



Cheshire West and Chester Council

Adult Social Care Complaints and Compliments

Annual Report
2019 – 2020

Introduction

This report provides information about the Adult Social Care Compliments and Complaints received by Cheshire West and Chester Council during the period 1 April 2019 to 31 March 2020. It highlights performance against statutory and internal timescales for complaint handling and provides assurance that improvements or revisions to services have been identified as a result of listening and responding to both compliments and complaints.

The Council's Customer Relations Team, within the Governance Directorate, was responsible for the coordination of compliments and complaints during this period. The Adult Social Care team are responsible for responding to complaint matters and satisfying themselves that providers have dealt with complaints appropriately. The Customer Relations Team review all draft responses answered by the Council and provide advice and support to the service on reasonable outcomes or remedies to complaints, from a layperson's perspective.

In accordance with statutory guidance, responses to complaints received by the Council should be proportionate. Officers are encouraged to resolve matters locally at the first point of customer contact to avoid escalation wherever possible. Concerns raised with the service and resolved by close of play the following day are not counted as statutory complaints. Where this approach does not deliver a satisfactory outcome for the complainant, matters are then directed through the formal complaints' procedure.

The objectives of this report are to:

- be open and transparent about our social care complaints process
- meet our statutory obligation to produce an annual report
- provide clear and concise comparative data on compliments and complaints, including details of complaints broken down by subject and service area
- provide a summary of customer profile and type of customer interaction
- identify service improvements as a result of complaints and compliments and demonstrate learning and improved practices and processes from these

Context

Whilst considering this report it is important to see the overall picture of Adults Social Care involvement in the Cheshire West and Chester area. During this period 18,535 customers received service from Adult's Social Care teams. 35 formal complaints were handled representing less than 0.19% of service users.

1.0 STATUTORY COMPLIANCE PROCEDURE

1.1 The Adult Social Care Complaints Procedure

The Local Authority Social Services Act 1970, as amended by the National Health Services Act and Community Care Act 1990 and the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, require the local authority to have a procedure for the handling and consideration of complaints received by, or on behalf of, adult service users. A local authority must also ensure that action is taken if necessary, in the light of the outcome of a complaint. To comply with the above requirements, Cheshire West and Chester have adopted the operational procedures set out in section 1 of this report.

1.2 Role of the Customer Relations Team

The Customer Relations Team is responsible for the handling and consideration of complaints and acts as a central point through which complaints can be made to the Council. Complaints can be made via telephone; in writing; through the online social care complaints portal; or directly to the dedicated social care complaints email inbox. Complaints received directly by the Service should be referred to the Customer Relations Team to be assessed for eligibility.

The Customer Relations Team, often in liaison with the Service, will determine whether a complaint is eligible for consideration under the statutory framework or whether an alternative route (for example safeguarding or through the corporate complaints process if the issue complained about is not related to the quality of care provided) would be more appropriate.

The Customer Relations Team offer training, advice and support to staff in their consideration of complaints and perform a quality assurance role in the preparation of complaint responses. The Team also liaise with complainants to keep them informed on progress with their complaints and provide advice about the complaints process and the role of the Local Government & Social Care Ombudsman.

The Team also coordinates the completion of Learning Action Reports for the service, which capture the learning and improvements identified through responding to complaints. This is recorded and reported centrally and monitored to ensure that the implementation of identified, agreed actions following the outcome of complaints is carried out. Learning is shared with other services, where it is relevant to do so, in order to improve service delivery Council-wide.

1.3 What is a Complaint?

Any expression of dissatisfaction about a council service (whether that service is provided by the council or by a contractor, commissioned provider or partner) that requires a response. There is no difference between a 'formal' and an 'informal' complaint. Both are expressions of dissatisfaction that require a response.

1.4 Who Can Make a Complaint?

Anyone can make a complaint if they receive a service from Adult Social Care. Complaints can also be accepted from individuals acting on behalf of a service user, for example from an advocate or family member, if the service user has given consent. Where a service user's capacity to make informed decisions may be in question, the Customer Relations Team (in conjunction with the Service Team Manager) will look at whether the person pursuing the complaint is acting in the service user's best interests.

People who fund their own care (self-funded users) for services that are regulated by the Care Quality Commission do not fall under this procedure as they are not using Council services.

1.5 Adult Social Care and Health Complaints Procedure

The current Adult Social Care and Health complaints procedure consists of a single response to the complainant, followed by a right of referral to the independent Local Government and Social Care Ombudsman.

