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**Statutory Social**

**Care Annual Report**

Complaints and Customer Feedback

For the period 1 April 2017 to 31 March 2018

**INTRODUCTION 3**

**i. Background 3**

**ii. Purpose 3**

**iii. Period covered and data 3**

**SECTION ONE: SUMMARY AND OVERVIEW**

**1.1 Executive Summary 4**

**1.2 Statutory Complaint trends and outcomes 5**

**1.3 Statutory Local Government Ombudsman (LGSCO) complaints received** **5**

**SECTION TWO: ADULT SOCIAL CARE FEEDBACK**

**2.1 Summary of ASC feedback in 2017/18 6**

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

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

**2.4 Learning for ASC 8**

**2.5 Services which were the subject of compliments in 2017/18 8**

**2.6 Joint Complaints 9**

**2.7 LGSCO Complaints 9**

**2.8 LGSCO ASC identified learning 11**

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

**3.1 Services which were the subject of complaints in 2017/18 12**

**3.2 Breakdown of complaints by stage 12**

**3.3 Breakdown of complaints by outcome 13**

**3.4 What do people complain about in the statutory process? 13**

**3.5 Learning for CSC 14**

**3.6 Definition of non-statutory CSC complaints 14**

**3.7 What are non-statutory CSC complaints about? 15**

**3.8 Services which were the subject of compliments and comments in 2017/18 16**

**3.9 LGSCO Complaints 16**

**3.10 LGSCO Children's Social Care identified learning 17**

**Introduction**

1. **Background**

Local authorities are legally required to establish complaints procedures to deal with complaints about their social care functions. 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 which local authorities must have in place. For adult social care, this report is also produced in accordance with the requirements of the Local Authority Social Services and National Health Service Complaints Regulations (2009).

Lancashire County Council is the Vice Chair of the National Complaints Managers Group (England) and the Vice Chair of the North West Complaints Managers Group which comprises 23 local authorities. The aim of this group 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. These groups are also consulted on proposed changes to legislation and learning from complaints by the Association of Directors of Adult Social Services and the Association of Directors of Children's Services.

**ii. Purpose**

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

This report also includes information on compliments and comments received by the Council.

**iii. Period covered and data**

The report covers the period 1 April 2017 to the 31 March 2018. The report makes extensive use throughout of data available from the Customer Feedback System 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 the date received. All percentages and costs are rounded to the nearest whole number.

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| --- | --- |
| 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.** |

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

**1.1 Executive Summary**

Complaints are used by the Council as an opportunity to learn and improve. As a direct result of complaints in 2017/18 the Council has made improvements to processes and procedures, it has improved communication with the NHS, customers and their families and commissioned extra training for staff and managers.

Complaints represented just under **two percent** of all active adult social care and children's social care cases throughout Lancashire in 2017/18. Statutory complaint totals have increased overall by just over 15% (699 in 2016/17 to 805 in 2017/18). This is a trend that many councils are experiencing and ombudsman referral rates are also going up. Just under 32% of social care complaints refer to social work practice including complaints about assessments which has risen in both adults and children's' social care. However the number of complaints that have been resolved early have more than doubled.

Complaints in adult social care (ASC) have risen by 13% (from 479 complaints in 2016/17, to 540 in 2017/18).  Included in this figure were 27 complex joint complaints with the NHS, which is a welcome fall from 2016/17 (33).

Statutory children's social care (CSC) complaints increased by 20% (from 220 complaints in 2016/17 to 265 in 2017/18). Non Statutory CSC complaints decreased by 6% (from 93 complaints in 2016/17 to 87 in 2017/18).

Graph 1 below, shows a trajectory comparison for the total number of complaints received over the last 5 financial years. It can be seen that this is increasing for all social care complaints, but more steeply for adults.

**Graph 1**

Graph 2 overleaf, shows an overall increase in social care **compliments** from 596 in 2016/17 to 758 in 2017/18, mainly due to a 27% rise in ASC compliments mainly for the provision of day care and equipment or adaptations. The increase may be due to a wider circulation of the 'Your Views Count' feedback form which is given out after social care assessments and reviews are undertaken.

Positive appreciation for the actions of children's social care is usually always low because of the nature of the work. There has however been a considerable increase of children's' compliments in 2017/18, due to improved capture of this type of feedback.

**Graph 2**

**1.2 Statutory complaint trends and outcomes**

Social care complaints represented 1.5% of CSC and 2.3% of ASC active cases. Complaints 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 almost 50% of all feedback in 2017/18. Increasingly people are therefore contacting the council to complain rather than to compliment staff.

