

PUBLIC

Agenda Item No.5 (b)

DERBYSHIRE COUNTY COUNCIL

STANDARDS COMMITTEE

22 March 2017

Report of the Director of Legal Services

COMPLIMENTS AND COMPLAINTS - ADULT CARE

1. Purpose of the Report

To inform the Committee about compliments and complaints received by Adult Care during the financial year 2015-2016.

2. Information and Analysis

The terms of reference of the Standards Committee provide that the Committee has an overview of complaints handling. In order to inform Members of the procedure for complaints in Adult Care, the Committee is invited to receive the report which was presented by the Director of Adult Care to the Cabinet Member on 20th July 2016 entitled Annual Compliments and Complaints Report 2015-16 and which is attached at Appendix 1. David Gurney, Group Manager (Performance) for Adult Care has been invited to attend the meeting of the Standards Committee to inform Members of work on compliments and complaints in Adult Care.

3. Other Considerations

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

4. Background Papers

The file held on behalf of the Director of Adult Care.

5. Officer's Recommendation

To note the position in respect of compliments and complaints received by Adult Care in 2015-2016.

**John McElvaney
Director of Legal Services**

DERBYSHIRE COUNTY COUNCIL

CABINET MEMBER

20 July 2016

Report of the Strategic Director for Adult Care

ANNUAL COMPLIMENTS AND COMPLAINTS REPORT 2015-16

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 2015/16.

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 2015/16 and what is proposed within the action plan for 2016/17.

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, social return on investment and transport considerations.

4. Key Decision

No

5. Social Value

The complaints process offers local people the opportunity to ensure their concerns are formally addressed by Adult Care. In turn it allows managers to reflect on practice, to offer redress (where appropriate) and to consider changes to the way services are delivered.

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

No

7. Officer's Recommendation

That the Cabinet Member notes and approves the findings of the Annual Compliments and Complaints Report for 2015/16.

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 2015 TO MARCH 2016

INTRODUCTION

This report provides information about compliments and complaints received by Adult Care during the 12 months from 1 April 2015 to 31 March 2016.

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

In Adult Care we actively encourage feedback to allow us to continually improve the services we provide. We recognise that negative feedback does not always mean that there has been poor practice or blame.

Clients or their carers should feel confident that providing honest feedback will not have a negative impact on their support. Instead we will use it to accept responsibility where that is appropriate and learn from our mistakes. As well as accessing the formal complaints procedure, people are encouraged and 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 at the earliest opportunity. 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 2015 and 31 March 2016, 30,805 referrals were received in Adult Care. This figure includes those referrals where other means of support such as the universal offer and signposting rather than a full assessment were identified as the appropriate response. During this period 11,773 clients received a service to help them live in the community following an assessment.

The overwhelming majority of Adult Care feedback relates to Prevention & Personalisation, previously known as Fieldwork, and Direct Care as they are the services which have the most frequent and prolonged contact with clients.

Prevention & Personalisation services undertook 7,290 assessments. A total of 15,571 reviews have been completed by a combination of Call Derbyshire low level reviews (reviews of support for people receiving a single low-level service e.g. laundry or frozen meals), Prevention & Personalisation services (Support Plan Reviews) and Direct Care services (Personal Service Plan reviews).

Within Direct Care 1,746 clients received a home care service, 1,295 received day care and 1,284 received care in a council-run establishment.

On behalf of our clients, Adult Care commissions a number of services from independent agencies. These agencies are required to have their own complaints policies and procedures and there is an expectation that initially 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.

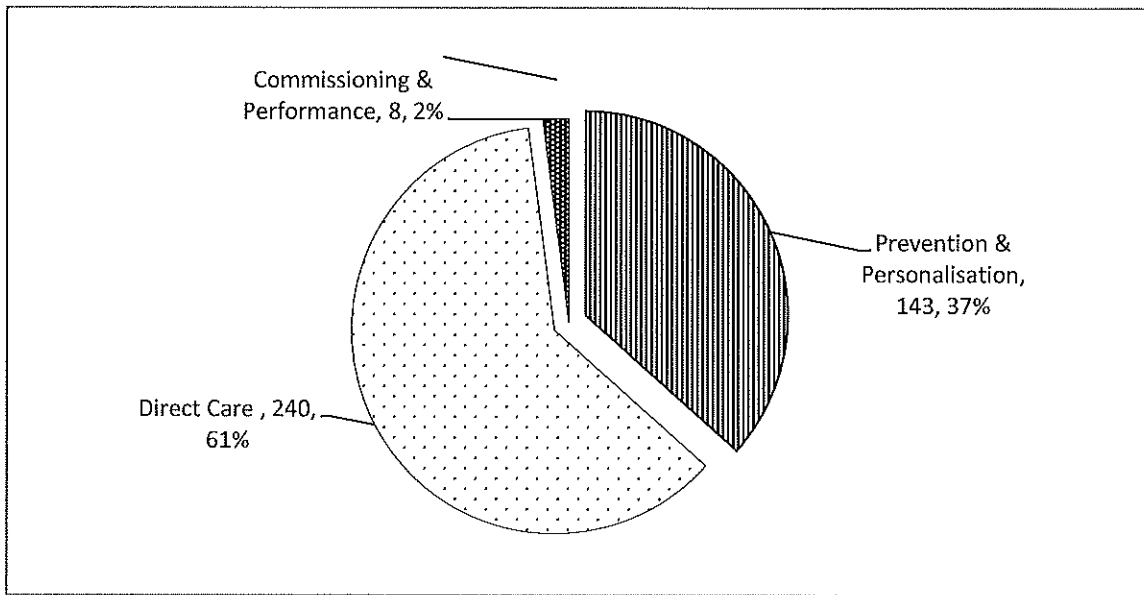
The ASCOF (Adult Social Care Outcomes Framework) is a government tool to create transparency around the quality of care provided. The latest figures show that Derbyshire's rate of client satisfaction with the quality of care and support received is better than the national and regional averages, and higher than other local authorities with similar characteristics.

The information below provides a more detailed look into the feedback on Adult Care compliments and complaints gained over the year 2015/2016.

COMPLIMENTS

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

Figure 1 – Compliments received during 2015/16 by Service Type



The total number of compliments recorded for this year, at 391, is 16% lower than last year's 467.