Complaints are always assessed, or 'triaged', by the Customer Relations Team to identify any potential safeguarding risks or concerns that need immediate attention. Where safeguarding issues are identified, those matters are redirected to be considered under the appropriate safeguarding procedures without delay. Where there are no obvious safeguarding concerns complaints are referred via the Customer Relations Team to a Senior Manager to be considered through the social care complaints procedure. All, or parts of, a complaint may not be eligible under the social care complaint process. Where this is the case all non-social care elements will be referred to the corporate complaints policy or a more appropriate 'alternative path' and the customer kept informed about how their complaint, or parts of their complaint, will be dealt with.

Commissioned providers are expected to have robust complaint procedures in place, and an appropriate reporting mechanism for these in order to keep the Council updated. As the Council retains overall accountability for the services delivered by commissioned providers, it reserves the right to accept a complaint into its own ASC complaint process if it considers it warrants further investigation, for example, if it decides that the provider's response does not answer the complaint, address the injustice or offer a reasonable remedy. Where there are immediate contractual concerns these will be followed up outside of the complaint process by the Commissioning Service.

The Customer Relations Team will work with the Service and the Commissioning Team to monitor these complaints and provide advice and support.

1.6 Initial Expressions of Dissatisfaction

Complaints received directly by the Service (or elsewhere) that, from initial assessment, look like they can be resolved by close of play the following day, are not required to proceed through the complaints process. These concerns/issues are often relatively minor, and resolution can most easily be addressed locally

through the service. The customer is always advised how they can progress their complaint if they remain dissatisfied.

1.7 Formal Resolution

Complaints considered under the formal procedure are acknowledged within three working days and information is provided to the customer about the complaints process and how to access advocacy support.

Complaints are allocated to the relevant Senior Manager who will discuss the complaint, where necessary, with the complainant. The scale and the nature of the investigation are intended to be proportionate to the complaint and may include an initial telephone call; face to face meetings with complainants; interviews with staff; paper reviews of records; policies and procedures examination, etc.

Responses to all complaints should be concluded within the statutory 6 months deadline unless exceptional circumstances prevent it and an alternative deadline is agreed in advance with the complainant or their representative. However, the Council has set itself a challenging, much shorter, internal target to aim to complete non-complex complaints within 20 working days. It is intended that, as far as possible, most complaints should be resolved by a single thorough response. Due consideration will be given to any request from a complainant to consider further the outcome of any complaint and this is at the Customer Relations Manager's discretion following consultation with the service. An expression of general dissatisfaction with the outcome of the complaint will not normally lead to the response being revisited.

Following conclusion of the complaint process the complainant has the right to pursue the matter further with the independent Local Government and Social Care Ombudsman (LGSCO) if they feel the matter remains unresolved.

1.8 Safeguarding

The Customer Relations Team liaises directly with the Adult Safeguarding Team, and with the relevant Social Care Team as appropriate. Contact is maintained with the Safeguarding Unit to discuss individual complaints and agree appropriate approaches if there are any safeguarding concerns. When Safeguarding thresholds are met, the contact will be dealt with via a Safeguarding investigation, rather than through the complaint process.

2.0 PERFORMANCE ACTIVITY 2019/20

2.1 Summary of Complaint Activity

A total of 86 representations were received this year. Of these, **35 formal complaints** were accepted.

Of the remaining representations:

- 24 were treated as a 'request for service' (defined as when contact is made for the first time to make a request for something that would not be considered a complaint).

- 6 did not proceed as they were withdrawn by the complainant, usually because the service has resolved the issue to the customer's satisfaction without the need to progress a formal complaint.
- 21 cases were refused as 'ineligible' as there was a more appropriate alternative pathway to address the concerns raised, such as via the Corporate Complaints process.

Where cases are declined as ineligible under the policy, the complainant is sent a response explaining why and signposted to a more appropriate process where relevant.

2.2 Comparison with Previous Years

The table below shows the number of representations and progressed complaints for 2019/20 compared with the previous two years.

Table 1: Total number of complaints considered

Year	Total no. of valid complaints processed	Request for service	Withdrawn/ not pursued	Ineligible / Redirected *	Total no. of representations considered
2019-20	35	24	6	21	86
2018-19	30	33	7	20	90
2017-18	39	36	9	22	106

**Complaints not valid through the Social Care procedure, for example complaints that were being dealt with as Safeguarding investigations, or the complainant was not directly involved with the service user and is therefore ineligible to complain.*

The overall figure of valid complaints represents an increase of 17% compared to the number of complaints investigated by the Council in the previous year. However, the total number of representations considered decreased slightly. These overall lower numbers are as a result of both the Customer Relations team and the Adults Social Care Service taking a more robust and determined approach to resolving issues at the earliest opportunity (see section 2.3 below).

