

DERBYSHIRE COUNTY COUNCIL
CABINET MEMBER

Agenda Item: 3

8 OCTOBER 2014

REPORT OF THE STRATEGIC DIRECTOR - ADULT CARE
ANNUAL COMPLIMENTS AND COMPLAINTS REPORT 2013-14
ADULT CARE

1. Purpose of the Report

To present to the Cabinet Member for Adult Social Care the annual compliments and complaints report for 2013-14.

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 2013-14 and what is proposed within the action plan for 2014-15.

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

**Mary McElvaney
Acting Strategic Director – Adult Care
County Hall
MATLOCK**



Derbyshire County Council

ADULT CARE COMPLIMENTS AND COMPLAINTS ANNUAL REPORT

APRIL 2013 TO MARCH 2014

INTRODUCTION

This report provides information about compliments and complaints received during the 12 months from 1 April 2013 to 31 March 2014.

For complaints, 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
- 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 do not necessarily equate negative feedback to poor practice or blame.

Clients or their carers should never 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 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** 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 2013 and 31 March, 2014, a total of 29336 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 13011 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 10535 assessments. A total of 17511 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 - 7702 clients
Day Services - 2210 clients
Residential - 3598 clients

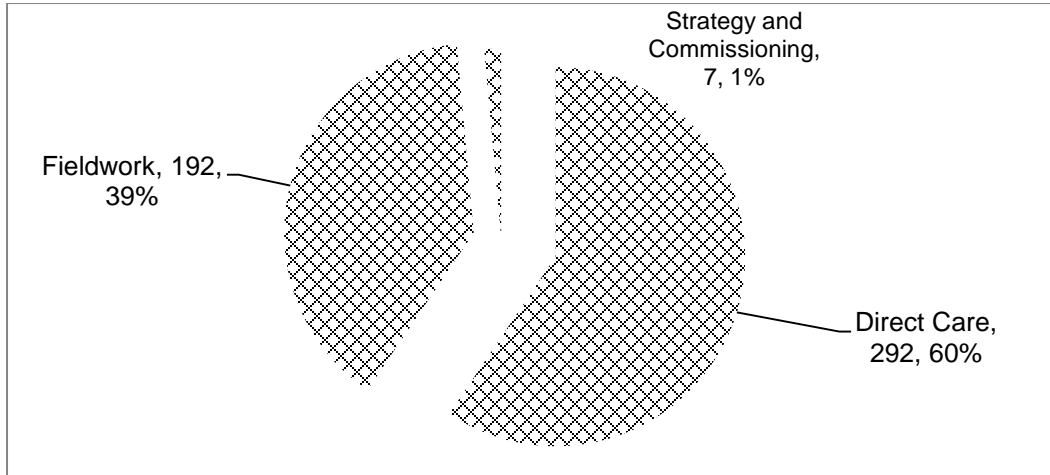
On behalf of our clients, Adult Care commissions a number of services from independent agencies. These agencies have their own complaints policies and procedures and there is an expectation that the Service Provider will investigate and respond directly to the complainant. If the complainant remains dissatisfied then Adult Care processes the complaint within its own Complaints procedures. 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.

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 2013/14 by service type



The total number of compliments received this year, at 491 is 17% higher than last year's 419. 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.

Figure 2 Fieldwork services - compliments by area

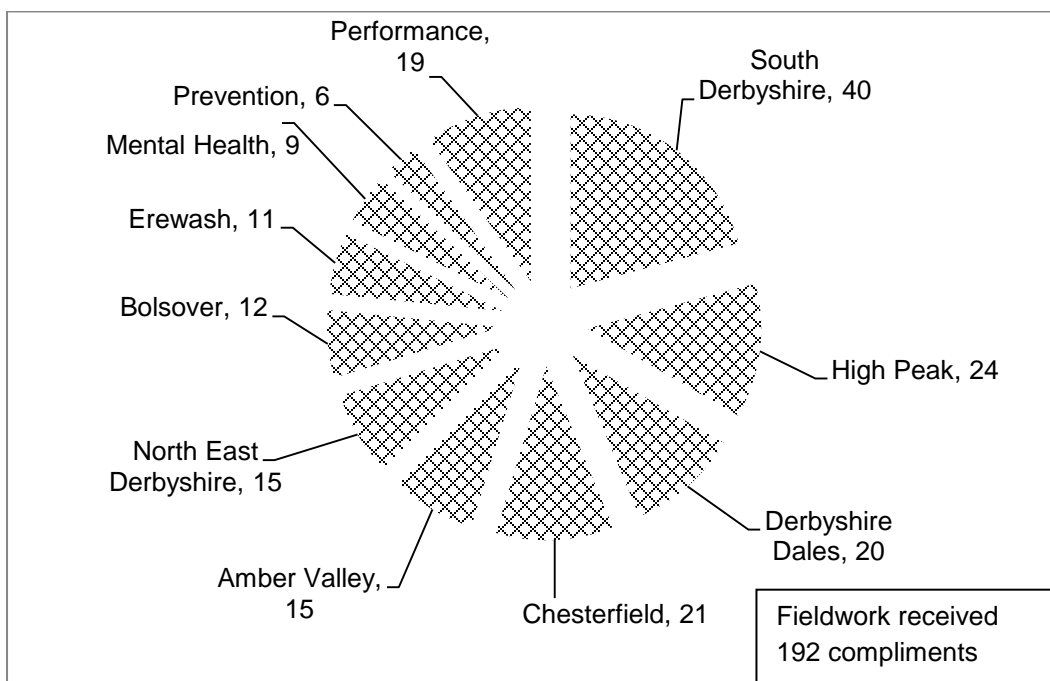
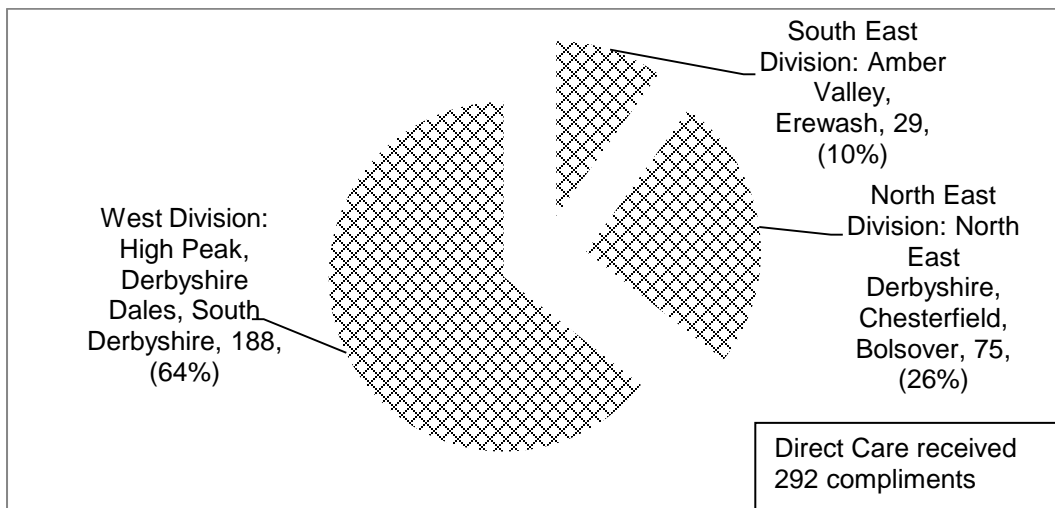


