

Adult Social Care Complaints, Compliments and Comments Annual Report

1 April 2009 to 31 March 2010

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Introduction

The purpose of this Annual Report is to inform Members of the Council, service users, carers and the general public as well as Adult Social Care staff about the effectiveness of the complaints procedure and highlight the recent changes in the way complaints about health and social care services are handled.

On the 1 April 2009 the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 came into force following the consultation 'Making Experiences Count' by the Department of Health. The consultation found that the complaints processes for people receiving both health and social care services were overly complex and inflexible.

As a result the legislation introduced radically altered the way in which complaints are handled introducing a single joint complaints process for both social care and health services, with one stage as opposed to the previous three stage process used in relation to adult social care services. The regulations also introduced a duty for health and social care services to cooperate.

Darlington Borough Council implemented a new Adult Social Care Complaints, Compliments and Comments Procedure on the 1 April 2010 providing a local framework to ensure complaints are handled effectively and in line with the new regulations.

The procedure aims to:

- (a) Make it as easy and accessible as possible for service users and their carers to raise complaints:
- (b) Foster an organisational culture in which complaints are accepted, owned and resolved as efficiently as possible;
- (c) Ensure high levels of customer satisfaction with complaints handling;
- (d) Resolve individual issues when they arise and reduce the number of complaints referred to the Ombudsman; and
- (e) Enable the Department to identify trends and topics in relation to complaints and improve services as result.

The Assistant Director of Adult Social Care and Housing is the responsible person for ensuring that the Council complies with the arrangements made under the regulations. They will act as the 'Adjudicating Officer', which means they will make any important decisions on complaints and ensure that action is taken if necessary in the light of the outcome of a complaint.

The Corporate Complaints Manager is the responsible person for managing the procedure for handling and considering complaints in accordance with the agreements made under the regulations.

Local Government Ombudsman (Health Services Ombudsman)

Although complainants can refer their complaints from the outset to the Ombudsman, they will not normally investigate until the Council has conducted its own investigation and

made a response. Where it has not been possible for the complaint to be resolved to the satisfaction of the complainant they may refer the matter to the Local Government Ombudsman (or Health Services Ombudsman for some joint complaints).

Information and Accessibility

We are committed to making sure that everyone has equal access to all our services, including the complaints procedure. To help make sure our complaints procedure is easily accessible we have produced a single complaints, compliments and comments leaflet covering Corporate, Children's and Adult Social Care Services to reflect the single point of access for complainants within the Council. We:

- use plain language;
- accept complaints over the phone or in person, in writing, by e-mail, via our website
 or by any other reasonable means;
- provide information and responses in electronic formats, Braille, large print, on DVD, audio, easy read format and other languages on request; and
- provide translators (including sign language translators) where needed.

Advocacy

Adult Services has a contract for the provision of specialist advocacy services for people with Mental Health needs and Learning Disabilities. The current provider of this service is Advocacy Together.

The Independent Mental Capacity Advocate (IMCA) service also provide advocacy on specific issues and reviews.

Specialist advocacy services for adults who are deaf, deafened, deafblind or visually impaired are provided by North Regional Association for Sensory Support (NRASS).

Summary of Representations and Achievements

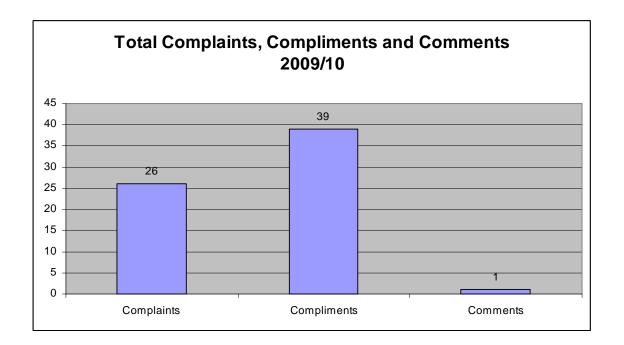
- There has been a decrease in the recorded feedback from the public from 127 representations in 2008/9 to 66 representations in 2009/2010.
- One comment was received during 2009/10.
- There were 39 compliments received about staff or services (59.1% of all feedback) in 2009/10, which is a decrease from 91 compliments (71.7% of all feedback) in 2008/9.
- There were 26 complaints dealt with under the complaints procedure during the year (39.4% of all feedback), which is a slight decrease from 29 complaints in 2008/9.