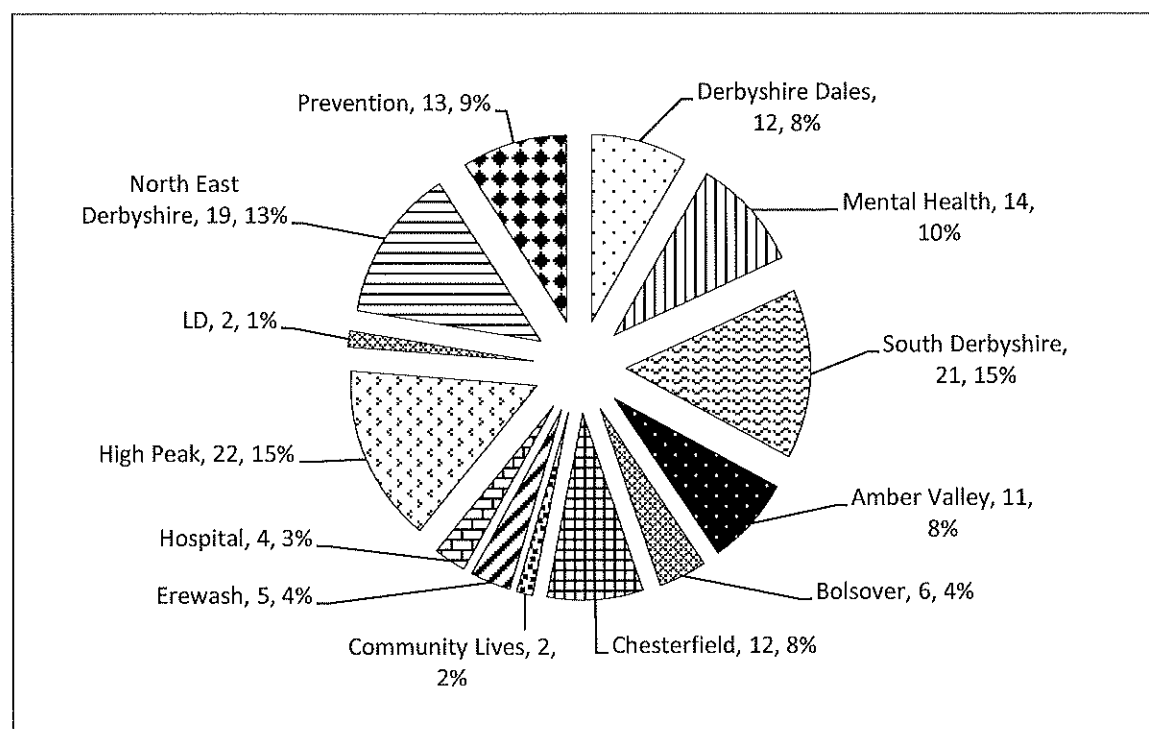
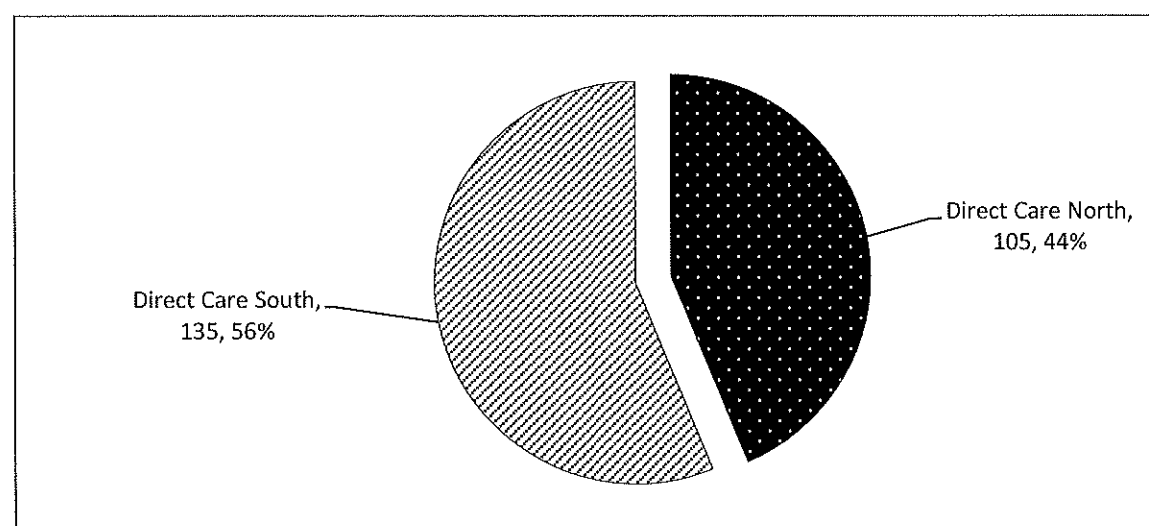
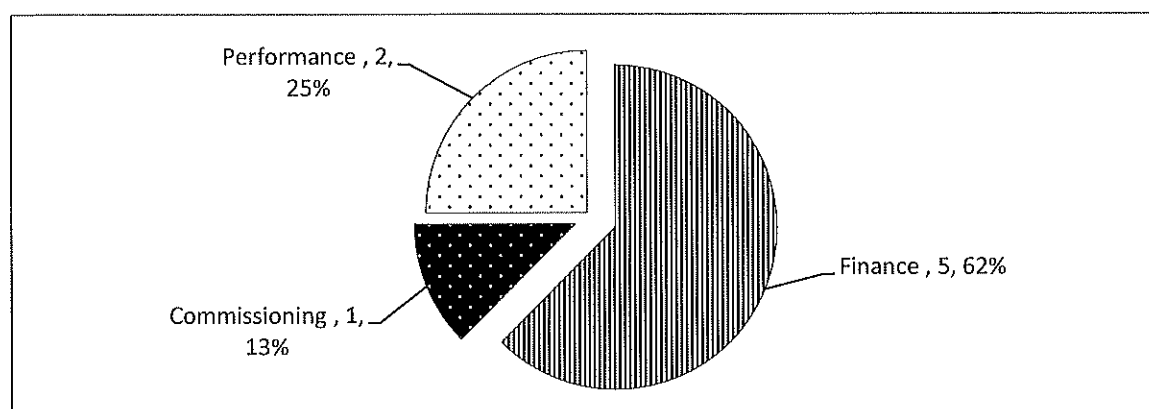
Figure 2 Prevention & Personalisation Services – Compliments by Area**Figure 3 Direct Care Services – Compliments by Area**

Figure 4 Commissioning & Performance – Compliments by Area

What Sorts of Compliments Do We Receive?

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

"Thanks so much for all your support, quick progress and communication. It has been very much appreciated." (*Chesterfield Prevention & Personalisation*)

"I cannot thank the staff enough for the fantastic care mum received. Their compassion and understanding are fantastic and all lead by a brilliant team of duty managers. There aren't enough words to express our thanks for all the care, love and understanding you gave not only to mum but to us as well" (*Direct Care Residential Service*)

"Without you I don't know what I would have done. Your girls are brilliant in every sense of the word - kind, caring and compassionate" (*Direct Care Home Care Service*)

"Just to say a truly huge thank you for all your persistent and consistent thoughtfulness throughout your work on my case. You always knew exactly what to say and your dedication shines legitimately too. You are super!" (*Mental Health Team*)

"I was amazed to be offered the service of four visits each day for six weeks free of charge I think that is excellent! Very reassuring to know someone was there. I will miss the team - thank you all very much!" (*Re-ablement Team*)

"I just wanted you to know what fabulous support my Mum and her family have had" (*Acute Hospital Team*)

"I would like to at least take the opportunity to thank you for your assistance, patience and understanding as I have been trying to assist my mum." (*Finance Team*)

COMPLAINTS AND SERVICE ENQUIRIES

Definitions of Complaints and Service Enquiries can be found in Appendix 1.

Figure 5 Historical Levels of Complaints and Service Enquiries

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
Service Enquiries/ Representations	82	105	82	159*	309**	108
Complaints	316	350	334	238	260	228

**Additional guidance was given to staff this year as to determining what should be treated as a service enquiry or representation as opposed to a complaint*

***The statistic for 2014-15 included Members Casework enquiries handled by Councillors but not passed to Adult Care for action or advice. For 2015-16 statistics only included those enquiries in which Adult Care staff have become directly involved.*

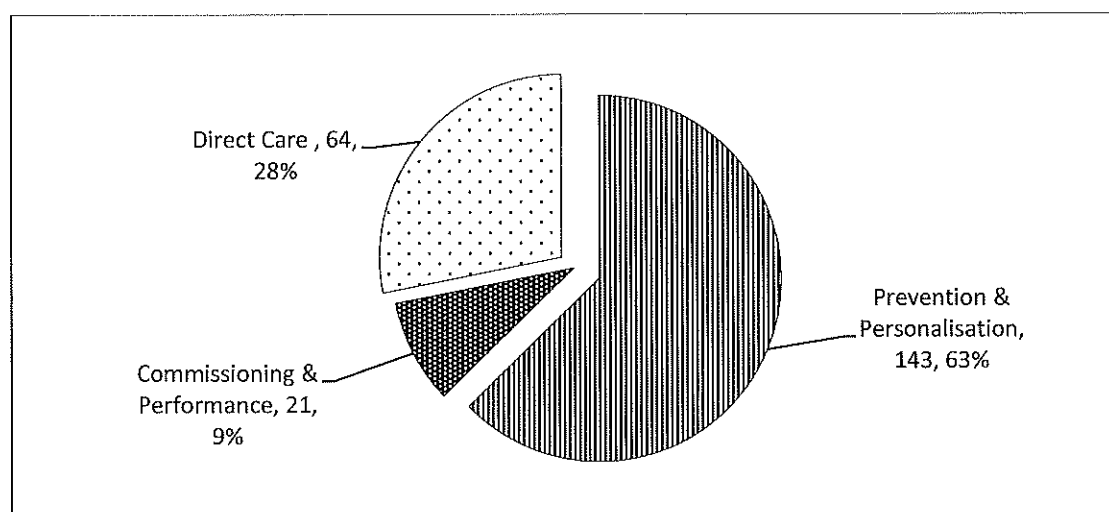
COMPLAINTS

This year sees a slight decrease in the number of complaints received about Adult Care services from 260 in 2014/15 to 228 in 2015/16. Although the total number of referrals to Adult Care increased in this period the decrease in complaints can possibly be accounted for by a reduction in the level of services being provided after assessment (a reduction of 8.7 per cent from the previous year). Figure 6 below shows the breakdown of complaints received within the different Adult Care divisions. This shows a drop in complaints in Prevention and Personalisation and an increase in complaints about Direct Care services.