2.3 Number of Complaints - Observations

The Customer Relations Team continues to focus its efforts on the initial triage of complaints and identifying opportunities for promoting early resolution of issues raised, or signposting to better, more appropriate, routes.

Within the adult social care teams, including provider and reablement as well as social work and community teams, there is a strong focus on trying to resolve issues that arise informally to prevent them from escalating to a formal complaint. Initial findings are then shared across all areas of the service so that the learning can be cascaded throughout.

This is also the case for any areas of improvement that have been identified with clear action plans being developed, reviewed and audited.

2.4 Complaint Outcomes

Table 2 below shows the outcomes of the 30 complaints investigated.

Table 2 - Outcomes and comparisons with previous years

Year	Upheld	Partially upheld	Not upheld	Outstanding	Total
2019-2020	8 (23%)	14 (40%)	12(34%)	1(3%)	35
2018-19	11(37%)	9 (30%)	10 (33%)	0	30
2017-18	10(26%)	21(54%)	8(20%)	0	39

The percentage of 'upheld' cases has decreased compared to previous years and the percentage of cases 'not upheld' has increased. The number of complaints considered reflects only a small proportion of the overall number of service users however, it is reassuring that the trend is a positive one. Given that complaint investigations are conducted internally, the results continue to offer confidence that the outcomes from complaint investigations remain balanced and objective. It also reflects the Council's commitment to openness and accountability and promotion by the Customer Relations Team of accepting fault as soon as it is identified and offering an appropriate, and reasonable, remedy. This is demonstrated by there being fewer defensive responses being issued and a real commitment to learning from complaints.

As a result of closer integrated working, some complaints contain elements requiring responses from health colleagues in order to fully respond to issues raised by the complainant. These responses are complex and often take longer than the 20-day target. They may also offer different solutions and outcomes that can influence social care responses.

Adult Social Care Senior Managers in discussion with Health counterparts have agreed that some complaints require separate responses from organisations due to their complexity, although when possible one joint response is provided in line with best practice.

2.5 Breakdown of complaints received by Service Area

Table 3 below shows a breakdown of complaints received by each service area.

Table 3 – Breakdown of complaint by service area

Service Area**	Customer Numbers by Area	Numbers of Complaints Per Year		
		2019-20	2018-19	2017-18
Prevention and Wellbeing	18535			
Northwich & Winsford Patch Team	1955	4	1	5
Chester, E.Port & Rural Patch Team	3975	19	12	20

Service Area**	Customer Numbers by Area	Numbers of Complaints Per Year		
Learning Disability Team	1266	2	3	2
Occupational Therapy	4991	1	2	0
Review Team (previously the Advice and Contact Team)	111	0	0	1
Reablement and Provider Services	526	0	1	0
Community Mental Health	648	0	4	8
Hospitals Social Work Teams	1736	5	3	1
Safeguarding Team*	30	2	0	0
Client Finance	0	1	1	1
Commissioned Provider Services	0	0	0	1
Strategic Commissioning	42	0	1	0
Transition Team (now included in LD above)	-	0	1	0
Emergency Duty Team	44	0	1	0
Community Access Team**	2336	0	0	1
Solutions Team (new team)	231	0	0	0
Other	644	1	0	0
Total	18535	35	30	39

*Relates to complaints about the safeguarding process or the complaint doesn't meet the threshold for initiating a safeguarding investigation.

** The Community Access Team was formally called the Advice and Contact Team

The table shows a slight increase in complaints which aligns with the increase in services users (previous year was 16,745/30) so pro rata this does not give cause for concern or warrant further investigation.

The higher number of complaints for the Chester, Ellesmere Port and Rural patch reflects the higher population in this area and is consistent with previous years.

Providers are usually expected to deal directly with complaints in the first instance using their own complaint procedures, although the Council may respond if either it considers intervention is necessary at an early stage and/or the complainant remains dissatisfied with the outcome. This is in line with policy, and recognises that Providers are best placed to give an informed and considered response to issues raised about their own services whilst the Council maintains its overall accountability for the delivery of these services and monitors standards through appropriate contract management.