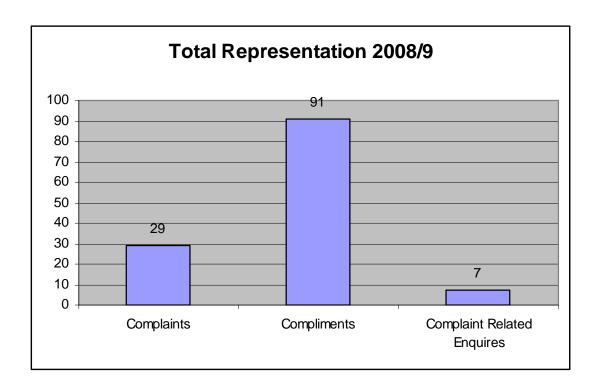
 One Adult Social Care complaints was progressed to the Ombudsman during 2009/10.

Review of the Year

Breakdown of all Representations

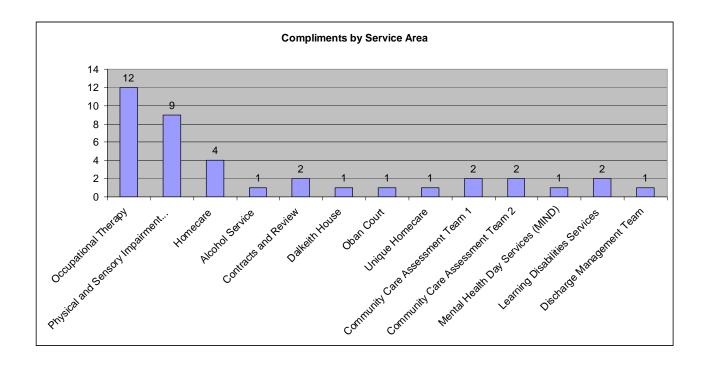
A total of 66 representations were recorded during the year 2009/10.





Breakdown of Compliments by Service Area

1. The number of compliments received in 2009/10 was 39.



The following service areas received the most compliments:

- Occupational Therapy 12 compliments (30.77%)
- Physical and Sensory Impairment Team (PSI Team) 9 compliments (23.1%)
- Darlington Borough Council Home Care 4 compliments (10.3%)

The compliments can be broken down as follows:

- a) 23 Staff attitude (58.97%)
- b) 17 Service provision (43.59%)

Breakdown of Complaints

There were a total of 26 Adult Social Care complaints received in the year 2009/10.

The target for acknowledging receipt of complaints under the procedure is 3 working days.

- 8.77% of complaints received were acknowledged within the 3 working day timescale.
- 19.23% of complaints were not acknowledged within the 3 working day timescale.

The following issues were the most complained about:

- Service provision 10 complaints (38.5%)
- Charges/fees 5 complaints (19.2%)
- Communication 5 complaints (19.2%)

Of the 26 complaints investigated, the outcomes were as follows:

- 5 complaints (19.2%) were upheld
- 8 complaints (30.8%) were not upheld
- 9 complaints (34.6%) were partially upheld
- 2 complaints (7.7%) were withdrawn
- 2 complaints (7.7%) are ongoing

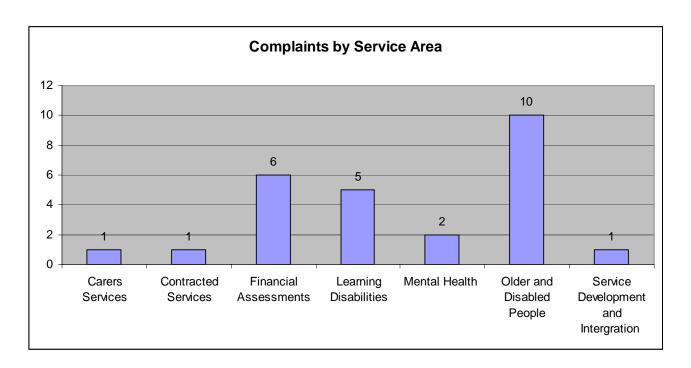
There are no longer any statutory timescales for complaint responses, except that complainants should receive a response within six months. Within the new Adult Social Care Complaints, Compliments and Comments Procedure there are three different types of investigation with varying timescales to ensure investigations are completed in a timely manner and within the maximum time allowed for an investigation (6 months).

The longest investigation took 57 working days with the second longest taking 37 working days. The complaint which took 57 working days involved a significant period of time in which the complainant considered their complaint. The complaint which took 37 working days was a complex complaint involving potential litigation. A number of meetings with legal personnel and other professionals took place in respect of this matter. The complainant was kept informed of progress at all times.