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

Figure 6 Year on Year Comparison of the Number of Complaints between Adult Care Divisions

	2013/14	2014/15	2015/16
Direct Care	56	39	64
Prevention & Personalisation	169	189	143
Commissioning & Performance (including Finance)	13	32	21

Figure 7 Proportion of Complaints received during 2015/16 by Service Type

- This year sees a decrease of 10% in complaints for Prevention & Performance, a decrease of 3% in complaints for Commissioning & Performance (principally Finance) and an increase of 13% for Direct Care.

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 3rd party contributions, Co-funding etc. (mainly Finance, not Prevention & Personalisation)
- **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 8 Primary Nature of Complaints Concerning Prevention and Personalisation Services

Complaints trends can be found later in this report.

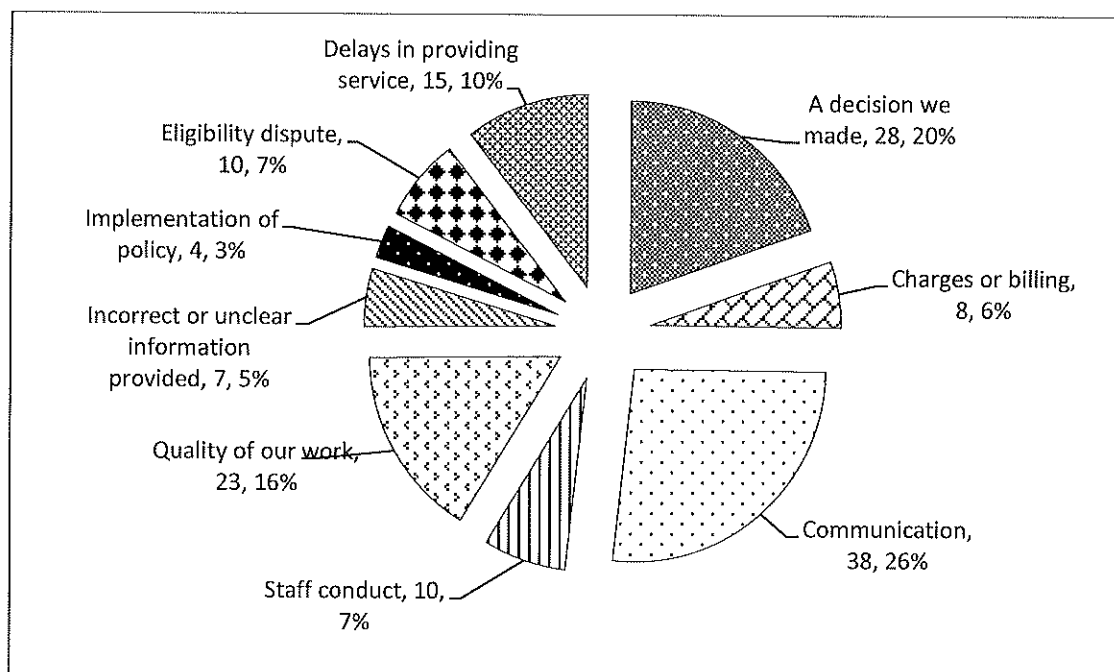
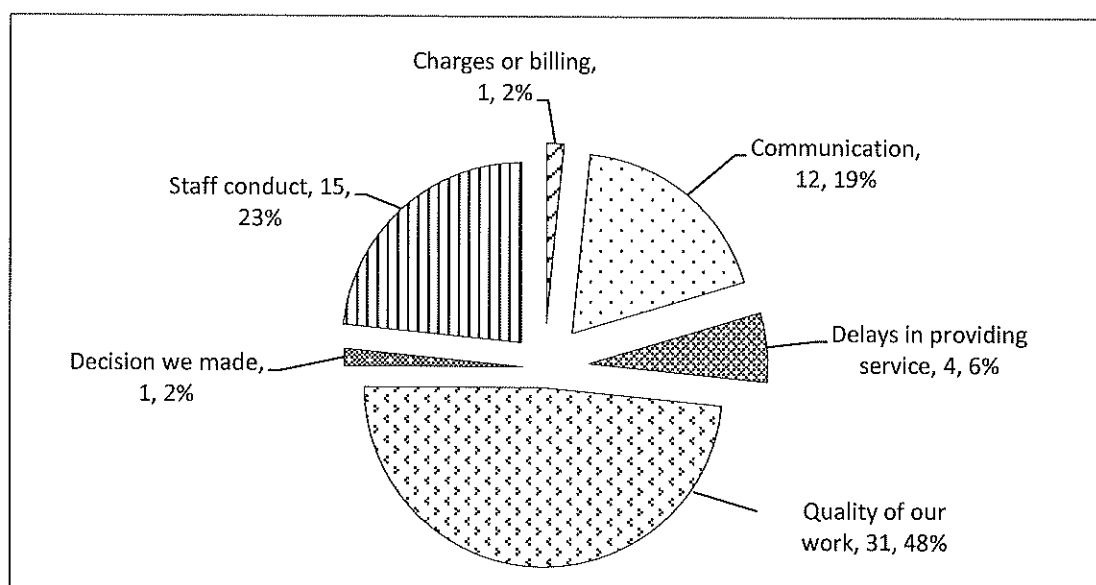


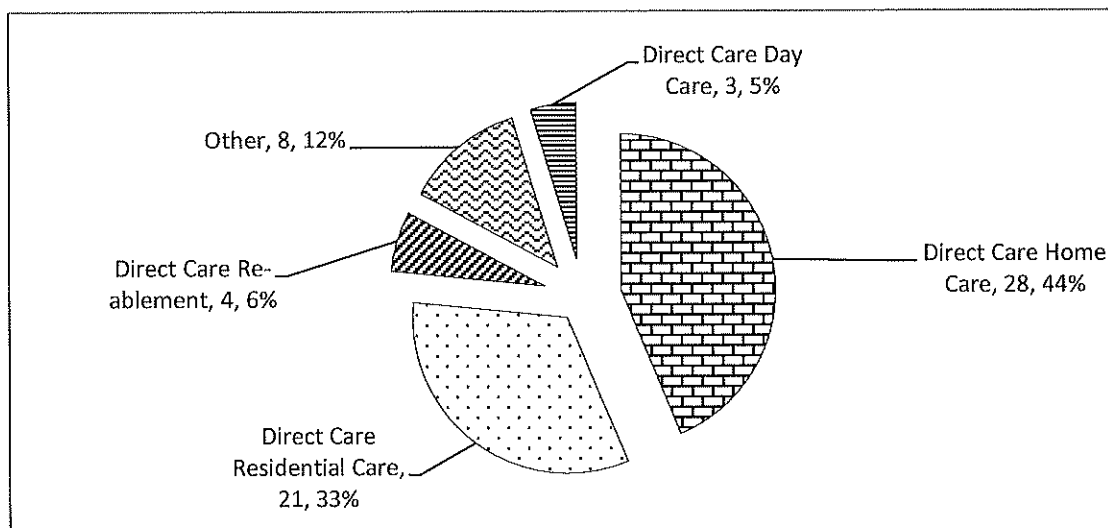
Figure 9 Primary Nature of Complaints Concerning Direct Care Services

Complaints trends can be found later in this report.



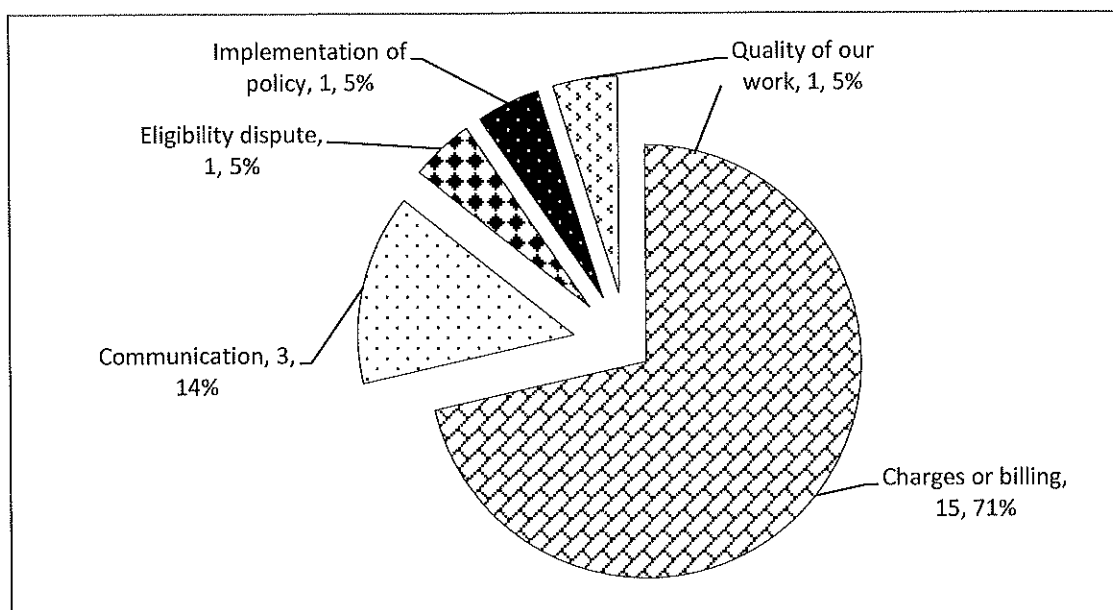
Direct Care services continue to see that the majority of their complaints, as in 2014/15 and 2013/14 relate to the quality of their work, as indicated in Figure 9 above. This category encompasses Home Care, Re-ablement, Residential and Day Care as indicated in Figure 10 below.

