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Care and Invest  
to create a  
better borough**



**Telford & Wrekin  
COUNCIL**

# **Adult Statutory Complaints Annual Report 2019-20**

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## 1. Purpose of Report

To report statistical information to Members and Officers detailing Telford and Wrekin Council's Adult Social Care complaints and compliment activity from 1 April 2019 to 31 March 2020.

To provide an open resource to anyone who wishes to scrutinise local services.

To outline the key developments and planned improvements to the complaints processes operated by the Council.

To consider how some of the learning from complaints and compliments can be used to improve the overall customer experience.

## 2. Introduction

This is the Complaints Managers Annual Report for Adult Social Care (ASC). It is a statutory requirement to prepare an annual report for each year about the complaints activity within Adult Social Care that will be made available to any person on request;

This must;

- a) Specify the number of complaints received
- b) Specify the number of complaints which were upheld.
- c) Specify the number of complaints that we have been informed have been referred to the Local Government Ombudsman.
- d) Summarise,
  - a. The subject matter of complaints received;
  - b. Any matters of general importance arising out of those complaints , or the way in which those complaints were handled;
  - c. Any matter where action has been or is to be taken to improve services as a consequence of those complaints.

This report provides information about complaints made between 1 April 2018 and 31 March 2019 under the Local Authority Social Services and National Health Service Complaints (England) regulations 2009.

## 3. Context

### Legislation

Section 5 of the Regulations (2009) requires local authorities to consider complaints made by someone who;

- Is receiving or has received services from the authority;
- Is affected, or likely to be affected by the action, omission or decision of the authority.

A person is eligible to make a complaint where the local authority has a power or duty to provide, or to secure the provision of, a service for someone.

The 2009 regulations set a benchmark for all complaints to be investigated within six months. If the complaint is going to exceed this time scale the Local Authority should write to the complainant to advise them of this and explain the reasons why.

The '**corporate**' complaints process is used for anyone else who makes a complaint.

### **What is a complaint?**

A complaint may generally be defined as an expression of dissatisfaction or disquiet about actions, decisions or apparent failings of a local authority's adult social care provision which requires a response. We will always try to resolve problems or concerns before they escalate into complaints. If it is possible to resolve the matter immediately (or within 24 hours) there may be no need to engage the formal complaints process.

The purpose of a complaints process is to resolve concerns raised by service users and their representatives, to deliver outcomes which are appropriate and proportionate to the seriousness of the issues and to ensure that changes are made in response to any failings which are identified.

To achieve this, the approach to handling complaints must incorporate the following elements

- Engagement with the complainant or representative throughout the process
- Agreement with him/her about how the complaint will be handled
- A planned, risk-based and transparent approach
- Commitment to prompt and focussed action to achieve desired outcomes
- Commitment to improvement and the incorporation of learning from all complaints.

A complaint must be made no later than 12 months after;

- The date on which the matter which is the subject of the complaint occurred; or
- If later, the date on which the matter is the subject of the complaint came to the notice of the complainant.

The time limit will not apply if the complaint manager is satisfied that;

- The complainant had good reasons for not making the complaint within the time limit; and
- Notwithstanding the delay, it is possible to investigate the complaint effectively and fairly.

### **Who can make a complaint?**

A complaint may be made by a relative, carer or someone who is acting on behalf of a person who has died, or is unable to make the complaint themselves because of;

- Physical incapacity, or
- Lack of capacity within the meaning of the Mental Capacity Act 2005, or
- Has requested the representative to act on their behalf.

Complaints may be received through a variety of media (phone, letter, email, feedback-form, personal visit etc) and at various points within the organisation (to staff members, via the respective web addresses, direct to the Customer Relationship Team.

## **Adult Statutory Complaints Procedure in Telford and Wrekin Council**

When a complaint is first received, the Customer Relationship Team will carry out an initial assessment of the complaint to determine the issues, the severity and the potential impact and to identify any other organisations that may be involved.

When someone contacts the Customer Relationship Team to make a complaint, we acknowledge their complaint within 3 working days. We also offer a meeting with the complainant to discuss the matter and to establish their desired outcome. Agreement is sought on the following points;

- Detailed account of the complaint.
- Complainant's view of the impact, which this has had on him/her.
- Specific reference to any aspect which requires immediate action within the adult safeguarding/protection procedures.
- Details of the outcome(s) which will resolve the matter from the complainant's perspective.
- Whether the subject of the complaint could relate, entirely or partly, to another body (eg an NHS body or an independent care provider) and could therefore need a joint approach (see sections 13 and 14 below).
- How the complaint will be investigated, and by whom.
- How long it should reasonably take to investigate the matter and to provide the complainant with the Council's formal response.
- How often and by what means, the complainant will be updated on the progress of the investigation.
- Whether an advocacy, translation or other support service is required.
- Whether the involvement of an impartial mediator might contribute to a satisfactory resolution of the complaint.

