



Health and Social Care Complaints and Compliments

Annual Report 2012 - 2013

1.	Introduction	2
2.	Advocacy	2
3.	Statistics	3
	Complaints by service	3
	Subjects of complaints	4
	Outcomes of complaints	4
	Outcomes of Ombudsman complaints	4
	Response times	5
	Delays and extended deadlines	5
	Diversity monitoring	5
4.	Learning and service improvements	6



1. Introduction

The purpose of this report is to provide information about activity in respect of Health and Social Care's statutory complaints procedure for the year 2012-13. The legal basis for the complaints procedure lies in the Local Authority Social Services Act 1970, in Section 114 of the Health and Social Care (Community Health and Standards) Act 2003 and The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. Associated with these regulations is the Department of Health Guidance document, called "Listening, Responding, Improving: A guide to better customer care".

Local Authorities are required to publish an Annual Report in respect of complaints which includes the following information:

- The number of complaints received
- Complaint outcomes
- The number of complaints referred to the Ombudsman
- Subject of complaints
- Significant issues raised by complaints, lessons learned and actions taken.

The Complaints Team ensures that complaints are recorded correctly, handled appropriately and in a timely fashion, with outcomes recorded and followed up where appropriate. During the year, the team moved from Health and Social Care to create a new Council-wide complaints team covering all statutory and corporate complaints to the Council.

2. Advocacy

Complaints Procedure Advocacy (CPA) provided support to 16 complainants or their relatives/carers. Different levels of support are provided from information promoting self-help to assisted information (which could include research or signposting) and general help (which could be arm's length support, eg advising on process and proof reading letters drafted by clients) through to full case work. Complainants are supported to look at different options and possible outcomes to equip them to make informed choices about action which may be taken. CPA works to ensure people can represent their own interests as far as possible and does not offer advice on how an individual should act.



3. Statistics

The Complaints Team collects data in compliance with statutory requirements and the Council's equality and diversity policies. The information below relates to statutory complaints. It is likely that many comments/issues were dealt with outside the procedure. There were 122 statutory complaints as defined under the complaints regulations. The approximate total number of service users was 6,700.

In addition, there were 70 additional issues brought to the attention of the Complaints Team, consisting of:

- 17 compliments
- 17 general comments about services
- 10 minor issues were resolved outside procedure
- 7 complaints about independent providers that were responded to directly by the providers, with complaints team liaison
- 6 complaints about health services requiring adult social care input
- 2 complaints about neighbouring local authorities requiring social care input
- 1 corporate complaint requiring adult social care input

The main services complimented included Care Direct, intermediate care and reablement services. It is recognised, however, that the number of compliments recorded is likely to be a small percentage of those received verbally by staff members.

Complaints by service

Service	Number	%
Finance	34	27%
Older People	17	13%
Independent Providers	15	12%
Independent Living Service	9	7%
Learning Difficulties	9	7%
Physical and Sensory Impairment	6	5%
Intake and assessment	6	5%
Approved Mental Health Professionals (AMHP)	4	3%
Hospital Social Work	4	3%
Accessible homes	3	2%
Rehabilitation	3	2%
Reablement	3	2%
Safeguarding	3	2%
Other	¹ 12	9%
Total	² 128	³ 99%

¹ including community equipment, Care Direct, day care centres, elderly people's homes

² Some complaints related to more than one service

³ Due to rounding



Subjects of complaints

Issue	Number	%
Communication	45	31%
Quality of service delivery	22	15%
Fairer Contribution Policy	19	13%
Unwelcome or disputed decision	16	11%
Delay in provision of services or assessment	14	10%
Quality of care	10	7%
Invoicing	9	6%
Funding	4	3%
Other	¹ 7	5%
Total	² 146	³ 101%

¹ including staff attitude/behavior, policy/procedure issues, assessments

² There is often more than one issue arising in a single complaint. They are all recorded.

³ Due to rounding

Outcomes of complaints

Outcome	Number	%
Upheld	13	11%
Partially upheld	32	26%
Not Upheld	38	31%
Withdrawn	4	3%
Safeguarding Process	5	4%
Outstanding	30	25%
Total	122	100%

Partially upheld means that more than one or more element of the complaint was or was not upheld.

Outcomes of Ombudsman complaints

Outcome	Number	%
Local settlement	4	44%
Investigation discontinued – injustice remedied	7	33%
Not upheld	2	22%
Total	9	100%

The Local Government Ombudsman uses distinct classifications to record complaint outcomes. An investigation may be discontinued if, during enquiries, there is evidence to show that there has been no maladministration or if an injustice has been remedied or if the Council agrees a settlement with the complainant through the Ombudsman.



