, however, are solely those of Adult Care.

## **CONTEXT – the work of Adult Care**

Between 1 April 2012 and 31 March, 2013, a total of 28,688 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.

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

Fieldwork Services undertook 6,076 assessments. A total of 19,239 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).

### **Direct Care**

In Direct Care, clients have received the following services:

Home Care – 9,016 clients

Day Opportunity services – 3,361 clients

Residential – 3,403 clients

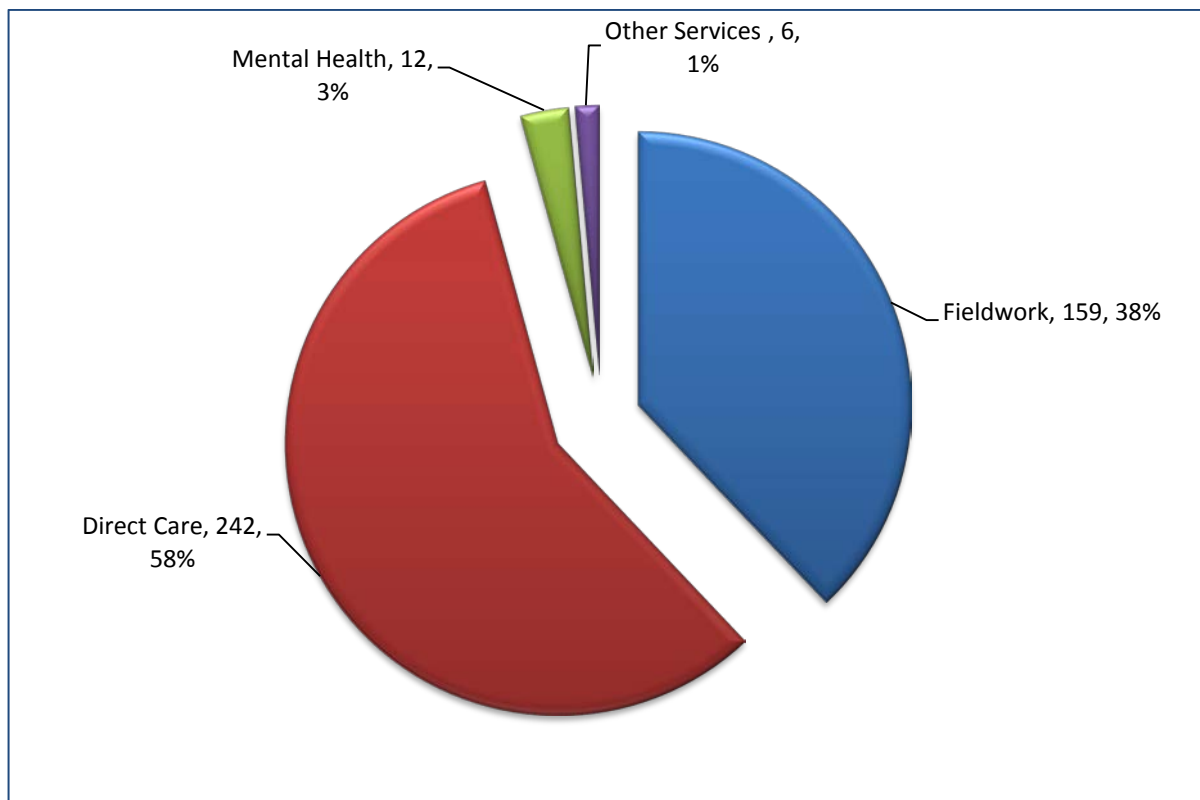
On behalf of our clients, Adult Care commissions a number of services from independent agencies. These agencies have their own complaints policies and procedures and as such clients will complain in the first instance directly to them. However, in some cases, we will investigate a complaint on the client's behalf. These cases 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 the workforce as well as the areas in need of improvement. This first part of the report therefore considers compliments received.