We aim to respond to all Adult Statutory complaints within 25 working days, because of the nature and complexity of some issues it may take longer, and complainants will be informed if this is the case. The time scales may be extended to a maximum of 65 working days.

When the investigation is complete, the manager will write a letter explaining what they have found and what they will do to put things right.

If the complainant is not happy with our final decision, or how we have dealt with their complaint, they can refer the matter to the Local Government and Social Care Ombudsman (LGSCO).

### **Adult Social Services Interactions in 2019/20**

In 2019/20 there were just under 5,000 (4,876) adults supported by the Council. Out of those, 2,360 received a Long Term service (a service that was expected to continue and not be time limited or low level).

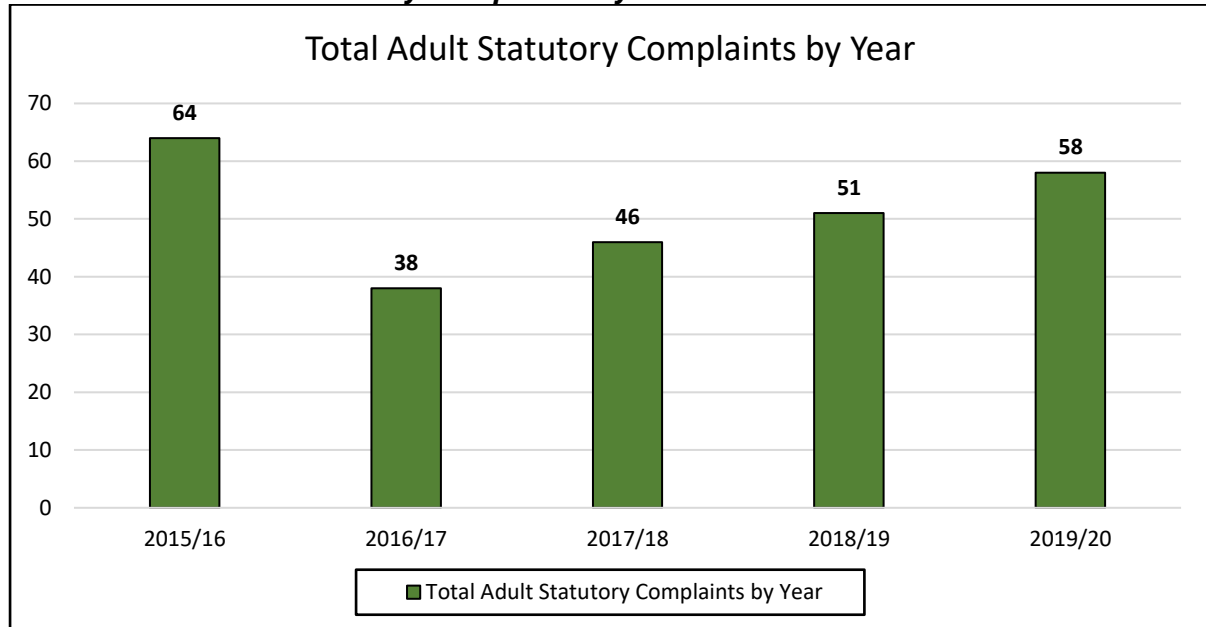
There were 7,385 new contacts in 2019/20 for 4,959 different people, this includes 1,439 contacts for people being discharged from hospital.

As well as this there were a further 100 reviews for people leaving hospital who were already being supported by the Council before going into hospital and were then discharged back to Council services.

## 4. Adult Statutory Complaints 2019/20

We received 58 Adult Statutory complaints between 1 April 2019 and 31 March 2020, in 2018/19 we received 51 and in 2017/18 we received 46. The table below shows comparisons of the number of statutory complaints over the past three years.

