



Complaints and Compliments Annual Report

1 April 2009 – 31 March 2010

**Adult Social Care
Customer Services**

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Executive Summary

This is the first annual report on Customer Services: Compliments and Complaints in Adult Social Care since the new complaints regulations came into effect on 1st April 2009. The purpose of the report is to inform customers, carers, elected members, partner agencies and staff about the work of Customer Services within Adult Social Care about the extent to which services are meeting our customer's expectations. The report also describes the action we are taking to improve the quality of the social care services that we deliver.

It has been a busy and challenging year for the Complaints Team, which provides a service for both Adult Social Care and Children and Young People's Social Care. The Team has been involved in a number of important projects, such as:

- Overseeing the split of the Social Care Complaints Service into dedicated Adults' and Children's Teams
- Co-ordinating the Leeds Partner Agencies to develop effective partnership working and working to implement the new single Complaints Procedure across Health and Social Care, which came into force on 1 April 2009
- Working closely with the Corporate Procurement Unit and developing a service specification for the Independent Person service, which will go out to tender
- Working closely with the Human Resource Development Service to develop a service specification for a complaints training programme, aimed at the independent, voluntary and faith sectors
- Reviewing and revising information literature for both Adults' and Children's Services

During the year under review, 2009/10, the following points summarise the key messages of compliments and complaints received

- 317 compliments were recorded compared to 184 in the previous year.
- 391 complaints were recorded compared to 346 in the previous year, representing an increase of about 12%.
- The time taken to acknowledge complaints improved significantly in this reporting period, rising to 98.7% compared to 69.6% in 2008-09. Whilst the statutory timescale for fully resolving a complaint is now a maximum of six months (with the timescale dependent on individual case's risk assessment), we aim to provide an initial response from service managers within 20 working days. During this reporting period, 67.7% of complaints were responded to within 20 working days compared to 55.2% the previous year.

The significant improvement in timescale performance compared to the previous year is attributable to the recruitment of an Administrative Officer who operates an efficient reminder system and involves senior managers in the case of a late response.

- Although there was an increase in the overall number of complaints (391, up by 12% in this reporting period compared to the previous year), the number of complaints that escalated to formal investigation by an Independent Investigating Officer reduced to 5 cases compared to 25 the previous year.
- 9 complaints were considered by the Ombudsman compared to 3 the previous year. Although this was an increase over the previous year, complaints 3 were judged as premature; 3 as having no or insufficient evidence to warrant an Ombudsman's investigation; and 3 led to local settlement.
- Monitoring of our compliments and complaints procedure has again led to a number of lessons to be learned. These are set out in the report.

John England
Deputy Director
Partnerships and Organisational Effectiveness

August 2010

1.0 PURPOSE OF REPORT

- 1.1 This report provides information about compliments and complaints received during the twelve months between 1 April 2009 and 31 March 2010, as required under the new Local Authority Social Services and National Health Service Complaints (England) Regulations, which came into effect on 1 April 2009.

2.0 BACKGROUND

- 2.1 The new Regulations place a duty on Local Authority Social Services and the National Health Service to establish and implement a procedure for dealing with complaints and representations.
- 2.2 It is a statutory requirement to produce an Annual Report which provides information on the quantity of the complaints received and the adequacy of the Complaints Procedure.

3.0 WHAT IS A COMPLAINT?

A complaint, as defined in Department of Health guidelines is:

‘An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority’s adults’ social services and the National Health Service provision which requires a response’.

If it is possible to resolve the matter immediately, there is no need to engage the complaints procedure.

4.0 WHO CAN MAKE A COMPLAINT?

Anyone coming into contact with Leeds City Council can make a complaint. The Corporate Complaints Procedure provides a process for all customers to use. If the complaint is about adult social care, the statutory complaints procedure for social and health care services will be used.

A person is eligible to make a complaint under the statutory complaints procedure where the local authority and the health service have a power or duty to provide or secure a service – and if the person’s need or possible need for the service is known by the local authority and the health service.

A complaint can be made by the representative of a service user who has been professionally defined (under the Mental Capacity Act 2005) as having no capacity to make decisions, as long as the representative is seen to be acting in the best interests of that service user.

Anyone can complain who is affected (or likely to be affected) by the actions, decisions or omissions of the service that is subject to a complaint.

5.0 THE NEW COMPLAINTS PROCEDURE

The new complaints procedure is a two-stage complaints system, focusing on local resolution and, if unresolved, an investigation by the Health or Local Government Ombudsman.

The aim of the new arrangements is to make the whole experience of making a complaint simpler, more user-friendly and more responsive to people's needs. The emphasis is to offer a more personal and flexible approach, which is effective and robust. Complaints are risk assessed and graded. The level of investigation needed is linked to the potential risk and the wishes of the complainant.

Complaints Officers, in discussion with the complainant and the Service Managers, will contact the complainant to agree the complaint, resolution plan and sought outcome. They will then determine the level of risk and complexity and, using the Making Experiences Count Complaints Toolkit, developed by the Department of Health, will determine a resolution plan. Options include mediation, resolution by the Service Manager, or an independent investigation.

