

ANNUAL REPORT 2014-2015

ADULT SOCIAL CARE

Complaints, Comments and Compliments

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1. Executive Summary

There will be a move towards providing adult social care differently with the challenges with the implementation of the Care Act 2014 and the increased demand on resources. Adult Social Care have experienced a decrease in the number of complaints between 2013/14 and 2014/15, however with these changes the Service may experience an increase in the number of complaints and will need to ensure these changes are managed appropriately.

It is noted that Ombudsman complaints have increased in 2014/15 and that the number of formal complaints have also increased significantly in 2014/15. Again we have seen a high level of complaints disputing decisions, and it has been highlighted where recording has been clear, concise and appropriate that those decisions are able to be justified. However there is still a need to ensure recording is of the required standard.

2. Introduction

Under the National Health Service and Community Care Act 1990 and Children Act 2004, it is a requirement for local authority Adult Social Care and Children's Services to have a system of receiving representations by, or on behalf of, users of those services. Havering Adult Social Care welcomes all feedback, whether this is a comment on improving the service, complaint on what has gone wrong with the service or compliment about how well a service or individual has performed.

Havering has adopted the statutory guidelines for complaints management as outlined by the Department of Health and good practice principles of the Local Government Ombudsman and has encompassed this within its new procedures as follows:

- | | | |
|----------|---|---|
| Informal | - | where a complaint involves a regulated service, or is a minor concern which can be dealt with within 5 working days, or where a complainant does not wish to take it through the formal process. |
| Formal | - | Local resolution – where the complaint is considered low-medium risk aim to respond within 10 working days where possible. Where a complaint is considered medium – high risk aim to respond within 10-20 working days. Where a complaint is considered complex and may require an independent investigation, aim to respond within 25-65 working days. Timescales may vary in agreement with the complainant. |

Although there is no longer a Stage 3 Review Panel in the regulations, it has been agreed within Havering to have an option for complaints to be reviewed by a Hearings Panel.

Complainants who remain dissatisfied will have the right to progress to the Local Government Ombudsman.

The time limit for complaints to be made has remained at 12 months

3. Complaints Received

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3.1 Ombudsman referrals

The number of Ombudsman referrals increased in 2014/15 with two decisions of maladministration, (one 'injustice', one 'no injustice'), two cases were under investigation, one the Ombudsman did not investigate and closed the complaint, two were found no evidence of maladministration and there were three enquiries.

	Apr 14- Mar 15	Apr 13- Mar 14	Apr 12- Mar 13
Maladministration	2		
Local settlement with penalty			2
No maladministration after investigation		3	
Ombudsman discretion			
-Cases under investigation/ongoing	2	1	
-Investigation not started/discontinued	1	3	2
No evidence of maladministration/service failure	2		2
Cases completed not premature			
Premature/Informal enquiries	3	1	4
Total	10	8	10

3.2 Total number of complaints

The total number of complaints dropped in 2014/15 by 17% from 2012/13. Although there has been a drop it should be noted that this may increase in 2015/16 with the various changes on how Adult Social Care is provided and the increased pressure on resources.

Total Number of Complaints			
2014/15	2013/14	2012/13	
92	108	106	

3.3 Stages

There has been a slight increase of 7% in the number of formal complaints for 2014/15 with a drop in informal complaints by 37%. Enquiries dropped from 2013/14 and are not included in any further figures within this report.

	Enquiry	Formal	Informal	Joint health and adult social care formal complaint
Apr 14 - Mar 15	22	54	36	2
Apr 13 - Mar 14	32	50	57	1
Apr 12 - Mar 13	9	34	68	4

3.4 Teams

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The highest number of complaints received was within the Preventative & Assessment Team with a sharp increase of 67% in 2014/15 compared to 2013/14, which related mainly to disputes over adaptations/equipment, as well as Freedom Passes. There continues to be a drop in the number of complaints regarding external agencies, with homecare complaints decreasing by 41% and a 22% drop in residential/nursing complaints. Although external home care remains one of the areas most complained about, when taking this in to perspective, the total number of people who received home care in 2014/15 was 2,027 with a total of 642,649 commissioned hours. Of those receiving home care who complained (32), 11 were on self-directed support.