**Figure 1 - Compliments received during 2012/13 by service type**

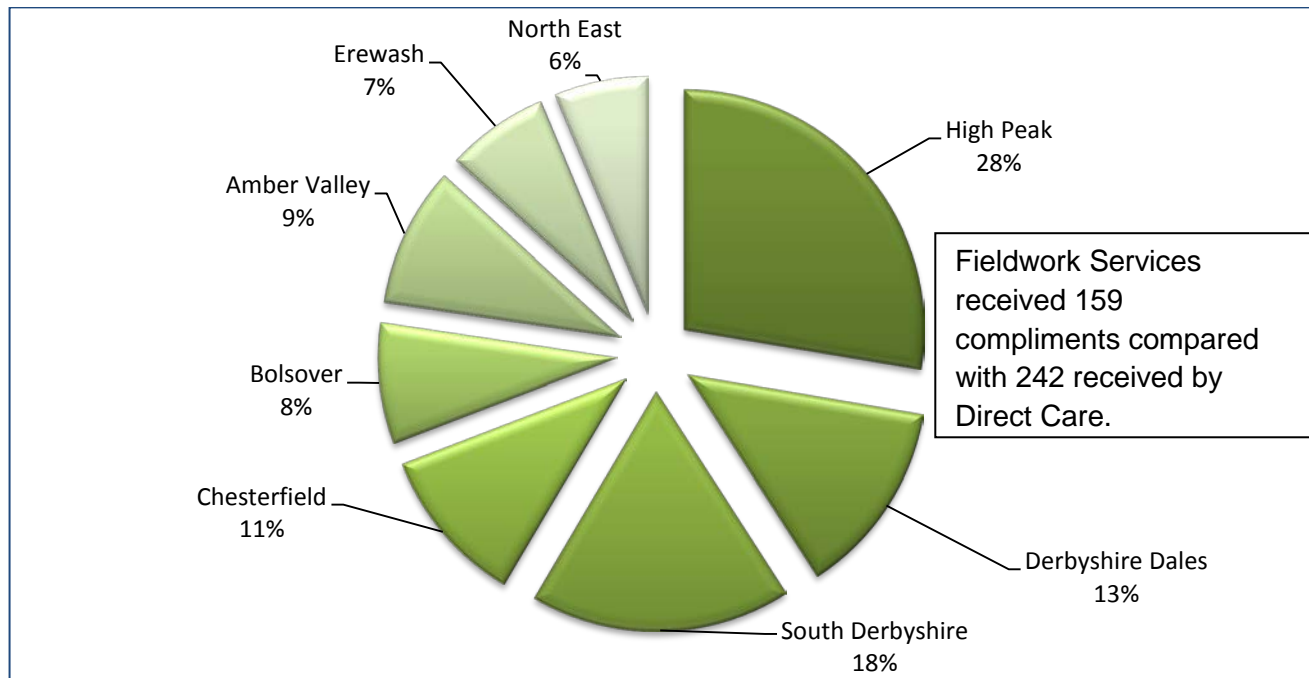


\*NB. 'Other Services' includes Finance, Contracting and Compliance, Commissioning, Prevention and Performance

The total number of compliments received this year, at 419, is higher than last year's 315. This can be explained in part by the department's stronger focus on recording and learning from the positive feedback we receive as well as the negative.

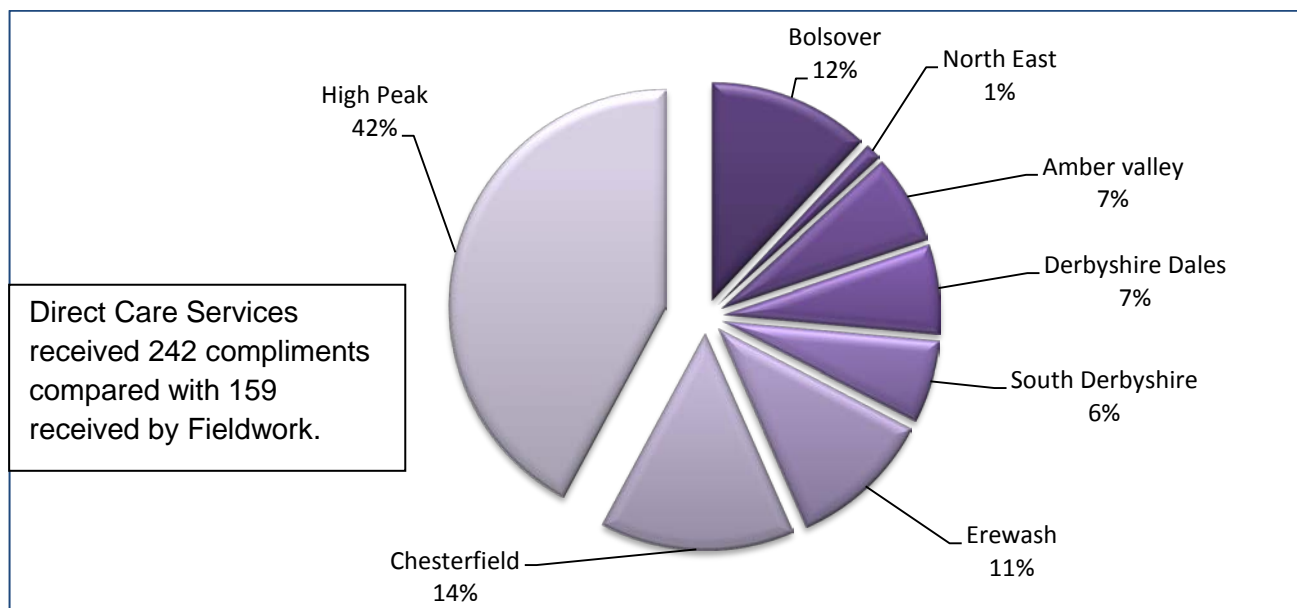
## Fieldwork compliments

Figure 2 Fieldwork Services- Compliments by Area



## Direct Care compliments

Figure 3 Direct Care Services - Compliments by area



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

*"Heartfelt gratitude from the family to everyone involved in the care and support given to our Mum making it possible for her to enjoy life at home. She thought of the carers as her friends."* (Direct Care - Home Care)

*"What staff offered was way beyond their call of duty. We feel so privileged to have benefited."* (Direct Care - Residential Care)

*"We were very pleased with the prompt service of assessing her and the quick response to her needs."* (Fieldwork Services - Occupational Therapy)