Figure 3 Direct Care services - compliments by area

Strategy and Commissioning

Four compliments were received by the Contracting and Compliance Team and three by the Finance Team.

What Sorts of Compliments Do We Receive?

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

"Thank you to all who have attended to me, for good food, good bed and good friends. I feel happy, very secure and relaxed, thank you." (*Direct Care Residential Care*)

"Thank you for all your help, your carers are marvellous, they are like therapy with their pleasant attitude." (*Direct Care Home Care Services*)

"You have been very compassionate in all your dealings with me and in the difficult circumstances I wanted to let you know how much this has been appreciated." (*Mental Health Services*)

"Thank you for achieving in eight days what it would take eight weeks to do in other authorities. The care worker is exemplary; we really cherish her." (*Fieldwork Team*)

"A big thank you for all your help, support and kindness that has enabled me to stay secure and happy in my own home." (*Fieldwork Team*)

"Letters from the finance staff were always polite and courteous." (*Finance Team, General Services*)

"This service has been really beneficial to me and my daughter. It has enabled her to experience that she can go out without me and be safe. It has shown me that I don't have to feel trapped and alone." (*Community Lives Team*)

"The Blue Badge process has been so quick, it has enabled me to go to tea at Kensington Palace." (*Blue Badge Team, General Services*)

COMPLAINTS AND SERVICE ENQUIRIES

Figure 4 Historical levels of complaints and service enquiries

| | 2009/10 | 2010/11 | 2011/12 | 2012/13 | 2013/14 |
|---------------------------------------|---------|---------|---------|---------|------------|
| Service Enquiries/ Representations | 78 | 82 | 105 | 82 | 157 |
| Complaints | 268 | 316 | 350 | 334 | 238 |

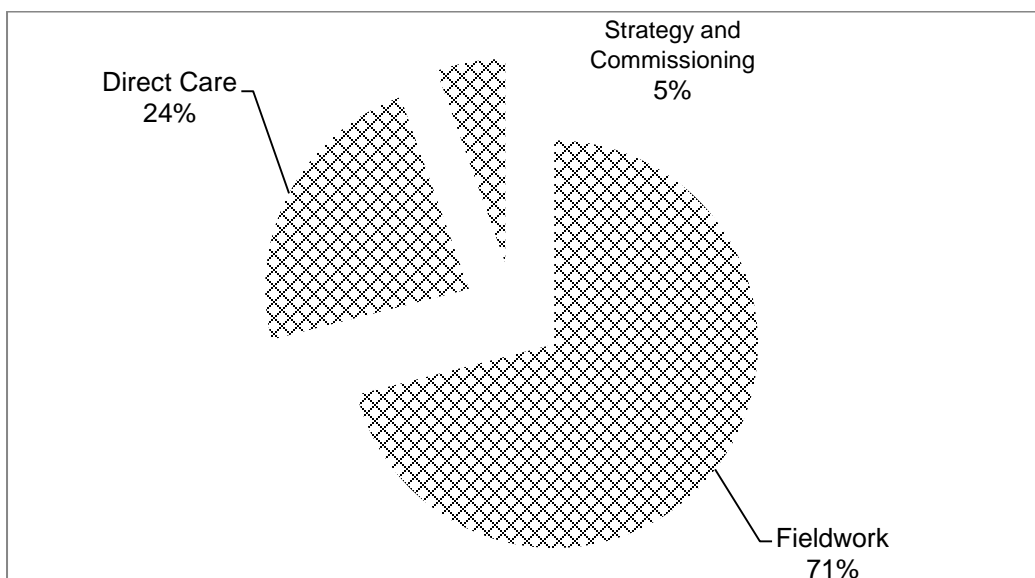
COMPLAINTS

This year sees a drop in the number of complaints received about Adult Care services from 334 in 2012/13 to 238 this year. This is the second successive year that complaints have fallen. Figure 5 shows the breakdown of complaints received about Fieldwork services, Direct Care and other services. The drop in complaints is matched closely by an increase in service enquiries and representations which allows for matters to be resolved to the client's satisfaction without recourse to a complaint. In addition guidance has been clarified for staff as to how contact from MPs and Elected Members should be treated. This has resulted in more being recorded as a service enquiry/representation rather than as 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.'

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

| | 12-13 | 13-14 |
|-----------------------------------|-------|-------|
| Direct Care | 78 | 56 |
| Fieldwork | 232 | 169 |
| Strategy and Commissioning | 24 | 13 |

Figure 5 Fieldwork and Direct Care comparison



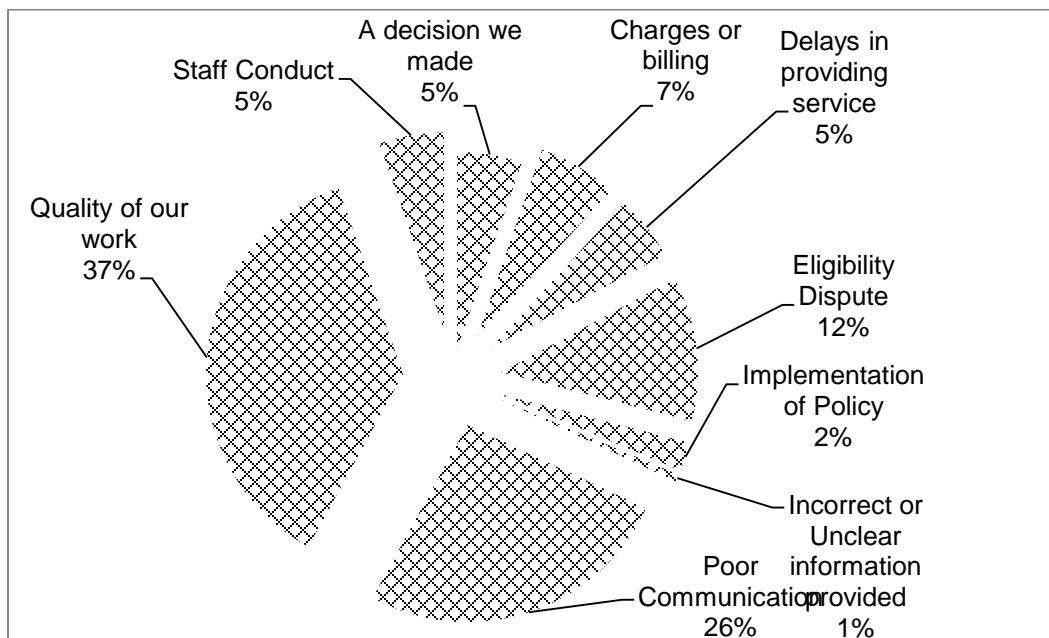
It is interesting to note that in 2012/13, complaints were distributed similarly across the sections. Fieldwork services made up 69% and Direct Care made up 23% of the complaints received.