The Preventative Team also had an increase in the number of complaints in 2014/15 of 25% compared to 2013/14. The Joint Assessment and Discharge Team received 50% less complaints in 2014/15 compared to 2013/14

It should be noted that with restructure of the service, teams shown in the table below consist of those teams in the previous structure as well as those currently in the structure.

	Apr 14- Mar 15	Apr 13 – Mar 14
Adult Protection Team (Safeguarding Adults)		3
Access & Assessment		5
Adult Community Team North	2	5
Adult Community Team South	8	9
Adult Social Care Customer Services (Front Door)	3	2
Appointee and Receivership	1	
Commissioning		14
Day centres	4	4
Direct Payments		2
External Homecare	17	24
External Nurs/Res	9	11
Financial Assessment & Benefits Team	6	
Joint Assessment & Discharge Team [JAD]	5	10
LD Team	3	5
Mental Health	2	
Preventative & Assessment	18	6
Preventative Team	8	6
Quality & Brokerage	2	
Reablement	3	9
Royal Jubilee Court		
Safeguarding	2	
Supported Living		
Joint Health & Adult Social Care		1

3.5 Reasons

There has been a drop in the number of complaints regarding 'quality of service' by 58% in 2014/15. The continuation of the Quality & Safeguarding Meetings has evidenced the impact on ensuring that services provided on behalf of the local authority are improving and that the trend has been that 'quality of service' has continued to decrease over the

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years. Nine were in relation to the home care provided, mainly around timings of visits. The next highest reason for complaint was 'dispute decision' mainly around charges, although some were in relation to provision of equipment or adaptations, e.g. bathing facilities. Also there were a number of disputes regarding disabled freedom passes following assessment of eligibility on responsibility transferring to the local authority from the London Councils. 'Level of service' was also high and related to respite stays or care provided within an external residential/nursing home, or external home care agency and discharge arrangements.

'Behaviour of staff' has dropped by almost half in 2014/15 and was mainly where a complainant did not agree with the decision made and felt they were not listened to.

	Access to Information	Behaviour of Staff	Change of Service	Closure of Service	Data protection	Delay in Decision Making	Delay to implement a Service	Dispute decision
Apr 14 – Mar 15	-	7	1	-	-	1	2	21
Apr 13 – Mar 14	4	13	-	-	-	-	4	25
	Eligibility	External to Social Services	Financial Issues	Incorrect Information	Incorrect Invoicing	Incorrect assessment	Lack of Communication	Level of Service
Apr 14 – Mar 15	1	-	4	4	-	-	4	21
Apr 13 – Mar 14	-	1	14	2	-	2	10	17
	Need of Service	Non Delivery of a Service	Quality of Service	Safeguarding Issues	Welfare Concerns			
Apr 14 – Mar 15	-	1	24	-	-			
Apr 13 – Mar 14	7	10	57	-	2			

3.6 Outcome

The main outcome in 2014/15 was 'explanation given'. However it should be noted that 'apology given' is also linked to 'explanation given' where it was acknowledged that initial enquiries may not have been dealt with or communicated effectively. Meetings offered have increased in 2014/15 which have assisted both the complainant understand processes and the decisions made and the Service in understanding from the complainant's perspective. What has also been highlighted is the need for staff to ensure that they are providing clear and concise information around charges and that this is recorded appropriately.

	Apology given	Assessment to be carried out	Assistance to find alternative services	Change in Practices	Change in Procedures	Change of Provider	Change of Social Worker
Apr 14 – Mar 15	23	5		3			
Apr 13 – Mar 14	36	3	1	3	2	-	-
	Compensation Offered	Complaint Withdrawn	Explanation given	Financial Assistance awarded	Fees Waivered	Hours increased	Information given
Apr 14 – Mar 15		1	53		3		
Apr 13 – Mar 14	-	1	66	-	4	-	1

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	Meeting offered	No further action required	Referred to Safeguarding	Re-Imbursement	Services Reinstated	Training Identified	Other
Apr 14 – Mar 15	6	1		1		1	
Apr 13 – Mar 14	3	1	-	2	-	2	3

3.7 Response times

The response times for 2014/15 dropped by 14% for informal complaints and 39% for formal complaints within 10 working days. Also there has been a drop in the number of complaints responded to within 11-20 working days by 5% (informal) and 1% (formal). In 2014/15 there has been a significant increase in the number of complaints taking over 20 working days for both informal and formal by 44% and 47% respectively. It should be noted that complaints have become more complex requiring information/involvement from external agencies which has led to timescales not always being met.