Figure 10 Breakdown of Direct Care Complaints by Service



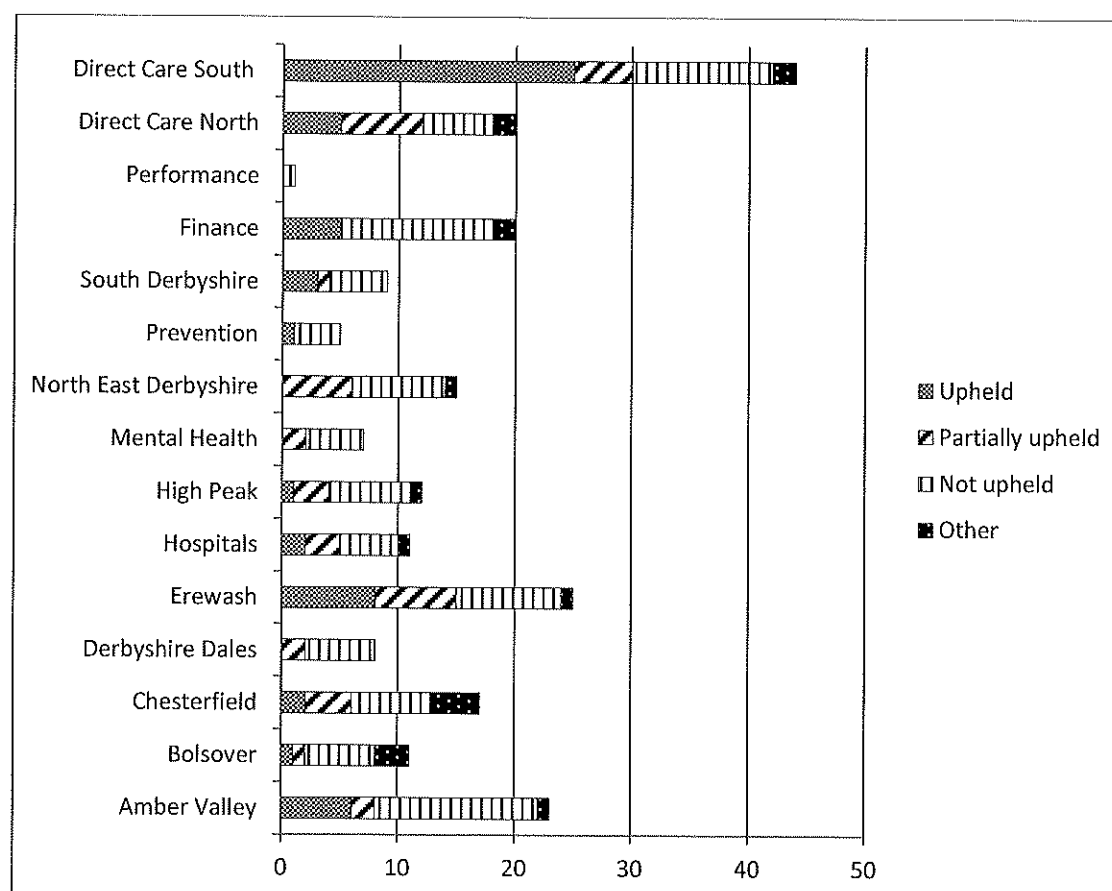
The Direct Care Quality and Compliance Group meet regularly to look at quality assuring Direct Care services. This includes a learning review of more serious individual complaints or serious case reviews and implementing how best to share learning across the service.

Figure 11 Primary Nature of Complaints Concerning Commissioning and Performance Services (including Finance)



What Services have People Complained About?

Figure 12 Responsibility Centres and Complaint Outcomes



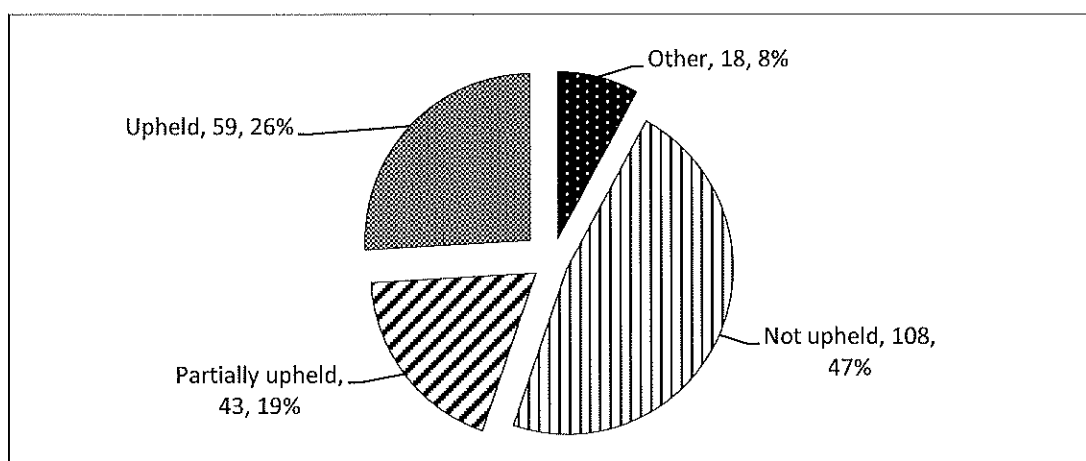
*NB 'Other' includes matters dealt with under safeguarding procedures, or complaints which were withdrawn, unsubstantiated, or which have not yet been responded to.

Some locality managers are responsible not just for Prevention & Personalisation 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. The total for North East Derbyshire includes complaints about the countywide services Intermediate Care (one), Supported Living Reviews (one), Deaf Services (one), and Community Lives (one). High Peak includes one complaint for countywide Transition Services.

Complaint outcomes

It is well known throughout society that some people are fearful of complaining and many are mistrusting of public organisations' willingness to look into complaints in an unbiased manner. Figure 13 below shows that 45% of complaints were either fully or partially upheld; reflecting an openness to admit errors and learn from them. This is an increase from 42% last year. Some examples of how we have improved our services as a result of a complaint are provided later in the report.

Figure 13 Complaint Outcomes for all services



* 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 14 below and, as for both last year and 2013/14; reflect a high proportion of complaints relating to the quality of our work and communication issues.

Figure 14 Table Detailing Outcomes by Complaint Theme

Subject of complaint	Outcome				Total
	Upheld	Partially upheld	Not upheld	* Other	Total
Quality of our work	16	10	32	2	60
Communication	21	10	20	5	56
A decision we made	3	6	20	1	30
Staff conduct	6	5	14	3	28
Charges or billing	4	2	17	3	26
Delays in providing service	4	7	6	2	19
Eligibility dispute	2	1	7	1	11
Incorrect or unclear information provided	3	1	2	1	7
Implementation of policy	1	1	5	0	7
Discrimination	0	0	0	0	0
Total	60	43	123	18	244