Complaints Categories

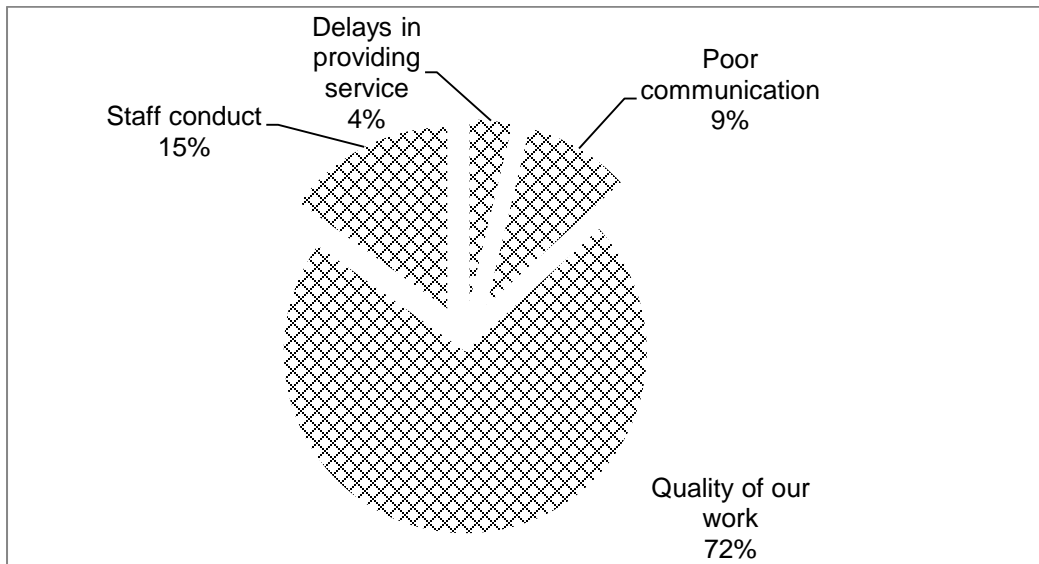
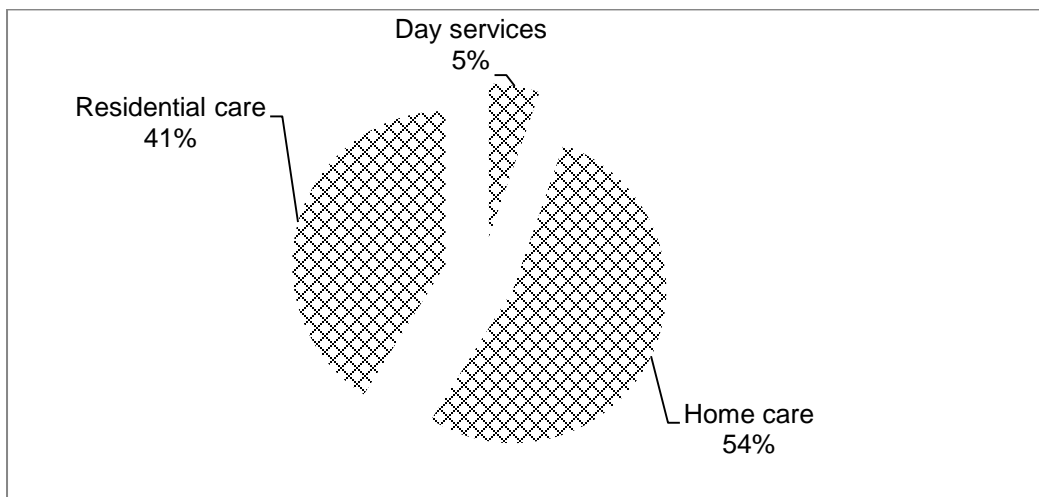
This year, the system with which we record complaints has changed. As part of this change, the complaints categories we use were updated to make them wider and more relevant to the current work we do:

- **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 residential client or 3rd 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.

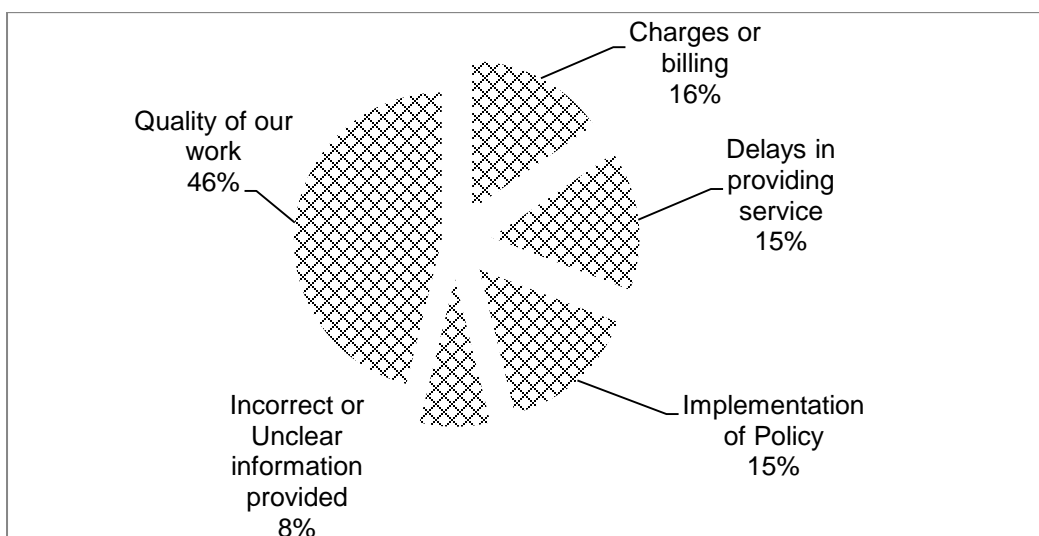
Figure 6 Nature of complaint for Fieldwork services



In terms of Direct Care services, the majority of complaints relate to the quality of our work, as indicated in figure 7 below. This category encompasses the work of the domiciliary services organiser, home care service, processes, facilities etc.

