`

Statutory Social Care Annual Report

**Complaints and Customer Feedback**



**For the period 01 April 2015 to 31 March 2016**

**INTRODUCTION 3**

**i. Background 3**

**ii. Purpose 3**

**iii. Period Covered 3**

**SECTION ONE: SUMMARY AND OVERVIEW 4**

**1.1 Executive Summary 4**

**1.2 Statutory Complaint trends and outcomes**   **5**

**SECTION TWO: ADULT SOCIAL CARE FEEDBACK**

**2.1 Services which were the subject of complaints in 2015/16 6**

**2.2 Breakdown of complaints by stage and outcome 6**

**2.3 What do people complain about? 7**

**2.4 Learning for Adult Social Care 7**

**2.5 Services which were the subject of compliments in 2015/16 9**

**2.6 Joint Complaints 9**

**SECTION THREE: CHILDREN AND YOUNG PEOPLE SOCIAL CARE FEEDBACK**

**3.1 Services which were the subject of complaints in 2015/16 10**

**3.2 Breakdown of Complaint by stage and outcome 10**

**3.3 What do people complain about in the statutory process? 11**

**3.4 Learning for CYP social care services 12**

**3.5 Summary of non-statutory CYP complaints 12**

**3.6 What do people complain about in the non-statutory process? 13**

**3.7 Services which were the subject of compliments and comments in 2015/16 13**

**Introduction**

**i. Background**

Local Authorities are legally required to establish complaints procedures to deal with complaints about their social care functions since 1991. The complaints procedure for children and young people is covered by The Children Act 1989 and the Department for Skills and Education produced guidance, 'Getting the Best from Complaints' (2006), which outlines the procedures. The Local Authority Social Services and National Health Service Complaints Regulations came into effect on 1 April 2009 and this report is produced in accordance with the requirements of those Regulations.

**ii. Purpose**

The purpose of the Annual Report is to review the operation of the complaints process over a twelve month period, including statistical data, and to provide the local authority with an instrument to keep informed about complaint themes and how effective its current arrangements are for handling customer complaints. It offers some analysis of what the information from the operation of the process means for the Council.

The report also includes information on, and analysis of, other types of customer feedback such as comments and compliments.

**iii. Period Covered**

The report covers the period 1 April 2015 to the 31 March 2016 and is in three sections.

|  |  |
| --- | --- |
| Section One | **Summary and Overview** highlights the key messages from the report and gives the overall picture across the Council |
| Section Two | Statistical data, analysis and learning in relation to **Adult Social Care Services.** |
| Section Three | Statistical data and further information and analysis and learning in relation to **all Children's Services.** |

The report makes extensive use throughout of data available from the Customer Feedback System (CFS) which records all statutory social care complaints and feedback for the Council. The statistical information presented within this report can be verified by reference to this database and is based on date received. All percentages are rounded to the nearest whole number. It should be noted that recording on the CFS commenced half way through 2014/15 and a new Corporate Complaints process was introduced in June 2015.

*If you require any additional information please contact the Complaints Team on 01772 539414 or email your request to complaintsandfeedback@lancashire.gov,uk*

**Section One: Summary and Overview of all Social Care Complaints and Feedback**

**1.1 Executive Summary**

Complaints represented around **one percent** of active adult social care and children's social care cases with an open referral in 2015/16. Statutory complaint totals have increased overall by 54% (480 in 2014/15 to 735 in 2015/16). This rise in complaints is also set against a rise in assessment activity across the whole of social care. The rise in complaints can be attributed to:

* increased expectations by the public and reduced budgets;
* ongoing financial complaints which have increased year on year as a proportion of complaints since 2013/14;
* it now being 'easier' to complain using the complaints portal on the LCC internet; and
* a single complaints team now logs, tracks and supports complaints through to resolution which means that complaints are no longer 'hidden' in different parts of the council.