*"Excellent service, really helpful staff"* (Other Services - Blue Badge Team)

*"Thank you for explaining everything in a detailed and helpful way. I am very impressed with the efficiency of the staff and have found the whole process very quick"* (Fieldwork Services)

*"I want you to know how grateful I was - and am - for all the care and support you gave my sister, even when it was extremely hard to do so, and for the support you gave me in those difficult times."* (Mental Health Services)

*"Thank you for the excellent service and the way that all issues were well managed. The support that I have received from during my loss has been very reassuring and supportive."* (Other Services - Finance Team))



## COMPLAINTS

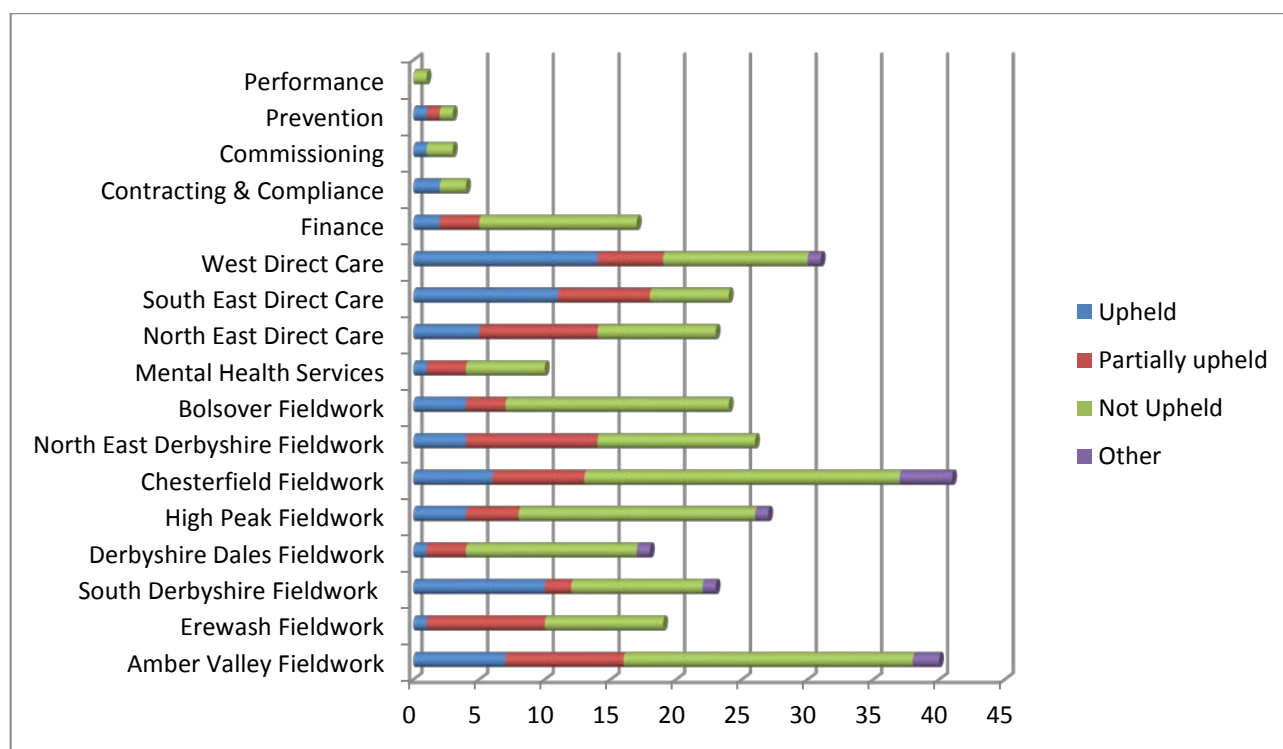
This year sees a drop in the number of complaints received about Adult Care services for the first time in three years:

**Figure 4 Historical levels of complaints and service enquiries**

	2009/10	2010/11	2011/12	2012/13
Service Enquiries / Representations	78	82	105	<b>82</b>
Complaints	268	316	350	<b>334</b>