Each complaint is treated according to its individual nature and the wishes of the complainant.

6.0 REVIEW OF COMPLIMENTS RECEIVED, 2009–2010

- 6.1 317 compliments were recorded, compared to 184 the previous year. Appendix 1 has a breakdown of the number of compliments received by area and service user group.
- 6.2 From this analysis it can be noted that the largest single number of compliments received refer to Learning Disability Residential AND Day services. An increase to 79 (25%) was recorded, rising from 7(4%) in the previous year. These compliments were received by the new Independent Living Project, in particular the respite service at Farfield Drive (42) and the emergency service at Scott Hall (8). Compliments about the Farfield Drive service referred to how much service users enjoyed their stay and looked forward to their next visit. They commended the friendly and supportive staff, the warm welcoming atmosphere and decor. They commented that the events and activities held by day services helped service users maintain their independence.
- 6.3 Day Services for older people and people with physical disabilities received 50 (16%) compliments, an increase over 18 received the previous year. These compliments often referred to the quality of care provided and the caring and friendly attitude of staff.
- 6.4 The in-house community support service traditionally receives a large number of compliments, yet it too saw a significant rise to 49 (15%) from 36 received the previous year. The same was true of the commissioned private sector community support service, which received 32 (10%) compliments, an increase over 22 received the previous year. Claimar (13) and Springfield (8) were the providers which received most compliments. Customers of the community

support service often referred to workers' care, support and professionalism, in allowing service users to maintain their independence and continue to live in their own homes.

- 6.4 Assessment and Care Management services continued to receive significant numbers of compliments, rising slightly from 34 to 37 (12%). Compliments often referred to workers' professionalism, tact, sensitivity and communication skills in dealing with complex and often traumatic situations.
- 6.5 Residential Care for older people received 32 compliments. In particular, The Green residential home received 17 compliments. Compliments often referred to the care and dignity afforded to relatives of residents who had passed their last days in our care.
- 6.6 The recording of compliments is largely dependent on written or telephone contact from service users or their families to the Director or other senior managers. Many individual compliments are made directly to employees across all services, either verbally or by personal letter. Whilst all employees are encouraged to share this information with the Complaints Services, so that it is recorded on the central system, many choose to keep this information to themselves.

7.1 REVIEW OF COMPLAINTS RECEIVED 2009-10

- 7.1.1 In the year 2009/10, 391 complaints were received compared to 346 the previous year. In 2007/8 323 complaints were recorded and this figure was similar to the numbers received in 2005-6 when 331 complaints were recorded. In 2006-7, changes to the contracts for Community Support services and the introduction of the Reviewing Team saw a significant increase in complaints, when 462 were received. Appendix 2 provides a breakdown of recorded complaints by category and by service user.
- 7.1.2 The most frequent category of complaint relates to Assessment and Care Management services. During the year, 113 (29%) complaints were recorded in this category, compared with 77 (22%) the previous year. 22% of complaints against this service referred to a perceived lack of support from social workers, whilst 21% expressed dissatisfaction with the outcome of an assessment.
- 7.1.3 The next significant category comprises complaints relating to commissioned Community Support Services. 82 (21%) complaints were received compared to 95 the previous year. In a year when overall numbers of complaints rose, Assessment and Care Management saw a reduction by 28%. 93 complaints were received in 2007-08 and 151 in 2006-07. As in previous years, inconsistent service delivery, including a failure of care assistants to arrive at a planned time or day, or unexpected changes of personnel within the care team, accounted for the vast majority of complaints (76%). There was an increase in the number of complaints about medication incidents to 13 (16%) from 9 (10%) in 2008/09.

- 7.1.5 As reported last year, the Social Care Complaints Service has continued to invest in Effective Complaints Handling Training for independent provider registered managers and the contracts team has continued its rigorous monitoring programme. These initiatives may be a contributing factor in the sustained positive trend in this sector.
- 7.1.6 The next significant category is the in-house Community Support Service provider, which received 52 (13%) complaints compared to 35 (10%) the previous year. 32 (62%) complaints referred to inconsistent service delivery, a near three-fold increase over 11 (32%) received about this issue in the previous year. This is a reflection of the introduction of the new rostering system introduced in this year. Complaints about staff attitude and conduct also rose to 8 (15%) from 5 (14%) received the previous year. Complaints relating to medication incidents remained stable at 4 (9%).
- 7.1.6 Finally, a number of categories represent small numbers of complaints where the issues are nonetheless significant. During the year 2009-10 there were 19 (5%) complaints regarding Learning Disability Residential and Day services, compared to 15 received the previous year. Complaints often reflected dissatisfaction with the level of support available from staff, but a small number referred to difficulties in relationships with other service users. There was also an increase in complaints about Learning Disability Assessment and Care Management Services, to 15 (4%) compared to 6 (2%) received the previous year. These complaints referred to a perceived lack of support from care managers, dissatisfaction with assessment outcomes and customer service issues.
- 7.1.8 The Equipment and Adaptation service also saw complaints rise, to 18 (5%) from 13 (4%) received the previous year. The majority of these complaints related to delays in providing equipment or adaptations, following assessment.
- 7.1.9 Commissioned Residential and Day service providers received 16 (4%) formal complaints this year, a similar number to last year (17). Complaints referred to a wide variety of issues, including staff attitude and conduct; allegations of physical assault and harassment by other service users; the quality of service provided; and medication issues. Where complaints indicated safeguarding concerns, investigation was undertaken under safeguarding procedures in the first instance.
- 7.1.10 In respect of the 30 complaints relating to other Council departments, 15 related to Passenger Transport services and 11 related to Catering services.
- 7.1.11 Last year, senior managers asked for data to be gathered specifically about complaints regarding medication incidents and problems with discharge from hospital. Complaints relating to medication incidents rose to 20 (5%) from 13 (4%) in 2008/09. Complaints about hospital discharge fell to 3 (1%) in 2009/10 from 13 (4%) in the previous year.

