

By: Oliver Mills – Managing Director, Kent Adult Social Services

To: Adult Social Services Policy Overview Committee –
16 November 2007

Subject: **ADULT SOCIAL SERVICES ANNUAL COMPLAINTS REPORT**

Classification: Unrestricted

Summary: This report provides Members with information about the operation of the Adult Social Services complaints and representations procedure between 1 April 2006 and 31 March 2007.

Introduction

1. (1) It is a statutory requirement under the following items of legislation for local authorities to have in place a complaints and representations procedure for Adult Social Services:

- NHS & Community Care Act 1990 (section 50)
- Health & Social Care Act 2000
- Local Government Act 2000

(2) Each local authority that provides social services is required to produce an annual report relating to the operation of its complaints and representations procedure.

(3) An annual report covering complaints and representations activity across adult social services has been presented to Members each year. This Annual Report provides Members with information about the operation of the Adult Social Services complaints procedure between 1 April 2006 and 31 March 2007.

(4) The report contains information on the number and type of complaints received by the Directorate, together with examples of how information gathered from complaints is utilised to inform, influence and improve service design and delivery.

(5) The report also informs Members of the current consultation from the Department of Health on key changes proposed to the operation of the complaints procedures with effect from 2009.

Background

2. (1) Members may recall from last year's annual report that significant changes were made to the complaints procedures. This was due to the following:

- i. New complaints Regulations came into force with effect from 1st September 2006, together with Department of Health Guidance entitled, "Learning From Complaints – Social Services Complaints Procedure for Adults". Details of the new process were provided to the Committee in November 2006.

- ii. The restructuring of Directorates, as mentioned in last year's report, meant that changes were made to the complaint handling arrangements for both Adult Social Services and Children, Families and Education Directorates. This resulted in the disaggregation of customer care teams to reflect these changes.

(2) During this period of change, the Directorate undertook a number of initiatives to ensure that it complied fully with the new Regulations, namely:

- i. Prior to the introduction of the new procedures, staff workshops were held to notify staff of the forthcoming changes. In addition, a briefing paper highlighting the key changes was circulated to all staff to ensure they were fully apprised of the new procedures. The guidance for staff, available on the Intranet, was also amended to reflect the changes.
- ii. The leaflet, "Comments, Complaints and Compliments" was revised and circulated throughout our offices and information points. This information is also available on the KCC website and can either be viewed on line, downloaded, or a hard copy can be ordered, as best suits the complainant.
- iii. With the introduction of changes to the constitution of Complaint Review Panels, it was identified that more 'independent' people needed to be recruited to sit on the Panels. (The Regulations require two of the three Panel members to be independent of the Local Authority) In order to comply with this, additional members were recruited and attended a training session organised by the customer care department and facilitated by the Local Government Ombudsman.
- iv. The database used to record all complaint information has been reviewed and updated to reflect the changes to both the Directorate structures and the complaints procedures.

(3) With the introduction of a new set of shorter timescales for responding to complaints, it is pleasing to note that the response times have improved from previous years. The current response time of 20 working days for stage 1 of the process is 79%, an increase of more than 15% on previous years. Although this indicates a significant improvement in performance, the customer care teams aim to improve this further in subsequent years. All stage 2 complaints are responded to within the required limit.

(4) Throughout the period of change, the Directorate maintained an effective and robust approach to dealing with complaints and continued to be receptive and responsive to complaints, compliments and enquiries, in accordance with the statutory guidance. While there is a legal requirement on the Directorate to have a complaints procedure in place, the Directorate views complaints as a valuable form of feedback, which is used to assist with the development and improvement of services. The new Regulations encourage the Directorate to embrace the opportunity to learn lessons where a service has failed to reach an expected standard.

The Number of Complaints and Compliments Received

3. (1) In 2006/07, 430 complaints were received; this is a slight increase from the previous year when 413 complaints were recorded. 368 of these were logged as statutory complaints and in comparison to those reported the previous year, 358, this once again

shows an increase in the number received. There were 725 merits (or letters of compliment) received during the year. The number of merits has increased significantly for two consecutive years.

(2) The number of complaints and merits needs to be seen in the context of the number of people accessing services. In 2006/07, there were over 31,000 referrals to Adult Social Services, there were also over 47,000 people in receipt of services in March 2007. The number of complaints, therefore, is relatively small compared to the number of people accessing the services.

(3) When analysing complaints, it should be remembered that an increase or decrease in the number of complaints does not necessarily reflect a change in the standard of service provided. An increase might indicate the positive view the directorate takes towards complaints, together with the fact that people are well informed about how they can make a complaint. Given the vulnerability of many of those people who access our services, it would be cause for concern if people felt unable to make a complaint if they were dissatisfied with the service(s) they received.