Complaints in adult social care (ASC) have risen significantly by almost 25% (from 334 complaints in 2014/15 to 417 in 2015/16). There were 21 complex joint complaints with the NHS, which is the same number as in 2014/15.

Statutory children's social care (CSC) complaints increased by 44% (from 146 complaints in 2014/15 to 211 in 2015/16). Complaints about the assessment process formed the subject of just less than half of all statutory complaints. This is to be expected as it forms such a fundamental part of the process.

Graph 1 below, shows a comparison of the total number of statutory complaints received for the last two financial years

**Graph 1**

Graph 2 below shows the number of 'statutory' compliments received. It can be seen that adult social care services have increased the amount of compliments by 38% in 15/16 when compared with the previous year. The equipment and adaptations service receives the greatest amount of positive appreciation by the public. This is as a result of the 'Your Views Count' leaflet that is given out after social care assessments and reviews are undertaken. Positive appreciation for the actions undertaken by children's social care services is always generally low but in 15/16 it decreased by a further 86%. A further 23 compliments were made relating to non-statutory feedback for CYP services.

**Graph 2**

**1.2 Statutory complaint trends and outcomes**

Complaints have increased to one percent of active cases (1.2% for CYP and 1% for ASC). Complaints however are on an upward year on year trajectory. The number of complaints as a percentage of total customer feedback has been increasing over the past years and complaints represented 44% of all feedback in 2015/16. As the years go on, people are therefore more likely to be contacting the council to complain rather than to compliment staff.

Graph 3 below shows a breakdown in the number of statutory complaints by final outcome for all closed complaints during the period, with most being either withdrawn or resolved early. A further breakdown of these figures can be found later in the relevant sections of this report.

In 2015/16 the total amount spent on investigations for statutory complaints was £18 811.00.

**Graph 3**

Lancashire is the current chair and an active member of the North West Managers Complaints Group (NWCMG). The group consists of 23 Local Authorities and its aim is to provide a forum where complaints staff can learn and share best practice, develop and implement local practice standards, discuss performance and problem solve. The Group is also consulted on proposed changes to legislation by the Association of Directors of Adult Social Services and the Association of Directors of Children's Services.

**Section Two: Adult Social Care Feedback**

**2.1 Services which were the subject of complaints in 2015/16**

Graph 4 shows a breakdown of Adult Social Care by Feedback Type. A total of 415 complaints were received in 2015/16, of which 133 were resolved early (stage 0) and 282 were resolved with a management and council action at the final outcome (Graph 6). In 2015/16 the total amount spent on independent complaint investigations for adults was £5,395.20.

**Graph 4**

**2.2 Breakdown of complaints by stage and outcome**

Graph 6 shows that (similar to 2014/15) about one third of complaints were resolved early, the rest entered the formal process. Graph 7 shows the split of 347 closed complaints which commenced in the year and had outcomes recorded against them. (The rest were still open at the year-end). Of these, almost 46% were withdrawn, had an early resolution or were signposted out of the process, (more than double the number in 2014/15), 41% of the total complaints received were upheld or partly upheld and 38% were not upheld. These proportions are similar to the previous year. This shows that when people make complaints, in well over a third of cases, there is an aspect that is justified. Equally in another third of cases, no aspect is found to be justified. Of the total number (415) of complaints received this financial year just under 4% (16) exceeded the 6 month statutory maximum timescale.

**Graph 7**

**Graph 6**

**2.3 What do people complain about?**

Graph 8 shows Complaints by service type for the last two financial years. For 2015/16, the most frequent subject of complaint was assessment (191) which received 46% of the total number of complaints (145 in 14/15). The total number of adult assessments undertaken in 14/15 was 41500, rising to 45761 in 15/16. Complaints as a proportion of these totals therefore increased from 0.3% to 0.4% with an overall jump of 30% in complaints about assessment activity. Complaints about care providers dropped from a proportion of 18% of all complaints in 2014/15 (68) to 10% of all complaints in 2015/16 (42%). Financial related complaints are on an upward trend. Financial complaints were 8% of all adult social care complaints in 2013/14. They increased to 17% of all adult social care complaints (54) in 2014/15. In 2015/16 they increased again to 21% of all complaints (87). This may be as a result of new financial systems having been introduced with complaints about duplicate billing, debt recovery and incorrect invoices with insufficient detail.