7.2 Formal Investigation

- 7.2.1 5 of the 391 complaints were formally investigated by Independent Investigating Officers, a significant decrease compared to previous years: 25 in 2008-09, 19 in 2007-08 and 10 in 2006-07. As is standard practice, complaints requiring formal investigation are investigated by Investigating Officers who are independent of Leeds City Council. Independent investigation has proved effective in resolving complex complaints.
- 7.2.2 The significant reduction in complaints requiring independent investigation is a welcome development in the spirit of the new complaints regulations, which came into effect on 1 April 2009. They emphasise that when mistakes happen, services should acknowledge them, put things right quickly and learn from the experience. Despite the increase in the overall number of complaints in this reporting period, it is satisfying to note that the overall number escalating to formal consideration has decreased, even taking into account the two stage approach, which in theory could lead to an increase in escalation to formal consideration and/or to the Local Government Ombudsman.
- 7.2.3 The cost of commissioning independent investigations reduced by more than half, to £12,028 in 2009/10 from £25,926 spent the previous year.

7.3 Stage 3 Complaints

- 7.3.1 The new Complaints Regulations, which came into effect on 1 April 2009, no longer contain a stage 3 Review Panel Hearing. However, 2 complaints from the previous year were finalised in this reporting period but fell within the previous complaints regulations. The trend compared to the previous two years reflects consistent success in resolving complaints locally. As a result of one of these complaints a payment of £350 was made in settlement of a complaint.

7.4 The Local Government Ombudsman

- 7.4.1 9 complaints were made to the Ombudsman in this reporting period compared to 3 the previous year. Although this is an increase, this should not be considered negatively after taking into account the increase in the number of complaints overall and the decrease in the number investigated formally. Looking further back to 2007-08, 14 complaints were made to the Ombudsman in that year.
- 7.4.2 2 of the 9 complaints to the Ombudsman were judged as having no, or insufficient evidence of maladministration. One was that the Council had failed to deal properly with the complainant's request for assistance in an application for a guide dog; and the other was that the Council did not properly undertake an assessment of someone who was hospitalised prior to being discharged to a care home. The family also alleged that the service received in the said care home was of a

poor standard. The Ombudsman however, judged that there was no or insufficient evidence of mal-administration.

- 7.4.3 One complaint that the Council had not provided the complainant with proper support was recorded as 'Ombudsman's discretion' i.e. the Ombudsman did not believe there was reason to continue the investigation further.
- 7.4.4 Three complaints to the Ombudsman were judged as premature, as the Council had not had a reasonable opportunity to investigate and reply to the complaint. These complaints were put through the Council's complaints procedure.
- 7.4.5 Three complaints to the Ombudsman were recorded as settled locally, as the Council had come to agreement with the complainants as to how the complaints would be handled.
- 7.4.6 Two of the complaints that reached local settlement related to older people. One was that the Council had failed to take into account the advice and recommendations of Health professionals in its assessment and care provision. This had led to a failure to provide adequate care services on a regular and consistent basis. The agreed local settlement amounted to:
- apologies to both the carer and the service user
 - a meeting with all partners to establish the level of support required to meet the needs of the service user/carer
 - a review of practices and procedures for the assessment of provision of care for people receiving after-care services under S117 of the Mental Health Act 1983
 - compensation totalling £500
- 7.4.7 The other complaint that reached local settlement related to Commissioning Services and the standard of home care provided by an independent provider. The settlement reached included
- £750.00 and an apology to the service user
 - £250.00 to the carer
 - an apology for the time and trouble taken to pursue their concerns and
 - a recommendation to review current practices for safeguarding investigations, to ensure that they are completed and documented where there are any uncertainties about a service user's safety.
- 7.4.8 The third complaint that led to local settlement related to building work commissioned by Learning Disability Services and the noise and disturbance caused by the early start of the contractor, which disturbed the neighbourhood. The local settlement reached included
- an apology and
 - lessons learned from this complaint being cascaded via the Customer Strategy Board, to ensure that all services are aware of

the importance of contractors' responsibilities when working on Council projects.

