

Annual Report

Complaints and Customer Feedback



Annual Report for the period 01 April 2014 to 31 March 2015

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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 2014 to the 31 March 2015 and is in four sections.

| | |
|---------------|---|
| Section One | Summary and Overview highlights the key messages from the report and gives the overall picture and learning across the Council. |
| Section Two | Statistical data and further information and analysis in relation to all Adult Social Care Services . |
| Section Three | Statistical data and further information and analysis in relation to Children's Social Care Services . |
| Section Four | Corporate (non-statutory) complaints for all other council services. |

The report makes extensive use throughout of data available from the Customer Feedback System. The statistical information presented within the report can be verified by reference to this database. All percentages are rounded to the nearest whole number.

It should be noted that because of the introduction of the new electronic recording system, midway through the year, only half year figures are available for 2014/15 activity, so monthly averages are extensively used in this report.

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 Statutory Social Care Complaints

1.1 Executive Summary

Complaints represented less than **one percent** of active adult social care and children's social care cases with an open referral in 2014/15. Statutory complaint totals have increased overall by 25%, (385 in 2013/14 to 480 in 2014/15). Complaints in adult social care have however risen significantly, with a 77% rise, (from 189 complaints in 2013/14 to 334 in 2014/15). Most probably this is a result of increased expectations by the public and reduced budgets. There was also rise by 40% in complex joint complaints with the NHS from 15 complaints in 2013/14 to 21 complaints in 2014/15. Adult social care related financial complaints also rose from 7% to 17% of all complaints, due to teething problems with new IT systems. Another reason for the rise in complaints has been the introduction of a new Customer Feedback IT system and internet portal. This means that online complaint submissions have increased and more complaint activity is being captured than ever before. Many issues which come in as 'complaints' are simply signposted back into 'business as usual' across all Council functions. In the past, this activity was 'invisible' but now it is being formally recorded and captured.

New arrangements for CYP complaints handling has however reduced statutory CYP complaints by 26% (from 196 complaints in 2013/14 to 146 in 2014/15).

The reduction in compliments is very pronounced, going down from 1270 in 2013/14 to 310 in 2014/15. This is mainly as a result of a massive reduction in adult social care (ASC) compliments which used to be captured for equipment and adaptations services. There has been a 45% decrease in customer feedback overall which has gone down from 1837 instances in 2013/14 to 1017 in 2014/15.

Chart 1 below shows the total number of customer compliments, comments and complaints received in 2014/15 for adult and children's social care services. **Chart 2** provides the previous year comparison. It can be seen that the proportions of feedback have completely changed. For the first time ever, complaints now represent the biggest proportion of social care customer feedback (48%).

Lancashire County Council Social Care Compliments, Comments & Complaints 2014/15

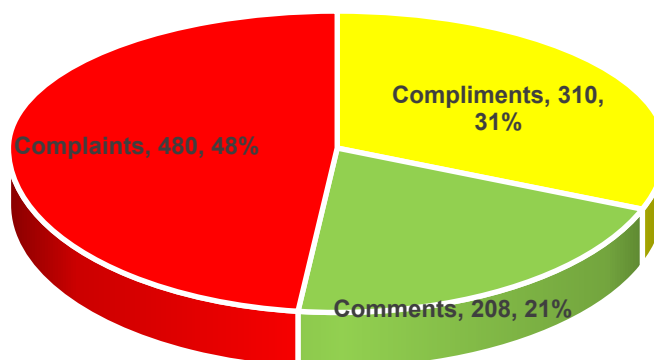
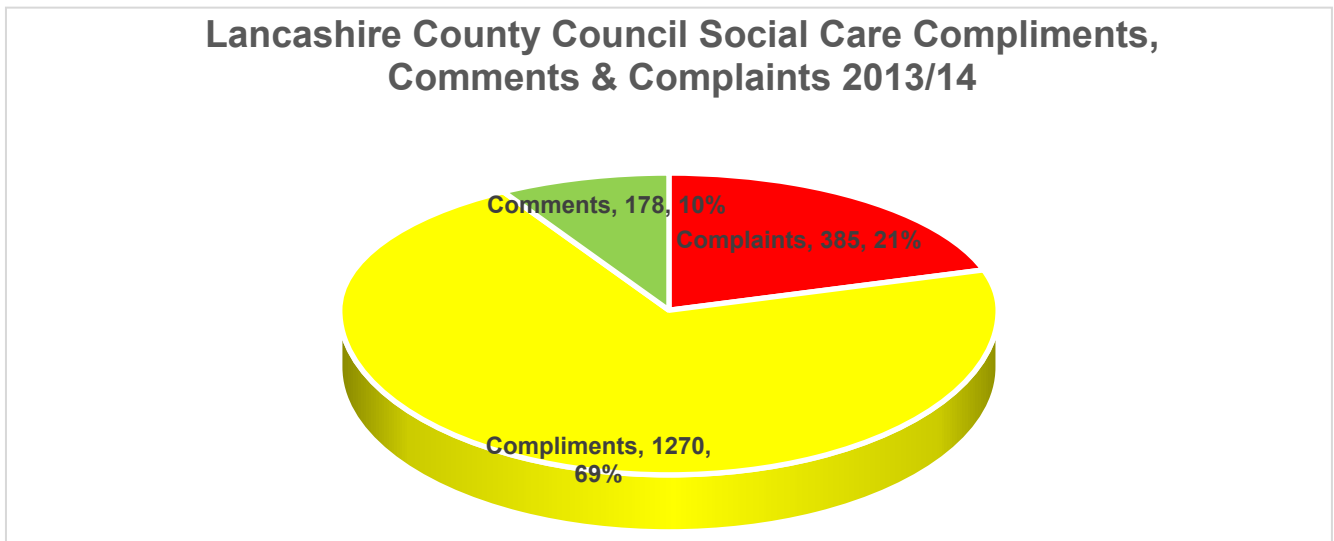