(4) Of the 430 complaints, 368 were logged as statutory complaints under the NHS and Community Care Act. The other 72 complaints were from "non qualifying individuals" (not service users or carers); these complaints are still looked into and responded to, but not as part of the statutory process.

(5) The emphasis in the complaints procedure is to try to resolve complaints at a local level. If the complaint is not resolved at Stage One or if it is particularly serious, then the complaint can progress to Stage Two. Stage Two complaints are independently investigated by an off line manager or an investigator who is independent of KCC, in accordance with the new guidance. The third stage of the process is a Complaint Review Panel.

(6) Of the 368 statutory complaints received in 2006/07, 19 were investigated under Stage Two of the complaints procedure and 2 went on to a Complaint Review Panel.

(7) Further details about the number of complaints and representations received are provided in Appendix 1, attached to this report.

Services for Adults with a Disability

4. (1) There were 50 complaints about services for people with a disability. This was a decrease on 2005/06 when there were 78 complaints.

(2) Care management accounted for 41 of the complaints and 5 were about residential care. The reasons for complainants expressing their dissatisfaction follows a similar theme to previous years, typically, with the outcome of their assessment, where they felt they needed more care than was identified.

Services for Older People

5. (1) In 2006/07, there were 201 complaints about services for older people, indicating a slight increase compared to 2005/06 when there were 190 complaints received. The trend in the number of complaints about residential care services has

continued to decrease from 34 in 2005/06, to 17 in this reporting period. One likely reason for this continued reduction is that people raise their concerns direct to the Commission for Social Care Inspection, which has an inspection and registration responsibility for care homes and a duty to check that homes are meeting required standards.

(2) Complaints about domiciliary care continue to increase from 33 in 2005/06 to 46 in 2006/07. The reasons for these complaints show a similar trend to previous years, which is often related to inconsistency in service provision, poor communication, discrepancies between the time allocated for a visit and the time spent with the service user. Oliver Mills (the Managing Director of Adult Social Services) and Cathi Sacco (Head of Contracting and Quality Assurance) held a second meeting with a group of service users and carers, who had raised concerns about this. Work is ongoing to address the concerns raised with the aim of improving satisfaction levels, as follows:

- i. There are mechanisms in place for addressing issues of concern and there has been a focus to ensure that these are working.
- ii. The contracting department has introduced a Quality Assessment Framework and the systems currently in place are working. As a result, we are able to target those providers that are not performing as well as expected.
- iii. In January 2008 CSCI intend to introduce a rating system for providers.

Occupational Therapy and Sensory Loss

6. (1) In 2006/07, there were 50 complaints about the O.T Bureau, 1 of which was about Deaf Services.

(2) As in previous years, the majority of these complaints related to the time taken for equipment to be provided or for an adaptation to be completed. There were also delays in work being undertaken, following completion of the assessment, which on occasion is due to funding problems, such as obtaining funds through Disabled Facilities Grants.

Other Specialist Service Complaints

7. (1) There were 49 complaints about other Specialist Service Units. This includes 18 complaints about the Adult Services Provider Unit, which tend to include issues of respite care and staff behaviour.

(2) 24 of these complaints were received about in-house registered care centres for older people. Many of these arise as a result of relatives feeling there had been a lack of communication between themselves and the centre and/or dissatisfaction with the quality of the care provided.

Complaints to the Local Government Ombudsman

8. (1) In 2006/07, 4 people contacted the Ombudsman's office about issues relating to Kent Adult Social Services. One of these was not upheld, two of these were outside the jurisdiction of the Ombudsman, as they were premature and the complaint was referred to the adult social services complaints procedure. One resulted in compensation of £500 being awarded as it had not been made clear that the client could have used their own agent for works undertaken on the house by way of a Disabled Facilities Grant. This

would have enabled the individual to use the Care and Repair agency or an independent architect.

Learning the Lessons from Complaints

9. (1) Adult Social Services work hard to improve the quality of the services that we provide with the intention of meeting our service users needs and expectations. There are occasions when things go wrong and as a Directorate we continue to focus on developing a listening and learning culture where feedback from service users is fed into the system for driving improvement, through business planning and commissioning processes.