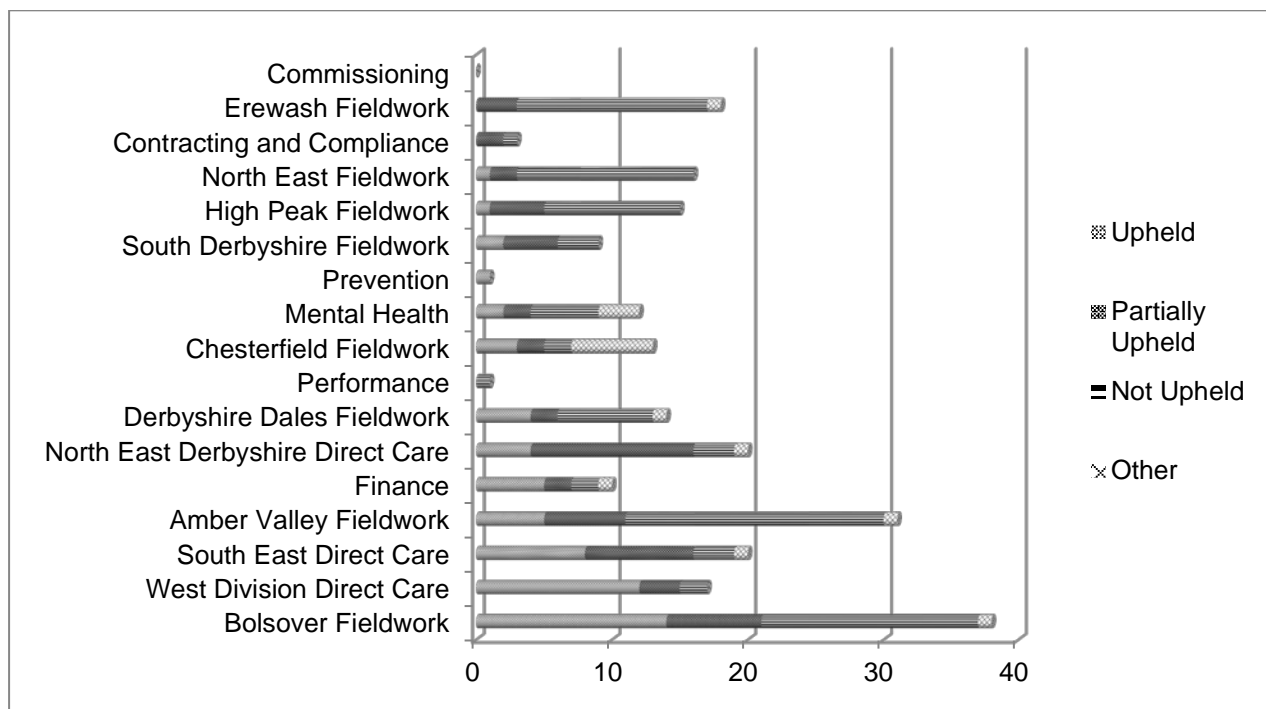
Figure 7 Nature of complaint for Direct Care services**Figure 8 Breakdown of Direct Care complaints by service**

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 complaint for Strategy and Commissioning Services

What services have people complained about?

Figure 10 Responsibility centres and complaint outcomes

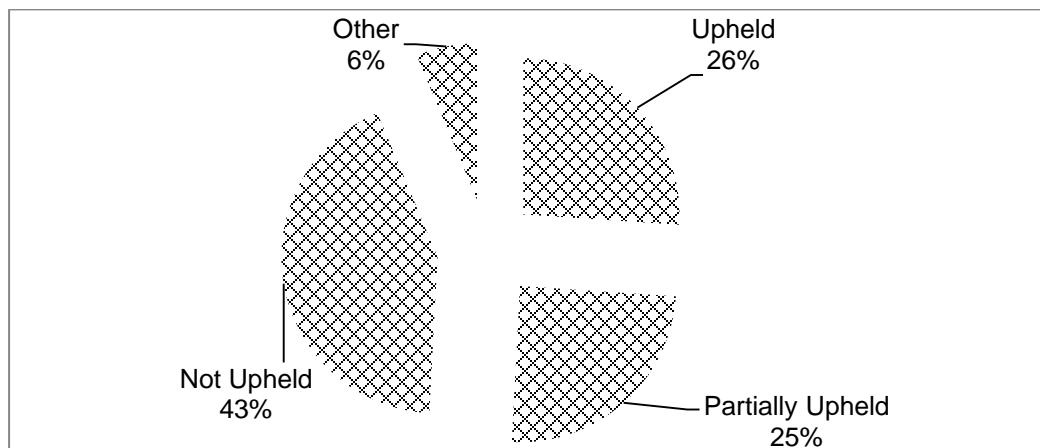


* NB 'Other' includes matters dealt with under safeguarding procedures, or complaints which were withdrawn, unsubstantiated, or which have not yet been responded to. It is worth noting that Bolsover fieldwork complaints include 16 which related to Hospital Discharge teams and processes across the county.

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 11 below shows that whilst 43 per cent of complaints were not upheld, 51 per cent were either fully or partially upheld, showing willingness 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. In the previous year 52 per cent of complaints were not upheld and 45 per cent were either fully or partially upheld.

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 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 | Total |
| Quality of our work | 28 | 34 | 43 | 4 | 109 |
| Communication | 13 | 11 | 24 | 2 | 50 |
| Eligibility dispute | 2 | 4 | 13 | 1 | 20 |
| Staff conduct | 9 | 3 | 4 | 1 | 17 |
| Delays in providing service | 6 | 1 | 4 | 2 | 13 |
| Charges and billing | 2 | 5 | 3 | 3 | 13 |
| Implementation of policy | 1 | 0 | 4 | 1 | 6 |
| A decision we made | 1 | 0 | 6 | 2 | 9 |
| Incorrect or Unclear information provided | 1 | 0 | 0 | 0 | 1 |
| Discrimination | 0 | 0 | 0 | 0 | 0 |
| Total | 63 | 58 | 101 | 16 | 238 |

* 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.