Chart 2

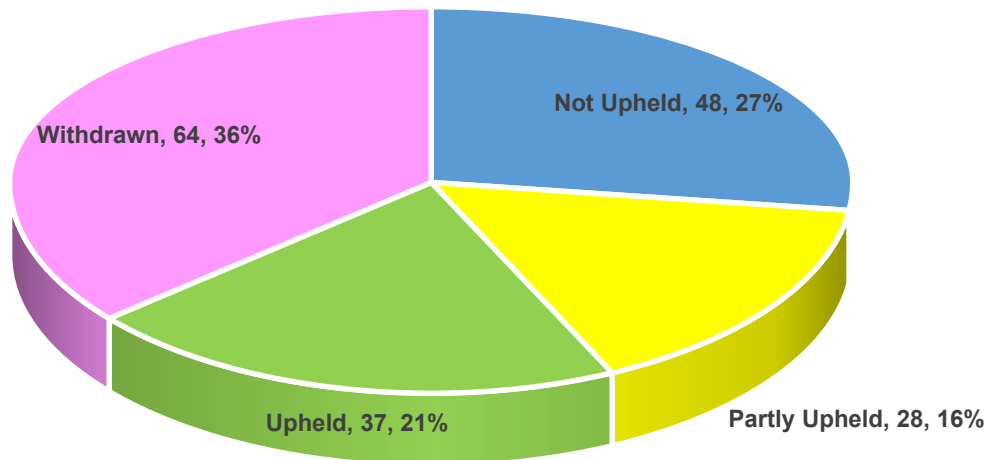


1.2 Complaint trends and outcomes

Complaints have remained at less than one percent of active cases (0.8% for CYP and 0.9% for ASC). Despite the rise in complaints, social care teams therefore mainly get things right rather than wrong. 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 four years. This year it has increased significantly to 48% compared with 21% in 2013/14.

Chart 3 below shows that, from when the new Customer Feedback System went live in October 2014, 63% (112) of resolved complaints were either not upheld by the investigating manager, withdrawn by the complainant or resolved early. A further **21% (37) of resolved complaints were upheld** and 16% (28) of complaints were partly upheld by the investigating manager. Compared with the previous year, 15% (57) of complaints were upheld, therefore there has been a slight increase of 6% in upheld complaints in 2014/15. This rise is probably an impact of very busy social care teams sometimes overlooking aspects of practice.

Outcome of complaints between 01 October 2014 and 31 March 2015



1.3 Learning from Complaints

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 statutory Complaints Managers can discuss, learn and share best practice regarding social care complaints. There are opportunities to 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.

1.4 Learning for adult social care

Complaints have been used to improve services across adult social care systems and processes. During the past year the complaints training has improved the consistency and confidence of staff in complaint handling, to resolve complaints and ultimately improve the complainant's experience.

Learning from complaints has resulted in the following outcomes in 2014/15:

Improved internal working and with partners:

- Improvements to integrated hospital discharge arrangements
- Promoted use of Housing Support Pathway model for supported tenancies to improve compatibility of tenants
- Contract monitoring arrangements of providers being developed in response to learning arising from complaints
- Embedding new systems for officers to record Service Users agreement with assessment, support plan & charging arrangements
- Reviewing the approval process for social and health care funding in residential care (including nursing)

Finance Services¹:

¹ Please see Appendix 1 on page 18 for full details and analysis of the problems faced and improvements made

- Improved working arrangements between social care and finance for handling complaints, queries and disputes
- Develop good practice in resolving complaints that relate to more than one team or service
- Review needed of systems in place once LCC notified of an activated power of attorney arrangement

Safeguarding & Mental Health Services:

- Extended the availability of carer assessments by independent carer organisations to people who are supported by integrated mental health teams
- Safeguarding Adult Boards to be provided with intelligence from safeguarding complaints for review
- Development of audit and delegation systems to ensure management oversight of casework

Older People & Disability Services:

- Implemented new guidance for Aid Call, to improve response times and monitoring
- Improved the pre-admission and admission process for new residents, as part of 'My Home Life/Maintaining Identity'
- Updated procedures for new and existing residents who are self-funding, including clear fee information for public display
- Introduced new clinical escort guidance to improve the experience for residents being escorted to clinical appointments and hospital
- Reviewing our arrangements to ensure good communication with families and carers so they can remain involved in the persons care
- Introduced a new procedure for when an older person is absent from day time support

1.5 Learning for CYP social care services

The findings particularly from Stage 2 investigations, provides the opportunity for open dialogue among professionals within children's social care and enables and facilitates learning from complaints to reduce similar occurrences. Conclusions and recommendations from all Stage 2 complaints are shared with all senior managers who have a role in social care complaints handling. In 2014/15, 11 Stage 2 investigations were undertaken on behalf of the Council and the following learning has been identified:

- Assessment – the need for more accurate and timely recording of assessments including initial assessment and core assessments. Some complaints commented on the quality of recording.
- Communication was a common theme running through all complaints, lack of or irregular contact with key contacts caused unnecessary anxiety and frustration.
- Support – some complainants felt that there was a lack of support from professionals dealing with their cases.
- More efficient complaint handling – this was identified in 2 complaints where more timely responses and checking of progress on complaints was highlighted.
- Training and development of staff on more specialist areas for e.g. ASD / Aspergers / specific SEND areas.
- Quality Assurance of complaint responses at stage 1.
- Lack of clarity on processes such as the initial contact for assessment stage
- The request for an apology for the actions of workers in individual cases.
- Review of assessment or reporting of information

As a result of stage 2 investigations the following action has been taken:

- Comprehensive joint training between Adults and Children's social care front line staff has been rolled out to enable cross service area learning and enables the sharing of good practice. Themes and trends for complaints are detailed in this training so that specific areas can be discussed/addressed.
- Quality assurance of stage 1 responses is a service the complaints and appeals team now offer and is open to staff who want to utilise this service.
- The complaints team now have a better system of recording and progress monitoring of complaints and this has already shown improvements in recording and out-coming of complaints.
- Themes and learning are regularly communicated back to senior managers via their senior management teams.
- There is more support from the complaint managers for their specific areas to designated complaints officers for e.g. attendance at team meetings.

1.6 Remedies

Complaints can be remedied in many different ways. There is usually more than one remedy or action resulting from a complaint therefore the number of remedies and actions exceeds the total number of complaints received.

In 2014/15, the five most common actions or remedies for all statutory complaints in descending order were:

- Gave apology - 38% (67)
- Gave explanation of decision making and action on case - 33 % (59)
- Gave explanation of legislation and authority's policy, procedure and eligibility criteria - 11% (20)
- Gave advice and information - 10% (18)
- Reimbursement of costs - 10% (17)

1.7 Local Government Ombudsman (LGO) enquiries and referrals

Despite a national rise of 10% in complaints to the LGO, LGO complaint referrals in Lancashire remain broadly static. In the 12 month period to 31 March 2015, 161 LGO enquiries relating to Lancashire County Council were made. This is similar to the previous year when 163 enquiries were made. Of these, a total of 78 had investigations or formal enquiries with only 11 of those upheld (9%). The vast majority of LGO referrals related to statutory social care complaints in CYP and adult services.

Table 1: LGO Enquiries: 1 April 2013 – 31 March 2015

| LGO Enquiry by service area | 2013/14 | 2014/15 |
|--|----------------|----------------|
| Adult Social Care | 29 | 27 |
| CYP Social Care and CYP non statutory (e.g. Education) | 22 | 31 |
| Corporate | 9 | 20 |
| Overall Totals | 60 | 78 |

Adult social care LGO complaint enquiries went down from 29 in 2013/14 to 27 in 2014/5 and from 22 in CYP, they rose to 31 last year. The rise in CYP referrals (of about 40%) appears in part to be linked to a rise in school appeals queries. Over half of all Corporate LGO complaint referrals (11) related to Highways and Transport matters.

Of the 27 LGO adult social care enquiries, the outcomes were as follows in 14/15:

- 5 not upheld
- 9 not progressed by the LGO
- 8 referred back for local resolution into our complaints procedure
- 5 upheld and local settlements agreed totalling £3300 (£2920 in 13/14).

Of the 31 LGO CYP enquiries, the outcomes were as follows in 14/15:

- 10 not upheld
- 7 not progressed by the LGO
- 8 referred back for local resolution into our complaints procedure
- 6 upheld and local settlements agreed totalling £2400 (£45 100 in 13/14).

Of the 20 LGO Corporate enquiries, the outcomes were as follows in 14/15:

- 4 not upheld
- 14 not progressed by the LGO
- 2 referred back for local resolution into our complaints procedure
- None were upheld

Learning from LGO complaints

Of the 11 upheld cases, the following actions have been taken in response to LGO findings and recommendations.

Adult social care

1. Staff have been made aware that carer's assessments/needs should be undertaken/considered even if the person they care for doesn't meet eligibility criteria.
2. Safeguarding procedures have been reviewed and updated.
3. Shared Lives policies and procedures have been reviewed and updated.

Children's Services

1. Appeal Panel clerks have been directed to take more comprehensive notes of panel decisions.
2. Procedures/practices when checking email addresses when making safeguarding referrals to other Local Authorities have been improved.
3. Procedures relating to complaints which are outside of the scope of the statutory children's complaints procedure have been improved.
4. Procedures about consent required for people acting as representatives have been reviewed.
5. Procedures relating to considering foster carers for adoption have been reviewed to avoid delays and faults in the process (and in how Adoption Allowances are considered).
6. Quality of care assessments have been improved.

Section Two: Adult Social Care Feedback

- Statistical Data and Analysis

2.1 Services which were the subject of complaints in 2014/15

As already mentioned, the significant difference between the last two financial years has been the large increase of 77% in complaints. [Chart 5](#) and [Chart 6](#) below gives a breakdown of the average number of complaints received each month by service type.