**Graph 3**

Graph 3 shows a breakdown in the number of statutory complaints by final outcome for all 622 closed complaints during the period. It can be seen that just under a third (31% of complaints) were justified by being upheld or partly upheld. More than half (55%) of complaints have also been 'nipped in the bud' or withdrawn at an early stage in the complaints process. This figure is welcome news as it shows the success of early action to resolve complaints. This figure for 2016/17 shows a significant increase from the previous year (one third).

In 2017/18 the total amount spent on investigations for statutory adult social care complaints was nil because all complaints in ASC have been investigated internally and for children's social care it was £6 090.15, this represents a slight increase over last year's cost of £5 817

**1.3 Statutory Local Government and Social Care Ombudsman (LGSCO) complaints received**

165 social care complaint referrals were made about Lancashire County Council to the Local Government and Social Care Ombudsman (LGSCO) during 2017/18. Of these, 104 LGSCO final decisions about social care were made. This is an increase of 24% when compared to the previous year (84). However the total number of LGSCO complaints and enquiries have also risen over this period too from 16,863 in 2016/17 to 17,452 in 2017-18.

The amounts paid in local settlements added up to a total of £638,058.48. Last year the total was £43,907.00. The difference is mainly due to a large refund having been awarded to 143 Independent Living Fund recipients, as a result of a LGSCO report finding.

**Section Two: Adult Social Care Feedback**

**2.1 Summary of ASC feedback in 2017/18**

Graph 4 shows a breakdown of ASC by feedback type. A total of 540 complaints were received in 2017/18 which is an overall rise by almost 13% when compared with the previous financial year (479). However it should be noted that people are more likely to compliment adult social care rather than to complain. The main reason for an adult social care compliment is due to the provision of equipment and adaptations to keep people living at home and independent for longer.

**Graph 4**

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

The breakdown of these can be seen in Graph 5. Stage 0 is the early resolution of complaints. It can be seen that there has been an increase of complaints being 'nipped in the bud' and a decrease in complaints requiring investigation, at the formal stage.

**Graph 5**

The outcomes of 425 closed complaints that commenced in this financial year, and had outcomes recorded against them at the year-end are shown in Graph 6, the rest (116) were still open at year-end. Of these 425 closed complaints, just over 47% were 'nipped in the bud'. It can be seen that the Stage 0 complaints which have had an early resolution have almost doubled. This is as a result of the Complaints Team focussing its resource on early resolution.

**Graph 6**

Graph 6 shows the outcomes of complaints. Of those complaints that required investigation at a formal stage (333), the breakdown was 26% upheld (70), 21% partly upheld (87) and 20% not upheld (67). 29% remain open and 4% (12) were withdrawn throughout the complaint process. These proportions are similar to the previous year. In terms of the upheld and partly upheld complaint numbers, this shows that when people make complaints, in over half of cases, there is an aspect that is justified.

Of the total number (540) of complaints received in 2017/18, 2% (11) exceeded the 6 month statutory maximum timescale. This was mainly due to the complexity of the case.

**2.3 What do people complain about?**

Graph 7 shows complaints by service type for the last two financial years.

**Graph 7**

For 2017/18, the most frequent subject of complaint was Care Provision (128) which received 24% of the total number of complaints, which is a change from assessment holding the biggest proportion in previous years. There has also been a significant increase in the number of complaints about Support Planning from 67 complaints in 2017/18 compared with just 15 in 2016/17. Assessment related complaints have fallen by 58% from 197 to 83. This may be as a result of the Complaints Team recording the service more accurately, rather than defaulting to 'assessment'. Complaint handling training programs have been offered to our care providers and changes to the 'handover' to residential care procedure have also been implemented.

Financial complaints have slightly increased as a proportion of all complaints in 2017/18 (102 or 19% of the total recorded by service type) when compared with 2016/17 (83 or 17%).