Response times (within required timescales)

Type	Number	%
Acknowledgements	97	79%
Reply	37	47%

The response time is not a statutory requirement, but a time frame for response requested by senior managers at the time the procedure was introduced. Timeframes may be extended beyond the deadline and here are reasons why that happened:

Delayed and extended deadlines

Reason	Delay	Extension
Availability		
• Investigating Officer	1	7
• Complainant	3	6
• Staff	3	5
• Witness		1
Allocation		
• Re-allocation requested by complainant		1
• by Service Manager	2	2
Liaison with provider	1	2
Complexity of complaint	1	1
Death of service user		1
Totals	11	26

A distinction is drawn between an extended deadline and a delay. A deadline can be extended by agreement with the complainant in advance. A delay is recorded where managers have not informed the complaints team that an extension has been agreed, or where there has been slippage in the time management of the complaint. Also recorded are situations relating to the complainant's behaviour or availability.

Diversity monitoring

It is not a requirement of the Regulations that Equalities information is recorded in respect of complaints management. However, in HSC this information is recorded for two reasons:

- to ensure the procedure complies with the Council wide expectation that we monitor the impact of equalities issues in relation to the management of the complaints procedure.
- to monitor the "reach" of the complaints procedure in comparison to the people who receive a service.



Gender	Number	%
Female	73	60%
Male	48	39%
Couple	1	1%
Totals	122	100%

Disability	Number	%
No	63	51%
Yes	41	33%
Unknown	19	15%
Totals	122	¹99%

Age	Number	%
16-24	5	4%
25-59	32	26%
60-64	5	4%
65+	75	62%
Unknown	5	4%
Totals	122	100%

Ethnicity	Number	%
White	108	89
Black/African/Caribbean	5	4
Asian/Asian British	4	3
Mixed Race/Dual Heritage	1	1
Unknown	4	3
Total	122	100

Religion	Number	%
Buddhist	1	1
Catholic	8	7
Christian	42	34
Hindu	1	1
No religion	9	7
Sikh	2	2
Other	13	11
Unknown	46	38
Totals	122	¹101

Sexuality	Number	%
Heterosexual	71	58
Gay	3	3
Not given/unknown	37	30
Undefined	² 11	9
Totals	122	100

¹ Due to rounding

² People with learning difficulties sometimes are unable to define their sexuality

4. Learning and service improvements

The Council is committed to improving services as a result of the lessons learned from complaints. In order to capture some of this information, managers responding to complaints are asked to complete an action plan on conclusion of a complaint when the findings of an investigation reveal comprehensive and significant learning points. Here are some examples of actions and service improvements resulting from complaints.

- As a result of a complaint from a relative of an elderly service user who considered that a move from a care home to one with nursing care at the end of her life was unnecessary, staff at the care home were provided with palliative care training.
- A parent complained about poor communication during assessment which resulted in a support plan that did not meet the needs of their adult disabled son. As a result, the Case Discussion Forum process was streamlined to ensure that professionals from all the teams involved communicate clearly and follow the same procedures.



- A daughter complained that transfer of care between agencies resulted in her father not receiving medication as the new carer did not know where the medication was stored. Practitioners were therefore reminded to include location of medication when they establish support plans with new providers.
- The family of an adult with learning disabilities complained that a social worker was unprofessional and bullying in her approach: she did not provide meeting agendas or minutes; she showed no empathy, was not willing to listen or try to understand others' points of view and, when challenged, became verbally aggressive. As a result, guidance was provided to staff reminding them that:
 - sufficient time needs to be spent with service users to assess their needs;
 - where concerns/ issues are raised by families, managers support practitioners to put things in writing and try to keep communication open, especially following difficult meetings;
 - being late for meetings can add to difficult situations and “wrong foot” practitioners. Where practitioners are working on difficult cases, competing demands on their time need to be considered to avoid being late repeatedly for the same clients. Managers need to consider this when allocating cases;
 - Best Interests Assessments should be carried out as soon as possible where plans could be contentious for someone who does not have capacity to make their own decisions.

Support to practitioners was improved when making difficult judgement decisions, particularly in terms of Best Interests work where a service user does not have capacity and there may be a conflict of opinion. Practitioners require support to balance the need to identify/ negotiate with potential new providers, whilst not being seen to have made decisions prior to a full best Interests decision.