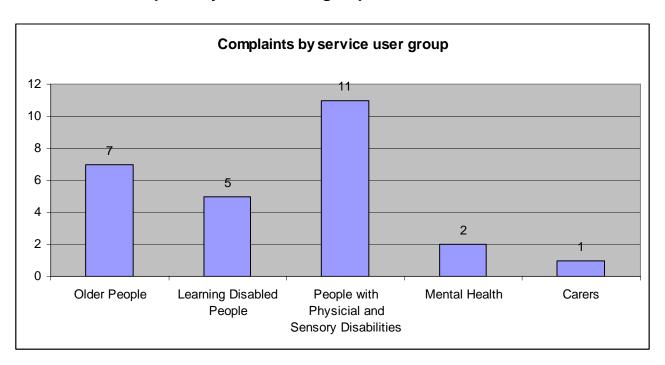
Breakdown of Complaints by Service Area

The three service areas that received the most complaints were:

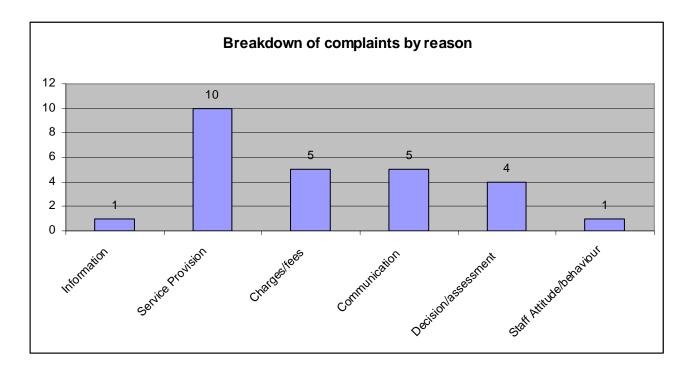
- Client Based Finance 6 complaints (23.08%)
- Physical, Sensory Impairment Team 5 complaints (19.23%)
- Learning Disabilities 5 complaints (19.23%).



Breakdown of complaint by service user group



Breakdown of Complaints by reason



An Equal Opportunities Monitoring Form was sent to each complainant. The response rate was particularly low and no topics or trends were identifiable from the information collated. Two respondents were British, two were female and one was male and one respondent was a wheelchair user/had other mobility difficulties. The manner in which this information is collated will be reviewed in order to achieve a higher response rate.

Achievements against Performance Targets

A number of local performance indicators (targets) were set for 2009/2010 to reflect the new regulations:

LI2020 Percentage of those making a complaint satisfied with the handling of these complaints: Target for 2009/10 - 65%

Of the 26 complaints received two are ongoing and three were joint complaints which the Council did not lead on so satisfaction surveys were not sent out. Three of the complainants were 'not survey appropriate' and two of the complainants have advised us they are dissatisfied. Of the 18 satisfaction surveys sent during 2009/10 only four have been returned. The results of these were:

Fairly satisfied 25% Neither satisfied or dissatisfied 25% Very dissatisfied 50%

The Corporate Complaints Unit will continue to send out satisfaction surveys to all complainants and review our practice in order to achieve a higher response rate so that we can accurately measure our performance.

LI2021 - Percentage of all complaints received under the Adult Social Care Complaints Procedure referred to the Ombudsman following investigation under the Council's procedure.

3.8% of the complaints received under the Adult Social Care Complaints Procedure were referred to the Ombudsman following investigation under the Council's procedure.

This was 1 out of 27 complaints. The data collated from this year will be used to set the targets for the following 3 years.

LI2022 - Number of complaints submitted to the Ombudsman without consideration through the Adult Social Care Complaints Procedure: Target for 2009/10 - 1.

There have been no complaints submitted to the Ombudsman this period without consideration through the Adult Social Care Complaints Procedure.

Performance Targets for 2010/11

LI2020 Percentage of those making a complaint satisfied with the handling of these complaints: Target for 2010/11 – 67.50%

LI2021 - Number of all complaints received under the Adult Social Care Complaints Procedure referred to the Ombudsman following investigation under the Council's procedure. Target for 2010/11 - 1.

LI2022 - Number of complaints submitted to the Ombudsman without consideration through the Adult Social Care Complaints Procedure: Target for 2010/11 - 1.

Monitoring

To ensure the effectiveness of the complaints procedure, all complaints are monitored by the Complaints Manager. All resolution and organisational learning actions identified as a result of complaints are assigned to a responsible manager and progress against those actions is monitored by the Complaints Manager.

In addition to this report that is taken to the Council's Cabinet and the Health and Wellbeing Scrutiny Committee a quarterly report is produced and taken to the Community Services Departmental Management Team and information on Adult Social Care Complaints is included is the bi-annual report taken to the Council's Corporate Management Team.

Organisational Learning

Client Based Finance – in response to a complaint about the way in which contributions towards a Direct Payments were calculated, the Fairer Charging Policy is currently being reviewed. This review will aim to make the assessment of 'disability disregards' more personalised to an individuals circumstances.

Learning Disabilities – further risk assessments have been developed to improve health and safety following a complaint about an incident at a day centre.

