



**Adult Social Care  
Complaints, Compliments  
and Comments  
Annual Report  
2019/20**

## Contents

Introduction	3
Local Government and Social Care Ombudsman (Health Services Ombudsman)	4
Information and Accessibility	4
Advocacy	4
Summary	5
Review of the Year	6
- Breakdown of all Representations	6
- Total Complaints, Compliments and Comments Received 2019/20	6
- Breakdown of Compliments by Service Area/Team	7
- Breakdown of Complaints by Service Area/Team	8
- Breakdown of Complaints by Issue	10
- Complaint Outcomes	11
- Local Government Ombudsman Complaints Received 2019/20	11
- Local Government Ombudsman Complaint Outcomes 2019/20	11
Organisational Learning	12
Further Recommendations	13
Performance against the Procedure	13
Performance Indicator for 2019/20	14

## Introduction

The purpose of this annual report is to inform service users, carers, the public, Council Members and staff of the effectiveness of the Adult Social Care Complaints, Compliments and Comments Procedure (the procedure).

On the 1 April 2009 the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (the regulations) 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 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.

The Council implemented a new procedure on the 1 April 2010 providing a local framework to ensure complaints are handled effectively and in line with the 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 Council to identify topics and trends in relation to adult social care complaints and improve services as a result.

The Assistant Director Adult Services is the responsible person for ensuring that the Council complies with the arrangements made under the regulations. They act as the 'Adjudicating Officer', which means they make decisions on complaints and decide what action should be taken in light of the outcome of a complaint.

The Complaints and Information Governance Manager (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 and Social Care Ombudsman (Health Services Ombudsman)**

Although complainants can refer their complaints to the Local Government and Social Care Ombudsman (LGSCO) from the outset, the LGSCO will not normally investigate until the Council has conducted its own investigation and provided 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 LGSCO (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 the Council's complaints procedures are easily accessible we have produced two leaflets (one for children and young people and one for adults) covering all Council services to reflect the single point of access for complainants within the Council. The leaflets are available in all Council buildings. They have been written in line with the Plain English Campaign standards. The title is written in the most commonly used community languages and it contains details on how to access the information in other formats, for example, large print, audio and Braille.

Information is available on the Council's website. There is also an electronic form which people can use to make a complaint, pay someone a compliment or pass comment on Council services. People may make a complaint in any format they wish. This can be in writing, by email, via the web, over the phone, in person or by any other reasonable means.

The Complaints Manager can arrange advocates and interpreters (including British Sign Language interpreters) where appropriate.

### **Advocacy**

During 2019/20 the Council commissioned an advocacy service which provides RPRs (Relevant Persons Representatives), IMCAs (Independent Mental Capacity Advocates), IMHAs (Independent Mental Health Act Advocates), Court of Protection Advocacy, and Care Act Advocates. This is provided by Darlington association on Disability (DAD)

The Council also commissioned Specialist Advocacy / Welfare Rights services for adults with a sensory impairment, and NHS Complaints Advocacy on behalf of the NHS.