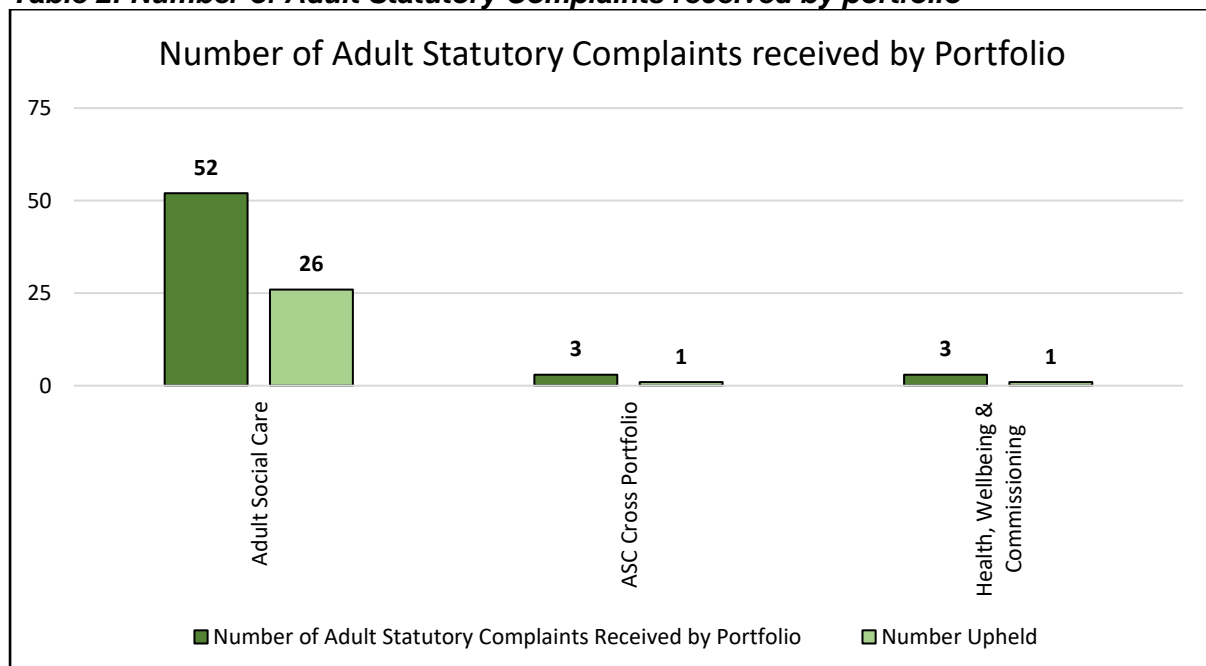
**Table 1: Total Adult Statutory Complaints by Year**



There has been a gradual increase in the number of complaints received over the last three years. However, we have not yet achieved the level received in 2015/16 of 64 complaints.

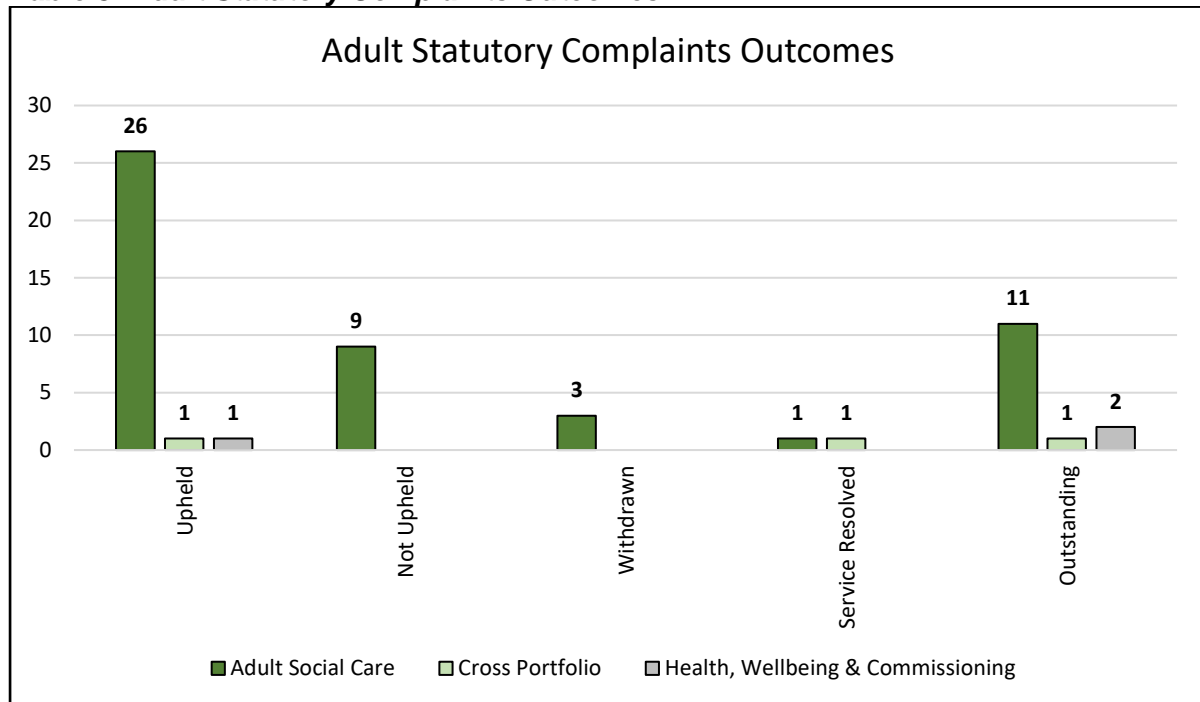
Of the 58 received 43 were completed during the financial year. Below is a table of the statutory complaints received by portfolio against number upheld, these complaints were cross cutting and it was felt that it was appropriate for the complaint to follow the Adult Statutory Complaints Procedure.