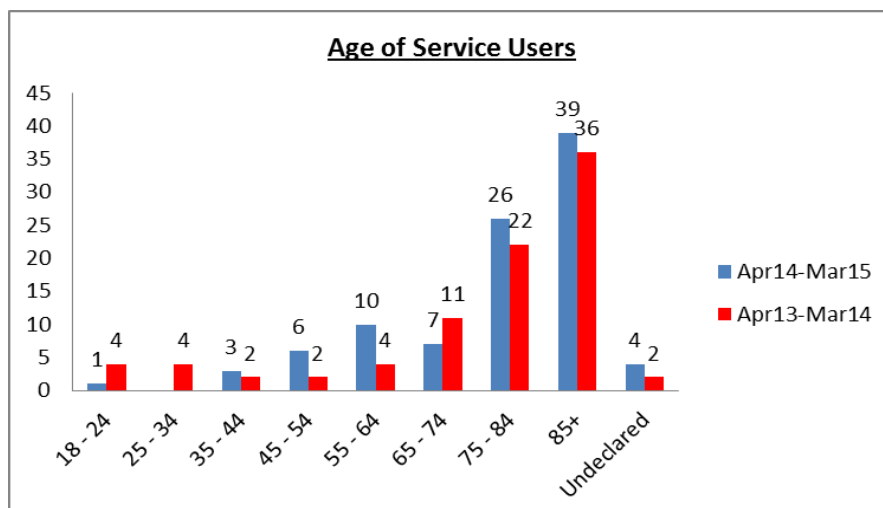
External agencies response times within 10 working days improved in 2014/15 with a number of complaints being dealt with by discussion with the complainant. It should be noted that 21% were referred to safeguarding and therefore closed as a complaint.

	Within 10 days		11-20 days		Over 20 days	
	Apr 14 – Mar 15 %	Apr 13 – Mar 14 %	Apr 14 – Mar 15 %	Apr 13 – Mar 14 %	Apr 14 – Mar 15 %	Apr 13 – Mar 14 %
Informal	50	57	25	29	25	14
Formal	33	54	20	21	47	25
External agencies	62	53	21	25	17	19

3.8 Monitoring information

3.8.1 Age

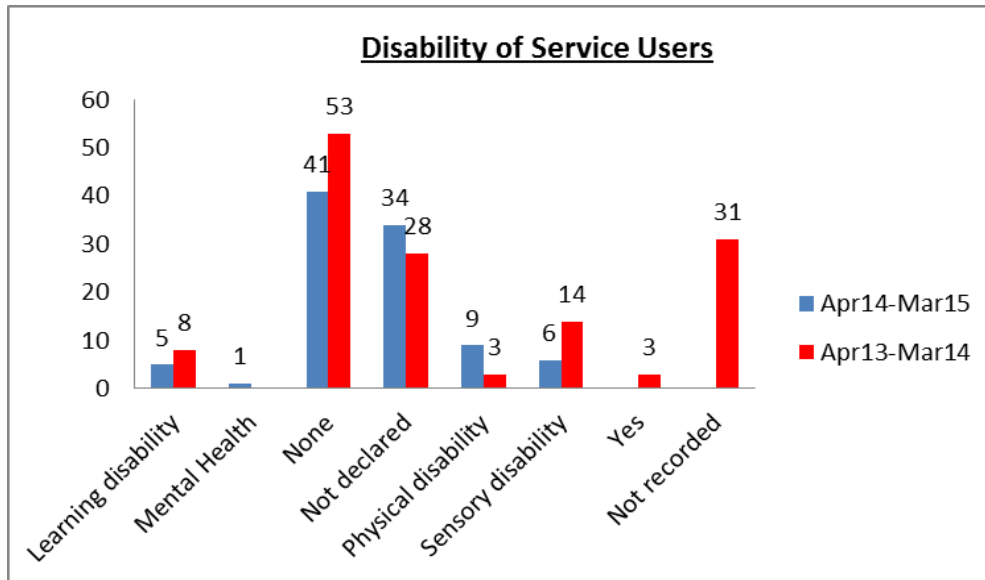
There has been an increase in the number of service users involved in complaints during 2014/15 across nearly all age ranges 85+ (8%); 75-84 (15%); 55-64 (60%) and 45-54 (67%). The population within Havering for 85+ has increased but for those aged 75-84 this has decreased. Population data for those aged 55-64 and 45-54 are no longer broken down in this way, but will be reported in future for those aged 18-64.