(2) The customer services department adopts a positive attitude towards complaints, hence the complaints procedure is both widely publicised and specifically focussed on those people who use our services. Staff are encouraged to view complaints as a means of improving a particular service rather than a mechanism to apportion blame, although this will only happen through continued training and support

(3) Training for staff on customer care is made available as part of the core induction programme, as well as being available to individual teams. This needs further focus in order to reduce the number of complaints related to the behaviour of staff. The training emphasises that a good complaints process should provide the complainant with a speedy response, that addresses their concerns and aims to resolve the complaint to their satisfaction, wherever possible. While there is a genuine focus on ensuring that lessons are learned from complaints, it is also possible to learn important lessons from compliments and we therefore welcome feedback on peoples' good experiences too.

(4) Information gathered from complaints is provided to operational managers, training managers and policy staff, so that themes and trends can be identified, with appropriate action taken to make service improvements.

(5) An example of the impact just one complaint can make is illustrated by a complaint received from a service users mother and the actions that arose as a result: The staff rota information system was changed to minimise errors and to ensure continuity and consistency of support; a system was devised where service users were empowered to choose a maximum of four members of staff to ensure that both the service users and their relatives were comfortable with the personality and skills of the staff. This was then reflected in the staff rotas; the fire risk assessment was updated; changes were made to the staff induction programme to allow a minimum of 24 hours shadowing of another member of staff.

(6) Another example from an in house residential provision resulted in several changes being made following a Stage 2 investigation. In this case, a leaflet was developed to inform clients of the types of care offered; the Terms and Conditions document was reviewed and amended to an easy read format; staff were provided with additional training to enable them to discuss the Terms and Conditions document with service users, relatives or advocates; dining chairs were modified to make them easier to use and more suitable crockery was made available for service users; the security call units were moved to a more appropriate place to allow staff to identify callers;

(7) One continued area of focus has been on improving the transition from children's social services to adult social services. Although some people do still experience problems, the Directorate is committed to ensuring a smooth transition for each service user. The Leader of the Council recognised the importance of this and it is included within the Towards 2010 document. In addition, service users and carers were consulted and complainants were given the opportunity to be involved in the consultation on the document.

Other Developments

10. (1) Notwithstanding the significant changes that have taken place in the past year in regard to the complaints procedures, it is envisaged that further changes to the process will occur in the future. The White paper, "Our health, our care, our say", published in January 2006, included a statement that, "... by 2009, there will be a comprehensive complaints system across the whole of health and social care". The Department of Health consultation document, "Making Experiences Count" was issued in June 2007, the feedback from which will be used to develop the proposed new complaints model.

(2) The three Customer Service teams have purchased an innovative tool, "Complaints Made Easy", which will enhance the complaints training currently provided to staff. The training tool consists of a board game and manuals, which focus on a totally different way of delivering the training to staff. The emphasis is much more on interactive learning and the length of the training can be adapted to fit in with the needs/time pressures of the teams themselves. Six members of the customer care staff attended the formal training required to enable them to deliver the training to Directorate staff. The intention is to roll out the training within areas as appropriate. In addition, the induction element of customer care training programme will also be adopting this new training tool.

(3) With effect from September 2006, all complainants administered by the HQ customer care team have been sent a questionnaire asking for feedback on the administration of their complaint. With effect from 1 April 2007 this will be replicated within area customer care teams. This was not intended to encourage complainants to raise their complaint again, but to find out about their experience of the process and seek to identify improvements that could be introduced. Of the 21 questionnaires issued between September 2006 and March 2007, 11 were completed. A brief analysis indicates that:

- i. 73% thought that the customer care staff/staff involved in the investigation of their complaint were helpful and courteous.
- ii. Interestingly, of those 73%, 50% remained dissatisfied with the outcome of their complaint. No reasons were given for their dissatisfaction and as the questionnaires are completed anonymously, it is not possible to ascertain why this is so.
- iii. 82% did not know about the complaints procedures before they complained, emphasising the need to continue to promote and provide information on the process.

(4) With effect from 1 August 2007, Specialist Services was restructured and staff now work within the respective areas of the county, East or West. Customer care responsibility for complaints handling has transferred from HQ to area teams.

Conclusion

11. (1) During 2006/07 the Adult Social Services Directorate has concentrated its efforts on:

- implementing the new legislation and associated guidance
- amending its written procedures
- publicising the changes to the procedures to both the public and staff
- providing training to staff
- Maintaining a robust and effective complaints procedure in line with statutory requirements

(2) Complaints are seen as providing valuable customer feedback, with the information from complaints being fed into the planning and commissioning processes to improve and develop services.

Recommendations

12. Members are asked to NOTE and COMMENT on the contents of this report.

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Background documents: None

Appendix One

Complaints, Enquiries and Merits Received Between 1 April 2006 and 31 March 2007.