Safeguarding Team concerns are not included in Table 3 as they are dealt with outside of the complaint process as there is a separate requirement to make enquiries or cause others to do so, as per the Care Act 2014.

2.6 Complaints by Subject

By their nature, adult social care complaints are very specific to the circumstances of the individual and cover a wide range of individual experiences, often relating to more than one aspect of a service that has been received. Complaints received by

the Council have been classified based on the 'primary' area of concern (subject) raised by the complainant.

Detailed below are the numbers of complaint that fall within each category:

Table 4 – Complaint Subject

Complaint Subject (primary area of concern)	2019-20	2018-19	2017-18
Standard / Quality / Appropriateness of Service	23	21	25
Ignoring Concerns	1	1	2
Appropriateness of service	1	1	0
Issues with Provider	8	3	5
Inaccuracies in assessments	3	0	1
Lack of support	8	13	12
Standard of care	2	3	5
Social Worker – Attitude or Behaviour	1	2	1
Social Worker – Communication & Information	7	1	1
Financial / Cost Issues*	4	2	12
Total	35	30	39

The pattern of complaints largely reflects the stresses and strains within the provider market. Because of national reporting about the quality of care, there is a more acute awareness of the quality of care, its availability and its cost. Top-ups for residential care can cause resentment from carers as providers of residential care frequently ask for more money over and above the agreed contractual rate.

Domiciliary Care has seen pressure in the market locally and nationally, leading to availability issues in some areas.

2.7 Complaint Response Times

The table below shows a breakdown of response times in working days of all cases.

Table 5 – Compliance Rates

No. of Working Days	2019-20	2018-19	2017-18
	Closed cases		
20 working days or less	7	6	8
21-40 working days	10	11	9
41-60 working days	6	5	8
61-80 working days	6	3	2
81-100 working days	2	1	2
Over 100 working days	3	4	10
Total	34 (1 Still open)	30	39

As this report is presented to Members some months after the reporting period of 1 April 2019 to 31 March 2020 we can include a brief reference to the impact the

COVID-19 pandemic has had on the Adults Social Care service these past months. The response to the pandemic has stretched resources in the Council and across the UK as a whole and hence not all complaint investigations relating to 2019/2020 have been completed within the statutory 6 month deadline. However and importantly families have been kept up to date with progress.

A more detailed observation of the impact of the pandemic will be presented in the 2020/2021 annual complaints report.

Only 20% of complaint responses achieved the local target of 20 working days or less. There is no statutory requirement to respond to complaints within this tight deadline and adult social care cases are often very complex, involve the wider family, and tend to take longer to investigate and form an appropriate response to avoid further escalation. Response time will form part of the 2020/2021 review of how adult social care complaints are dealt with.

Where complaint response deadlines exceed 20 days, both the Customer Relations team and the service inform the customer of the delay as soon as they can, explaining why additional time is required and working with them to agree a reasonable extension.

2.8 Local Government and Social Care Ombudsman (LGSCO)

The Ombudsman reports on local authority figures based on the number of cases it receives in the reporting year; the number of decisions it makes in the reporting year (which may include cases ongoing from the previous year) and the Council's compliance with any recommendations.

The number of Adult Social Care cases received by the LG&SCO during this reporting period was 14 which is a decrease from 16 the previous year.

The Ombudsman also made decisions on 14 cases this year (compared to 16 the previous year) as follows:

- 4 closed after initial enquiries
- 1 incomplete/invalid
- 2 referred back for local resolution (premature)
- 1 advice given to complainant (premature)
- 6 upheld (2 of these cases from repeat complainants)

Of the 6 upheld cases decided by the LG&SCO, 5 were upheld for maladministration and injustice, the 1 remaining was recorded as having the injustice remedied during the Ombudsman's investigation. The following outcomes have been recorded:

- All required an apology
- 5 had some form of financial remedy totalling £2900:
 - £100 for anxiety and distress
 - £500 deduction on recovery of overpayment of Direct Payments
 - £750 to parent (Mother) for providing further care
 - £500 for time and trouble (£250 per case)