## Summary

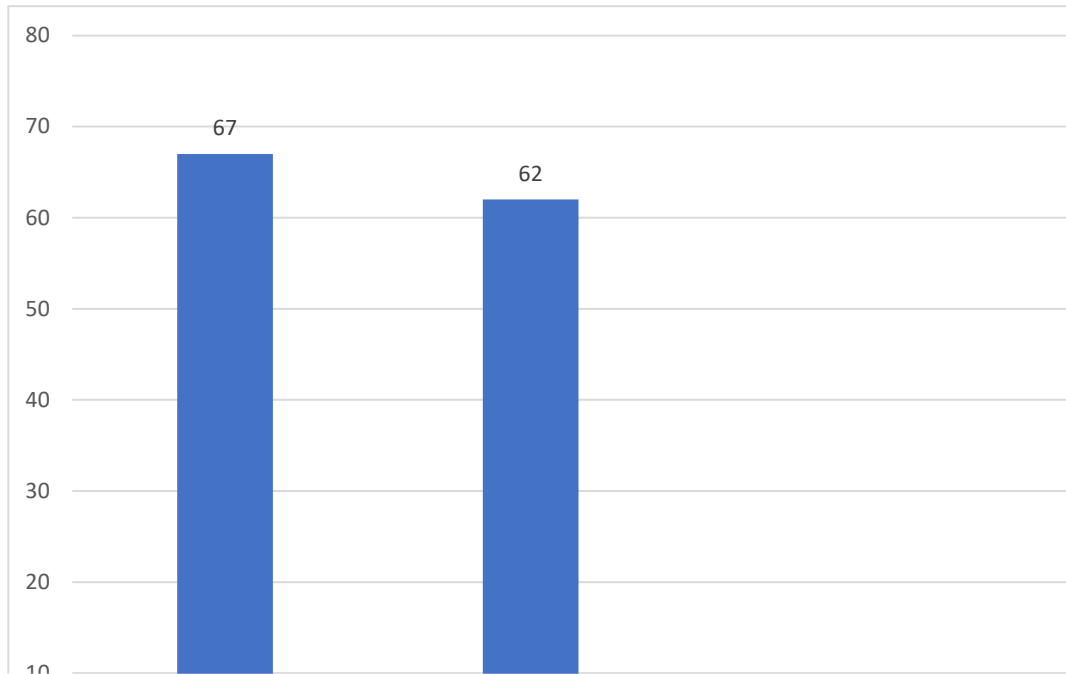
- There has been an increase in overall feedback from 99 representations in 2018/19 to 134 in 2019/20.
- We investigated 67 complaints under the procedure during 2019/20, an increase from 64 in 2018/19.
- We received 62 compliments under the procedure during 2019/20, an increase from 33 in 2018/19.
- We received zero comments under the procedure during 2019/20, a decrease from two in 2018/19.
- The Council received five complaints which did not qualify for investigation under the procedure during 2019/20, an increase from zero in 2018/19.
- Five adult social care complaints were progressed to the LGSCO during 2019/20, a decrease from 13 in 2018/19.
- The LGSCO reached a decision on six complaints during 2019/20, a decrease from 14 in 2018/19.

## Review of the Year

### Breakdown of all Representations

A total of 134 representations were handled under the procedure during 2019/20. This does not include those representations responded to directly by social care providers i.e. care homes and home (domiciliary) care providers.

### Total Complaints, Compliments and Comments Received 2019/20



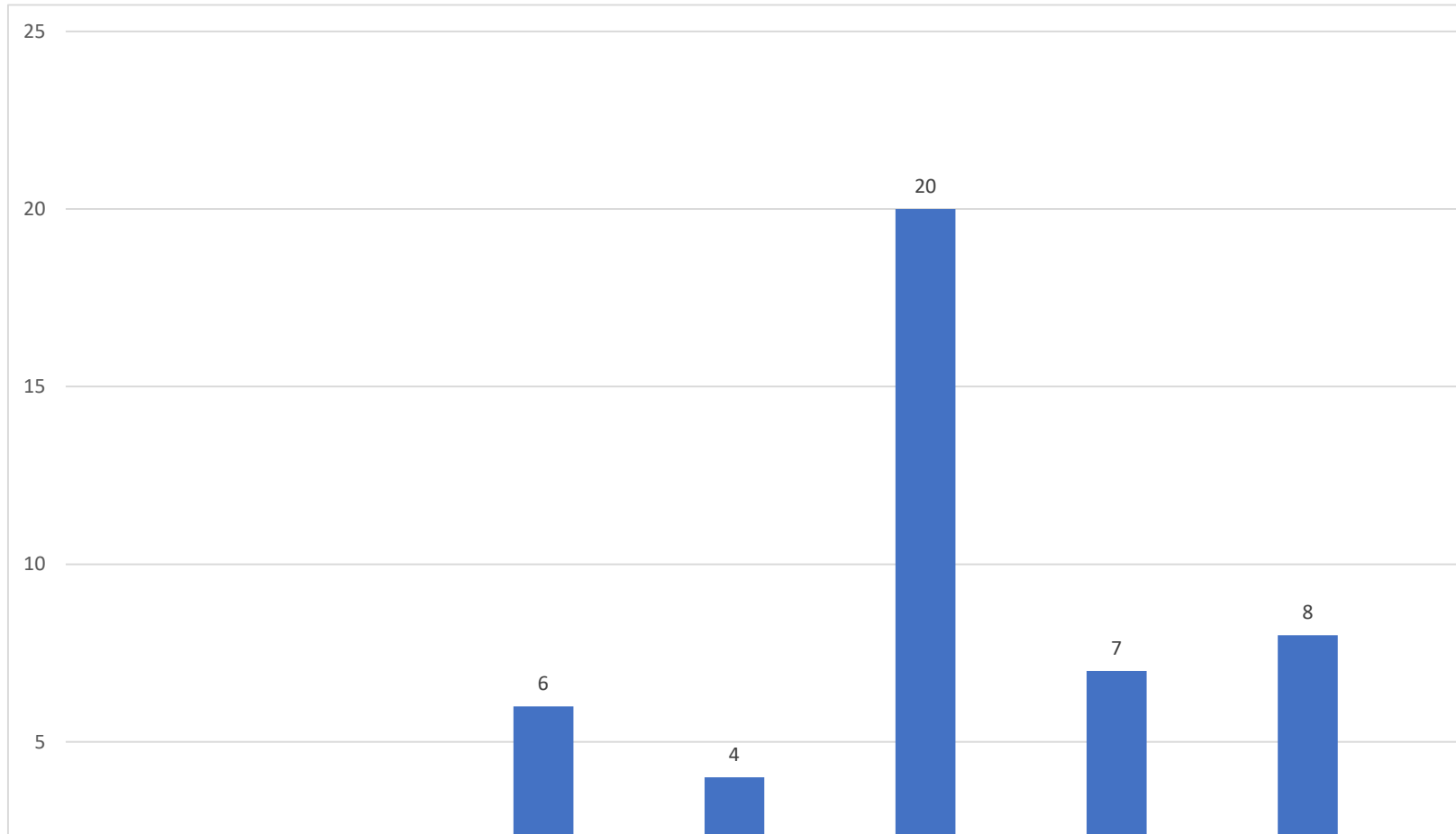
There was an increase in the number of complaints we investigated, compared to 64 in 2018/19.