7.5 Timescale Performance

- 7.5.1 Full data relating to response times for acknowledgement letters and responses to complaints are provided at appendix 4.
- 7.5.2 During the year 98.7% of complaints were acknowledged within the 3 working day statutory timescale. This is a significant increase on the previous year when 69.6% were achieved.
- 7.5.3 Whilst the statutory timescale for fully resolving a complaint is now six months, the service aims to provide an initial response from a service manager within 20 days. During the year 67.7% of complaints were responded to within this timescale, compared with 55.2% in 2008/09. The improvement in this year's performance has come about as a result of a more efficient reminder system and the involvement of senior management in chasing up responses. However, further work is needed and in 2010/11, performance information will be provided to senior management teams on a quarterly basis. It is expected that this will produce further improvements.
- 7.5.4 In the small number of complaints which escalated beyond the initial response, all received a response within the statutory six month timescale.

7.6 Compensation Payments

- 7.6.1 Under Section 92 of the Local Government Act 2000, local authorities are empowered to remedy any injustice arising from a complaint. It is now the practice to consider small *ex gratia* payments by way of recompense for costs incurred or compensation for a distress caused as a result of a matter complained about. The Local Government Ombudsman also has powers to direct the authority to pay compensation and to recommend the amount.
- 7.6.2 As detailed in paragraphs 7.3 and 7.4 above, during this reporting period, a total of £1850 has been paid out in compensation this year. This compares with £750 in 2008/09, £7,605 in 2007/08 and £37,300 in 2006/07.

7.7 Methods of notifying complaints

- 7.7.1 There is no requirement that a complaint must be written, although a person making a complaint is always encouraged to be as specific as possible. Consequently, complaints can be received via a number of different channels and the chosen channel of communication is recorded.
- 7.7.2 It is therefore noticeable that there has been a significant increase in the proportion of complainants who chose to make their complaints in

person: 195 (50%) compared to 144 (41%) in the previous year. Many customers clearly prefer to discuss their complaints by various means such as telephoning the complaints service (22%); complaining directly to workers (15%); telephoning the Contact Centre (13%); and visiting Head Office (1%).

7.7.3 The Council website, e-mail messages and the Customer Contact Centre are becoming ever more popular ways in which customers make their complaints, with 24% of complainants using these methods compared to 11% last year. Whilst the traditional method of writing, either by letter or using the complaints form remain popular at (34%), this has declined from 48% last year. Leaflets providing information on how service users can send compliments and complaints are widely available across all service areas and the leaflet contains a simple form, which people can use.

7.7.4 The trend for more relatives (125, 32%) and carers (67, 17%) making complaints than service users themselves (167, 42%) has continued during the year. This is particularly the case for older people, whilst adults with mental health or a learning disability are more likely to complain directly. However, it is perhaps indicative of the accessibility of the complaints process that no one group predominates and complaints are received in significant numbers from service users themselves.

7.8 Equality Monitoring.

7.8.1 All complaints are subject to equality monitoring, which now includes all the equality strands. Information is most frequently provided on ethnicity, gender and disability, where 80.6% of all complaints have ethnicity recorded, reflecting a return to the frequency shown in 2007/8 after increasing to 88% last year. All complaints except one (99.7%) have gender recorded and 62% of complaints state whether the person was disabled or not. For ethnicity, the percentage of complainants providing this information has increased slightly compared to the previous year. In respect of disability there has been a slight reduction in the percentage of complainants providing this information, and this continues the downward trend as 68% were recorded in 2007-08 and 64% last year.

7.8.2 Overall, data demonstrate that the proportion of people from a non UK or white background making a complaint is lower than both the proportion of the same groups within the overall population, as well as the proportion of the same groups receiving a social care service. This is an established trend and a better understanding of the reasons for this lack of recourse to the complaints procedure is required. Resources for a study, focused on service users from an ethnic minority group and commissioned through one of the user involvement organisations, will be sought over the next year.

7.9 Lessons learned

- 7.9.1 Where a complaint has been upheld, it is often the case that the manager undertaking the resolution of the complaint will make recommendations on how the service should be improved to avoid a similar situation arising for another service user. These actions will be brought to the attention of the complainant and there is a system in place for recording the action and the person with responsibility for implementing the action. Appendix 7 of this report contains examples of the lessons learnt during the course of the year, and actions taken to improve the quality of service.

8.0 DEVELOPMENT WORK CARRIED OUT BY THE COMPLAINTS UNIT IN 2009/10

- 8.1.1 The year under review has been a busy and challenging one for the Complaints Service. Key projects include

8.2 Overseeing the division of the Social Care Complaints Service into dedicated Adults' and Children's teams

- 8.2.1 The new Health and Social Care complaints arrangements which came into force on 1 April 2009 promote a single complaints service across Adults Social Care and Health. This has led to a national trend of separating the complaints function into dedicated Adults' and Children's Teams
- 8.2.2 The business case for new arrangements for an integrated Children's Services Complaints Service was approved by the Children's Services Senior Leadership Team. This has led to the appointment of a Children's Services Complaints Manager, appointed with effect from 26 July 2010. Work will now be undertaken for the transfer of functions from Adult Social Care Complaints Team to the new Children's Services Complaints Team.