### Which services have people complained about?

**Figure 5 Responsibility Centres and Complaint Outcomes**

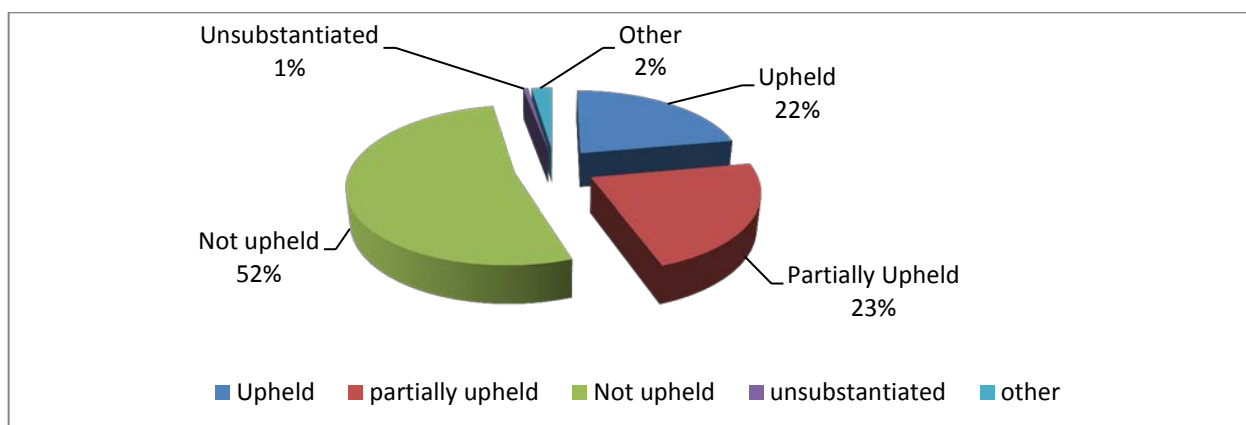


\* NB Other includes matters best dealt with under safeguarding procedures, or complaints which were withdrawn, unsubstantiated, or which have not yet been responded to.

## Complaint outcomes

It is recognised that some people are fearful of complaining and others mistrusting of public organisations' willingness to look into complaints in an unbiased manner. Figure 6 below shows that whilst 52 per cent of complaints were not upheld, 45 per cent were either fully or partly upheld, showing a willingness to admit mistakes and learn from them. Some examples of how we have improved our service as a result of a complaint are provided later in the report.

**Figure 6 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 7 below and reflect a high proportion of complaints relating to communication issues and decisions made.

**Figure 7 Table detailing outcomes by complaint theme**

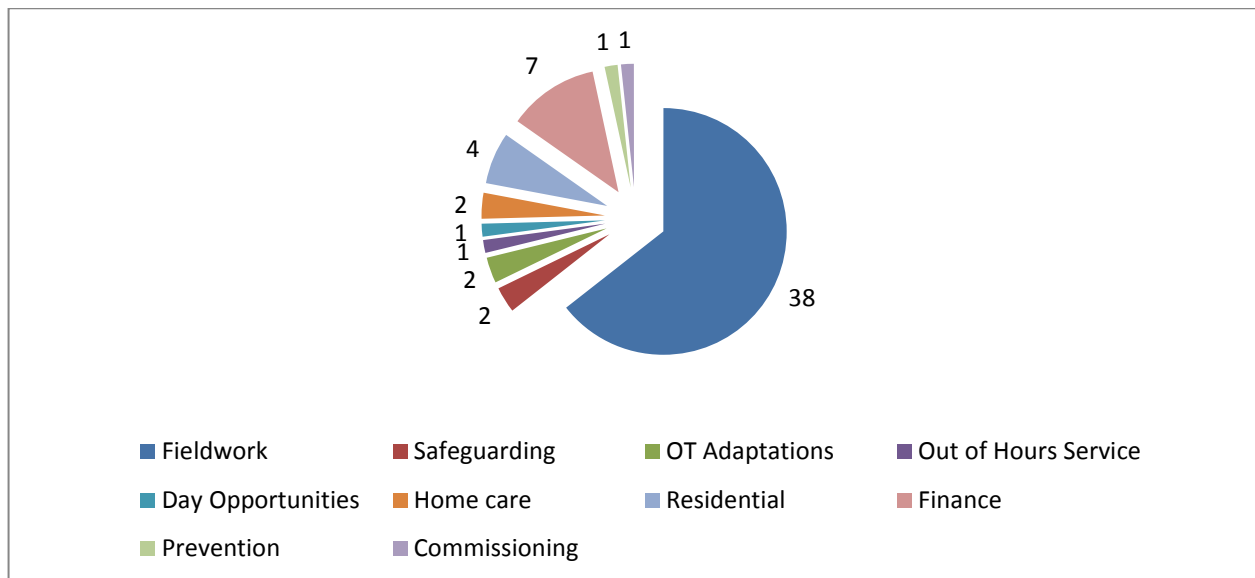
Complaint issue	Outcome					Total
	Upheld	Not Upheld	Partially Upheld	Unsubstantiated	*Other	
<b>Safeguarding</b>	1	1	1	0	0	3
<b>Communication Issues</b>	16	30	13	0	0	59
<b>Quality of Care - Personal</b>	11	13	11	0	3	38
<b>Delay in Service</b>	11	7	6	1	0	25
<b>Non Provision of Service</b>	9	0	1	0	1	11
<b>Conduct or Attitude of Staff</b>	8	19	18	0	1	46
<b>Decision</b>	7	47	12	0	2	68
<b>Insufficient Service</b>	4	15	9	1	0	29
<b>Quality of Care - Physical Standards eg. building, environment, fixed equipment</b>	3	3	2	0	0	8
<b>Policy</b>	2	15	1	0	1	19
<b>Eligibility for, or withdrawal of Service</b>	2	25	1	0	0	28
<b>Discrimination</b>	0	0	0	0	0	0
<b>Total</b>	<b>74</b>	<b>175</b>	<b>75</b>	<b>2</b>	<b>8</b>	<b>334</b>

\* 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.