There was an increase in the number of compliments we received, compared to 33 in 2018/19.

There was a decrease in the number of comments we received, compared to two in 2018/19.

There was an increase in the number of non-qualifying complaints received, compared to zero in 2018/19.

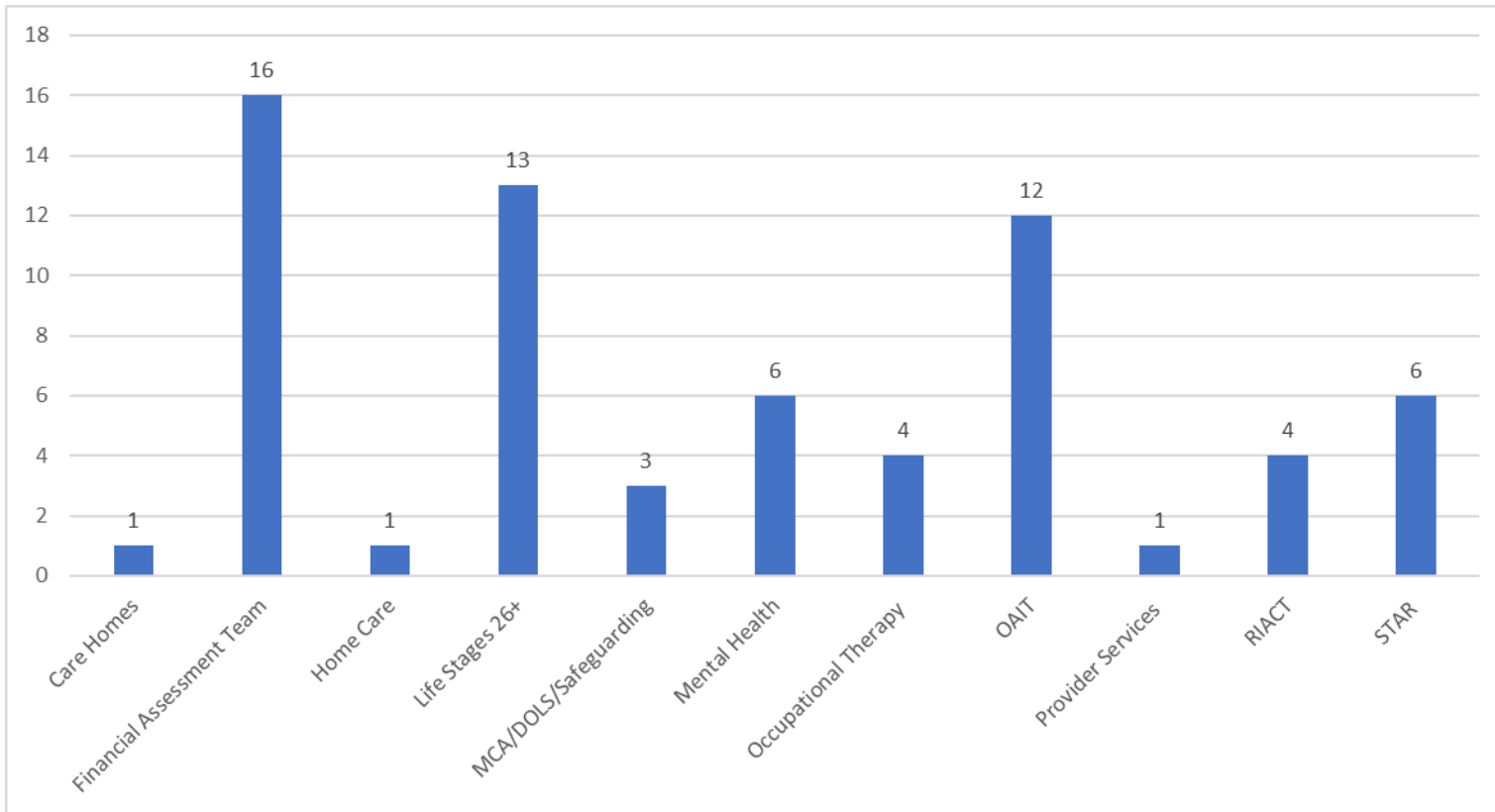
### Breakdown of Compliments Received by Team