**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.*

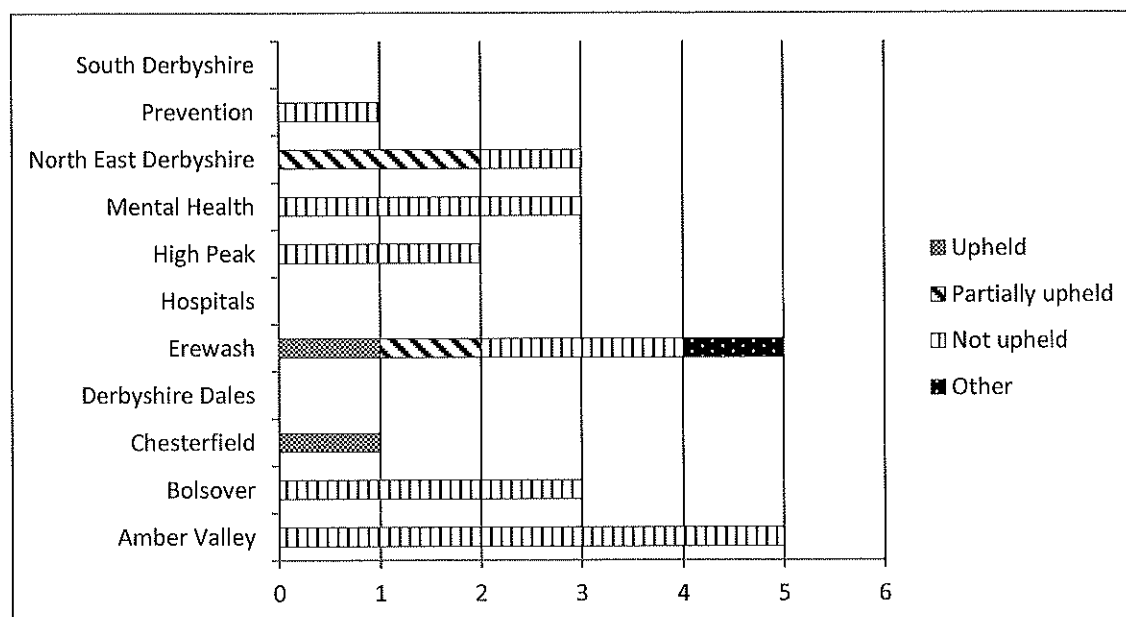
Quality of Work Issues

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

Prevention & Personalisation services generated 23 of these complaints, Direct Care services generated 31 and Commissioning & Performance, Finance Team generated one.

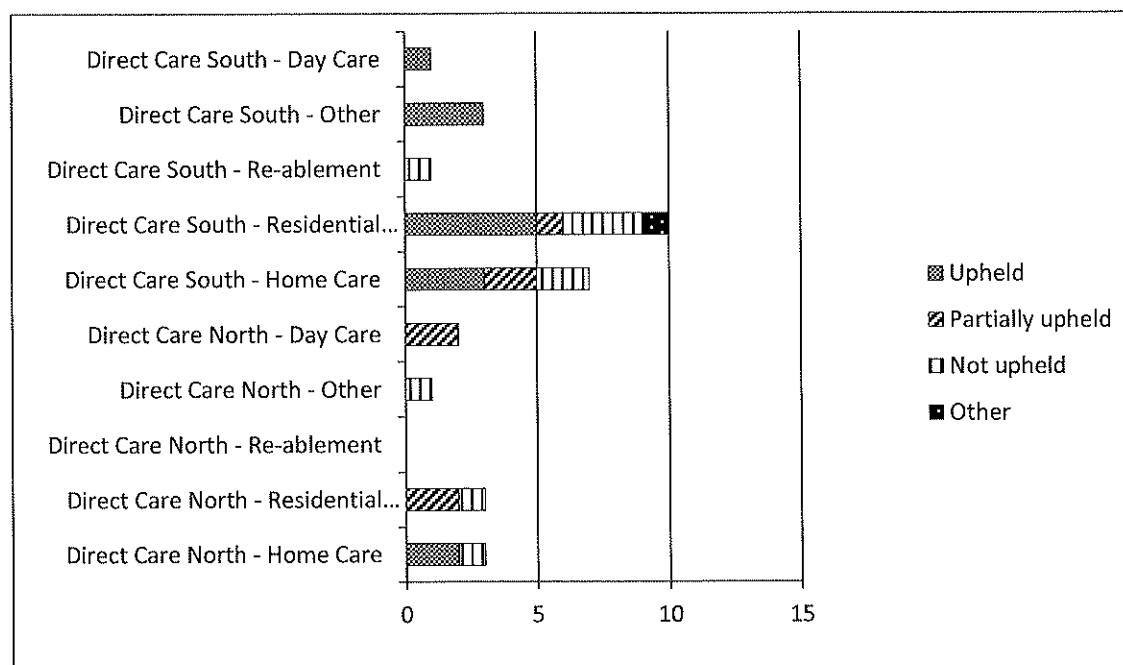
26 complaints of this kind were partially upheld or upheld whilst 27 were not upheld. The figures below show the breakdown complaint outcomes for this category.

Figure 15 Breakdown of Quality of Work Complaints by Prevention & Personalisation Services



**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.*

Figure 16 Breakdown of Quality of Work Complaints by Direct Care Team

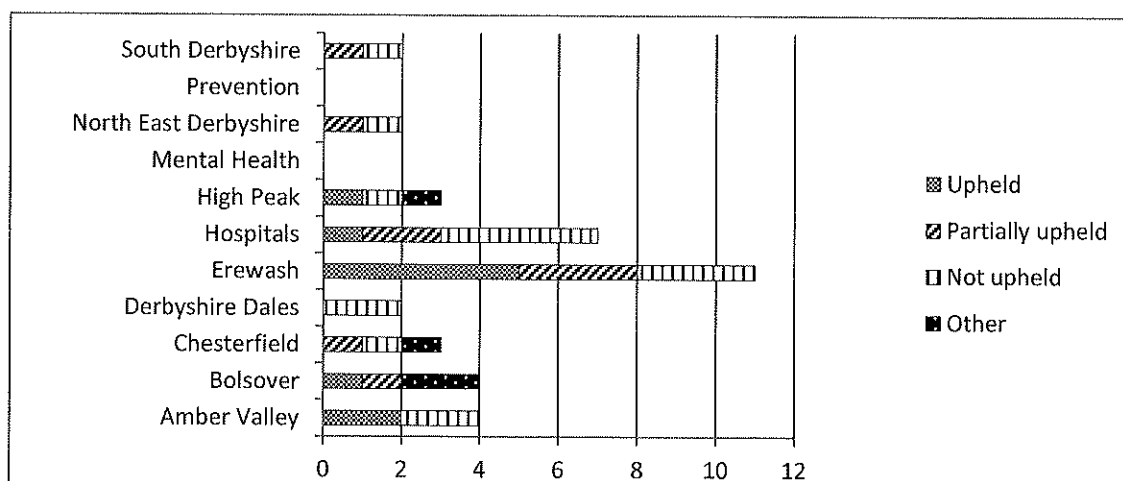


**NB 'Other' refers to matters best dealt with under safeguarding procedures, or complaints which were withdrawn, unsubstantiated, or which have not yet been responded to.*

Communication Issues

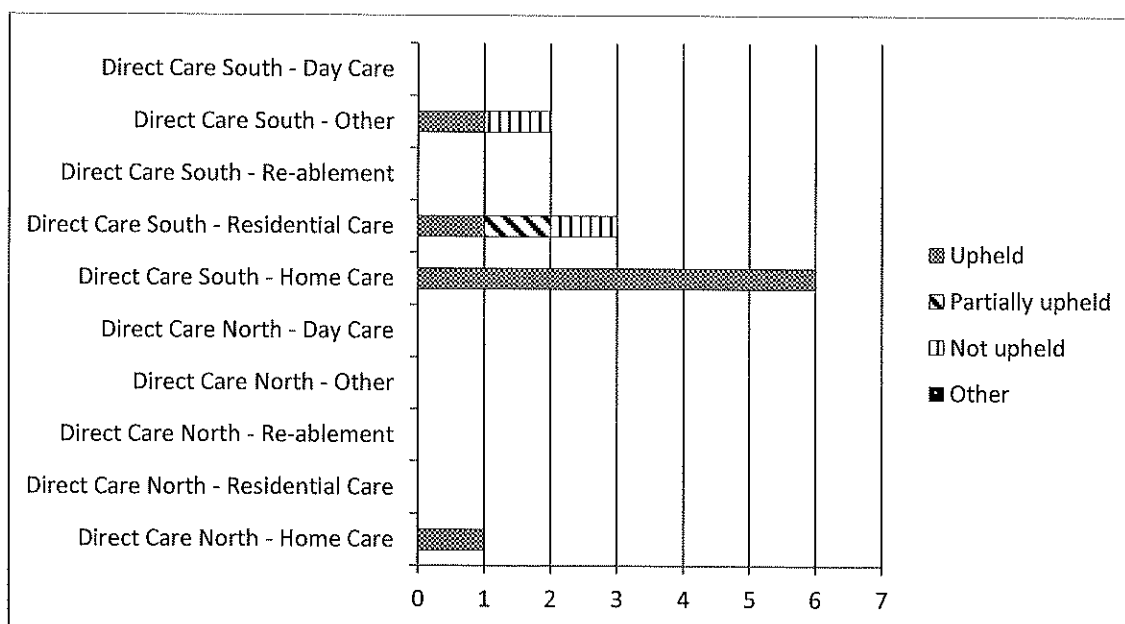
The second highest number of complaints received was on this subject. 30 of the 53 complaints about communication were either partially upheld or fully upheld. Prevention & Personalisation services generated 38 of these complaints, with Direct Care services generating 12 and Commissioning & Performance, Finance Team generating three.