Chart 5

Average of complaints by service type 13/14

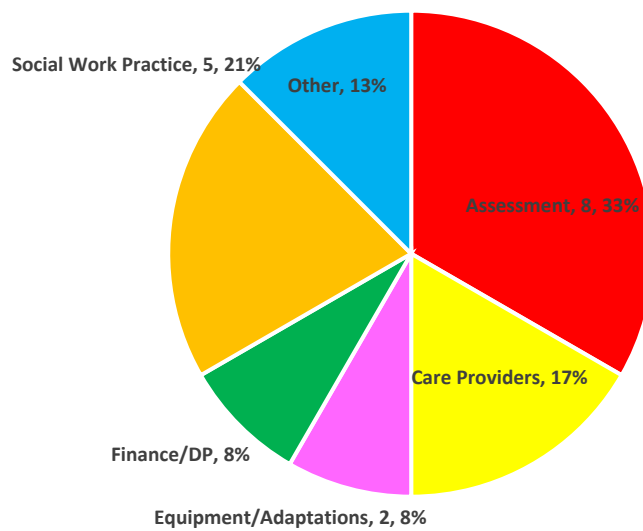
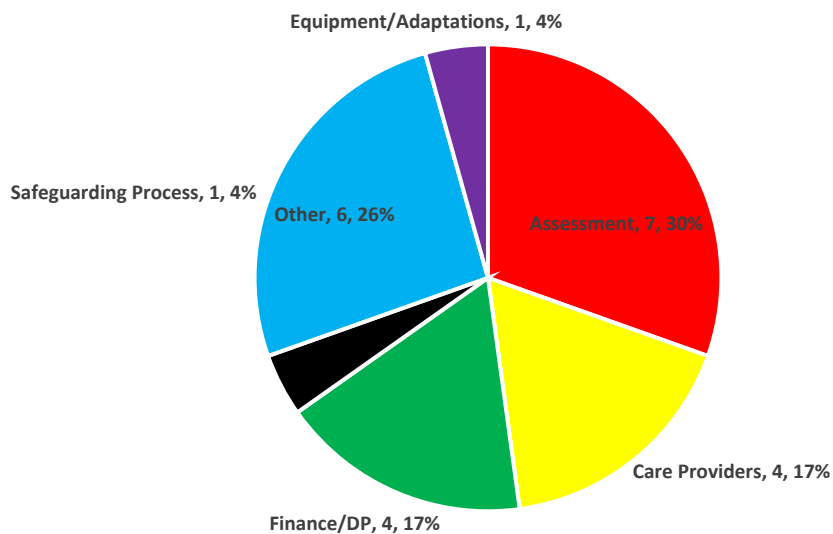


Chart 6

Average of complaints by service type 14/15



For 2013/14, the most frequent subject of complaint was assessment and this service received 33% of the total number of complaints that LCC adult social care received. This has remained at a similar level for 2014/15 with 31% of the total number of complaints. Complaints about care providers have remained constant with 17% in 2013/14 and 18% in 2014/15. Financial complaints increased significantly for 2014/15 from 8% to 17% of all complaints, as a result of new IT processes being introduced and some initial teething problems.

There has been a notable decrease in the number of complaints about equipment/adaptations with only 4% in 2014/15 compared with 8% in 2013/14. The new 'equipment prescription' model is therefore working well from this perspective.

2.2 Services which were the subject of compliments in 2013/14

As already mentioned, the significant difference between the last two financial years has been the large decrease in compliments. [Chart 7](#) and [Chart 8](#) below gives a breakdown of the average number of compliments received each month by service type.