**2.4 Learning for adult social care**

* Communication with customers has been improved whilst people are waiting for an Occupational Therapist (OT) or for social workers to be allocated.
* The council has recruited more OT staff and the use of an enhanced screening tool is expected to reduce future waiting times.
* Social work managers have brought to the attention of staff, the importance of recording accurate, up-to-date contact details and consent information, particularly where a person's capacity may vary.
* Social care managers have brought to the attention of staff the importance of setting up, changing and ceasing direct payments/packages of care on the social care IT system.
* Social care managers have brought to the attention of staff the importance of ensuing that the financial implications of care and third party arrangements are understood and affordable.
* Following a notification of death or when people are not 'debtors' in the true sense of the word, financial staff will be adding personal touches to standard letters to reduce complaints.
* The new Homecare Framework, now allows the council to clamp down on the practice of providers issuing late 'actual' information, which should reduce the extra work needed due to incorrect invoicing. This is hoped to reduce complaints by reducing the need to send out retrospective invoices.
* The council will avoid using the term 'council funded care' in correspondence.
* Improvements have been made to the Safeguarding Enquiry Service to reduce complaints. A practice guidance has been developed, to include information sharing with the alleged perpetrator and with families about the safeguarding process.
* Social care managers have brought to the attention of staff the importance of the correct communication/information being provided regarding the hospital discharge process and consideration for reablement.
* Social care managers have brought to the attention of staff the importance of ensuring clear and concise recording within case notes and that communication is clear to service users and families, particularly about progress and outcomes.

**2.5 ASC services which were the subject of compliments**

Graph 8 shows the number of compliments received by service type for 2017/18.

The number of statutory compliments have increased slightly from 538 in 2016/17 to 615 in 2017/18. This is mostly related to the leaflet 'Your Views Count' being circulated consistently after assessment or reviews. In 2016/17, 31% of all compliments were because of equipment and adaptations received but this has dropped slightly by 5% in 2017/18 due to the improved capture of compliments in other services. There has been an increase in the proportion of compliments in relation to assessment with this accounting for almost 25% of compliments in 2017/18 compared with 16% in 2016/17.

**Graph 8**

Day care provision, by internal and contracted care providers is another common reason for the number of compliments received. This category received almost 27% (165) of all compliments in 2017/18. Compliments recorded as non-statutory relate to positive feedback we receive about an Adult Social Care Service, particularly feedback we cannot easily link to a specific service user, for example a compliment from a shared lives carer about how helpful they have found a shared lives officer. These have significantly risen during 2017/18, again due to the improved capture of this data from service providers.

**2.6 Joint Complaints**

A Joint Complaints Protocol is in place with the NHS. Complaints investigations increasingly involve 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 was a small reduction in joint complaints during 2017/18 to 27, compared with 33 in 2016/17. These complaints are sometimes complex and take longer to resolve as they involve ASC and the NHS, typically Hospital Trusts and/ or Clinical Commissioning Groups. Four joint complaints were still open at the close of 2017/18. Of the resolved complaints 8 were not upheld, 4 partly upheld and 5 were upheld. Four were withdrawn by the complainants, 3 were early resolution, one was signposted to another process and 2 are still open. Assessment and Support Planning were the biggest theme with 3 each.

**2.7 LGSCO Complaints**

The Local Government and Social Care Ombudsman (LGSCO) provides the final stage for complaints about local authorities and some other organisations providing local public services. Their service is provided free of charge. Complainants approach the LGSCO when all other options for pursuing their complaint are closed by the Council, after it is considered that a proportionate response has already been provided. The LGSCO will only consider complaints that have already been through the Council's complaints procedures, although sometimes an early referral will be made to the LGSCO when complainants continue to be dissatisfied and the council considers that it has not done anything wrong or it has done all it can to resolve the matter.

In 2017/18, the LGSCO had a total of 80 complaints and enquires in relation to ASC in Lancashire. Of these, 37 were actively followed up with investigations. Graph 9 shows the number of LGSCO ASC enquires staying reasonably steady over the last few years with a slight increase for 2017/18.

**Graph 9**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LGSCO enquiry for Adult Social Care** | **2014/15** | **2015/16** | **2016/17** | **2017/18** |
| **Total Received** | **27** | **30** | **30** | **37** |

Graph 10 below shows the outcomes of the 37 LGSCO ASC investigations. Almost 14% were not upheld, 30% were not investigated, 5% were resolved early and 51% were upheld. (Nationally the overall proportion of upheld LGSCO complaints increased to 57% - up from 54% the previous year.) Therefore, in almost half of all cases, action taken by the Council was sufficient. It should also be noted that the LGSCO will uphold complaints that the council has already upheld. Of the 19 upheld complaints, 10 had already been upheld or partly upheld by the council, which makes an actual uphold rate of 11.25%.

17 final decisions resulted in a total of £630,958.48 being paid out by the council, with a total of £577,247.37 being specifically paid out in relation to a single ombudsman finding relating to the Independent Living Fund (ILF). It was identified that the council had overcharged 143 service users (to date) who had previously been in receipt of ILF by wrongly applying their contribution. 293 people were identified to be reassessed and 290 assessments have now been completed at the time of writing this report. This is a much larger figure when compared with settlement amounts paid out for 2016/17 (£34,727).