- £250 for distress and frustration (to be offset against outstanding debts).
- £300 for distress
- £500 for failure to implement a transition plan. This (and the £300 for distress) relate to the case where the Council remedied the injustice during the course of the Ombudsman's investigation. Though recorded under Adult Care services this has also been referred to in the CSC Complaints report as it demonstrates that the services need to continue to work closely to ensure that young people are supported during their transition into adult support services. In this case, prompt action by the service/s in receipt of the complaint ensured that the Ombudsman was satisfied with the remedy offered and it is promising that this remedy was deemed sufficient to resolve any injustice without the Ombudsman needing to make any further recommendations.
- Non-financial remedies involving:
 - A meeting with the client to outline support
 - Development of a new support plan
 - A fresh financial assessment
 - A new OT assessment
- In their 2019/20 Annual Report the Ombudsman has singled out the Council's Adult Care Services for failing to respond in time to 4 Adult Care Services cases between May and August 2019. Although time extensions were agreed the Ombudsman's office still needed to chase a response on each of the cases. The Ombudsman has advised that the Council should ensure it clearly communicates deadlines to internal departments providing enquiry information and that, where extensions may be required, it requests them before deadlines pass and responds without the Ombudsman needing to chase further.

The Ombudsman also highlighted that remedies were not completed within timescales. This related to one case under ASC which concerned the provision of a package of care. This was for a client and his family who are well-known to the service for repeated complaints and cancelling support or carers. Whilst the service tried to meet the Ombudsman's recommendation this case was closed as 'remedy complete, but not satisfied' due to the service finding it very difficult to secure support from providers either available in the area, or willing to engage with the family.

The Authority remains committed to ensuring that the complaints process continues to develop and remains open, transparent and accessible to those who need to use it.

2.9 Point and Method of Receipt of Complaints

The Customer Relations Team has recorded both the 'point of receipt' and 'method of receipt' of complaints into the Council. This intelligence can help support service improvement decisions.

Table 6 shows that the established systems for ensuring that complaints are directed to the Customer Relations Team for initial assessment are working well, with those sent into the service re-directed to the Customer Relations Team.

Table 7 shows a continued preference by customers in contacting the Council using the on-line complaint form. This bodes well for the future implementation of online complaint reporting via Firmstep.

Table 6

Point of receipt	2019-20	2018-19	2017-18
Service Area	7	5	10
Customer Relations Team	23	23	28
Director/Head of Service	2	1	0
Chief Executive	0	1	0
Other	3	0	1
Total	35	30	39

Table 7

Method of receipt	2019-20	2018-19	2017-18
Letter	2	6	9
Telephone/verbal	1	4	4
Email	22	12	21
Online complaints	9	6	4
Feedback Form	1	2	1
Total	35	30	39

3.0 COMPLIMENTS RECEIVED

There has been a decrease in the number of compliments recorded in this year's reporting. This is an area that both the Customer Relations Team and the service will include as part of the current review that is taking place, referred to in point 6 below.

Table 8

Year	2019-20	2018-19	2017-2018
No. of Compliments	93	136	310

A selection of compliments recorded is included below as examples:

Community Access/Review Team:

I have just taken a call from xxxxxx, he wanted to speak to xxxx to thank her for all that she has done.

He told me that she has been kind, and understanding, he felt as though he was very important, and she really took an interest in what he needed. He said she took the time to discuss all of his life, and didn't focus just on the fact he may need a stair lift. He is very grateful for all she has done, and really wanted to take the time to thank her, and thank all of us for what we do. He said we have a very good team, and are doing a great job.

Learning Disability Team

Thank you for going above and beyond it was appreciated.

Chester and Rural Patch Team

Thank you so much for taking the time to talk with me and helping me with any concerns and for your help and support over the past 12 months. You arranged a Social Worker who came to see me quickly who was wonderful. She listened and wrote everything down without rushing to leave me feeling so much better. I am very grateful for that so thank you very much.

Hospital Team

Hi xxx

Thanks for this email and the helpful info.

Thank you for all the help you have given to xxx and I over the last 4 weeks. I was really pleased to meet you and everything you have done for xxx has been obviously done with her care and best interest in mind.

For that we are both really grateful; we knew xxxx wasn't just a number to you as you treated her so wonderfully throughout.

The constant updates and information you provided to us also both made things so much easier for us to follow.

Thank you xxx

Community Access Team

In recent months we have received a great deal of help from xxxx. She has shown compassion & understanding over the months and has always been very proactive in dealing with any concerns we may have had. My mother is now happily settled in xxxx Care Home & it is due to xxxx efficiency & professionalism. She is an absolute credit to your organisation & we cannot praise her enough. We wanted to let you know as her Manager of how very pleased we were with everything as she made a very difficult time bearable. I'm sure that your Service receives a fair amount of negative reaction so we felt it important to pass on our very positive reaction.