There has been a decrease in the number of complaints about equipment/adaptations with less than 3% (just 10 complaints) in 2015/16 compared with a proportion of 8% in 2014/15. The relatively new 'equipment prescription' model is therefore working well from this perspective.

**Graph 8**

**2.4 Learning for adult social care**

* Review our mental capacity assessment training to ensure that staff appropriately address all concerns raised about mental capacity, including financial capacity.
* Review our systems and processes to ensure staff are aware of the correct commissioning process.
* Have procedures in place to ensure that written assessments and support plans are dated, signed and provided to service users; quality of assessment and support plans must look at meeting needs not just assessing them.
* Improve our communication with our customers who are Deaf and incorporate this into clear outcomes within the support plans and within any written communication in the future.
* Social care workers are reminded about the importance to fully discuss available support options with service users who are not eligible for respite and they self-fund social care.
* Raise awareness of the 'dementia passport' documentation.
* Address the delay in waiting time for assessments.
* In light of financial guidance within the Care Act Care Act 2014 the Council is in the process of identifying learning for staff and ensuring that our information around this issue is clear.
* Two complaints have raised issues around financial implications including advice when assets are not covered by a power of attorney or guardianship and this will be considered as part of our on-going training in this area.
* Training is being targeted at staff re carer assessments, direct payments, reablement and financial implications information.
* Clarify arrangements to access health funding for provision of daily living equipment, identified as a health need.
* Undertake a review of our website to include publishing the adaptation criteria and guideline documents.

**Exchequer Service**

* Ensure delays around financial assessments are minimised and are taken into account when issuing invoices for large amounts.
* Ensure contact with service users takes into account any specific circumstances which might affect their ability to understand the charging process.
* Undertake careful recording of conversations with the service user on case notifications to provide evidence of any agreed plans/actions.

**Mental Health, Learning Disability & Autism Service**

* Lancashire Care Foundation NHS Trust has met with Eating Disorder Services (EDS) and better links have been developed and communication has been improved in order to improve partnership working.

**Older People & Disability Service**

* Residential care staff have been reminded about the importance of completing incident reports and informing families when incidents occur; considering a person’s capacity to consent to representatives acting on their behalf and recording any decisions made and of familiarising themselves with residents’ support plans.
* Shared Lives Carers have been reminded of the need to ensure transparent and clear record keeping of financial transactions.

**Patient Safety, Quality Improvement and Safeguarding**

* Review the robustness of procedures and practice for oversight of safeguarding cases when staff members are unavailable for extended periods and enquiries that have gone on a long time.
* Improve recording of senior management instruction and communication within case notes.
* Provide a provisional list of attendees prior to the safeguarding meeting and record this within case notes, ensure a calm and welcoming environment in safeguarding meetings and review capacity to have good minute taking for timely distribution.
* The outcome of a safeguarding investigation should be put in writing to the individual and/or their relevant family members. It should contain information about how they can make a separate formal complaint to the Council regarding any outstanding concerns or if they are not satisfied with the way the investigation was carried out and the decision making process.
* Staff have been reminded about the policy and guidance on complaints on the intranet.
* In light of the Care Act 2014 and Statutory Guidance to the Act 2015, review arrangements between Safeguarding, Contract Compliance, and Complaints sections/departments, to identify actions that might prevent difficulties occurring for those who make complaints or safeguarding alerts about commissioned providers. .
* Appointing a lead officer within the procurement service to coordinate cross border placements.  A checklist has been devised to inform practice and amended to ensure that people are kept informed of the steps needed in order to improve timescales for finalising these arrangements.
* Specific contract monitoring of reablement provider's, resulted in improvements.
* A review of training for both Safeguarding and Customer Care will be completed prior to any further training being undertaken within the Customer Services Centre.