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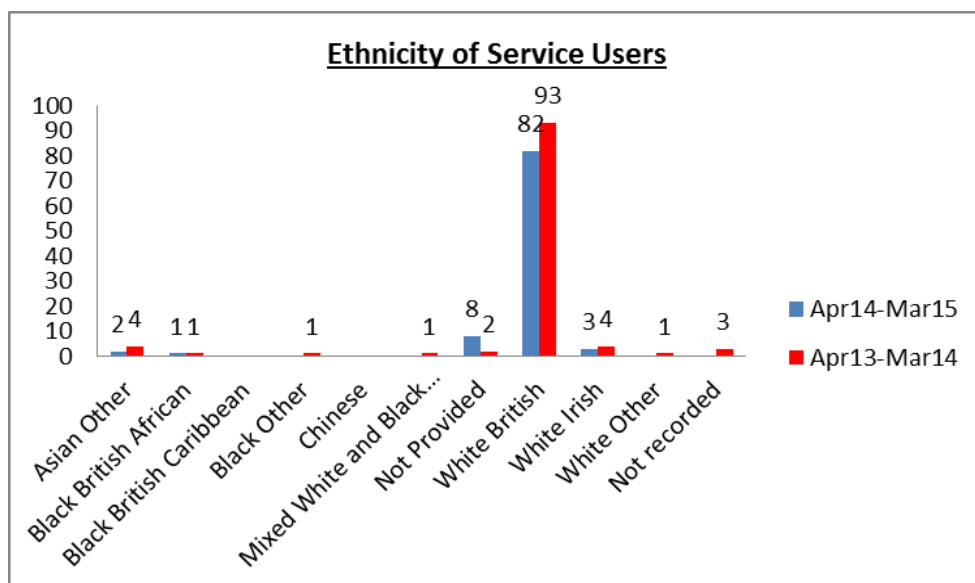
3.8.2 Disability

There has been an increase of 67% in those service users who have a physical disability and this may be representative of the number of complaints regarding disabled freedom passes, however will continue to monitor. There has also been significant improvement in 2014/15 from 2013/14 in 'not recorded' with all disability monitoring information being recorded.



3.8.3 Ethnicity

The number of service users in 2014/15 that are White British has dropped slightly from 2013/14 and still remains the highest number as reflected within Havering's population. It is also noted that 'not declared' has increased from 2013/14 and it may need exploring further as well as the low number of ethnic minorities that are involved in complaints.



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4 How we were contacted

Although the method of contacting us has dropped across all types, i.e. complaint leaflet, email, letter and telephone, they still remain the preferred method of contact with an increase in those contacting us online.

	Complaint Card or Leaflet	E-Mail	In Person	Letter	Online	Survey	Telephone
Apr 14 – Mar 15	10	28	-	27	2	-	24
Apr13 – Mar14	17	43	-	52	-	-	28

5 Expenditure

There was no expenditure incurred during 2014/15.

	Compensation	Independent investigators
Apr 2014- Mar 2015	-	-
Apr 2013 - Mar 2014	-	£1,474.97

6. Compliments

There were a total of 85 compliments received during 2014/15 which has decreased by 17% from 2013/14, however this figure almost matches the number of complaints received. Although not a significant drop, staff should be reminded to send all compliments to be logged.