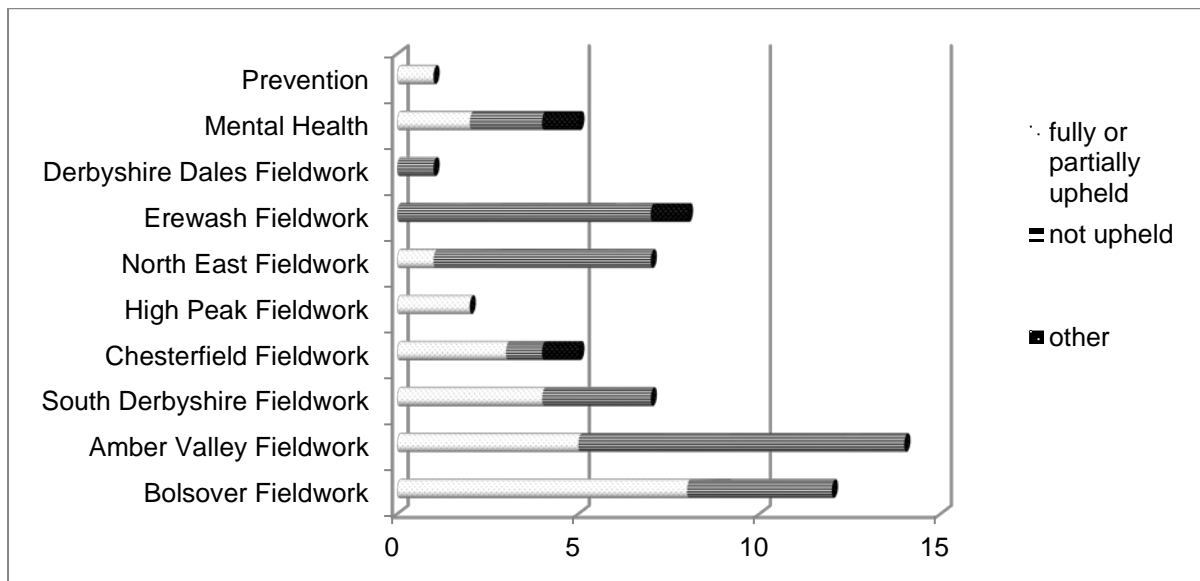
Quality of work issues

The highest number of complaints received was on this topic. This category is a broad heading which covers general dissatisfaction with the service we provide. Issues covered by this category would include: 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 is perhaps to be expected.

Fieldwork services generated 62 of these complaints, Direct Care generated 41 and Strategy and Commissioning generated six.

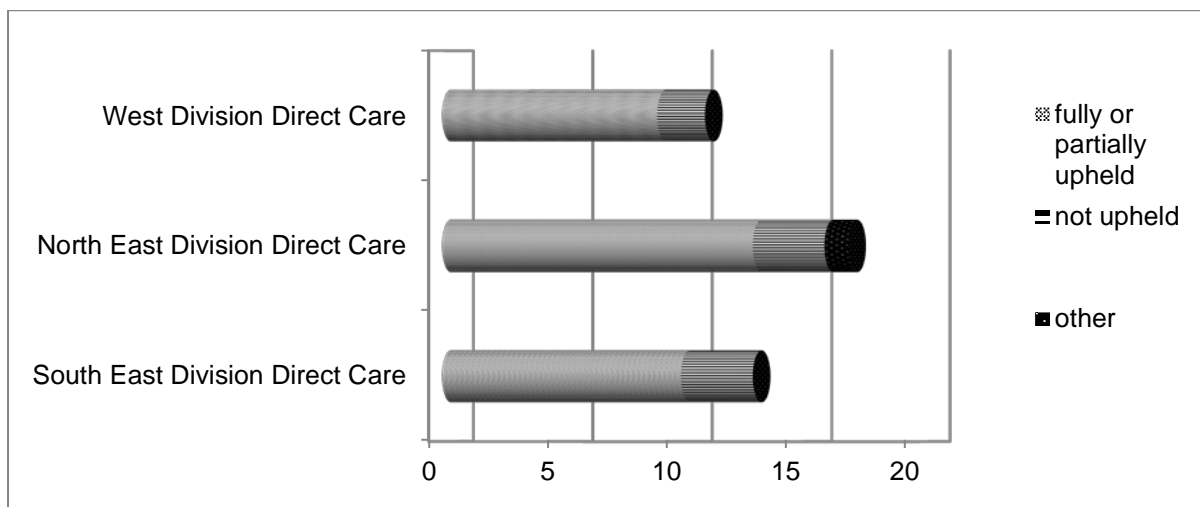
60 complaints of this kind were partially upheld or upheld whilst 42 were not upheld. The figures below show the breakdown complaint outcomes for this category.

Figure 13 Breakdown of quality of work complaints by Fieldwork team



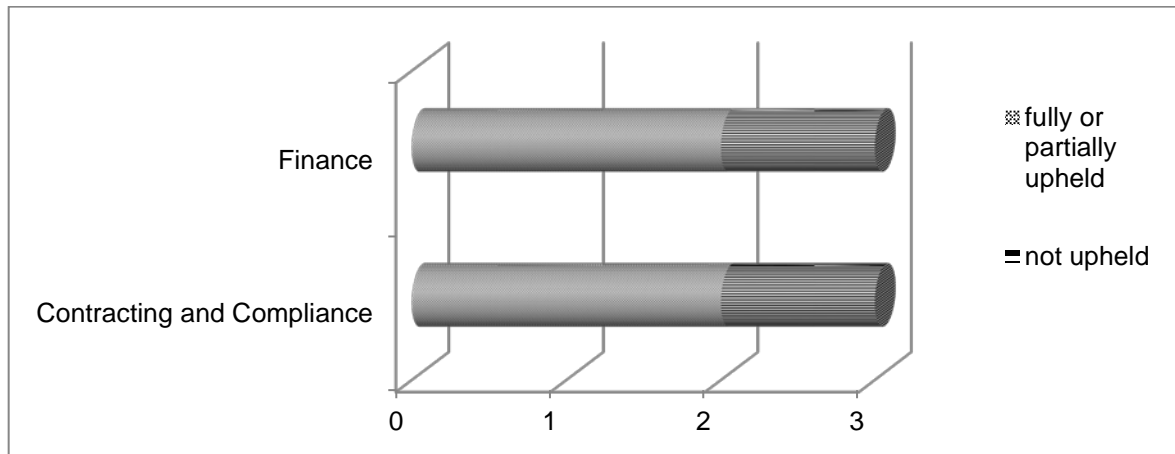
*NB other relates to those complaints which were not yet responded to, withdrawn or unsubstantiated.