**Graph 10**

Two public reports were published in relation to the Occupational Therapy Service and Learning Disability residential care. The LGSCO was satisfied with the actions and the continuous improvement undertaken as a direct result of learning from complaints. The LGSCO has therefore signed off and closed all upheld and partly upheld social care complaints in this way.

**2.8 LGSCO ASC identified learning**

The main learning from the 19 upheld and partly upheld complaints is outlined below.

* The finance team is reviewing our third party agreement forms so that they follow statutory guidance, on how the council arranges top-up fees. We will also be reviewing our procedures to ensure delays in handling complaints and implementing agreed actions from complaints are prevented in the future;
* Staff will consider a carer's ability to pay top-up fees for residential care on a long term basis and we have reviewed our procedures to ensure they are in line with the Care Act 2014;
* Staff have been reminded to inform customers of what the process is when an OT assessment has been requested;
* Staff training has been delivered to ensure that staff respond to complaints appropriately;
* Specific staff members have been reminded to provide copies of assessments and care and support plans when requested and to provide better clarity around funding;
* Staff will decide, in line with the Mental Capacity Assessment whether an Attorney or Deputy needs to be appointed for property and finance matters and ensure there are regular multi-agency meetings;
* When handovers occur with care providers, the relevant information is now included;
* Where care plans are recorded electronically from a hand written version, care providers will ensure that the service user has the opportunity to review the content of the plan, before applying their signature to it.

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

**3.1 Summary of CYP and CSC feedback in 2017/18**

There is a statutory and non-statutory process for complaints about CYP services. There is a statutory three stage process for those in social care who are eligible to complain. 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. The non-statutory process applies to non-social care complaints (for example education or Special Educational Needs and Disabilities SEND) or for people complaining about CSC who do not have parental responsibility for a child (for example grandparents). In 2017/18 the total amount spent on investigations for children's complaints was £6,090.15. This is almost twice the cost of the 2016/17 figure of £3,197.

Graph 11 shows the overall rise in CSC statutory complaints by just over 20% to make an overall total of 265 for 2017/18.

**Graph 11**

**3.2** **Breakdown of complaints by stage**

The breakdown of these can be seen in Graph 12. Stage 0 is the early resolution of complaints. It can be seen that there has been a welcome decrease of complaints at the formal stages because 150 (57%) of complaints were resolved early in the process (stage 0). The considerable increase in complaints being resolved early in the process reflects the focus of the Complaints Team to resolve complaints at this stage. The rest (115) were resolved with management and council action at the final outcome. No Stage 3 panels were held.

**Graph 12**

**3.3 Breakdown of complaints by outcome**

Graph 13 shows closed complaints which had a final outcome recorded (205 complaints) at the time of writing this report, split into final outcome. Of these 7% were not upheld, 18% of the total complaints received were upheld or partly upheld and 75% were signposted, resolved early or withdrawn, which, as already mentioned, is a significant improvement when compared with 2016/17.

**Graph 13**

Local and early resolution of complaints is a better outcome for everyone, as escalation is time-consuming and expensive. In about 18% of cases, the complaint was found to be justified and upheld or partly upheld.

Of the total number of CSC complaints received in this financial year, almost 50% (132) exceeded the statutory timescale. The reason for this is that due to staffing difficulties, CSC saw a number of agencies introduced to the service to alleviate caseloads, however in many cases, this caused disruption and an increased number of complaints about the actions of the agency. Often, the agencies themselves were not proactive at responding to complaints and after leaving the authority did not respond to the complaints, which left the council in some difficulty in achieving a resolution to matters.

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

Graph 14 overleaf shows a breakdown by service type for the last two financial years. It can be seen that the proportions are similar, apart from a small drop in the number of complaints in relation to assessments. Social work practice continues to be the most frequent subject of complaint covering more than half of all CSC complaints (149).

CSC have managed to continue with the drop in the number of complaints in relation to the safeguarding process from 5 in 2016/17 to 4 in 2017/18 and complaints about services for children with disabilities also had decrease from 14 in 2016/17 to 8 in 2017/18.

**Graph 14**

**3.5 Learning for CSC**

The learning identified for all services is the need for better and more efficient communication between district and NHS and partners 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 themes identified through stage1 and stage 2 complaints in 2017/18 are as below.