8.3 Independent Person Service

- 8.3.1 The agreement between the Council and RR Consultancy for the provision of an Independent Person service (as required under the Children Act Guidance) and an independent investigation service expires on 31 March 2011. This service will be put out to tender with a view to a new contract being in place by 1 April 2011.
- 8.3.2 The Complaints Service has been involved in developing the service specification and is working closely with the Council's Procurement Unit to ensure that arrangements are in place for new providers to begin work on 1 April 2011.

8.4 Integration with Health: the new Local Authority Social Services and National Health Service Complaints (England) Regulations 2009

8.4.1 In June 2007, the Department of Health launched a public consultation on its proposals to harmonise the Health and Social Care Complaints Procedures, to enable complainants to receive a seamless response and to enable health and social care organisations involved to learn and improve. This is a two stage complaints system focusing on local resolution and if unresolved, an investigation by the Health or Local Government Ombudsman.

8.4.2 Following publication of the new single complaints procedure which came into effect on 1 April 2009, the Leeds Partner agency Complaints Managers co-ordinated by Social Care came together to consider shared opportunities and to identify the impact partner organisations have on the people of Leeds about how we listen, respond and ultimately learn from people's experiences. The agencies involved were: Leeds City Council, Adult Social Care Service; Leeds Teaching Hospitals NHS Trust; NHS Leeds (PCT); and Leeds Partnership Foundation Trust.

8.4.2 A risk assessment workshop facilitated by the Adult Social Care Business Change Leader and the Adult Social Care Complaints Manager took place in September 2009.

8.4.3 Specific aims of the workshop were to identify opportunities for the partner agencies to work together, identifying risks that could impact on effective partnership working and to look at shared opportunities for working together such as:

- setting a work plan and monitoring timescales
- aiming to work within agreed identified timescales
- exploring similarities in information leaflets provided to customers
- exploring similarities in information literature provided to staff i.e. satisfaction survey questionnaires sent out to complainants
- consent forms
- action plan forms
- investigation form structure template
- good practice guidance for staff and
- exploring ideas for shared training opportunities/staff briefings and inductions

8.4.4 A Governance framework supporting the implementation of the Single Complaints Process across Leeds Health and Social Care agencies has been drafted and circulated to all members of the working group.

8.4.5 Despite competing pressures, the work has progressed. The separation of the Complaints Service between Adults' and Children's Teams and the appointment of the Children's Services Complaints Manager, will allow the Adult Social Care Complaints Team to focus on working towards a number of key milestones in relation to the new

single complaints process across health and social care partners in Leeds.

8.5 Protocol for Managing Mixed Sector Complaints

8.5.1 In 2008 a protocol for dealing with complaints involving more than one agency was signed by all partners of the West Yorkshire Complaints Network (a Health and Social Care Network).

8.5.2 Following publication of the new Complaints arrangements which came into effect on 1 April 2009, the Protocol was revised taking into account advice from the Department of Health. The revised Protocol has been agreed by the West Yorkshire Complaints Network. It is in the process of being signed off through partner agency governance arrangements. Each agency was asked to agree its commitment to the procedure for handling interagency health and social care complaints within West Yorkshire. The Chief Executives, Responsible Managers or Chief Officers for each of the agencies have been asked to indicate their organisation's commitment in writing.

8.6 Work undertaken in preparation for new arrangements

8.6.1 Training for Council staff

To enable staff to have clarity about their role and what is expected of them to fulfil their role to deliver the complaints procedure, a rolling programme of training for staff has been undertaken on an ongoing basis.

8.6.2 More specific courses have been provided for Team Managers, Service Delivery Managers, Principal Unit Managers, Day Care Managers and Supervisors involved in local resolution of complaints. Part of the emphasis of the Effective Complaints Handling course is the importance of prompt resolution of complaints. During this reporting period, there was an improvement in timescale performance of responding to complaints compared to the previous year: 68% of complaints were responded to within 20 working days compared to 55% the previous year. This may be due to the effective reminder system in operation as well as the training offered to staff involved in resolution of complaints.

8.6.3 A more specific course was also offered to Children's Services' Heads of Service involved in adjudication of formal complaints. An adjudication course for Adult Services' Heads of Service is planned to take place within the current financial year.

8.6.4 Training for independent sector staff

Where services are provided by independent sector organisations commissioned by the Council, wherever possible, the service provider should handle complaints. However, it is important for the organisations to understand the background to the social care statutory complaints

procedure and how their process needs to dovetail into the social care statutory complaints procedure.

- 8.6.5 For the fourth year running, Effective Complaints Handling training has been provided to private sector home care providers. Three sessions were provided to Managers and Supervisors involved in complaints resolution. The training has been welcomed and found to be useful in supporting organisations to ensure that complaints are effectively handled.
- 8.6.6 Following a consultation exercise targeting the independent, voluntary and faith sector, a programme of effective complaints training will be undertaken to support organisations to ensure they can effectively handle complaints that are lodged under the statutory complaints procedure, in a manner that is compliant and resolution focused.
- 8.6.7 The Complaints Manager is in discussion with the Commissioning Business Support Service to make arrangements for the training. The target group for the forthcoming training will be the independent sector residential and nursing care providers.