**Table 2: Number of Adult Statutory Complaints received by portfolio**



The table below shows the outcomes of all complaints for Adult Statutory Complaints.

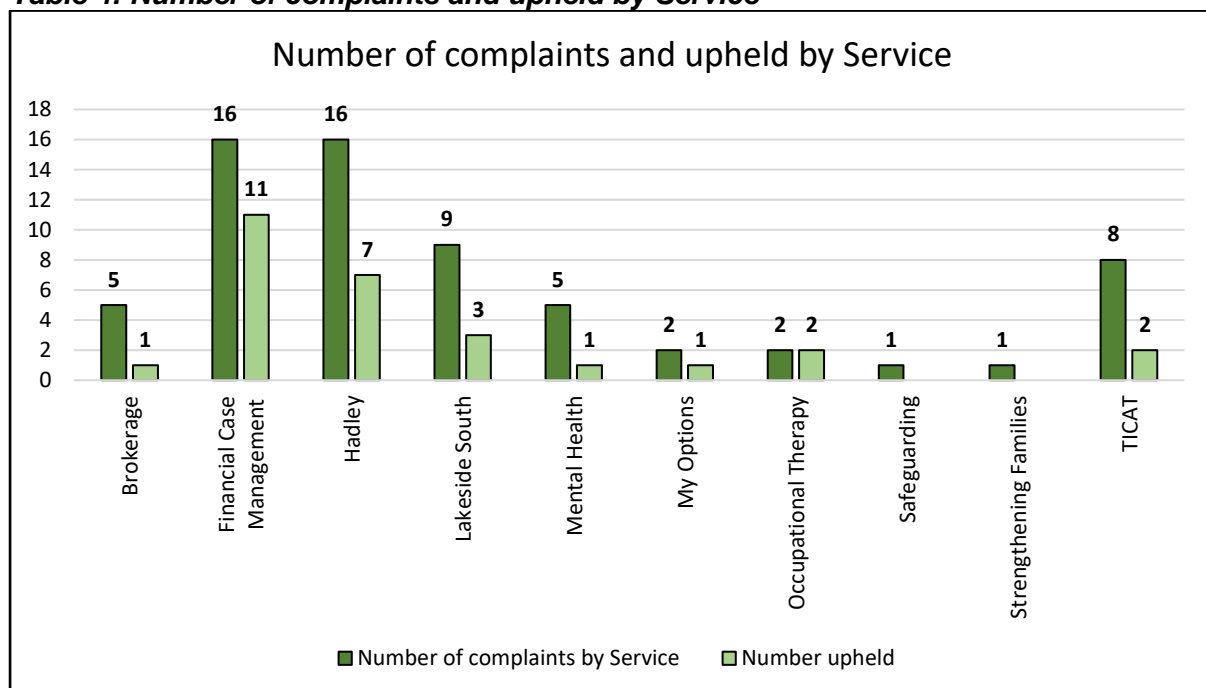
**Table 3: Adult Statutory Complaints Outcomes**



Of the 43 complaints completed, 65% (28) were upheld, 21% (9) were not upheld and 14% (6) were dealt with via another method.

The table below includes the number of complaints received by each service. Please note that number of complaints detailed below is higher than the overall total because individual complaints may have multiple issues against different teams. This table seeks to show all services against issues were raised.

**Table 4: Number of complaints and upheld by Service**



The most upheld complaints were received by the Financial Case Management team where 16 Statutory Complaints were received and 11 upheld. These were due to various issues

including delays in assessment, invoicing, errors in calculations, Data security, Delay in responding, provision of funding and notifying a change.