OAIT = Ongoing Assessment and Intervention Team  
RIACT = Responsive Integrated Assessment Care Team  
STAR = Short Term Assessment and Review

*N.B. Those teams that do not appear in the graph did not receive any compliments during 2019/20*

### Breakdown of Complaints Received by Service Area/Team



OAIT = Ongoing Assessment and Intervention Team  
RIACT = Responsive Integrated Assessment Care Team  
STAR = Short Term Assessment and Review

*N.B. Those teams that are not listed did not receive any complaints during 2019/20.*



Commissioning & Contracts investigated two complaints, one about a Care Home and one about a Home Care Agency. This was an increase from one related to a Home Care Agency in 2018/19.

Financial Assessments saw a reduction in complaints, 16 compared to 18 in 2018/19. The most common theme was dissatisfaction with the time taken to undertake the financial assessment.

There was an increase in complaints for Life Stages 26+, 13 compared to four in 2018/19. There was no common theme in the complaints received. Five of the complaints received were from the same individual and concerned the conduct of their social worker. A further four were from another individual regarding the support provided.

There was a decrease in complaints for MCA/DOLS (Mental Capacity Act/Deprivation of Liberty Safeguards), three compared to five in 2018/19. There was no common theme in the complaints received.

The Mental Health Team received six complaints, an increase from five in 2018/19. There was no common theme in the complaints received.

Occupational Therapy received four complaints, a decrease from six in 2018/19. The most common theme was people's dissatisfaction with the outcome of their assessment.