Figure 17 Breakdown of Communication Complaints by Prevention & Personalisation Services



**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.*
The total for North East Derbyshire includes complaints about the countywide services Intermediate Care (one) and Deaf Services (one).

Figure 18 Breakdown of Communication Complaints by Direct Care Services



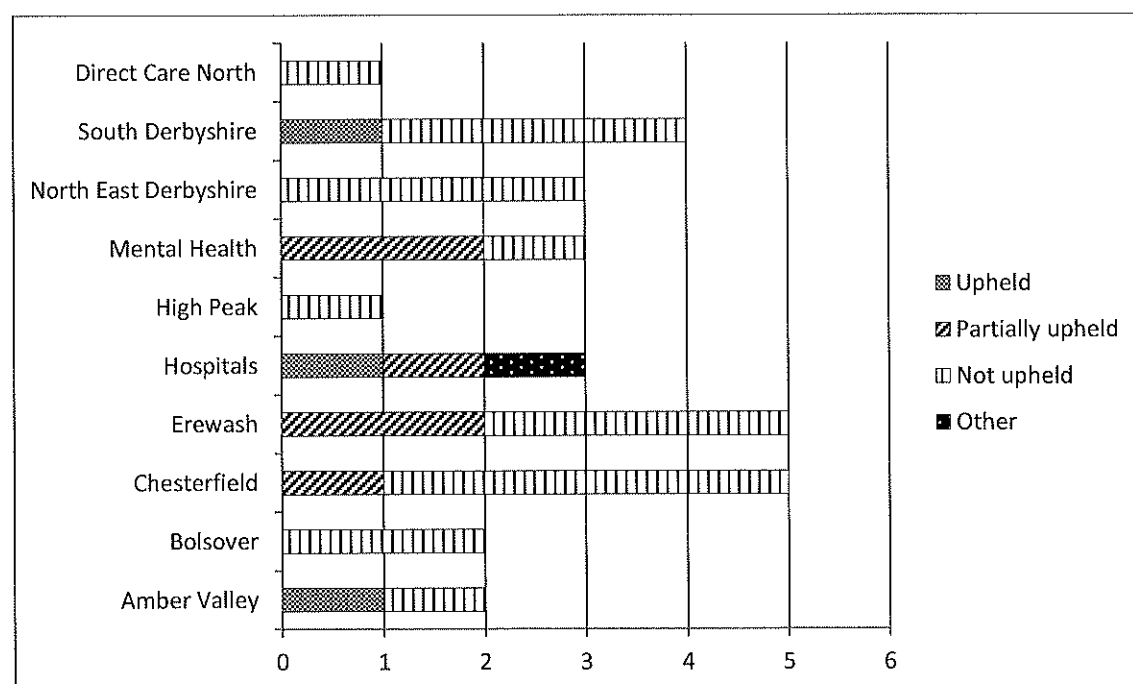
Breakdown of Communication Complaints by Commissioning & Performance Services (including Finance)

The Finance team received three complaints, one was partially upheld, one not upheld and one other.

Breakdown of Complaints regarding A Decision We Made

This year the subject 'a decision we made' has figured highly in the Prevention & Personalisation division. Figure 19 below shows the spread across teams. Of all 29 complaints received, nine complaints of this kind were partially upheld or upheld whilst 19 were not upheld and one was withdrawn. The figures below show the breakdown complaint outcomes for this category.

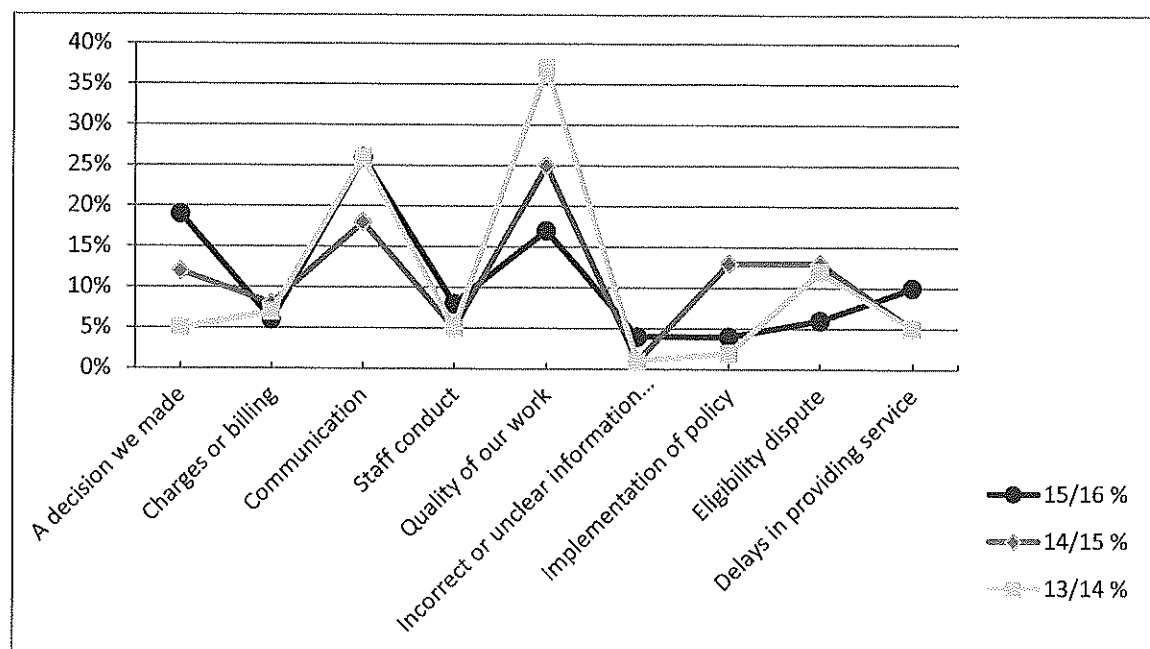
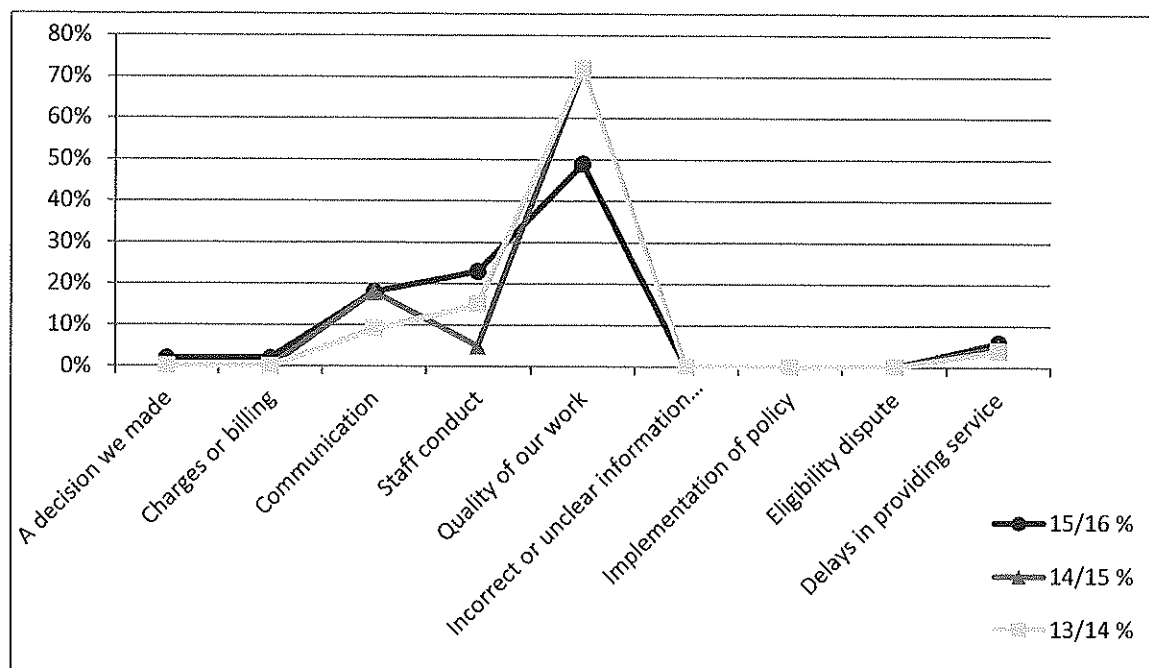
Figure 19 Breakdown of A Decision We Made Complaints by Team