## Communication issues

The second highest number of complaints received was on this topic. Almost half of the 59 complaints about communication were upheld or partially upheld. As can be seen from Figure 8 below, Fieldwork Services generate the most complaints in this area. These included complaints about the quality of financial information provided, the difficulties in getting responses when the allocated worker was on sick leave and inaccurate information being recorded.

**Figure 8 Breakdown of communication complaints by service**



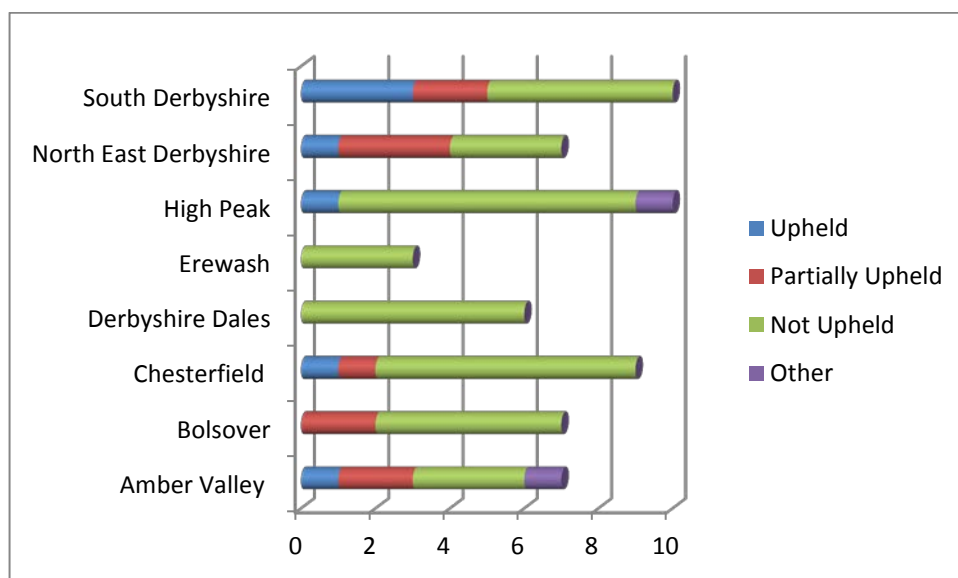
Improving communication across the department and particularly in Fieldwork Services will be a focus for work in 2013-14.

## Decisions

Complaints relating to decisions included a wide range of issues, some of which are a response to changes in the department's approach to supporting clients, including methods of funding, changes to traditional models of service provision and, as reviews are carried out, a higher number of people affected by the raising of the eligibility threshold implemented the previous year.

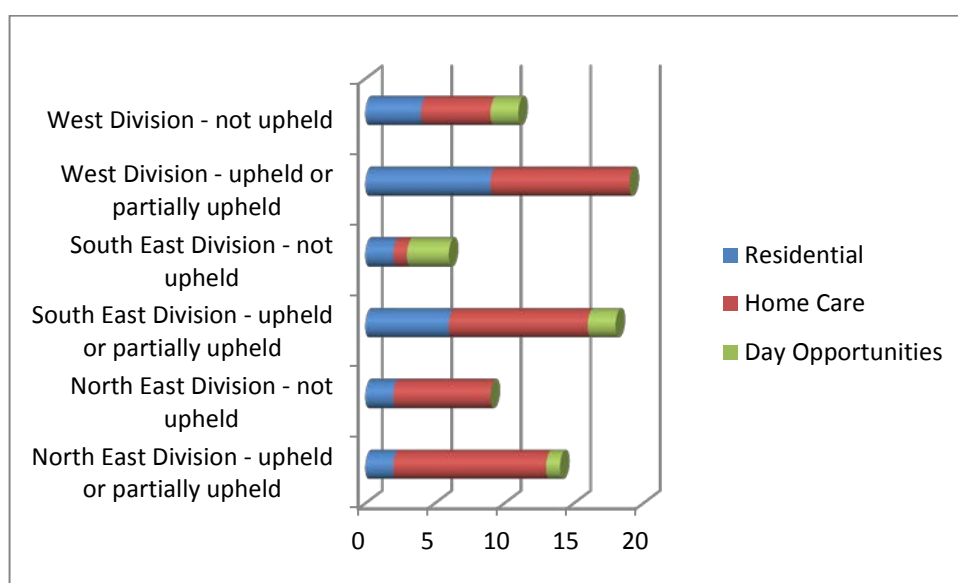
This is also reflected in the complaints received regarding eligibility for, or withdrawal of services, of which only 2 of the 25 were upheld. As would be anticipated, of the 68 decision-related complaints, 59 were about Fieldwork Services which are responsible for assessing people's eligibility for support and funding.

**Figure 9 Decision outcomes by fieldwork area**



In terms of Direct Care Services, home care complaints form a majority, as indicated in Figure 10 below which also identifies which Responsibility Centre provides the service.