**2.5 Services which were the subject of compliments in 2015/16**

Graph 9 shows the number of compliments received by service type for 2015/16. The number of compliments has increased from 408 in 2014/15 to 560 in 2015/16. This is mostly related to the leaflet 'Your Views Count' being circulated more consistently after assessment or reviews. In 2014/15 18% of all compliments were because of equipment and adaptations received, however this has increased to just over 35% in 2015/16. There has been a significant decrease in the proportion of compliments in relation to assessment with this accounting for just over 11% of compliments in 2015/16 compared with 41% in 2014/15.

Contracted care providers are another common reason for the number compliments received. This category received almost 27% (150) of all compliments in 2015/16, which has gone up proportionally by almost 4% since 2014/15.

**Graph 9**

**2.6 Joint Complaints**

A Joint Complaints Protocol has been agreed with the NHS. Complaints investigations are increasingly involving many different parts of the council as well as health services and contracted service providers therefore adding much more complexity which the complaints team coordinates.

There were an equal number of joint complaints during 2015/16 (21) as during 2014/15. Four of these were still open at the close of 2015/16. Seven were not upheld, 6 partly upheld and only 2 were upheld. The other 2 were withdrawn by the complainants.

**Section Three: Children and Young People Feedback**

**3.1 Services which were the subject of complaints in 2015/16**

The Children's social care complaint procedure involves a statutory three stage process for the child or those who have parental responsibility. The Stage 1 initial response is always by the service manager involved. If the person complaining is still unhappy, they can request a Stage 2 independent investigation. If the complainant remains unhappy, a Stage 3 review panel, which reviews the way the stage 2 was investigated, can be requested. There is a non-statutory process for non-social care complaints (eg education or Special Educational Needs and Disabilities SEND) or for people complaining who do not have parental responsibility for a child (eg grandparents). In 2015/16 the total amount spent on investigations for children's complaints was £13 416.36.

**Graph 10**

Graph 10 shows the overall rise in Children and Young People's (CYP's) complaints by 88% to make an overall total of 321 for 2015/16. The graph also shows the breakdown between statutory Children Act Complaints and non-statutory complaints involving other CYP services. It can be seen that there has been a large increase in non-statutory CYP complaints in 2015/16. Of the total number of social care (211) complaints received in this financial year, 8% (17) exceeded the statutory timescale.

**3.2 Breakdown of complaints by stage and outcome**

Graph 11 overleaf shows a breakdown of all statutory CYP social care complaints by stage. Of the 211 statutory CYP complaints received in 2015/16, 13 were recorded as Stage 0 (resolved early), 195 Stage 1, 2 Stage 2 and 1 Stage 3. The fact that 99% of all CYP statutory complaints were resolved early or at Stage 1 in the process is credit to the quality of the response / investigation and resolution offered by managers to the issues highlighted. Local and early resolution of complaints is a better outcome for everyone, as escalation is time-consuming and expensive. Last year, one Stage 3 panel was held and, in other cases, early referral to the Local Government Ombudsman was agreed.

**Graph 12**

**Graph 11**

Graph 12 shows complaints by final outcome for the last two years, split into complaint stage. Of the 211 Children's Social Care enquiries 121 had a final outcome recorded (the rest were still open at the year-end). Of these 42% were not upheld, (almost double the number of unjustified complaints than in 2014/15), 36% of the total complaints received were upheld (a similar proportion to the previous year) or partly upheld and 22% were signposted, resolved early or withdrawn. This demonstrates that in over one third of cases, complaints are justified and, equally, over another third are not.