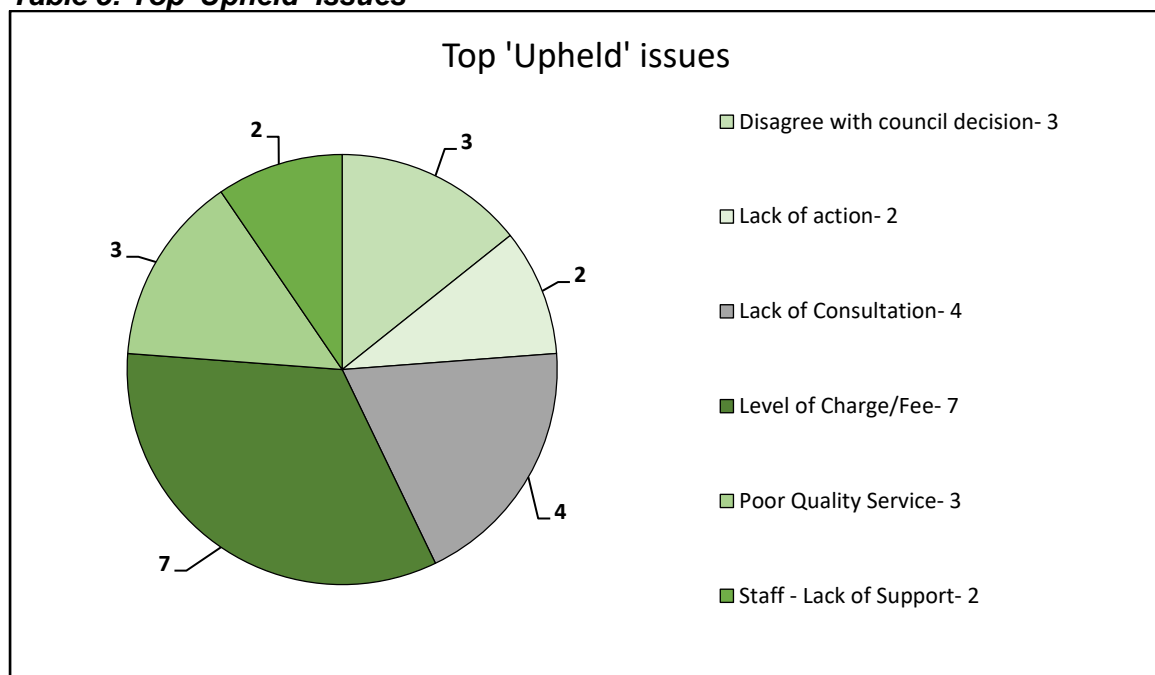
16 complaints were also received for Hadley Locality Team, where 7 were upheld. Involving communication and calls not being returned, delay in carrying out assessments, data security and where complainants disagreed with the decision.

Lakeside Locality Team also received 9 complaints, where 3 were upheld. Lack of support from staff, staff conduct and information not made clear in correspondence.

## 5. Issues for 'upheld' complaints

Of the upheld complaints the top issues raised were as detailed in the table below;

**Table 5: Top 'Upheld' Issues**



**Lack of action-** in total there were 8 complaints received regarding this matter 2 of which were upheld. These concerns related to failings in communication and action regarding safeguarding concerns, and lack of communication and action regarding a financial assessment.

**Poor Quality of Service-** in total there were 5 complaints received regarding this matter 3 of which were upheld. The concerns related to care providers and service received by social care. Care providers not registered and incorrect qualifications. Volume of staff impacting on the support received. Care providers not arriving on time, and not acknowledging customers requested visit times. General concerns regarding the standard of care being provided.

**Disagree with Council Decision-** in total 11 complaints were received regarding this matter, 3 of which have been upheld. These included the use of a personal budget towards socialising, and incorrectly declining a self-referral for a Disabled Facilities Grant.

**Level of Charge/Fee-** in total there were 8 complaints received regarding this matter. 7 of which were upheld. These related to Financial Case Management delays in assessments, incorrect advice provided regarding charges, and calculation errors.