ACT North received the highest number of compliments and this is again mainly through customer feedback forms. Learning Disabilities received the second highest with ACT South and Commissioning receiving the third highest.

Examples of the types of compliments received are:

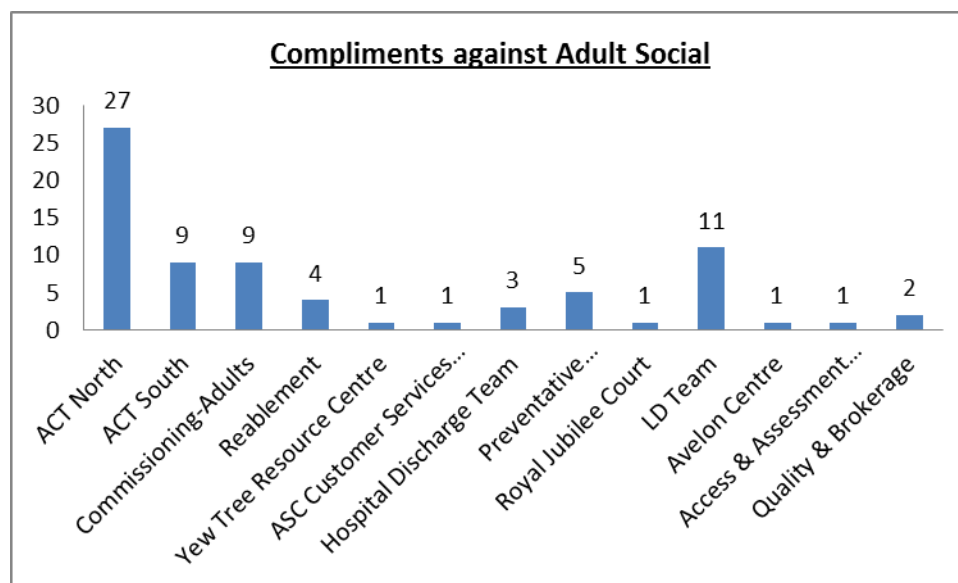
‘The person that visited was very professional was not in a rush and made sure everything was sorted...’ (ACT North).

‘It’s been a very difficult time for me recently and your friendly approach, professionalism, nature and empathy has really helped us through these times’ (ACT South)

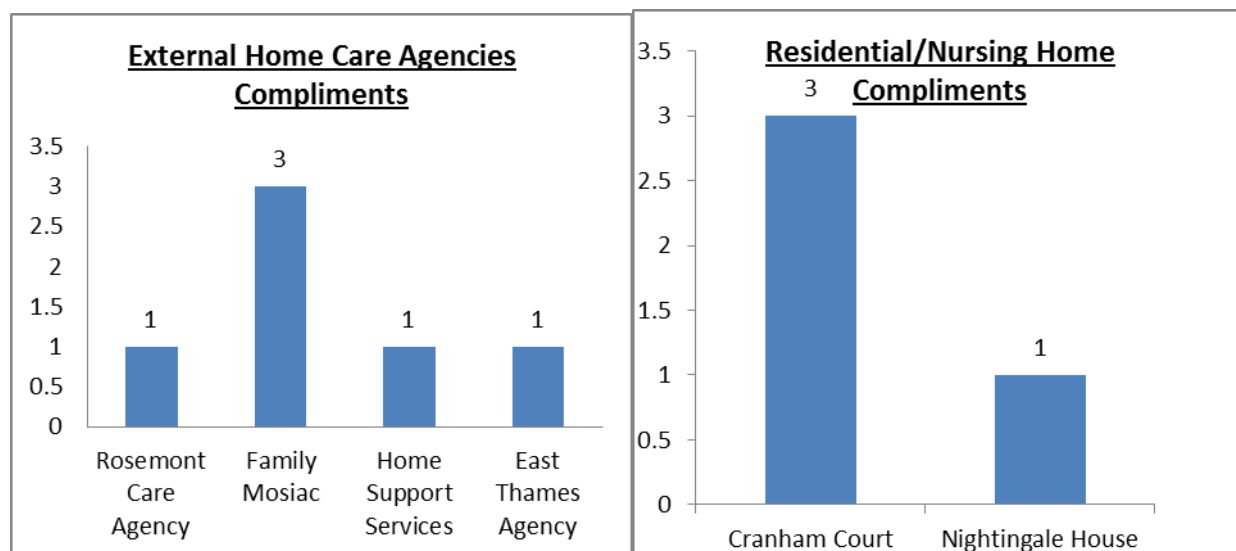
‘We would like to express our thanks and appreciation for your efforts on our behalf’ (Learning Disabilities)