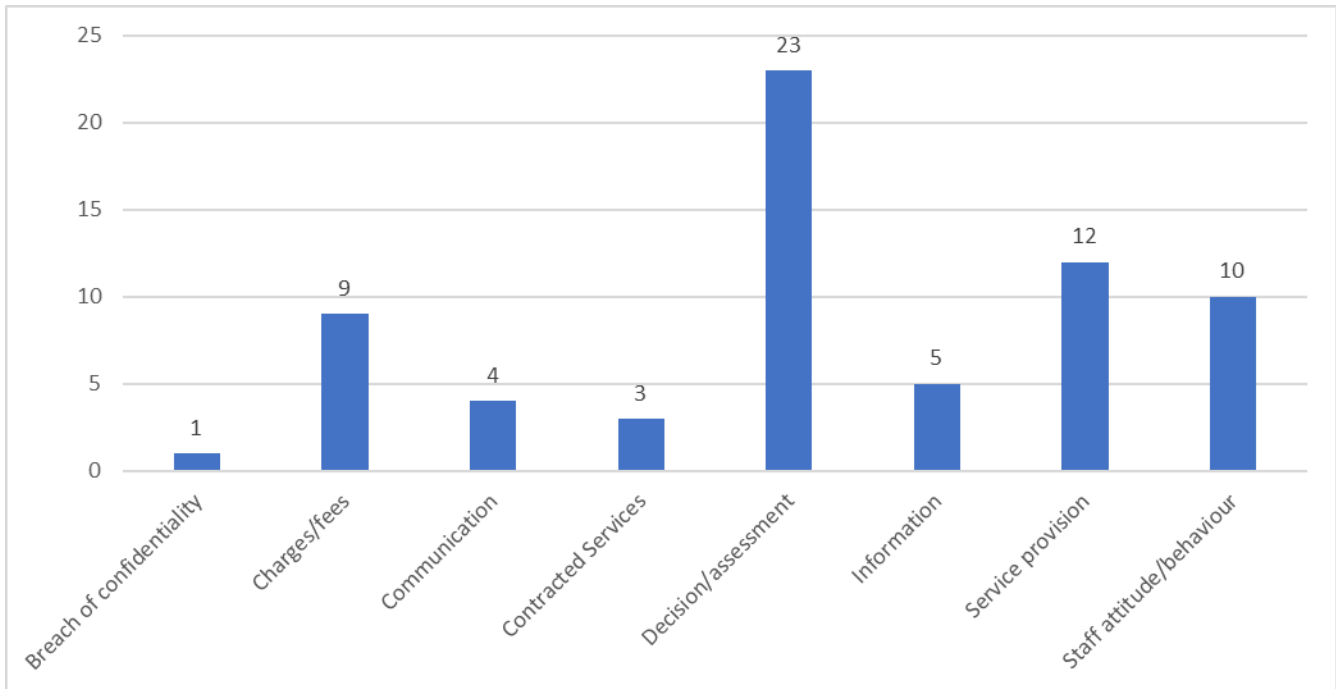
Ongoing Assessment & Intervention Team (OAIT) received 12 complaints the same number as 2018/19. The most common complaint remained people's dissatisfaction with the outcome of their assessment.

There was one complaint for Provider Services, the same number as in 2018/19.

Responsive Integrated Assessment Care Team (RIACT) received four complaints, an increase from zero in 2018/19. There was no common theme in the complaints received.

Short Term Assessment & Review Team (STAR) received six complaints, a decrease from 10 in 2018/19. The most common theme was people's dissatisfaction with the lack of information provided regarding care charges.

### Breakdown of Complaints Received by Issue



The most common cause of complaint remained dissatisfaction with a decision/assessment. In total the Council received 23 complaints about this issue, an increase from 17 in 2018/19.

The second most common cause of complaint was service provision. The Council received 12 complaints about service provision a decrease from 13 in 2018/19.

The third most common cause of complaint was staff attitude/behavior. The Council received 10 complaints about staff attitude/behavior, the same number as in 2018/19.

The fourth most common cause of complaint was charges/fees. The Council received nine complaints about this issue, a decrease from 13 in 2018/19.

## Complaint Outcomes

57 complaint investigations were concluded during 2019/20. The outcomes of these complaints are detailed in the chart below.

Service Area/Team	Upheld	Partly Upheld	Not Upheld	Inconclusive	Withdrawn	Total
Financial Assessments	2	5	5	0	1	<b>13</b>
Life Stages 0 – 25	0	0	0	0	0	
Life Stages 26+		1	4	1	3	<b>9</b>
Occupational Therapy	1	3	1	1	0	<b>6</b>
Ongoing Assessment & Intervention Team (OAIT)	1	4	2	0	4	<b>11</b>
Short Term Assessment & Review Team	1	2		1	3	<b>7</b>
Mental Capacity Act/Deprivations of Liberty Safeguards (MCA/DOLS)	0	1	2	0	0	<b>3</b>
Mental Health	0	0	3	0	3	<b>6</b>
Commissioning & Contracts – Home Care	0	0	0	0	1	<b>1</b>
Commissioning & Contracts – Care Home	0	1	0	0	0	<b>1</b>
<b>Total</b>	<b>5</b>	<b>17</b>	<b>17</b>	<b>3</b>	<b>15</b>	<b>57</b>

### Local Government Ombudsman Complaints Received 2019/20

Five adult social care complaints were progressed to the LGSCO during 2019/20, a decrease from 13 in 2018/19. There were no common themes in the complaints referred to the LGSCO.

### Local Government Ombudsman Complaint Outcomes 2019/20

Five adult social care complaints were determined by the LGSCO during 2019/20, compared to 14 in 2018/19.

Full details of those complaints determined by the LGSCO are included in the Cabinet reports of 3 December 2019 and 15 September 2020 entitled [Review of Outcome of Complaints Made to Ombudsman](#).