Number of Complaints by Originator

Originator	Number	%
Advocate	3	0.8
Anonymous	-	-
Carer/close relative	229	62.2
Central Government Dept	1	0.3
Client	108	29.4
Contractor	2	0.5
County Councillor	2	0.5
Health Representative	2	0.5
Homeowner	1	0.3
Housing Association/Landlord	1	0.3
Investigator	1	0.3
KSS staff	1	0.3
Legal Representative	3	0.8
Member of Parliament	6	1.6
Neighbour client/Establishment	1	0.3
Other local authority	2	0.5
Other KCC Department	-	-
Other	5	1.4
Service Provider	-	-
Voluntary Organisation	-	-
Total	368	100%

Number of Records by Contact Method

(For complaints, enquiries and merits received between 1 April 2006 and 31 March 2007.)

Contact Method	Number	%
e-mail	97	7.1
Fax	3	0.2
Letter	1079	78.5
Other	48	3.6
Telephone	138	10.0
Text	0	0
Visit	3	0.2
Website	6	0.4
Total	1,374	100%

Number of Records Received by Type.

1 April 2006 to 31 March 2007.

Type of Record	Number	%
Enquiry	199	14.5
Merit	735	53.5

Non Statutory Complaint	72	5.2
NHS and Community Care Act Complaint	368	26.8
Total	1,374	100%

Comparison of complaints numbers for 2005/06 and 2006/07.

Service	2005/06.	2006/07
Contracting	37	39
Disability		
Care Management	42	41
Day Care	6	
Domiciliary	5	4
Residential	23	5
Other	2	
Older People		
Care Management	112	132
Day Care	5	1
Domiciliary	33	46
Residential	34	17
Other	6	5
Specialised Services		
Adult Service Unit	19	18
Homecare	1	4
Older people	21	24
		3
O.T and Sensory Loss		
Deaf Services	1	1
O.T	41	49
Mental Health	2	4
County Benefits	1	1
Finance	4	18
Hospitals	11	22
Out of hours	2	1
Supporting People*	-	1
Direct Payments	3	1
HQ Learning Dis.	-	2
Others	2	1
Total	413	440

(Learning and physical disability figures have been amalgamated for this year's report due to the previous database not being set up to report separately)

* Other complaints in respect of Supporting People are dealt with directly by the team and are not reflected in this report as they are not part of the statutory framework.

Statutory Complaints by Subject.

1 April 2006 to 31 March 2007.

Subject	Number	%
Adult Protection	4	0.8
Application of Eligibility/Assessment Criteria	1	0.2
Assessment/Review	4	0.8
Behaviour of staff	69	14.0
Change/closure	4	0.8
Claim for compensation	1	0.2
Communication difficulties	19	3.9
Delay in decision making	7	1.4
Delay in provision of service	26	5.3
Direct Payment	4	0.8
Disputed decision	121	24.7
External service	51	10.4
Financial assessment	24	4.9
Housing	1	0.2
Impact of Application Policy	4	0.8
In house service	19	3.9
Incorrect billing	13	2.7
Lack of information	34	7.0
Meal service	17	3.5
More service wanted	4	0.8
Non delivery of service	6	1.2
Other	2	0.4
Personal Information	4	0.8
Problems contacting Adult Social Services	15	3.1
Request for service	34	7.0
Resource Issue	1	0.2
Transport	1	0.2
Total	490	100%

(Some people complain about more than one issue, therefore the total adds up to more than the total number of complaints)

Ethnicity	Number	%
African	2	0.5
Any other ethnic group	1	0.3
Asian other	1	0.3
Indian	4	1.1
Information declined	-	-
Mixed other	1	0.3
Not known	116	31.5
White and black African	1	0.3
White and black Caribbean	2	0.5
White British	234	63.6

White other	6	1.6
Total	368	100%

Outcome of complaints at Stage One (1 April 2006 to 31 March 2007).

Outcome	Number
Advice	4
Apology	85
Complaint withdrawn	5
Explanation	215
Financial Settlement	10
Issue resolved	11
No reply sent	2
Other	4
Other agency issue	12
Other ASD procedural issue	5
Policy change	1
Policy issue raised	1
Service changes	13
Total	368

Comparison Between 2005/06 and 2006/07

Type of Record	2005/06	2006/07
Enquiry	180	199
Merit	629	735
Non Statutory complaint	55	72
NHS and Comm Care Act Complaint	358	368
Total	1,222	1,374

Comparison between Areas.

Area	Number of Statutory Complaints
East Kent	174
West Kent	135
HQ	59
Total	368