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 50 complaints about communication, 22 were partially or fully upheld. Fieldwork services generated 44 of these complaints, with Direct Care generating five. One was received by the Finance team, which was partly upheld.

Figure 16 Breakdown of communication complaints by Fieldwork team

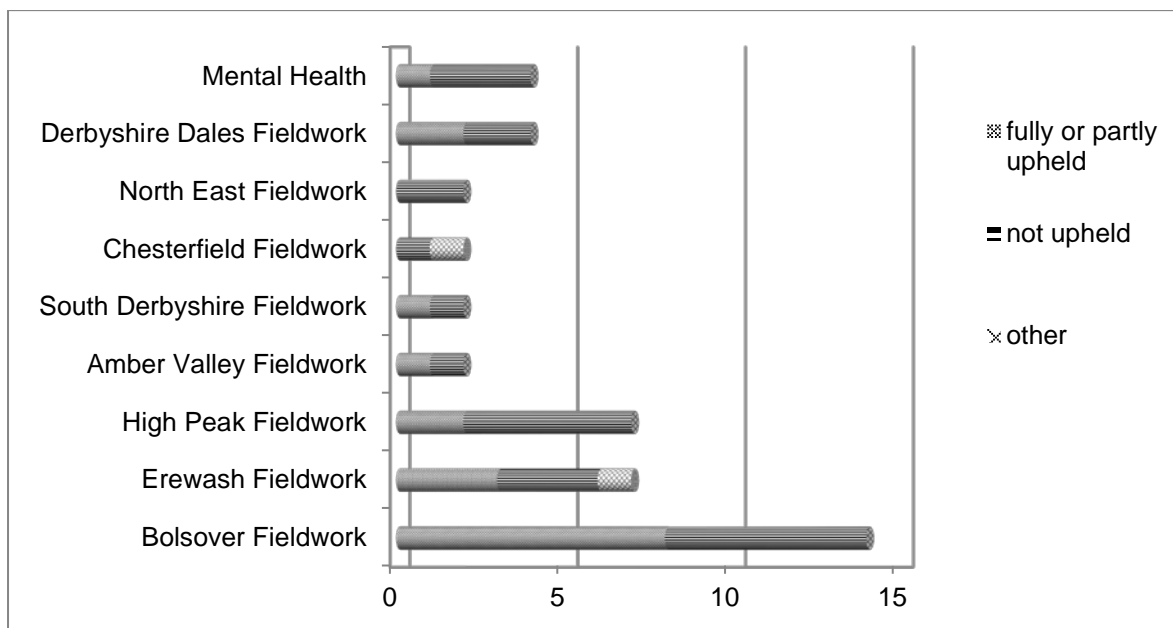
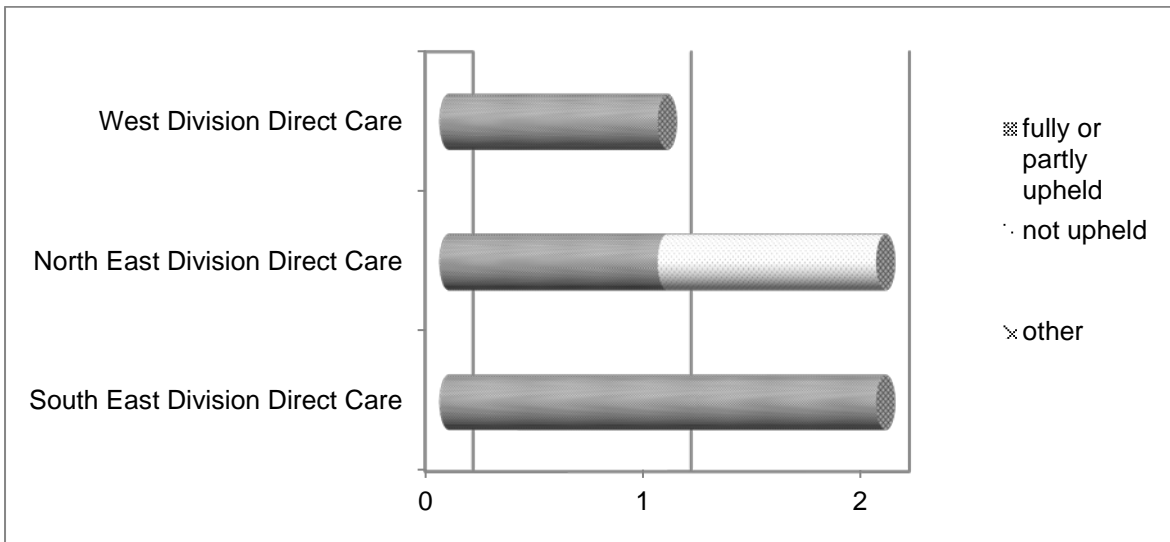


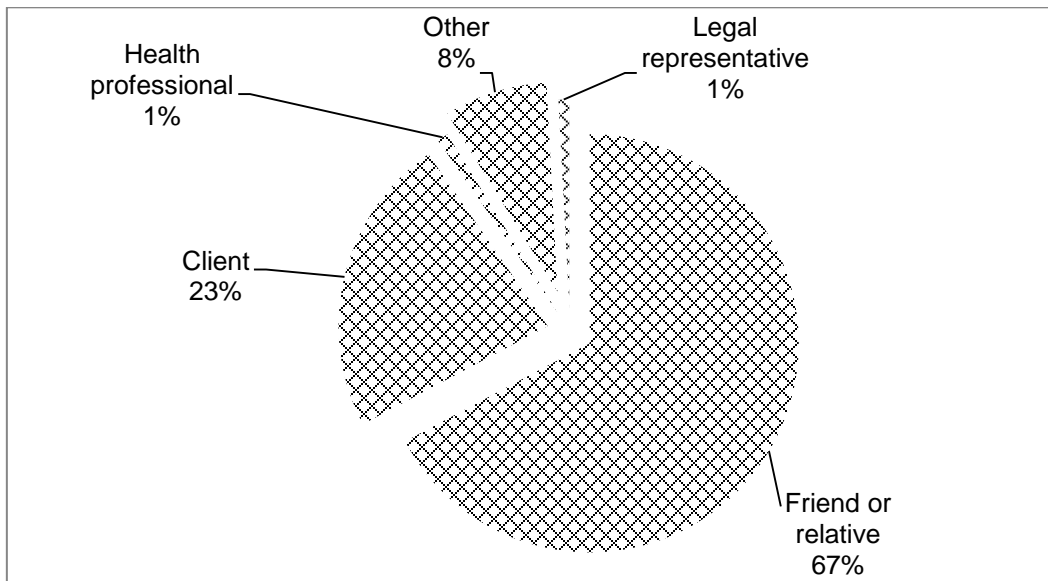
Figure 17 Breakdown of communication complaints by Direct Care team

Eligibility issues

The next highest number of complaints received related to the disputed eligibility of services. As we saw from Figure 11, more of these were not upheld than were upheld.