## **Organisational Learning**

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 those actions taken to resolve individual complaints, a number of service improvements were made following complaint investigations during 2019/20, some of which are detailed below.

### ***Commissioning & Contracts***

Following a complaint about a Home Care provider it was agreed the provider would ensure that in all case where they were required to administer medication there would be clarity as to who would administer the medication. It was also agreed the provider would ensure their staff were all aware of the company medication policy and that it was adhered to. Furthermore, it was agreed the provider would ensure that all of their care workers are aware of how to respond appropriately in articulating to clients and families, their responsibilities in relation to the administration of medication to prevent such misunderstandings occurring in the future.

As a result of the same complaint it was agreed the provider would ensure that their support plans accurately reflect the Council's Support Plan, and where there are discrepancies, these would be clarified as a matter of urgency upon acceptance of the care package. It was also agreed the provider needs to ensure that all of their staff are aware that they should fully complete all required care tasks and remain at the property for the contracted period of time.

The provider agreed to review their process for recording and responding to concerns raised by clients and their families to ensure that all concerns are documented, fully investigated and feedback is provided to the client/family.

### ***Financial Assessment Team***

Following a complaint regarding a financial assessment it was agreed all social workers and community support officers would make it clear in assessment what level of care the person has been assessed as needing i.e. residential standard care/residential EMI/funded nursing care or fully health funded. The care home were also asked to ensure that families are aware that residents can be given EMI residential enhanced care on both the first and second floor of the home as families must know what level of care their family member is receiving at any time within their care journey.

### ***Mental Capacity Act/Deprivations of Liberty Safeguards (MCA/DOLS)***

Following a complaint Safeguarding Adult Managers were reminded of the timescales for completing Safeguarding Initial Enquiries and that if new information comes to light during the initial enquiries this must be passed on to relevant professionals to investigate.

### ***Ongoing Assessment & Intervention Team (OAIT)***

Following a complaint for OAIT it was agreed the social worker would repeat the Council's Data Protection training. It was also agreed social workers would ensure people with a Lasting Power of Attorney are given information and that if they do not respond to telephone calls and messages social workers would write to them to ensure they are fully informed at all times.

### ***Short Term Assessment & Review Team (STAR)***

Following a complaint for the STAR Team all staff were briefed on the importance of sharing information in relation to Financial Assessments, directed to the policy and advised to provide copies of the information leaflet to all new clients and clients with a change in need i.e. moving from domiciliary support to residential. It was also agreed managers would ensure social workers discuss and record charging implications for the individual with them and/or their financial agent and leave documentation following assessment so they can refer to this for recall of the visit. The Council also committed to reviewing the "Making a contribution" section of the assessment on Liquid Logic (the Council's electronic social care records management system).

### ***Occupational Therapy***

Following a complaint for Occupational Therapy it was agreed a clearer process was required for the authorisation of Disabled Facilities Grants and noted an interim process was in place while the policy was being reviewed/updated. It was also agreed staff would be provided with information in relation to Disability Related Expenditure and application of mobility benefits.

### **Further recommendations**

Adult Services should ensure complaints are responded to in a timely manner and that where an extension is required this is communicated to the complainant and properly recorded.

### **Performance against the Procedure**

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

93.94% of complaints received during 2019/20 were acknowledged within the 3 working day timescale, an increase from 69.4% in 2018/19.

There are no longer any statutory timescales for complaint responses, except that complainants should receive a response within six months. The procedure sets out a timescale for dealing with complaints solely about the Council's services i.e. 30 working days, although there are circumstances in which the investigator may agree an extension with the complainant. It also states that for joint health and social care complaints the complaints managers from the different organisations will work together to decide a reasonable timescale

and agree this with the complainant. This is to ensure investigations are completed in a timely manner and within the maximum time allowed.

Seven complaints exceeded the maximum six month time limit, a reduction from 12 in 2018/19.

### **Performance Indicator for 2018/19**

In relation to adult social care complaints the Council's key performance indicator is the number of maladministration decisions received from the Local Government and Social Care Ombudsman. The Council received five maladministration decisions during 2019/20, compared to nine during 2018/19.

Full details of those complaints determined by the Local Government and Social Care Ombudsman are included in the Cabinet reports of 3 December 2019 and 15 September 2020 entitled [Review of Outcome of Complaints Made to Ombudsman](#).