Chart 7

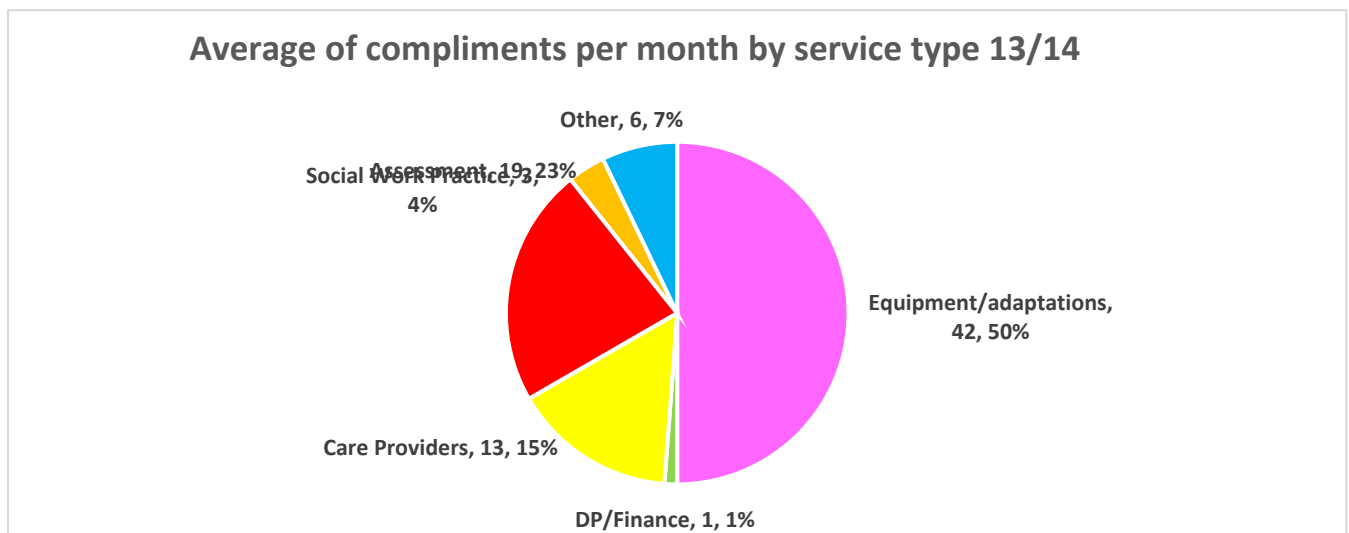
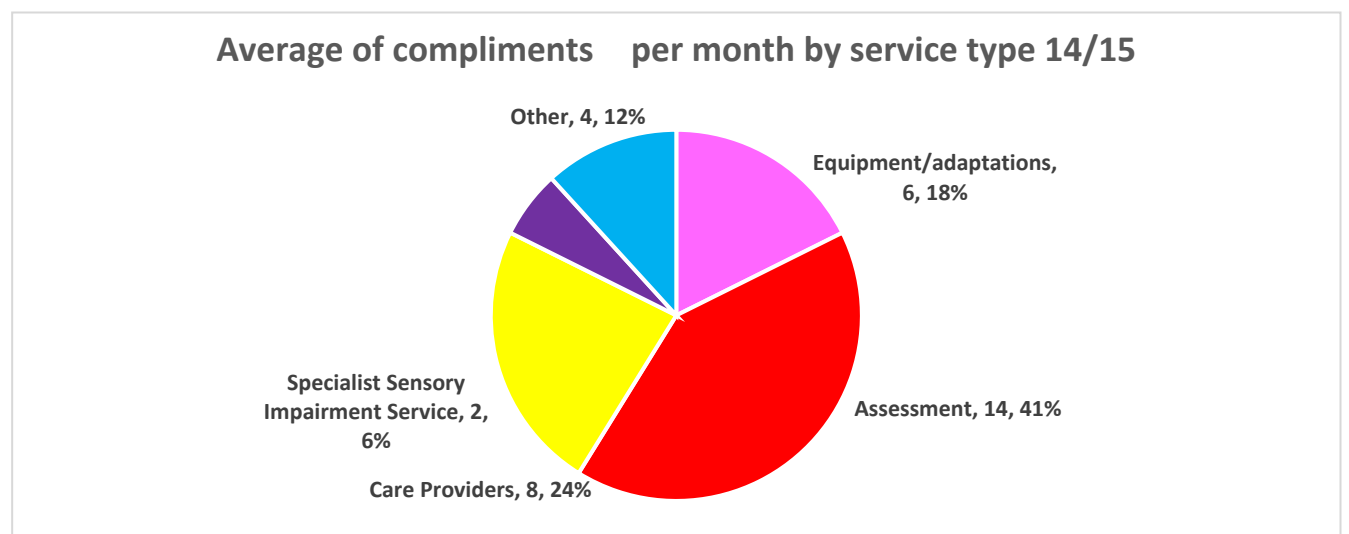


Chart 8



The main difference between the last 2 years has been the large reduction in compliments received overall. The average per month has gone down from 84 per month to just 34. This is mostly related to the new equipment and adaptations 'self-service' model of operation. It is also related more generally to the leaflet 'Your views Count' not being circulated as consistently after assessment or review any longer. In 2013/14 half of all compliments were because of equipment and adaptations received, however this has decreased to just 18% in 2014/15. There has been a significant increase in the proportion of compliments in relation to assessment with this accounting for 41% of compliments in 2014/15 compared with 23% in 2013/14.

Contracted care providers were another common reason for a compliment. This category received 23% of all compliments in 2014/15, which has gone up proportionally by 8% since 2013/14.

2.3 Joint Complaints

In 2014/15 the number of joint complaints was 21, compared with 15 in 2013/14, an increase of 40%. A Joint Complaints Protocol is in the process of being agreed with the NHS. Complaints investigations are increasingly involving many different parts of the council as well as health services and contacted service providers therefore adding much more complexity which the complaints team co-ordinates.

Section Three: Children and Young People Social Care Feedback

- Statistical Data and Analysis

3.1 Services which were the subject of complaints in 2014/15

[Chart 9](#) and [Chart 10](#) below gives a breakdown of the average number of complaints received each month by service type.