Analysis of complainants

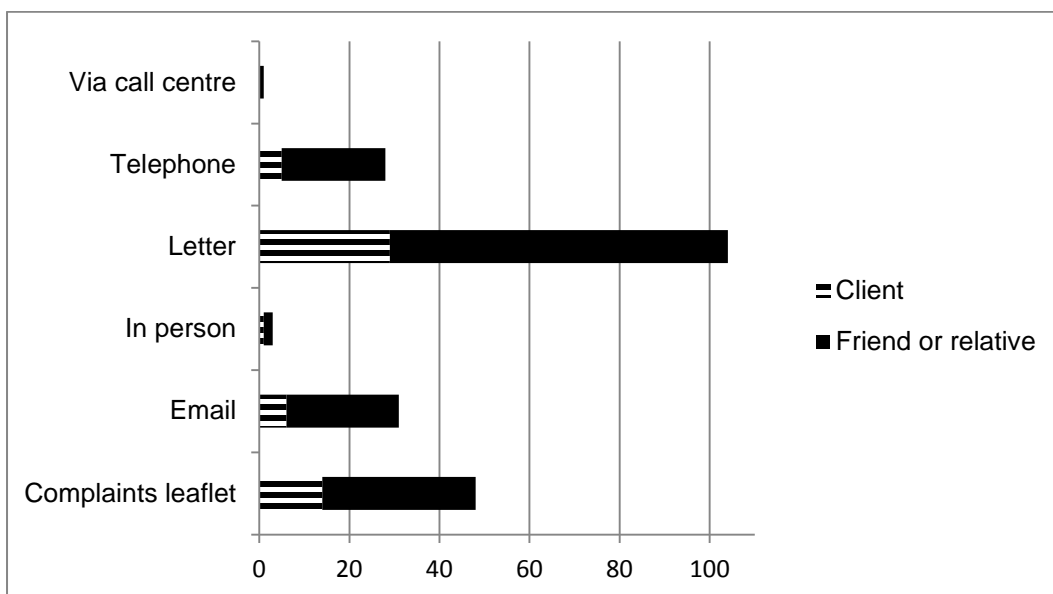
Figure 18 Who has complained?



The overwhelming majority of complaints continue to be from friends and relatives of clients. It is positive to see that the number of clients complaining for themselves has increased as a percentage of complainants from 16% last year to 23% this year. This suggests that people are feeling better able to make their feelings known without the need for advocacy by others.

As can be seen from figure 17 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 19 How clients and friends or relatives have complained



Plans to review the corporate Putting People First complaints leaflet are now being pursued to encourage a greater use of the form.

Equalities – Statistics and Analysis

Figure 20 Clients – age, gender and disability

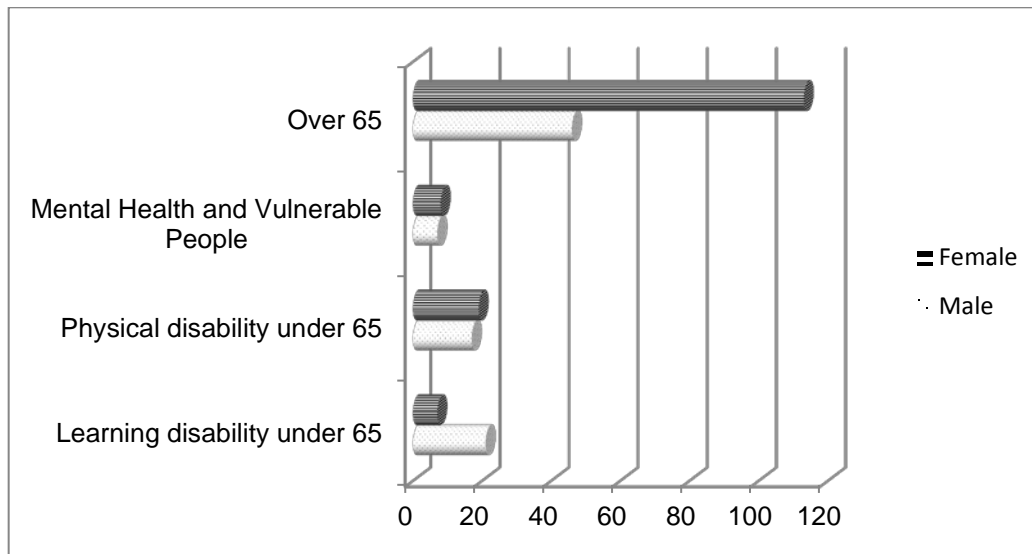


Figure 21 Equalities information – Analysis

| Protected Characteristic Group | Findings |
|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Ethnicity | One client identified as being of mixed or multiple ethnicities, thirty have 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 5.8% |
| Age | 159 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 | 147 women and 91 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. 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. 28 complaints were related to clients with a learning disability, 33 were about Mental Health services and 35 from people under the age of 65 with a physical disability |
| 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 | 73 of the clients who had complaints raised regarding their care were Christian, 3 stated their religion as 'other' and the remainder have either not stated or have no religion. 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 87% success rate in acknowledging complaints within the regulatory 3 working days of receipt. This compares to 97% the previous year.

Our departmental performance target is to respond to complaints within 10 working days of this acknowledgement. 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 232 complaints that were responded to, 186 were given an expected timescale of 10 working days. 131 of these (70%) were responded to within the 10 days. 46 were given an expected timescale of 20 days. 27 (59%) were responded to within the 20 days. Overall, 158 complaints (68%) were responded to within the timescale given at the time of acknowledgment. This is higher than last year's 60% but it is acknowledged that this still falls short of the standard of 80% being responded to within the agreed timescale.