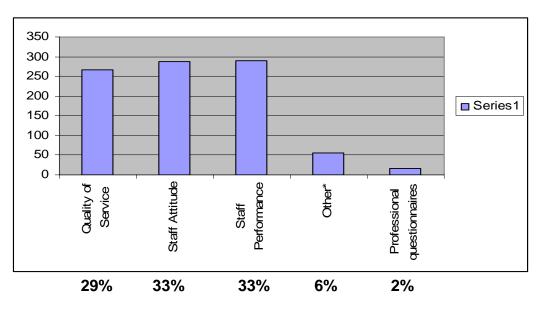
Contracted Services

All contracted providers carry out their own quality monitoring in addition to the monitoring carried out by the Adult Social Care and Housing Contracts Team. The residential care homes and domiciliary care providers receive a number of compliments, comments and complaints direct from service users/relatives in the form of completed questionnaires and letters. The providers audit complaints and can evidence during monitoring visits what action they have taken. Many homes keep copies of thank you cards and letters they receive. The Contracts Department have suggested they keep a record of these compliments so that they can be included in Departmental Reports and give recognition to the homes for the good service they provide.

Darlington Borough Council currently contract with 22 Residential Care Homes for Older People with a total capacity of 1132 beds. As at the end of March 2010 the homes were not operating to full capacity with the occupancy level being 860 beds.

Care Homes - Compliments

Chart 7: The breakdown of areas of all positive comments received for care homes



(% based on 860 bed occupancy)

The impact that these comments had on the Social Care Providers was noted as follows:

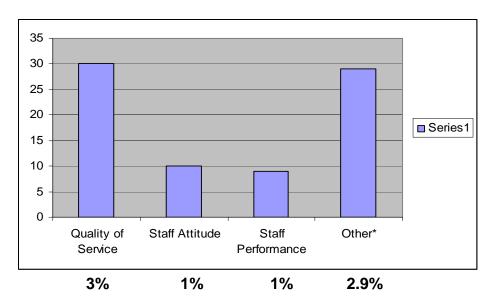
- Always strive to raise standards
- Good practice rolled out to other units
- Raises staff moral

^{*(5 –} support to students,11 – decoration,1 – thanked for effective and efficient way dealt with complaint refurnishing, 8 – social activities, 7 - food)

- Entertainment improved
- Staff work closely with visiting professionals and take on board any advice

Care Homes - Complaints

Chart 8: The breakdown of areas of all negative feedback received for care homes



(% based on 860 bed occupancy)

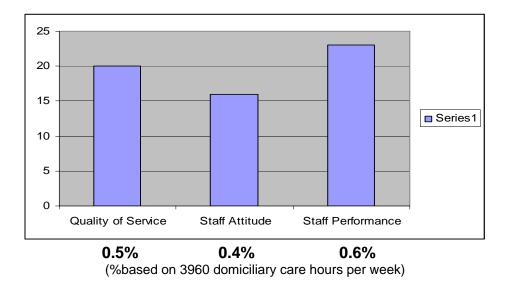
Out of all the negative comments/complaints received 78% were resolved satisfactorily. One improvement to service was noted as 'change in laundry and equipment purchased'.

Domiciliary Providers - Compliments

Darlington Borough Council employs domiciliary care workers at their four Extra Care Services. The total number of care hours provided by the Council as at 30/3/10 was 1254 hours per week. The Council also contracts with 12 independent domiciliary care providers, their total care hours at 30/3/10 was 3960 hours per week.

^{*} Complaints form – gap in doors, Issue re neighbour, 1 – anonymous deemed to be malicious and unfounded, Standard of decoration, Furnishings

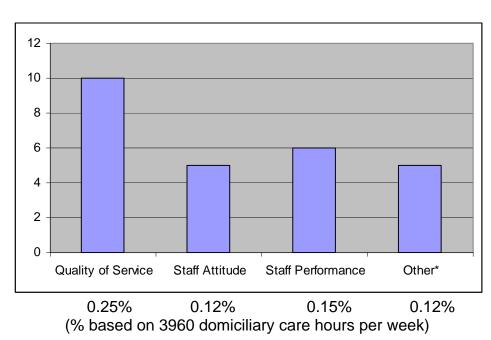
Chart 9: The breakdown of all positive comments received



As a result of one comment a domiciliary provider implemented early call so service user can attend church.

Domiciliary Providers - Complaints

Chart 10: The breakdown of all negative comments received



*Strategy meeting, Inform family of changes, 2 carers dismissed

The following improvements have been made as a result of the negative feedback received:

• More continuity communication, more training.

- Investigations carried out and staff retrained as a result
- Standards of dress, regular meetings, supervisions
- Continuous training, care worker visits.