8.7 Review of information literature for service users and staff

- 8.71 In view of the new complaints regulations, the Adult Social Care service user complaints leaflet has been revised. This is in line with the spirit of the new regulations and has been well received.

8.8 Work undertaken in response to the Children and Young People's Social Care Ofsted inspection 2009 and Comprehensive Area Assessment

- 8.8.1 Following last year's inspection, a number of urgent requirements were as follow
- to provide evidence that children, parents and foster carers have been provided with information about how to complain if they are unhappy about anything during the assessment and review process
 - to provide evidence that the complaints leaflet is provided to accommodated children, if they are of an age to understand
 - to ensure that children and young people have access to Leeds Children's Rights Service

Other requirements included:

- to establish quarterly management reviews and identify themes emerging from existing complaints
- to arrange an annual learning event linked to the complaints annual report
- to include requirements in service standards and the quality assurance framework

Further work following the Ofsted Inspection included

- work with the Children and Young People's ESCR project team to develop ESCR activity and guidance for staff to provide evidence that parents, foster carers and children and young people had been provided with a complaints leaflet and/or the complaints card
- revising the children and young people's complaints card and complaints leaflet and updating the Leeds Children's Rights contact details
- liaison with Children's teams to circulate documentation to existing looked after children and carers

9.0 PRIORITIES FOR 2010/11

9.1 A number of key internal and external influences and priorities need to be taken into account during 2009/10.

- Although the new complaints regulations (single complaints process across Health and Social Care) came into force on 1 April 2009, agencies were given between 12 and 18 months to implement the new requirements. The focus for the coming year is to progress the work being undertaken with Leeds Partner agencies and to implement identified opportunities.
- We will continue to contribute to the development of the personalisation agenda by working closely with Project Managers and Health and Wellbeing Managers to ensure that customer feedback is influencing service planning/delivery.
- We will continue to work closely with the Safeguarding, Contracts and Business Support and Commissioning Services to ensure Compliments and Complaints procedures are embedded in their work.
- We will continue with the training programme to staff and managers on the statutory complaints procedure, incorporating learning from customer feedback.
- We will continue to extend the Effective Complaints Handling Training to the independent sector.
- We will continue to explore ways to ensure continuous learning from complaints is widely shared.
- We will continue to inform performance management and service transformation of adult social care services.
- We will contribute to providing customer-focus service that encourages service users to speak out about their experiences, both good and bad.
- We will review staff instructions and good practice guidance for staff
- We will finalise the review of information to ensure that the complaints procedure is accessible to all service user groups.

- We will contribute to the Leeds City Council Change Programme through work undertaken by the Customer Strategy Board

10.0 CONCLUSION

- 10.1 The statutory complaints procedure enables people who are dissatisfied to make their views known and is, therefore, an essential element of the general culture change programme across Health and Social Care. Commissioners and service providers should welcome and value complaints as an important source of user feedback.
- 10.2 The Complaints Service's aim is to continue to contribute to a shift in culture where complaints are viewed as an opportunity to improve and raise customer satisfaction and where both staff and service users feel valued.
- 10.3 It will be noted from emerging national developments that the extent of the challenge facing Health and Social Care is significant. The changes to the complaints process across Health and Social Care is a journey towards person centred complaints arrangements, in keeping with the Health Reform programme.
- 10.4 Complaints continue to be a complex and difficult service area, with both legal and insurance implications. The Complaints Service looks forward to a period of productive change, with ongoing collaboration with both internal and external partners to improve social care service delivery to the citizens of Leeds.

If you would like to comment on this report, or to receive it in large print, Braille or other format, please contact:

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Complaints Team Members include:

Judith Kasolo, Head of Complaints and Customer Services; Dominic Wyatt, Complaints Officer; Ian Nicholson, Children's Complaints Officer; Tina Rowden, Complaints Administrator; and Preet Matharu, Complaints Administrator

Appendix 1 - Compliments received by client group

| Chief Officer | 2009/10 | % | 2008/09 | % |
|---|------------|-------------|------------|-------------|
| Chief Officer Support & Enablement | 131 | 42% | 87 | 47% |
| Chief Officer Learning Disability Services | 83 | 25% | 7 | 4% |
| Chief Officer Access & Inclusion | 54 | 17% | 48 | 26% |
| Deputy Director Strategic Commissioning | 34 | 11% | 36 | 20% |
| Deputy Director Partnerships and Organisational Development | 12 | 4% | 3 | 1.5% |
| Chief Officer Resources | 2 | 0.6% | 2 | 1% |
| Other Council Service | 1 | 0.4% | 1 | 0.5% |
| Total | 317 | 100% | 184 | 100% |