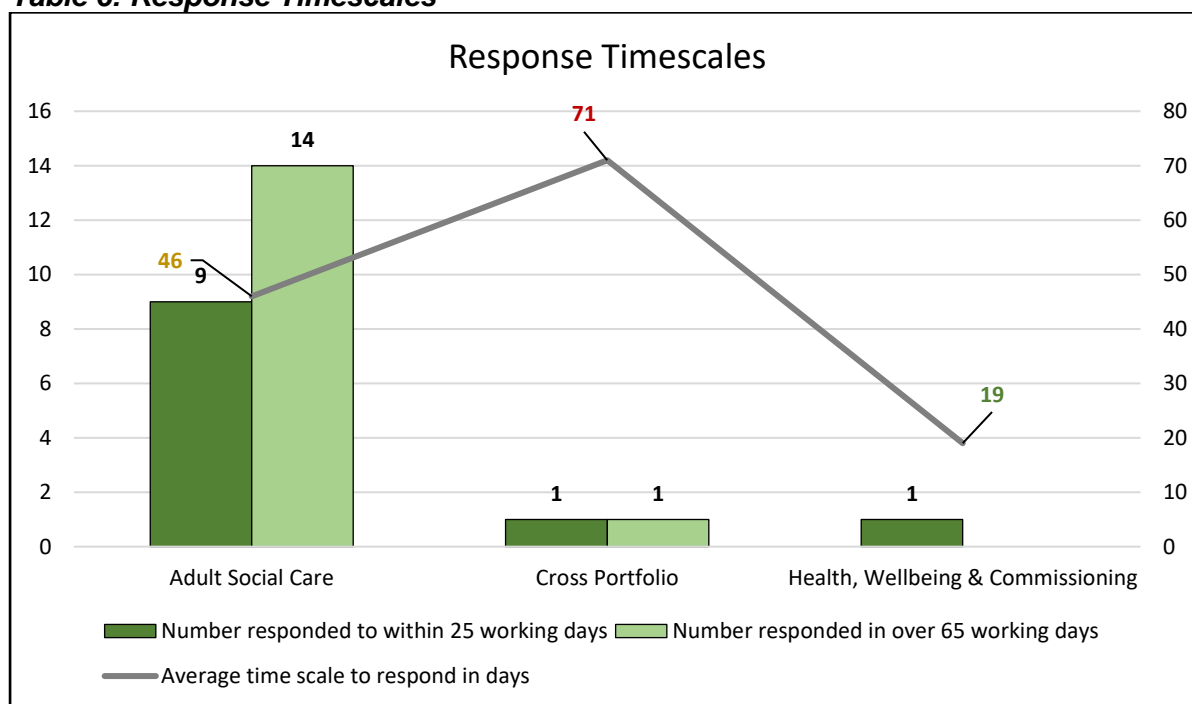
**Lack of Consultation-** in total there were 8 complaints received regarding this matter. 4 of which were upheld. These included where communication needs were not met. Customers had not been kept up to date and invoices were sent in error.

**Staff- Lack of Support-** in total there were 3 complaints received regarding this matter. 2 of which were upheld due to lack of support through communication.

## 6. Timescales for Responses

In 2019/20 the average number of days to respond to an Adult Statutory complaint across all portfolios was **51 days** this is an improvement on the 56 working days achieved in 2018/19. Please see table below;

**Table 6: Response Timescales**



The total number of days to respond to an Adult Statutory Complaint by Adult Social Care portfolio was 46 days which is a significant improvement on the 61 days that was achieved in 2018/19.

Of the 52 complaints received by Adult Social Care, 40 have been completed, 9 of the 40 responses were sent within the 25 working day timescale. However, 14 out of the 40 exceeded the 65 working day time scale. One complaint responded to under cross portfolio exceeded the 65 working day time scale.

Across all portfolios the average number of working days to respond to the complaints did exceed the initial 25 day timescale, however, the average days for all portfolios did not exceed the extended 65 working days, as outlined in the Council's policy achieving an average of 50 days. This does mean that complaints are in the main being responded to within 65 working days. 15 of the 43 complaints were responded to outside of the 65 working days which is 32%.

All complaints were responded to within 6 months, there are currently 5 complaints that are outstanding from the first three quarters of 2019/20 these have exceeded 65 working days, and will be closely monitored to ensure that they do not exceed the 6 months. 23% of complaints were responded to within 25 working days.