**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.*

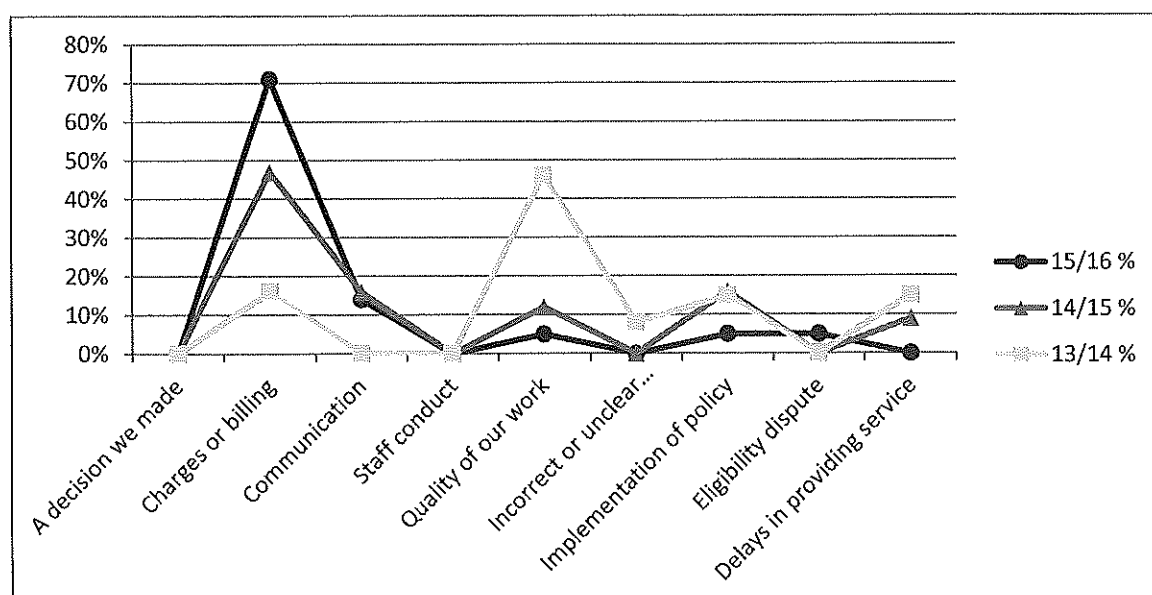
Complaints Trends

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

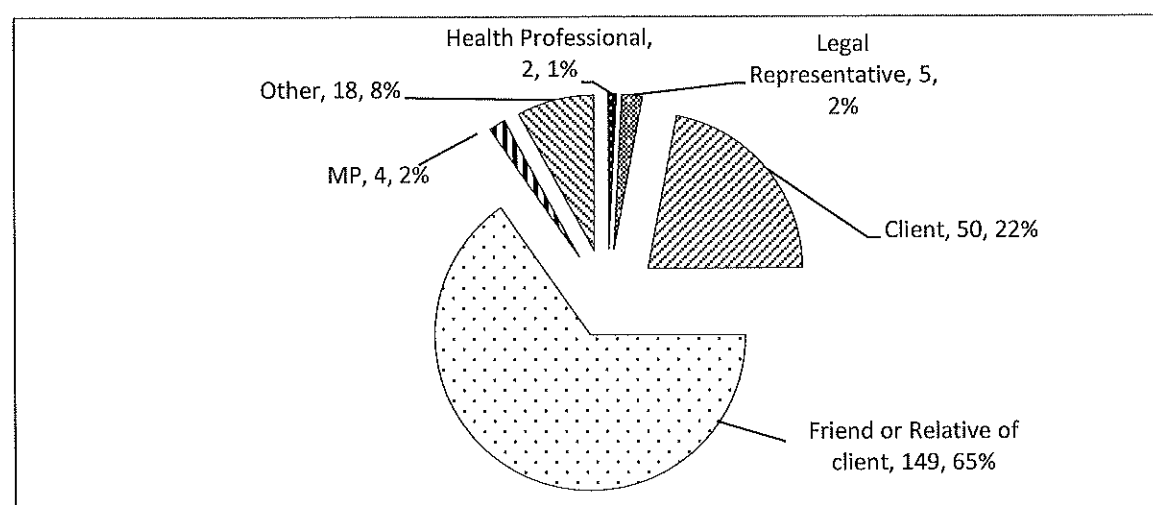
Figure 20 Prevention & Personalisation Services Trends by Categories**Figure 21 Direct Care Services Trends by Categories**

Both figures demonstrate a peak in Quality of Work complaints which has dropped in the years since the introduction of the new categories. Alongside this, there has been a rise in communication and staff conduct issues. This may be explained by the personnel responsible for logging complaints becoming more experienced in the use of the complaints categories. The Quality of Work category is sometimes used where it is difficult to define another category. It may also however, be a reflection of a need for further training for staff.

Figure 22 Commissioning & Performance Services Trends by Categories (including Finance)

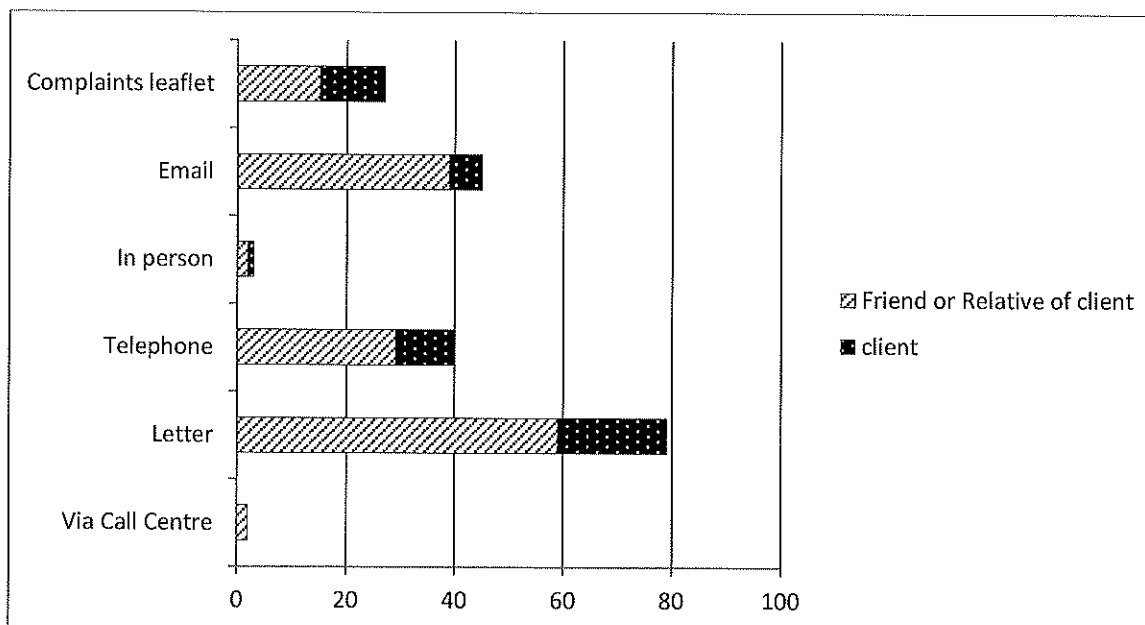
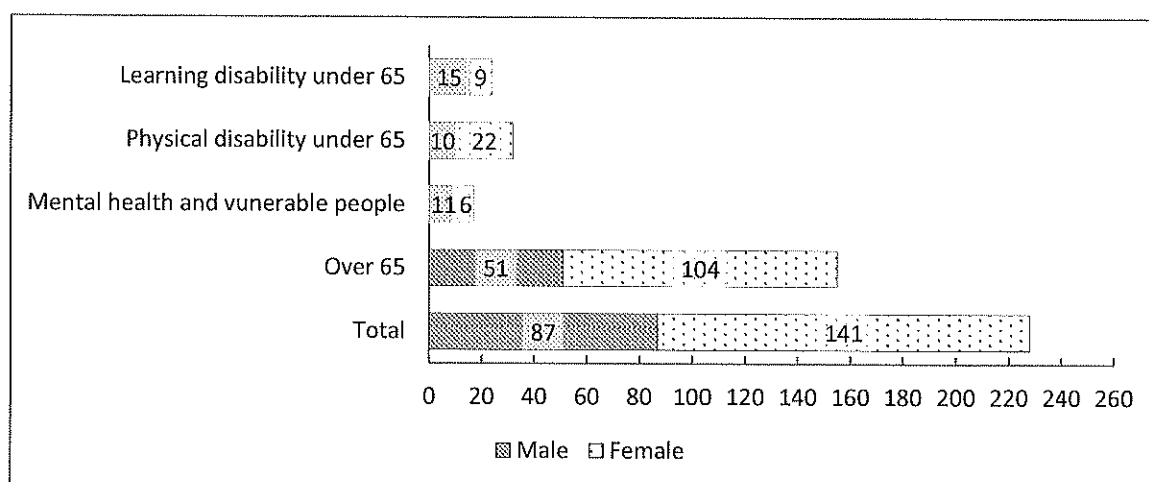


Analysis of Complainants
Figure 23 Who has Complained?