**Figure 10 Direct Care Services - complaints by service and Responsibility Centre**



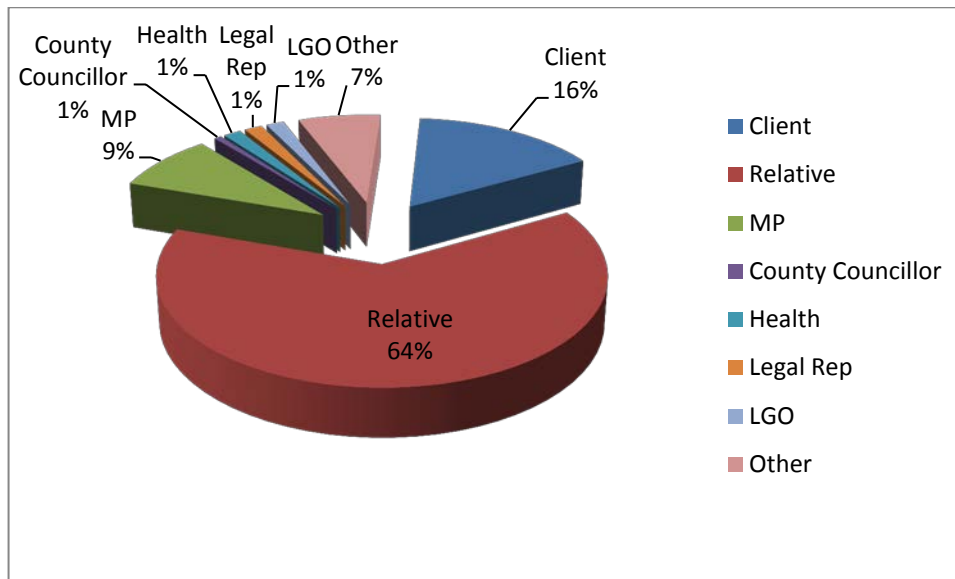
The Adult Care Quality and Compliance Group meet regularly to look at quality assuring Direct Care Services. This includes a review of more serious individual complaints/serious case reviews and how best to share learning.

Following an incident involving the use of a rotunda frame, the recommendation that 2 workers are to assist with transfers when using a rotunda is being reviewed by the Moving and Handling Team. As a result new guidance will be issued which will ensure aids are provided, used and reviewed appropriately in future.

Following an incident when a day service client fell from a wheelchair when being transferred from an ambulance, new instructions on escorts and risk assessments for transferring clients from ambulance transport are being developed.

## Analysis of complainants

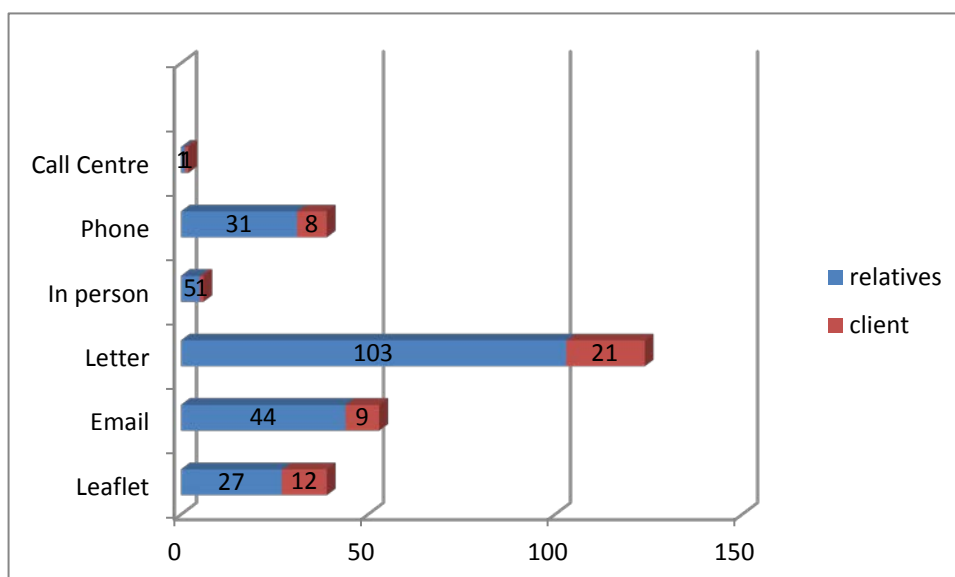
**Figure 11 Who has complained, by percentage of complaints total**



The overwhelming majority of complaints are from clients and relatives. The number of clients complaining for themselves (52) has halved since the previous year.

As can be seen from Figure 12 below, written complaints continue to be the preferred method of contact for clients and relatives, with letters accounting for almost a third of complaints.