Compliments received by service area

| Service area | 2009/10 | % | 2008/09 | % |
|---|------------|-------------|------------|-------------|
| Learning Disability Housing & Day Services | 79 | 25% | 7 | 4% |
| Support & Enablement Day Services | 50 | 16% | 18 | 10% |
| Support & Enablement Community Support | 49 | 16% | 36 | 20% |
| Access & Inclusion Assessment and care management | 37 | 12% | 34 | 18% |
| Support & Enablement Adult residential | 32 | 10% | 33 | 18% |
| Strategic Commissioning Community Support | 32 | 10% | 22 | 12% |
| Access & Inclusion Equipment and adaptations | 17 | 5% | 8 | 4% |
| Partnerships and Organisational Effectiveness | 12 | 4% | 3 | 2% |
| Learning Disability Assessment and care management | 4 | 1% | - | - |
| Strategic Commissioning Planning and Performance | 2 | 0.5% | 2 | 1% |
| Resources | 2 | 0.5% | 2 | 1% |
| Other | 1 | - | 1 | - |
| Access & Inclusion Mental Health Residential & Day Services | - | - | 6 | 3% |
| Strategic Commissioning Residential & Day Services | - | - | 12 | 7% |
| Total | 317 | 100% | 184 | 100% |

Appendix 2 - Complaints by service area

| Service area | 2009/10 | | 2008/09 | |
|--|----------------------|-----------------------|----------------------|-----------------------|
| | Number of complaints | % of total complaints | Number of complaints | % of total complaints |
| Total | 391 | 100.0% | 346 | 100.0% |
| Access & Inclusion Assessment and care management | 113 | 28.9% | 77 | 22.3% |
| Commissioning Services Community Support | 82 | 21.0% | 95 | 27.5% |
| Support & Enablement Community Support | 52 | 13.3% | 35 | 10.1% |
| Other Council Department | 31 | 7.9% | 37 | 10.6% |
| Learning Disability Housing & Day Services | 19 | 4.8% | 15 | 4.3% |
| Access & Inclusion Equipment and Adaptations | 18 | 4.6% | 13 | 3.8% |
| Contractor | 16 | 4.1% | 17 | 4.9% |
| Support & Enablement Day Services | 16 | 4.0% | 10 | 2.9% |
| Learning Disability Assessment and care management | 15 | 3.8% | 6 | 1.7% |
| Support services | 13 | 3.4% | 10 | 2.9% |
| Support & Enablement Residential Care | 8 | 2.0% | 29 | 8.4% |
| Access & Inclusion Mental Health Services | 6 | 1.6% | - | - |
| Partnerships & Organisational Development | 1 | 0.2% | 1 | 0.3% |
| Safeguarding | 1 | 0.2% | - | - |
| Other agency | 1 | 0.2% | 1 | 0.3% |

Appendix 3 - Complaints—how received

| How received | 2009/10 | % | 2008/09 | % |
|-----------------------|---------|--------|---------|--------|
| Letter | 69 | 17.7% | 90 | 26.0% |
| Form | 64 | 16.4% | 75 | 21.6% |
| Telephone | 84 | 21.5% | 74 | 21.4% |
| Via staff | 58 | 14.8% | 52 | 14.9% |
| Email | 41 | 10.5% | 29 | 8.3% |
| Corporate call centre | 51 | 13.0% | 13 | 3.7% |
| In person | 2 | 0.5% | 4 | 1.1% |
| Via an elected member | 13 | 3.3% | 4 | 1.1% |
| Fax | 3 | 0.8% | 2 | 0.6% |
| Via CQC | - | - | 2 | 0.6% |
| Via the Ombudsman | 6 | 1.5% | 1 | 0.3% |
| Total | 391 | 100.0% | 346 | 100.0% |

Complaints—received from

| Complainant—how involved | 2009/10 | 2008/09 |
|--------------------------|---------|---------|
| Service user | 167 | 129 |
| Relative | 113 | 101 |
| Carer | 67 | 57 |
| Other | 27 | 22 |
| Parent | 12 | 13 |
| Worker | 3 | 17 |
| Other agency | 1 | 5 |
| MP | 1 | 1 |
| Councillor | - | 1 |

Appendix 4 - Timescale performance

| | Acknowledged within | | | Responded within | | | |
|---|---------------------|-----------------|----------------|------------------|------------------|------------------|-----------------|
| | Average days | % within 3 days | % after 3 days | Average days | % within 10 days | % within 20 days | % after 20 days |
| Access & Inclusion | 0 | 98.4% | 1.6% | 19 | 30.5% | 36.4% | 33.1% |
| Strategic Commissioning | 0 | 98.6% | 1.4% | 25 | 28.2% | 32.9% | 38.9% |
| Support & Enablement | 1 | 98.1% | 1.9% | 14 | 47.9% | 21.1% | 31.0% |
| Learning disability | 0 | 100% | - | 16 | 48.4% | 29.0% | 22.6% |
| Other Council Services | 0 | 100% | - | 21 | 53.1% | 25.0% | 21.9% |
| Resources | 0 | 100% | - | 8 | 16.7% | 50.0% | 33.3% |
| Partnerships & Organisational Development | 0 | 100% | - | 27 | - | - | 100% |
| Total | 0 | 98.7% | 1.3% | 19 | 36.6% | 31.1% | 32.3% |