**3.3 What do people complain about in the statutory process?**

Graph 13 shows a breakdown by service type for the last two financial years. The proportions are similar, with an increase in complaints in relation to assessments. They have gone up from 36% of all complaints in 2014/15 to 48% (102) in 2015/16. The total number of CYP assessments in 14/15 was 13407 which rose to 14278 in 15/16. Complaints as a proportion of these totals therefore increased from 0.4% to 0.7% with a just under double the number of complaints about assessment activity. These figures demonstrate the pressure the CYP social care service is currently under.

Complaints about financial issues in CYP social care have remained constant with 12 in 2014/15 and 10 in 2015/16. There has been an increase in the number of complaints in relation to the safeguarding process from 12 in 2014/15 to 17 in 2015/16.

**Graph 13**

**3.4 Learning for CYP social care services**

Better recording throughout this year has enabled the service to capture more learning through complaints which have significantly increased since last year. Clear learning identified for all services is the need for better and more efficient communication skills between our districts and complainants as well as the need to review cases carefully where complaints are the subject of complex matters such as children with disabilities.

There is identified learning for the complaints team in terms of quality assurance and the need to provide a more hands on approach in offering the quality checking of responses that are being sent out to prevent escalation and ensure complaints are being responded to appropriately. Learning is particularly identified through stage1, 2 and stage 3 complaints as detailed below:-

**Stage 1 and 2 Complaints**

* The need for better recording of assessments.
* Better and consistent communication between staff members and complainants.
* The need to quality assure complaint responses at all stages.
* Provision of an apology, where warranted.
* Provision of a supporting letter to claim benefits as originally requested by the complainant.
* The offer of re-assessment in relation to the EHCP.
* In one case it was agreed that any future review that a school organises should have a smaller number of participants.
* Ensuring that appropriate staff have a greater understanding of the way Asperger's Syndrome can negatively impact on communication with those living with the condition.
* Ensuring that appropriate staff have a greater understanding of the way Autistic Spectrum Disorders can affect family life and family members.

**Stage 3 Complaints**

* That a consultation/pre-assessment review is arranged in one case.
* A consideration of a referral to Adult Social Work Services.
* A review of the arrangements for contact.

A clear rationale regarding any disagreement with, divergence from, or departure from, the views of contracted services

**3.5 Summary of non-statutory CYP complaints**

Non statutory children's social care complaints are complaints made by a person who is not entitled to complain under the Children Act procedures or if the complaint is regarding something that cannot be complained about under that procedure.

CYP non stat complaints increased dramatically from 25 to 110 in 2015/16 mainly as a result of better recording and the introduction of new systems which have enabled the capture of more complaints.

72 complaints were regarding general children's social care services, in relation to:

* Quality/Reliability of service
* Actions of the social worker
* Lack of communication
* Decision to place child in Foster Care/for Adoption
* Unfair treatment by social work staff
* Actions to protect a vulnerable child

33 complaints were regarding the Adoption and Fostering service in relation to:

* Adoption allowance policy
* Decision to not approve potential adoptive carers
* Decision to not approve potential foster carers

5 complaints received were in relation to the actions of the emergency duty team/contact centre.

**3.6 What are Non-Statutory Children's Complaints about?**

**Graph 14**

Graph 14 shows that 30% of non-stat complaints relate to fostering and adoption. There are also many other types of non-stat complaint, all relating to different CYP services and issues.

Identifying themes and learning from all children social care complaints – non statutory or statutory complaint intelligence is valuable. Senior managers are informed of the themes on a regular basis through regular attendance at team meetings or senior management meetings.

**3.7 Services which were the subject of compliments and comments in 2015/16**

Due to the nature of children's social care, there are fewer compliments received. A total of 9 statutory compliments were received for 2015/16, with the majority being about the assessment process. A further 23 non-statutory compliments were received during 2015/16. Nine comments were made and were passed onto the services concerned to take appropriate action.