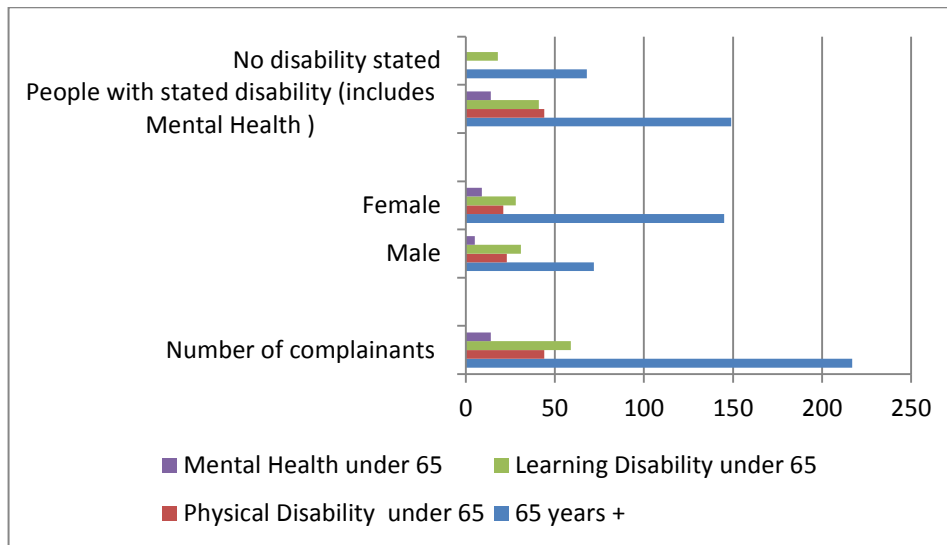
**Figure 12 How clients and relatives have complained**



The complaints leaflet as a method of complaining about Adult Care services is less popular than previous years (25 per cent drop since 2010), the form used is a corporate document and its format is currently under review. There is little difference compared to previous years for other methods of complaining.

## Equalities – Statistics and Analysis

**Figure 13 Complainants - age, gender and disability**



**Figure 14 Equalities information - Analysis**

Protected Characteristic Group	Findings
Race	Two clients identified as black or black British, one person of Asian or Asian British origin and two of dual heritage. The number of non-white British clients as a percentage of Adult Care clients is 0.72%.
Age	The majority of complaints related to clients over the age of 65 years (217). Given the volume of services provided to this age group this is to be expected.
Gender	The proportion of women receiving services in older age is greater than men in that group and so a higher level of complaints in this age group is not significant. In terms of mental health, the proportion of women receiving support in the community is also proportionately greater than men.
Disability	Services are provided to people with all types of disability or age-related conditions. This shows an increase in complaints from people with a learning disability (extra 10 to 59) and a corresponding reduction in those received from people under 65 years with a physical disability.

Sexual Orientation	As there have been no complaints explicitly related to discrimination or any with reference to people's sexual orientation, it must be assumed that this is not an area of significance. As information on individual client's sexual orientation is not routinely captured, however, it is not possible to evidence this further.
Religion and Belief	As with sexual orientation, this information has not been captured as part of the complaints process and similar assumptions as for sexual orientation above must be made. Changes to the complaints recording practice made in April 2013 will mean that this information will be available for analysis in future years.

## **Acknowledgement and Response times**

This year the department has achieved a 97% success rate in acknowledging complaints and service enquiries within the regulatory 3 working days of receipt.

Our departmental performance target is to respond to complaints within 10 working days of this acknowledgement. In some cases, a detailed investigation into the matter or liaison with other agencies will identify the need for a lengthier response time. In these cases, we will aim to provide a response within 20 days.

In terms of responses, 60% were responded to within 10 working days of acknowledgement. This is an improvement from the previous year's figure of 53%. In total, 84% were responded to within 20 working days (an improvement from 76% in 2011-12) and 61 complaints took longer than 20 working days to respond to.

Improvements in recording methods will enable a clearer picture to be provided next year about the extent to which responses times have actually matched the timescales initially agreed with the complainant as well as the actual number of working days taken to respond.



## LEARNING AND IMPROVING

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

Area	What has changed as a result?
Direct Care	A client's son complained that we had not shared important information with him about his Mum's fall and other health information. This led to the inclusion of a section within the Personal Service Plan documentation which addresses consent to information sharing, any limitations and with whom clients would like information to be shared.
Fieldwork	A complaint relating to a reduction in home care services being commissioned for a client resulted in staff being reminded to only reduce or withdraw a service after a formal review.
Derbyshire County Council Learning Disability Day Service	A complaint received at our Blooms Grove Road Day Services was regarding the lack of call system in the toilet. As a result, this has now been installed.
Commissioning - Carers	A complaint regarding the delay in processing an emergency carer's card application alerted us to the need to inform potential applicants in the Carer's newsletter of the expected timescales for processing so they know when to expect it to be ready.
Other Services / Headquarters Services	The Blue Badge application system has been reviewed to speed up the process and additional staff is drafted in to help out at busy times.
Occupational Therapy	Delay in fitting a shower - we have now instigated a more robust reviewing process with clients with whom we have little or infrequent contact so that they are not overlooked or forgotten.
Derbyshire County Council Day Care	A typing error on a client's electronic record caused upset to the family and alerted the home to the need for systems training.
Fieldwork	A complaint regarding the reduction in a client's personal budget after reassessment highlighted the need for staff in one team to develop a clearer understanding of the Resource Allocation System and the Self Directed Support process which aided work with future clients.

## **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.

10 complaints were considered by the LGO during the year.

- The LGO found no fault on the part of the Council in 2 cases.
- The LGO decided not to investigate for 6 cases– reasons include the investigation being outside of their jurisdiction or an agreement that the Council would re-assess.
- The LGO found fault in 1 case but were content with the Council's approach to addressing the issue.
- 1 investigation is on-going

5 further complaints were considered to be “premature”. Therefore they 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.

Compensation payments – there have been no compensation payments this year.