Appendix 5 - Breakdown of Ombudsman complaints and enquiries received between 1 April 2009 and 31 March 2010

| | Outcome | | | | Total |
|---------------------|------------------|------------------------|---------------------|----------------------|----------|
| | Local Settlement | Ombudsman's discretion | Premature complaint | No Maladministration | |
| Learning disability | 1 | - | - | - | 1 |
| Mental health | - | 1 | 1 | - | - |
| Physical disability | - | - | - | 1 | - |
| Older people | 2 | - | 2 | 1 | 2 |
| Total | 3 | 1 | 3 | 2 | 9 |

Appendix 6 - Complainants by ethnicity

| Ethnicity | 2009/10 Number | % | 2008/09 Number | % |
|-----------------|-------------------|--------|-------------------|--------|
| UK/E | 293 | 74.9% | 290 | 83.8% |
| Not known | 76 | 19.4% | 41 | 11.8% |
| Black Caribbean | 6 | 1.6% | 4 | 1.2% |
| Indian | 7 | 1.8% | 1 | 0.3% |
| Pakistani | 5 | 1.2% | 7 | 2.0% |
| Black African | 2 | 0.5% | - | - |
| Other | 1 | 0.3% | 3 | 0.9% |
| Black Other | 1 | 0.3% | - | - |
| Total | 391 | 100.0% | 346 | 100.0% |

Complainants by gender

| Gender | 2009/10 Number | % | 2008/09 Number | % |
|-----------|-------------------|--------|-------------------|--------|
| Female | 252 | 64.4% | 215 | 62.1% |
| Male | 126 | 32.2% | 111 | 32.1% |
| Joint | 13 | 3.2% | 16 | 4.6% |
| Not known | 1 | 0.3% | 4 | 1.2% |
| Total | 391 | 100.0% | 346 | 100.0% |

Complainants by disability

| Disability | 2009/10 Number | % | 2008/09 Number | % |
|--------------|-------------------|--------|-------------------|--------|
| Disabled | 104 | 26.6% | 132 | 38.2% |
| Not known | 149 | 38.1% | 125 | 36.1% |
| Non-disabled | 138 | 35.3% | 89 | 25.7% |
| Total | 391 | 100.0% | 346 | 100.0% |

Appendix 7 - Lessons learnt

| | |
|---|---|
| | |
| <p>Concerns about the breakdown in communication have been varied and have led to a number of changes</p> | <ul style="list-style-type: none"> • Concerns about the breakdown in communication which led to delay in move to a permanent placement involved the Service Manager in addressing the staff team about better communication to avoid delays and significant changes to Care Plans. • Lack of response to a referral message left for the Emergency Duty Team informed a project analysing current communication pathways and looking at producing better ways of communicating with Leeds residents • Lack of communication which led to delay in carrying out assessment led to the Service Manager reviewing adjusting the Allocation Policy |
| <p>A complaint about transport not turning up to transport a service user to college and required the carer being passed between social care, education and the college led to Service Manager recommending</p> | <p>To ensure proper arrangements were in place for that service group, the Service Manager recommended that the Chief Officer Learning Disabilities initiates a project with Education and Transport to put in place a proper system for notification and action for those service users/students who cease to benefit from education funded transport in their attendance at college at age 25 and for whom alternative arrangements are required including funding, if necessary, via Social Care</p> |
| <p>Complaints regarding inconsistent and missed home care service</p> | <p>Support Administrators have been instructed to ensure that if staff programmes are changed that these are posted out to staff to avoid any misunderstanding about customers they have been asked to visit.</p> <p>Memo also sent to all home carers reminding them to stick to times on their rotas, but if running early or late to contact the service user or the office.</p> |
| <p>Irregularities in administering medication by the community support service</p> | <p>Community Support Assistants to undertake the City & Guilds Accredited Medication Training which includes taking an examination to ensure competency levels.</p> <p>Regulation updates of support plan and risk assessments and dissemination of such information to those staff supporting service users.</p> |

| | |
|---|---|
| | <p>Introduction of an electronic file system which includes medication documentation</p> <p>NHS Leeds Medicines Governance Pharmacist to undertake a review of medication procedures, the outcome of which will inform practice throughout the Learning Disability Community Support Service.</p> <p>Senior members of staff undertaking spot checks of care workers to ensure that they are following the Care Plans correctly and using risk assessment guidelines.</p> |
| <p>Concerns relating to medication management at a supported living accommodation led to</p> | <p>Only staff that have had Medication Management training being permitted to administer medication.</p> <p>A review undertaken of all workers' training needs in relation to medication management.</p> <p>The drawing up of a Training Plan in consultation with NHS Leeds Pharmacy Technicians</p> <p>Improved medication stock control procedures implemented with immediate effect with a requirement that they be reviewed after 1, 3 and 6 months</p> |
| <p>Concerns about incorrect invoices for respite and day care</p> | <p>As well as Officers being reminded of the charging policy and procedure and auditing of all accounts at the establishment concerned, the Head of Adult Social Care Finance was asked to review the process of charging for meals.</p> |

Complaints and Compliments

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