## 7. Learning from Adult Statutory Complaints

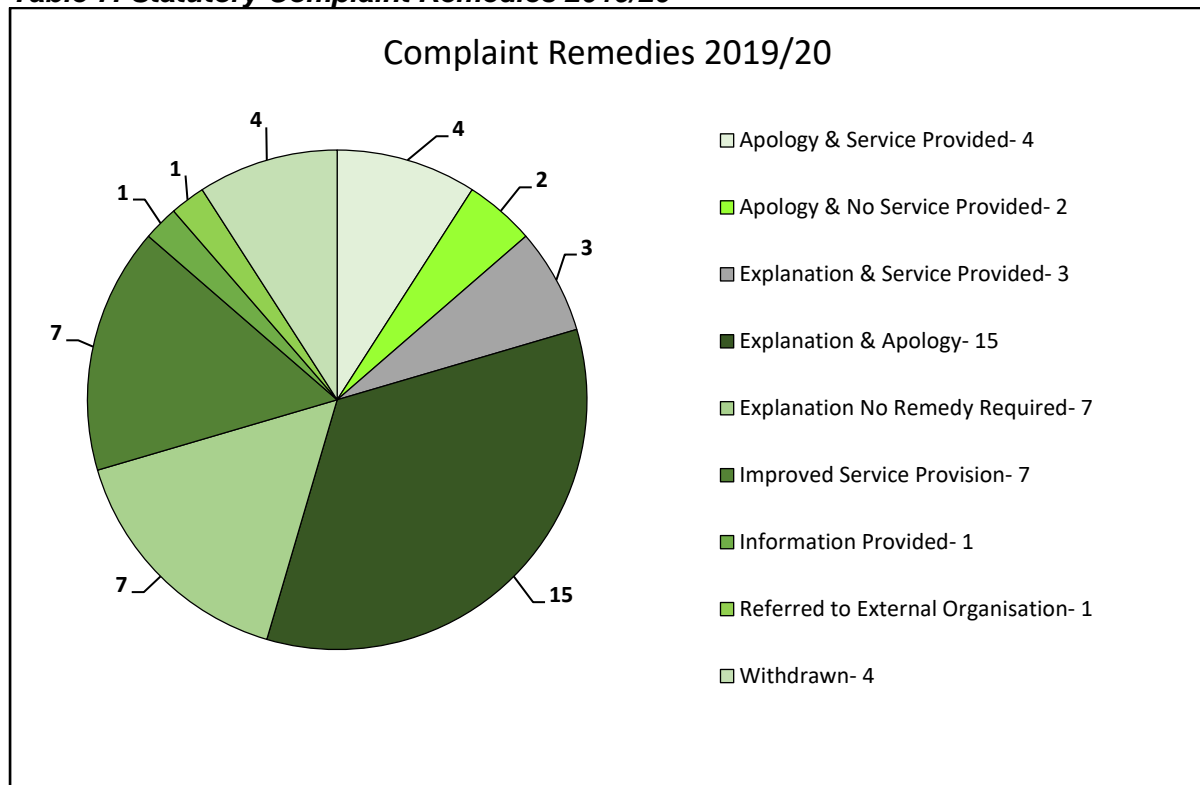
Complaints are a valuable source of information which can help to identify recurring or underlying problems and potential improvements. We know that numbers alone do not tell everything about the attitude towards complaints and how they are responded to locally. Arguably of more importance is to understand the impact those complaints have on people and to learn the lessons from complaints to improve the experience for others. This was echoed by Michael King, The Local Government Ombudsman who said it is not about ‘*how often you are getting it wrong, but how good we are at putting it right*’.

Lessons can usually be learned from complaints that were upheld but also in some instances where no fault was found but the Authority recognises that improvements to services can be made.

Occasionally during the course of an investigation issues will be identified that need to be addressed over and above the original complaint. The Customer Relationship Team will always try to look at the “bigger picture” to ensure that residents receive the best possible service from the Council.

The Customer Relationship Team will provide ongoing daily advice and support to managers around complaints management and resolution and responding to representations.

**Table 7: Statutory Complaint Remedies 2019/20**



Of the remedies recorded against Adult Statutory Complaints in 2019/20;

- 34% were to provide an explanation and an apology.
- 16% was to provide an explanation and no remedy was required.
- 16% was to improved service provision.

## **Positive Improvements:**

Below are examples of positive changes that have resulted from learning from complaints;

- Time scales have been introduced for social workers to complete support plans to ensure that interventions are timely.
- Social workers have been reminded to the importance of offering the opportunity for queries to be discussed and responded to.
- There are ongoing discussions with Social workers in professional development in supervision.
- Introduced a new investigation template and process for Adult Social Services to help with complaints.
- Clarity has been provided to Brokerage and Locality Teams regarding responsibility for keeping in touch with individuals and families.
- Launch of 'zoned' working for domiciliary care providers (move to a place based support model of care delivery in the borough).
- Practitioners are to notify Financial Case Management Team of any billing/invoice address changes so that they can confirm this and update ContrOCC and Agresso. A system report will also be run on a regular basis.
- Family Connect are to ensure that the advice about making further contact should situation change is made clear to callers and the telephone number of the appropriate team is provided should further contact be necessary.
- Review will be completed of Direct Payment processes.
- Review will be completed of current joint working practices across statutory agencies who have responsibility for responding to organisational concerns (to ensure that effective communication and partnership working with providers is strengthened within policy and fully embedded into practice).
- Workers have been advised to ensure that ongoing services, if required, are provided and in place prior to stopping enablement and that discussions take place with the family.
- Guidance has been issued to ensure best practice in taking messages when workers are not available. The importance of good communication/best practice in communication has been discussed with individuals and at team level and during communication sessions. Training has been provided on the importance of Making Every Contact Count, our approach to engaging conversations so that they have positive outcomes.