Chart 9

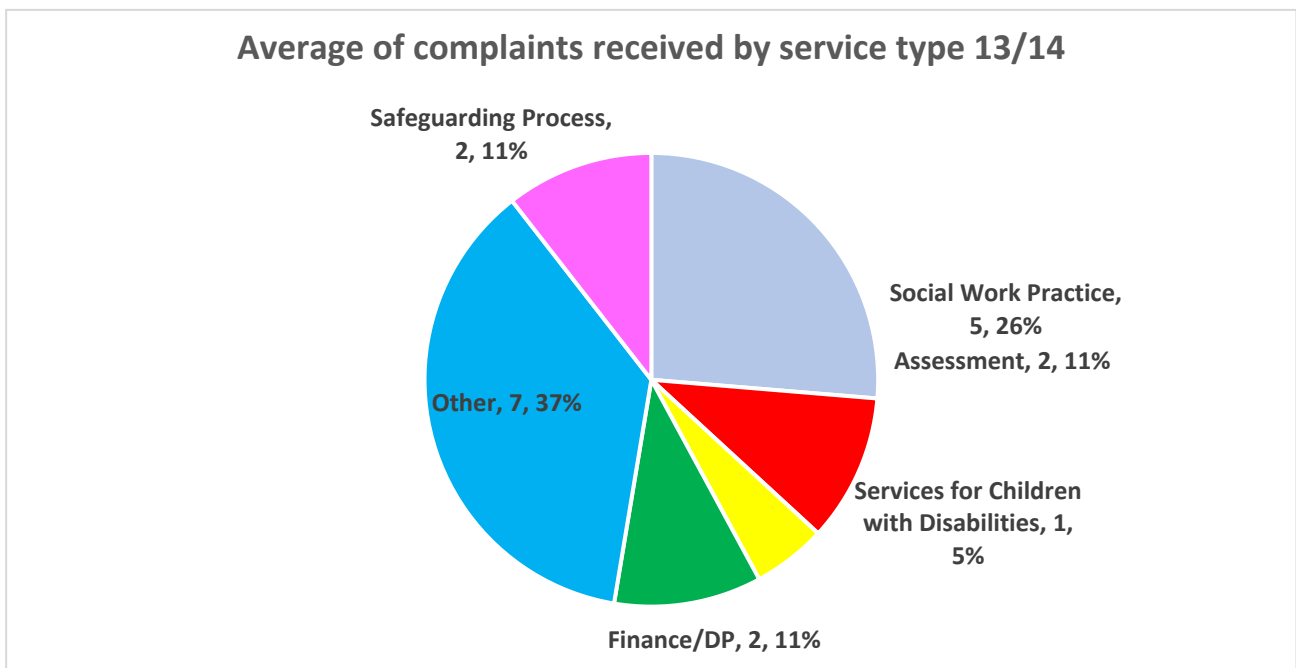
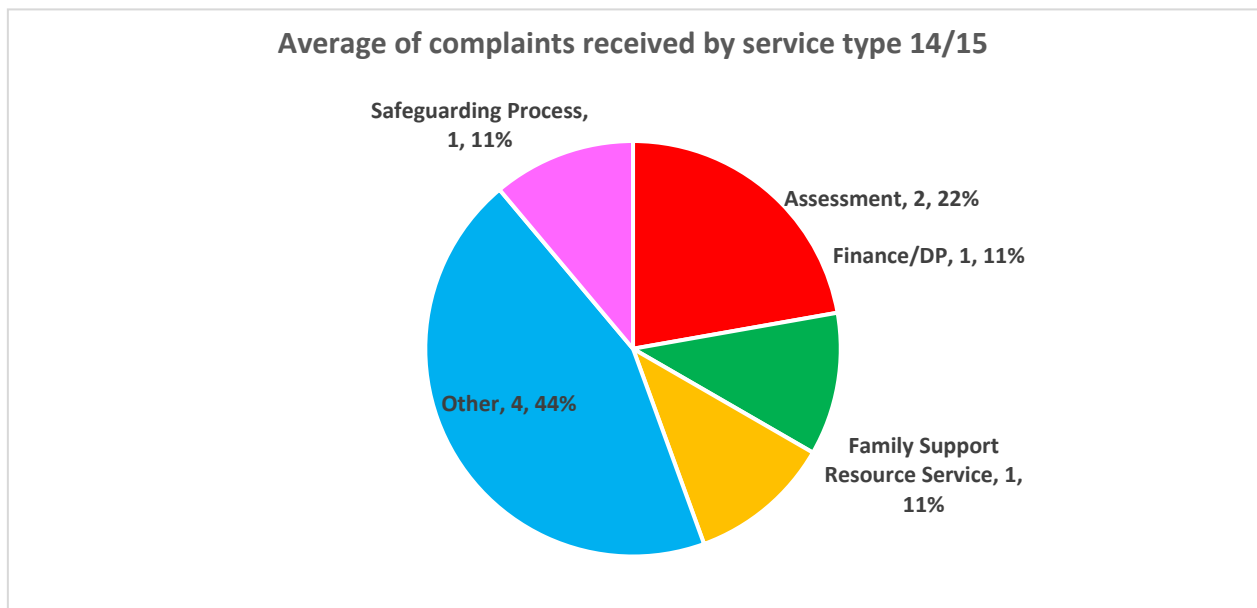


Chart 10



Complaints in relation to assessment have increased significantly from 12% in 2013/14 to 22% in 2014/15. However, complaints about financial issues have remained constant with 12% in 2013/14 and 11% in 2014/15.

There has been a notable recording of complaints regarding the safeguarding process in 2014/15 which accounted for 11%.

3.2 Breakdown of complaints by stage

It can be seen that despite the 26% reduction in CYP Stage 1 complaints, there has been a rise in Stage 2 commissioned investigations.

| Stage | 2013/14 | 2014/15 |
|---------|---------|---------|
| Stage 0 | 0 | 9 |
| Stage 1 | 196 | 146 |
| Stage 2 | 4 | 11 |
| Stage 3 | 0 | 0 |

3.3 Stage 2 and 3 Complaints

The Children's statutory complaint process allows the person complaining to request an independent investigation if they are not happy with the first (management) response to their complaint. This is a stage 2 investigation. If they remain unhappy the person can then request a Stage 3 review panel, which reviews the way the stage 2 was investigated.

This year the Social Care Feedback Service managed 11 Stage 2 investigations and no stage 3 review panels. Local and early resolution of complaints is a better outcome for everyone, as escalation is time-consuming and expensive. Often there is little a Stage 3 panel can achieve and in many cases, early referral to the Local Government Ombudsman was agreed.

3.4 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.