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 | <p>A complaint about lack of social stimulation and activities in a Residential Home resulted in the conservatory being converted into a dedicated Activities Room. Currently, several staff are taking responsibility for certain activities, i.e. chair based exercises, craft work, games.</p> <p>“D” who has been at The Grange for many years as part of the LD employment pilot, has been invaluable. I discovered that he is a member of numerous societies including historical, steam engine and canal. He has a vast collection of memorabilia of local places, and a love of steam engines and old buses. He has worked one to one with residents and day care clients. He had a wide collection and knowledge of music of all types, and has played his music to the residents. This has benefitted “D” as much as the clients, as he now feels more valued.</p> |
| Community Lives / Fieldwork | <p>A complaint about clarity of responsibility for a case resulted in an agreement that the area case worker should always be the named co-ordinator (unless there is a local agreement to the contrary for a finite period) as they will have on-going responsibility for the oversight and review of the plan once it is set up.</p> <p>A complaint has resulted in all cases open to the Community Lives Team requiring a named area worker as well to act as the case co-ordinator. The area worker will be required to attend reviews and input into the process even if they are not undertaking the assessment.</p> <p>Further clarification has been made to internal processes to make sure that case work reviews continue to be allocated to a named area worker once the Community Lives involvement ceases</p> |
| Finance – Co- funding | <p>A complaint about not knowing who to contact has led to a revision to the co-funding declaration form to make it clear who clients should communicate with for changes or queries.</p> |
| Occupational Therapy | <p>Following complaints about waiting times for adaptations, a revised joint approach to this work was developed with the Borough Council and Home Improvement Agency in Amber Valley and variations of this are now being rolled out across the County with local councils.</p> |
| Mental Health Service | <p>A complaint about a hospital discharge included assessments, communication and finance issues. Since this time, nursing documentation has changed. A full process review was undertaken and complex casework is not only discussed at multi-disciplinary team level but also at weekly multi-agency management meetings. Further work to improve links and pathways are on-going.</p> |
| DCC Day Care | <p>A complaint about inadequate communication with carers about outings in Learning Disability services led to staff training on how to improve communication with clients and carers.</p> |
| Fieldwork | <p>A complaint about a fieldworker missing casework meetings at a local Independent Sector home identified the need for improved relationships with local homes. A link worker system has been introduced as well as more systematic contact with the contracts department.</p> |

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.

7 complaints were completed by the LGO during the year, compared with 10 last year

- The LGO found no fault on the part of the Council in 1 case, compared with 2 cases last year
- The LGO decided not to investigate for 2 cases, compared with 6 cases last year
- The LGO found fault on the part of the Council in 3 cases, compared with 1 last year
- The LGO found fault with the Council's practice in 1 case but did not feel it caused the complainant injustice.

One further complaint was considered to be "premature" by the LGO. It was 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.

The LGO is currently investigating 1 complaint.

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

- £500 was paid to the client and £500 to her mother. The client had moved to live permanently in Brighton. The LGO found that the Council failed to ensure the client's needs were met whilst she was waiting for the other Council to agree funding responsibility. The council also paid £3,750 being the Direct Payments she should have received during this time.
- A total of £5100 was paid to a client and her mother after the LGO found that the Council had failed to properly assess and provide services to meet the needs of the client and properly complete necessary home adaptations.
- £200 was paid to the brother of a client who, in 2009, died in a care home rather than at home. The LGO found that along with three other organisations (DCC were neither the managing authority nor supervisory body at any point) DCC failed to take into account his and his brother's wishes when making decisions regarding the location of care provided to the client during the last few months of his life.

For further information regarding the Local Government Ombudsman, please visit 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 increased from 82 last year to 157 this year. The 2013/2014 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. 30 cases have been logged on the system relating to Adult Care since its introduction. 85 service enquiries were from MPs on behalf of their constituents. The significant increase from 18 MP enquiries in 2013/14 could be explained by more enquiries being captured by the Casework System, rather than being sent directly to workers. The large number of enquiries may also be due to the recent Adult Care Consultations.

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 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 27 Corporate Complaints were dealt with, up from 12 the year before. Eight of these were upheld (relating to delays and staff conduct). One was partly upheld (relating to the quality of our work).

ACTION PLAN 2013 / 14

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 (2013/14) is as follows:

Figure 15 Table showing Action Plan for 2013/2014 and progress

| Action | Progress |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Communication issues – continue work with all stakeholders to improve the quality of information and communication | The Information team have made good progress with this and continue to draw on the expertise available from the Stakeholder Engagement Board when reviewing documents aimed at clients and the public |
| 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. Regular contributions about practice improvements have been included in the Practice Bulletin |
| Undertake full review of complaints system based on recommendations and lessons learnt from the Francis Enquiry | Our system was reviewed to ensure that lessons learnt from the Francis Enquiry, for example Ordinary Residence, dealing with complaints about Independent Sector services and Care Co-ordination within Community Lives/Fieldwork interface, are incorporated into the way that Adult Care deals with complaints. This work was completed in February 2014 |
| Review training methods to increase range of options available for raising awareness of effective complaints handling practice | This has been postponed until June 2014 to enable the absorption of improved presentation materials/resources gained from the recent LGO training session organised by CAYA. This action will be transferred to next year's Action Plan |
| To review and improve the availability of guidance on how to handle complaints | New guidance was made available to staff from 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. Further progress is expected in 2014/15 |
| Undertake quality assurance checks on complaints responses | This has been completed and will continue as routine monitoring of complaints process |
| Ensure staff familiarity with complaints procedures | Regular briefing sessions with managers as part of their routine meetings/workshops. Not completed – to be transferred to next year's plan |
| Improve knowledge of Independent People who assist with complaints – improve the content of the IP Seminars over the coming year | Seminar 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 | Close consideration was given to the viability of following up complainants to check satisfaction with the way that the outcome. As yet no satisfactory means has been found to do so which would disengage the process from the outcome |

LOOKING FORWARD

Action plan 2014/15

Figure 16 Action Plan 2014/2015

| Action | Target Date and Activity |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Review training methods to increase range of options available for raising awareness of effective complaints handling practice | Absorb resources and relevant learning from LGO training session into Adult Care presentation/briefings by August 2014 |
| 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 |
| Ensure that the Adult Care Complaints Policy and processes are fit for purpose in the context of the Care Act | Review information as and when it becomes available about regulatory impact and best practice |
| Improve acknowledgement times | Review guidance for colleagues on how to identify complaints and responsible services |
| 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 |
| Improve the process for identifying learning and improvements made | Review current framework process by August 2014. Utilise potential changes to Quality Assurance forums to maximise opportunities to review policies and procedures in conjunction with complaints to assist in further development of quality across the department |
| 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 will be 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. |

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](#).