During 2020/21 more focus will be placed on learning to ensure that continuous service improvement takes place.

## **8. Complaints made to the Local Government and Social Care Ombudsman (LGSCO)**

The LGSCO has authority to investigate when it appears that our own complaints process has not resolved the complaint. Complainants can refer their complaint to the Ombudsman at any time, although they will generally refer all complaints back to us, if they have not been through the complaints processes first. In exceptional circumstances the, however the Ombudsman will look at things earlier; this is usually dependant on the vulnerability of the person concerned.

The Council were notified of 6 Adult Statutory complaints that were received and escalated to the LGSCO between 1 April 2019 and 31 March 2020. Three were not investigated and one was a premature referral.

Two cases remain open and have been allocated for investigation.

There were no findings of fault for Adults Statutory complaints in 2019/20.

Decisions were also made by the LGSCO for three cases from 2018/19, one was not upheld, one was not investigated as it was out of time and one had no finding of fault.

The low number of complaints investigated by the Ombudsman suggests that investigations and responses undertaken are clear and transparent.

## **9. Concluding Comments**

This annual report shows that whilst in the vast majority of cases the Council manages complaints well and is committed to putting right anything that has gone wrong there remains clear opportunities to improve in a number of areas. Although the number of complaints received have increased over the last 3 years this is against a backdrop of major reductions in government funding for local authorities and particularly for adult social care services.

The number of statutory complaints upheld is high in comparison with the number received (47%).

It is positive to see that overall the average time to respond to an Adult's Statutory Complaint's has reduced to 50 days from the 56 days reported in 2018/19. However, there is still some work to be done to improve timescales further.

### **Recommendations:**

Please see below the recommendations for this financial year;

- When completing a complaint investigation and response, services should assess whether any element of the customer journey could have been improved, even if this does not form part of the complaint i.e. Could improve communication have prevented the concerns being escalated to a formal complaint?
- Whilst response times have improved since 2018/19 services should continue to respond in a timely manner, so that customers get a resolution as swiftly as possible. Where an amended response date has been provided this must be honoured and not further extended.
- Services should continue to ensure that they are prioritising complaints and responding within the stated timescales, where there are unforeseen delay's the

Customer Relationship Team should be notified immediately so that we can notify the customer and advise them of the date they should expect their response.

- The legislation allows for complaints not to be registered if it is resolved within 24hrs of receipt. This should be used as an opportunity to reduce the number of complaints going forward.
- When responding to a complaint all points should be addressed, so that the customer is getting a full response and as a Council we are getting it right first time. Resources are available to assist officers investigating and responding to complaints. The Customer Relationship Team does quality check responses, and often makes comments and suggested amendments. The role of the Customer Relationship Team is to ensure that the complaint progresses and complaint standards are adhered to and this is reflected in the advice provided.
- The Customer Relationship Team will also continue to escalate those that have exceeded timescales to the Director.
- The Council's Adults Statutory Complaint Policy has been reviewed and will be approved in 2020/21. The Customer Relationship Team will continue to work with senior leadership teams to effectively utilise complaints intelligence to support positive improvements to service delivery.

## **10. Oversight and support provided by Customer Relationship Team**

The Customer Relationship Team continues to support service areas to both manage and learn from complaints. The key services offered by the team are;

1. Complaints advice and support.
2. Quality Assurance of complaint responses.
3. Acting as a critical friend to challenge service practice.
4. Support with persistent and unreasonable complainants.
5. Assistance in drafting comprehensive responses to complaint investigations.
6. Continue to escalate overdue complaints to Directors.

## **11. Customer Relationship Team priorities for 2020/21**

During 2020/21 the Customer Relationship Team will focus on a number of key priorities;

- Obtain approval for the updated Adult Statutory Complaint Policy.
- Help to improve the Councils record in timely complaint responses.
- Continue to improve our case management complaint system.
- Continue to improve and add to the resources available for managers, when responding to complaints and other correspondence and encourage self-help.
- Work to maintain low levels of maladministration findings by the Local Government and Social Care Ombudsman.
- Continue to provide a dashboard for quarterly reporting providing Senior Management with quarterly data so that improvement can be driven forward continuously during the year.