In 2014-2015 there were a total of 25 non statutory complaints recorded, the subjects of which were the following:

18 complaint 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

5 Complaints were regarding the Adoption and Fostering service in relation to:

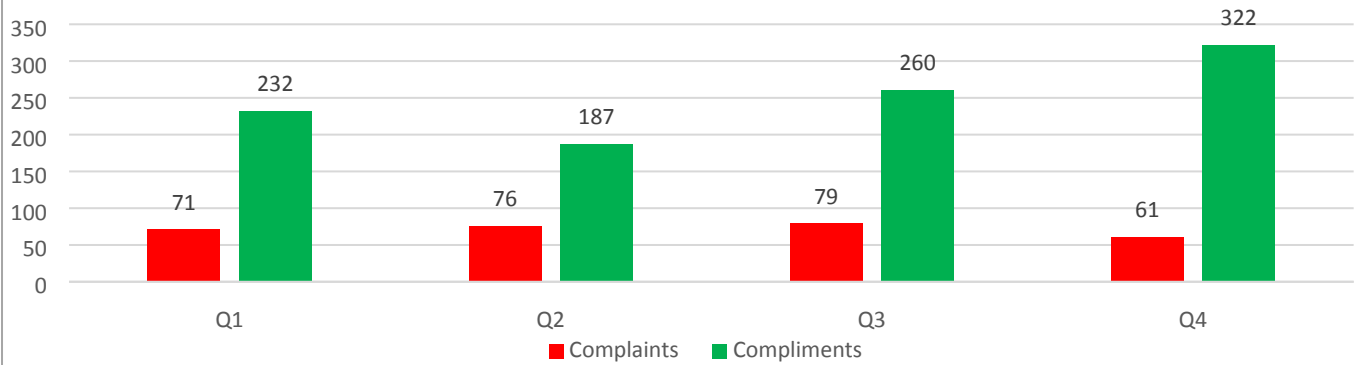
- Adoption allowance policy
- Decision to not approve potential adoptive carers
- Decision to not approve potential foster carers
- 2 complaints received was in relation to the actions of the emergency duty team/contact centre

Identifying themes and learning from all children social care complaints – non statutory or statutory is valuable and feedback is provided in the same way in that senior managers are informed of the themes on a regular basis through regular attendance at team meetings or senior management meetings.

Section Four: Corporate (non-statutory) complaints for all other council services.

- Statistical Data and Analysis

4.1 Annual Comparison 2014/15 Corporate Complaints/Compliments



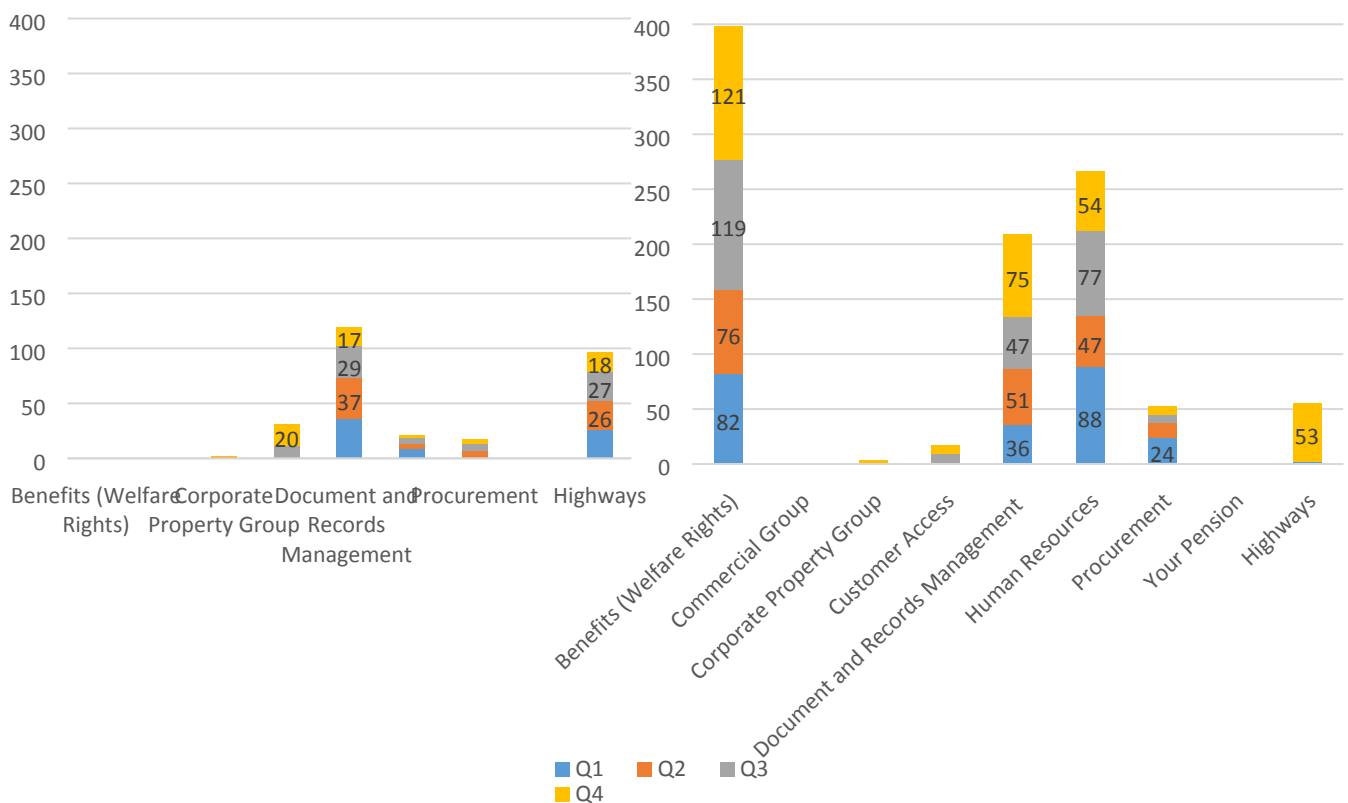
A total of 287 complaints and 1001 compliments were recorded for 2014/15. It can be seen that compliments consistently outnumbered complaints for every quarter of 2014/15.