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'I would just like to say a lady called at my home for an assessment ... was so understanding of my needs, very kind and courteous.' (Preventative Team)



It is noted that compliments have been received for those home care agencies that are recent additions to the local authority's provider framework. There has been a reduction in the number of compliments received for external residential/nursing homes with only two homes recorded. It should be noted that compliments for these agencies are those recorded that come to the local authority and each agency may receive compliments directly.



7. Members Enquiries

Members correspondence received during 2014/15 increased by 33% to 85 with 68 (80%) being responded to within timescale. This is a slight improvement from 2012/13 where 75% were responded to within timescale.

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8. Conclusion

Adult Social Care has continued to use complaints information as a performance tool in helping to improve services. It is welcoming to see that 'quality of service' and 'behaviour of staff' have decreased in 2014/15, although 'disputing decisions' remains one of the main reasons for complaint. Appropriate and clear recording has been highlighted as an area of improvement and this will be communicated to all managers with the Service.

Meetings have been proving successful with complainants and helped to inform both complainants and Adult Social Care in highlighting areas where there are gaps in the service.

However, it should be noted that disputing decisions will probably be a continued feature in 2015/16 with the changes envisaged with how social care is provided in future and the deferment of part two of the Care Act in relation to funding and appeals.

Efforts will need to be made in improving response times, however with the complexity of complaints and the involvement of other external agencies, this figure may still remain comparatively low.

Monitoring information is reflective of the borough and with the transfer to the new CRM system it is hoped that this information will still be easily obtainable.

The Complaints Team continue to provide guidance and advice to staff within Adult Social Care on complaints handling.

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9. Complaints Action Plan

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
Communication regarding discharge arrangements is poor	<ul style="list-style-type: none"> Improvements for discharge arrangements Closer working needed between social care and health. 	<ul style="list-style-type: none"> Social workers to be more proactive at early stage District nurses to work alongside social workers to identify support for those who will require it on discharge. 	<ul style="list-style-type: none"> Joint Assessment & Discharge Team 	Ongoing	This will continue to be monitored, although the number of complaints have dropped in 2014/15
Clear information on charges where self-funders become part funded by local authority	<ul style="list-style-type: none"> Improved recording of information given on charges 	<ul style="list-style-type: none"> Social workers/staff to be reminded of recording practices through 1:1 supervisions/PDRs. 	<ul style="list-style-type: none"> All 	Ongoing	This will continue to be monitored, Finance Assessment & Benefits Team Manager to visit team meetings at least annually. Review of process undertaken in 2015/16, with improvements to be implemented by March 2016
Clarity of information regarding respite/reablement/rehabilitation	<ul style="list-style-type: none"> Clear understanding by staff of differences 	<ul style="list-style-type: none"> Staff to be reminded of the differences and what is chargeable and what is not. 	<ul style="list-style-type: none"> All 	Ongoing	This will continue to be monitored, Finance Assessment & Benefits Team Manager to visit team meetings at least annually. Review of process undertaken in 2015/16, with improvements to be implemented by March 2016
Home care charges need to be ratified	<ul style="list-style-type: none"> Confidence that invoices reflect actual delivery 	<ul style="list-style-type: none"> Brokerage to ensure that invoices only accepted with the evidenced actual service delivery 	<ul style="list-style-type: none"> Brokerage Team 	Ongoing	Work is ongoing to improve the process of reconciliation. Review of process undertaken in 2015/16, with improvements to be implemented by March 2016