**Stage 1 and 2 Complaints**

* Where staffing issues necessitate a change in the allocated worker, an explanation should be provided to young people, dependent on their age/understanding, explaining the reasons why;
* Social workers will share with young people copies of any assessment that relate to their personal circumstances dependent on their ages and understanding;
* Social workers will invite young people to Core Groups and Child Protection Conferences and notes are placed on the young person's case file to confirm this;
* A service user was advised that they could sign their own consent form to attend a Linx group;
* Medication Alerts have been sent to all establishments to remind staff that it is important to administer the first dose of antibiotic upon receipt of them unless the prescriber has instructed otherwise;
* A management team have been reminded of the importance of seeking prompt medical advice;
* An Independent Reviewing Officer (IRO) was reminded they need to speak directly to all professionals during meetings;
* Managers will give consideration to allocating different leaving care workers, if this is in line with the child's wishes;
* In a specific case, a professionals meeting was held to discuss the complaint issues around the Educational Health Care Plan (EHCP);
* Managers have spoken to a specific social care team to ensure that staff communicate effectively and ensure that social workers consider how information is shared in future.

**3.6 Summary of non-statutory CSC complaints**

Non CSC statutory complaints are made by a people who are **not** entitled to complain under the Children Act procedures (for example a family friend or a relative without parental responsibility) or if the complaint is about something that cannot be complained about under the Children Act (for example adoption or fostering matters / complaints by members of the public: please see further categories below)

**3.7 What are non-statutory CSC Complaints about?**

**Graph 15**

Graph 15 shows that non statutory complaints dropped by just over 6% from 93 in 2016/17 to 87 in 2017/18. Similar to statutory complaints, 'Social Work Practice' is the most common complaint category.

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

**3.8 Services which were the subject of compliments and comments in 2017/18**

Due to the nature of CSC, not many compliments are expected although there was a welcome rise in 2017/18. A total of 148 compliments were received for 2017/18, which is a considerable rise from 58 in 2017/18, due to the incorporation of compliments from other CYP services. 5 comments were made and were passed onto the services concerned to take appropriate action.

**3.9 LGSCO Complaints**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LGSCO enquiry for Children's Social Care** | **2014/15** | **2015/16** | **2016/17** | **2017/18** |
| **Total Received** | **31** | **39** | **47** | **23** |

The Local Government Ombudsman (LGSCO) acts as the regulator and provides the final stage for complaints about local authorities and some other organisations providing local public services. Their service is provided free of charge. Complainants approach the LGSCO when all other options for pursuing their complaint are closed by the Council, after a proportionate response has already been provided. The LGSCO will only consider complaints that have already been through the Council complaints procedures. Sometimes the Council will make early referrals to the LGSCO when complainants continue to be dissatisfied and the council considers that it has not done anything wrong or it has done all it can to resolve the matter.

**Graph 16**

In 2017/18, the LGSCO had a total of 85 complaints and enquires in relation to CYP in Lancashire. Graph 16 shows a welcome fall in LGSCO CSC investigations, with 23 actively followed up by the LGSCO in 2017/18 which is a drop of 50% from 2016/17.

Graph 17 shows that of these enquires, 2 were not upheld, 14 were not investigated, 7 were either upheld or partly upheld. As the LGSCO will also uphold complaints that the council has already upheld and of the 7 complaints, 3 had already been upheld or partly upheld, this makes an overall uphold rate of 4.7%. In 70% of cases, the action taken by the council was sufficient. A total of £7,100 was paid in local settlements, a slight decrease when compared with settlement amounts paid out for 2016/17 (£9,180).

**Graph 17**

The LGSCO was satisfied with the actions and the continuous improvement undertaken as a direct result of the 7 complaints upheld by their investigations in 2017/18. There were no public reports for Children's Social Care. The identified learning from those complaints is as follows:

**3.10 LGSCO Children's Social Care identified learning**

* Ensure sure staff in all service areas who deal with children are aware of the requirements of Getting the Best from Complaints 2006 in dealing with complaints by or for children;
* Managers have reminded staff of the statutory timescales for producing Education Health and Care plans and the need to provide review outcome letters in a timely manner;
* Staff training is being delivered to ensure that staff respond to complaints appropriately.

The complaints team also received a compliment from the LGSCO regarding the way a specific joint complaint was handled:

*"In response to our recommendations, your staff have provided my office with a comprehensive report outlining the thorough exercise they have undertaken to tackle the issues raised in the complaint. I believe that the real value in complaints comes from the free learning and intelligence these experiences can provide to help improve services for the future. It is clear that your staff have responded to this cause in that spirit, and have demonstrated a level of mature reflection and learning that does credit to the Council. Please accept my thanks for that."*