Points to note:

- Most complaints were about Highways, Customer Access Team and Records Management, throughout 2014/15
- Welfare Rights was the service which recorded the highest number of compliments for 2014/15

4.2 Complaints Breakdown into Teams

4.3 Compliments Breakdown into Teams



Please note: Figures have been provided by the individual teams (not recorded by the Corporate Complaints team themselves), where results show 'nil' this may be due to the individual teams not being able to provide figures or not recording for the time frame required. Due to no teams reporting prior to 2014, the Corporate Complaints Team cannot provide a comparison with the previous year.

Blue Badge improvements

The Blue Badge Service is now with the Customer Access Service. A new process for dealing with Blue Badge applications has resulted in a 25% reduction in the time taken to process an individual application, from an average of 12 to nine minutes. A significant statistic is the 77% reduction in the amount of time passed between receipt of an application and the application being processed, as this was the source of many complaints previously.

| Quarter | No. of Blue Badge Complaints | No. of Blue Badge Compliments |
|-----------------|-------------------------------------|--------------------------------------|
| Apr – June 2014 | 8 | 6 |
| Jul – Sep 2014 | 29 | 18 |
| Oct -Dec 2014 | 23 | 1 |
| Jan – Mar 2015 | 11 | 1 |
| Total: | 71 | 26 |

The welcome downward trend in complaints in the last quarter above has continued into the new financial year.

Appendix 1

Financial issues: analysis of the problems faced and improvements made

Shortly after the new financial systems (Liquid Logic and Controcc) were implemented last year, problems began to emerge, with care providers complaining about not being paid correctly and clients who complained about incorrect billing. Whilst the problem initially manifested itself as an issue affecting the Procurement Service, further analysis identified that there were actually problems in different parts of the organisation and that the integrity of the data within the system was one of the main reasons for the problems. To address this, three broad areas of work were undertaken:

1) Improving and maintaining data integrity.

A temporary, cross-service "Hit Squad" of 15 people was created to correct errors in the data, and enable the backlog to be cleared. This was an effective use of resources and the quality of data improved. The Hit Squad focussed on client data that was already in the system and responsibility for new data was dealt with by the Care Navigation Team which already existed for this purpose. At the time it was thought that once the historic data was corrected that the Care Navigation team would be able to manage the day to day "business as usual" activity of recording new placements and make changes to any existing ones.

2) Working Practices

It was established that social care staff were, in some cases, not following the new processes and were, on occasion, doing things outside of the system. This contributed to the problems with data in the system. It was recognised that the initial processes that had been designed as part of the new system implementation required Social Workers to do tasks outside of core social work tasks, i.e. commissioning care packages. This was both time consuming and not an effective use of time and was therefore not always seen as a priority. It was therefore agreed that the most effective and logical place for this activity to take place was within the Care Navigation Team.

3) Suppliers

A large number of suppliers were not using the new system to submit their invoices. The system had been designed in such a way that suppliers could have access to all of their client information, be able to submit invoices electronically and be paid more promptly. When the systems went live, very few suppliers were registered to use the new systems in the way that is required. This resulted in significant numbers of manual invoices being received and contributed to the backlog. A significant amount of work was undertaken to target suppliers and encourage them to use the electronic system. This work was very successful with the majority of suppliers now sending in invoices electronically. A couple of very large providers had specific issues some of which are still being addressed.

The actions outlined above initially had a positive impact. There has however been a deterioration in the situation over the last few months and whilst the problems are not as significant as in the early days of the system implementation, action needs to be taken to address these on a long term basis. In order to do this a transformation board is to be established that brings together some existing groups that have been established to try and overcome some of the ongoing issues. This board will be supported by a programme manager and the Core Systems/transformation team. Key workstreams within the programme include;

a) Data

There are still some data issues that need to be addressed. The extent of this problem is currently being assessed as well as the capacity for the Care Navigation team to deal with all of these. An important system development will go live in October which will enable providers to report any inaccuracies in the data to one central point. Currently providers inform us in a variety of ways and have asked for an amendment to the system to make this process easier. Understanding why and how inaccuracies appear is a key issue that needs to be resolved and is a part of this workstream.

b) Social Workers' Use of the System

This will include ensuring processes are documented and that Social Workers are adequately trained in addition to this work is ongoing to understand other problems social workers are experiencing with the system to see if solutions can be found.

c) Reporting

Ensuring reporting mechanisms are effective and produce information in a format that is useful for management purposes.

d) Technical Issues

Despite the work already undertaken, there are some technical issues with the systems that are causing problems for users. The Business Control Team in the Core Business Systems / Transformation Service are currently working with services to understand and prioritise changes, and work with BTLs to ensure that those changes are delivered. The actions have been prioritised and work is focused on those changes that will have the biggest impact.

e) Resolving Queries At First Point of Contact

The Customer Access Service are also an important in the whole process. Some activity is underway within Social Care Services and Finance to work with the Customer Access Service to better resolve queries at first point of contact. This should provide a better customer experience.

The queries received will be monitored to ensure that any new issues are identified and action taken to overcome these.