As with previous years the overwhelming majority of complaints continue to be from friends and relatives of clients. It is encouraging to see that the number of clients complaining for themselves has increased slightly, from 17% in 2014/15 to 22% in 2015/16.

As can be seen from Figure 24 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. Three complaints were made in person this year which is the same number as last year.

Figure 24 How Clients and Friends or Relatives have complained**Equalities – Statistics and Analysis****Figure 25 Clients – Age, Gender and Disability**

*Please note that some clients have more than one Primary Support Reason. This breakdown of clients' reflects much the same pattern as in 2014/15

Figure 26 Equalities Information – Analysis

Protected Characteristic Group	Findings
Ethnicity	One client identified as being of mixed or multiple ethnicities, three identified as Asian/Asian British, two identified as being Black or African or Caribbean or Black British, three clients have not stated and six are unknown. The remainder of clients are white.
Age	155 complaints related to clients known to be over the age of 65. Given the volume of services provided to this age group this is to be expected.
Gender	In total 141 complaints received concerned female clients and 87 men concerned male. The proportion of women receiving services in older age continues to be 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. 24 complaints were related to clients with a learning disability, 8 were about Mental Health services and 32 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 can only be assumed that this is not an area of significance.
Religion and belief	64 of the clients who had complaints raised regarding their care were Christians, 14 have no religion, four stated their religion as 'other', two as Jehovah's witness and one as Sikh. The remaining 143 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 93% success rate (previously 91% in 2014/15 and 87% in 2013/14) in acknowledging complaints within the regulatory three working days of receipt.

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

Of the 244 complaints that were responded to, 186 were given an expected timescale of ten working days. 135 of these (73%) were responded to within the ten days. 42 were given an expected timescale of 20 days, of which 34 (81%) were responded to within the 20 days. Overall, 169 complaints (74%) were responded to within the timescale given at the time of the acknowledgement. This is 21% higher than last year's figure of 53% and brings us much closer to the 80% departmental target being responded to within the agreed timescale.

Complaints 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:

Figure 27 Table Showing Examples of Complaint Outcomes

Service Area	Complaint and Outcome
Direct Care – Residential service	There were complaints about difficulties in differentiating staff roles and responsibilities as well as seeing their names in a residential home. Following consultation the use of different coloured uniform (polo t-shirts all the same costings) for differing roles was implemented- Green for care staff, red for activity staff, pink for domestic staff plus each member of staff also has a name badge which is clearly visible rather than just the DCC official ID.
Direct Care – Home Care	Following a complaint about communication with Out of Hours care worker (community) staff, the accuracy of information shared verbally is now double-checked prior to the end of each call.
Contracting and Compliance	The introduction of 'three day' collections to reduce distress following bereavement had been highlighted as relatives needed the equipment to be taken away quicker than the normal ten day collection; a three day collection was added to the new Community Equipment Service contract in December 2015 and has been extremely well used.
Communication- all services	Following concerns about communication and information provision, a number of factsheets have been developed for the public and articles shared internally in the staff bulletin including one, for example, specifically about NHS Continuing Health Care. These articles all help to raise people's level of professionalism and competence and enable them to better signpost and support 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.

The number of complaints considered about Adult Care in Derbyshire increased this year from 11 in 2014/15.

21 complaints were received by the LGO during the year.

- The LGO found no fault on the part of the Council in three cases
- The LGO decided not to investigate four cases
- The LGO found fault on the part of the Council in five cases (an increase of one from 2014-15)
-

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

Adult Care is awaiting decisions in two cases.

In two of the cases where fault was found on the part of the council, the providers delivering care on behalf of the Council were at fault however, the Local Government Ombudsman would only find maladministration by the Council as the commissioner of the service and not the Provider.

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

- £100 was paid to the complainant. The Council failed to tell Ms A about the weekly top-up fee which she was liable to pay towards the fees for the residential care home she chose for her mother. The Council has now apologised and is currently revising its procedures.
- £250 was paid to the complainant. The Council failed to consider whether the care home was the only one which could meet her mother's needs in 2013 and there was a delay in telling Mrs Q the outcome of her mother's financial assessment. The Council has now apologised.
- £50 was paid to the complainant. The Council failed to acknowledge the pain and distress caused to Mr G by a missed call by his care provider. The Council has now apologised.

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 dealt with by Adult Care was 108, of these 72 were from MPs and 22 from County Councillors on behalf of their constituents, the remaining 14 were from clients or their representatives. The number of enquiries from MPs shows a decrease from 83 in 2014/15 and 85 enquiries in 2013/14.

The number of Service Enquiries dealt with by Adult Care includes enquiries which have been directed to Adult Care via local councillors on behalf of their constituents and passed to the department by the Members Case Work System.

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 although handled in Adult Care 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 9 Corporate Complaints were dealt with, which is considerably less than the 35 the year before. Five of these related to quality of our work. Two of the Corporate Complaints were upheld.

ACTION PLAN 2015/16

Every year the department draws up an action plan to make positive changes as a result of learning from complaints. Figure 29 shows progress on the action plan for the period last year (2015/16) is as follows:

Figure 28 Table Showing Action Plan for 2015/16 and Progress

Action	Target Date and Activity
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	This phase of the Care Act has been deferred until 2020 so will show in the Action Plan for the relevant forthcoming year (2018/19/20).
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	Due to the prioritisation of restructuring within the Direct Care workshop forum this has been deferred until 2016/2017.
Maintain a high quality Complaints Administration service during changes to personnel	The Complaints Administration has continued effectively to a high standard during the permanent post-holder's Maternity Leave.
Review process for determining timescales for response to complaints	Practice Guidance not completed - requires further action - deferred to 2016/17.
Ensure that the Adult Care Complaints Policy and processes are fit for purpose in the context of the Care Act	The policy has been reviewed and continues to be compliant with the Care Act 2015.
Improve response times to complaints within the target time	In 2016-17 the percentage of complaints responded to within the timescale was 74%. This compares favourably with 53% in 2014-15 although it is still less than the target of 80%.
Produce monthly data by group manager on compliance with response times	Cumulative complaint response report produced monthly and shared with Senior Management Team.
Review the internal publicity campaign on the importance of communication, which continues to be a major ground for complaints	A number of articles are shared through the Practice Bulletin and Factsheets regularly reviewed for accuracy as well as new ones developed.
Review the degree to which complaints are reported against individual elements of a service	We have continued to report at a management level but have highlighted in the commentary in the report where county-wide services fall under the remit of a particular group manager.

LOOKING FORWARD

Figure 29 Action Plan 2016/17

Action	Target Date and Activity	Responsible Officer
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	March 2017	Service Manager for Performance
Review process for determining timescales for response to complaints - Practice Guidance to be completed	October 2016	Service Manager for Performance
Improve data accuracy by reviewing guidance materials for complaints clerks	July 2016	Complaints Administrator
Develop eLearning package for 'Effective Complaints Handling'	October 2016	Service Manager for Performance
Review staff guidance and improve information available to clients regarding 3rd party top-ups	September 2016	Service Manager for Performance & Complaints Administrator in conjunction with Finance
Review of Complaints Policy/Procedure to further clarify relationship with safeguarding and disciplinary processes.	November 2016	Service Manager for Performance
Address speed of response to complaints with those managers who have been consistently under the 80% target	Ongoing	Assistant Directors

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](#).