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 dropped from 105 last year to 82 this year - similar to 2010/2011. These included 18 from MPs.

## **CORPORATE COMPLAINTS**

In addition to the complaints described already in this report which have been dealt with under the Adult Care Complaints procedure, a further 12 Corporate Complaints were dealt with, of which eight related to Blue Badge applications. These are separately reported within the County Council's Annual Complaints Report.

## ACTION PLAN 2012 / 13

Every year the department draws up an action plan to make positive changes as a result of learning from complaints. Figure 15 shows progress on the action plan for the period last year (2012 / 13) is as follows:

**Figure 15 Table showing Action Plan for 2012 / 2013 and progress**

Action	Progress
Improve response times to ensure a more timely response to complainants.	The complaints process was streamlined to remove a layer of authorisation and has seen an improvement in response times from 53% last year to 60% within 10 working days and from 76% to 84% within 20 working days this year.
To link in with the audit of area offices to further improve adherence to best practice of area staff and complaints clerks in particular.	Visits have been either completed or are scheduled for the coming year. This will form part of the on-going quality assurance within the Adult Care department.
Expand on complaints training with a minimum of 60 places being made Available.	Due to turnover in those staff who can deliver training, 27 people have participated in formal training sessions and a further 8 benefitted from a briefing.
To review and improve the availability of guidance on how to handle complaints.	This is in final draft form and will be available to staff by July 2013 – transferred to next year's action plan.
As a large proportion of complaints relate to communication (80 out of 350) ways to improve the department's communication techniques will be investigated.	Stakeholders have been engaged in redesigning many information documents. We are working to produce all our key information in BLS, audio, text and large format as standard. In addition, the information and communications advisory group meet regularly to improve the quality of communications with staff and clients. Work to improve communication will continue to be a focus of departmental activity and is transferred to next year's Action Plan.

Develop knowledge of Independent People who assist with complaints – improve the content of the IP Seminars over the coming year.	Not progressed as the planned schedule for January 2013 has been postponed until July 2013. This was as a result of changes in personnel within the Children and Younger Adults department with whom the service is jointly organised.
To review how complaint information is disseminated to all Adult Care staff.	This has been reviewed successfully and complaint information is disseminated in a way that continues to meet departmental requirements.
Review mechanisms and forums for sharing Lessons Learnt from Complaints.	Using the Practice Bulletin, sharing of lessons learnt has been improved and is being developed further due to a change in complaints recording with effect from April 2013.
Develop guidance for staff where they are subject to a complaint.	Not completed as good Local Government Ombudsman guidance is already available to staff on Dnet.
Undertake an internal audit of complaints process at quarterly intervals.	This forms part of preparation for the Quality Assurance Office visits and is therefore now 'business as usual'.
Undertake a telephone survey with 10% of complaints to ascertain clients' views on accessibility of the process.	This proposed action was reviewed and not considered to be the most helpful way of gaining objective clients' feedback. Alternative methods of gaining feedback from clients to be considered.
Develop a clear reporting route for what Adult Care has learnt from complaints and how this learning has been disseminated as a service improvement.	This is completed with a clear process in Direct Care services through the Quality & Compliance forum and on Fieldwork through the operational management meetings.
Review the joint complaint arrangements with NHS colleagues in the light of the development of clinical commissioning Groups.	This is still work in progress with other Health and Social Care organisations in Derbyshire. To be carried forward to the 2013/2014 action plan.

## LOOKING FORWARD

### Action plan 2013 / 14

**Figure 16 Complaints Action Plan 2013 / 2014**

Action	Activity
Communication issues - continue work with all stakeholders to improve the quality of information and communication.	Undertake focused activity with Stakeholder Engagement Board and Information and Communications Advisory group to review the effectiveness of current communication methods and styles. By October 2013.
Communication with Adult Care staff.	Ensure that the Practice Bulletin is used to disseminate themes which are identified within the quarterly complaints reports and annual report.
Undertake full review of complaints system based on recommendations and lessons learnt from the Francis Enquiry.	Ensure that lessons learnt from the Francis Enquiry are incorporated into the way that Adult Care deal with complaints.
Review training methods to increase range of options available for raising awareness of effective complaints handling practice.	Evaluate previous training delivery mechanisms and identify improved ways of raising awareness on effective complaints handling.
To review and improve the availability of guidance on how to handle complaints.	New guidance to be available to staff by July 2013.
Review the joint complaint arrangements with colleagues in other agencies to address the changed structure within the NHS e.g. Clinical Commissioning Groups (CCGs).	Liaise with agency colleagues to finalise revision of the joint working agreement.
Undertake quality assurance checks on complaints responses.	Review response letters on a regular basis to ensure that these fully address the complainant's concerns.
Ensure staff familiarity with complaints procedures.	Regular briefing sessions with managers as part of their routine meetings/workshops.
Improve knowledge of Independent People who assist with complaints – improve the content of the IP Seminars over the coming year.	Seminar to be held in July 2013 to introduce new Independent People and staff and update them on new policies and approaches.
Look at possible methods of gaining feedback from clients to improve our processes.	Ongoing work to ensure we remain up to date with how we are perceived by our clients.

***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](#).