Ellesmere Port Patch Team

I can't thank you enough for all your help with sorting out xxxx. xxx I knew as soon as I spoke to you we were on the right track. You always returned emails and call within a few hours (and there were a few lol) So a great big thankyou from all of us you have been a godsend.

3.1 Compliments by Service Area

Table 9

Service Area	Number of Compliments Received		
	2019-20	2018-19	2017-18
Northwich & Winsford Patch Team	3	2	18

Service Area	Number of Compliments Received		
Chester, E. Port & Rural Patch Team	6	15	9
Learning Disability Team	1	0	10
Occupational Therapy	1	1	0
Advice and Contact Team	3	3	3
Reablement and Provider Services	9	0	0
Community Mental Health	0	3	0
Emergency Duty Team	0	0	0
Hospitals Social Work Teams	6	11	3
Safeguarding Team	1	0	2
Review Team *	2	n/a	n/a
Client Finance	0	0	1
Commissioned Provider Services	61	101	264
Total	93	136	310

* This is a newly formed team hence there is no comparable data from previous years.

4.0 PROFILE/CATEGORY OF COMPLAINANTS

A summary of customer profile and type of customer interaction has shown the following:

Table 10

Person making the complaint	2019-20	2018-19	2017-18
Care recipient	11	9	11
Parent/s	2	3	5
Grandchild	0	0	0
Husband / Wife	0	1	3
Sibling	2	2	2
Executor	0	0	0
Son / Daughter	16	12	16
Advocacy service	4	2	1
Friend	0	0	1
Unknown (did not identify)	0	1	0
Total	35	30	39

Advocacy services have been promoted in teams and, as in the previous year, we continue to see increasingly complex cases requiring advocate involvement particularly in older people's services.

5.0 LEARNING AND SERVICE IMPROVEMENT

The Council has identified areas and opportunities from which learning can be taken from the complaints and the compliments process and used to improve future service delivery.

5.1 Learning from Complaints Cases

There have been a number of valuable learning points from complaints cases which have led to practice service improvements, and the following examples highlight the changes made:

- *Response times*: This is an action from last year but we are still having difficulties in meeting our agreed local response times. Whilst it is not a requirement within the complaint process the Customer Relations team had encouraged the service to conduct 'triage calls' within 5 days to try and effect an early resolution to complaints which has had some limited impact. The Customer Relations Team will continue to promote this through ASC complaint training in 2020/21 as well as work with the service to achieve more timely responses, even if that means accepting that the target SLA in service is extended from 20 days to 40 days. This should not be viewed as a 'backward step' rather an acceptance that ASC complaints are generally more complex to investigate and resolve. An extension to 40 days is still within the statutory timeframe of 6 months and will manage customer expectations more easily. It is also in line with the Council's corporate complaints policy, which allows an extension of up to 40 days for complex cases, and even beyond this if required. This can be managed through effective communication with the customer to manage their expectations and ensure a thorough review of their concerns.
- Transition to ASC – a continued need for a supported approach to transition
- *Community Services*: To increase awareness of community services, they will be discussed during team meetings (including any new services) and individually with practitioners as to the process for arranging transport when exploring community services. An information pack will also be created This information will then be relayed to individuals and their families so they can be supported to make an informed choice.
- *Commissioning*: CWaC have recently commissioned a new brokerage service which offers comprehensive support planning and independent advice about available care. All staff have been reminded to support service users to access an independent brokerage service.

5.2 Service Improvements and working with partners

There have been several notable service improvements and examples of partnership working during 2019/20 to design service delivery:

- West Cheshire offer was in progress: The adult social care transformation programme. Phase 1 was launched in 2018-19, seeing a new model for our Community Access Team, a brand-new review team. Work commenced on Phase 2, to include Hospital Teams, Reablement and Social Work and Occupational Therapy Teams. This went live in 2019. Social care staff are promoting a strengths and asset based style of working with people; focussing on a person's strengths rather than just their needs.

5.3 Policy and Procedure

- A new Transition policy and procedure has been approved and became operational in 2019/20. The aim of the policy is to improve the support available to young people with mental health problems and additional risks and needs.

5.3 Communication

- Adult Social Care and the Customer Relations Team work closely together and share relevant information to progress complaints and keep the customer informed of progress and anticipated completion date. This ensures that complainants have confidence in the process and receive a meaningful response
- The recent Ombudsman report suggests that there is still some work to do on establishing more efficient processes to ensure timely responses. The planned review in 2020/21 (see 6.0) will address this.
- Compliments and complaints learning points are discussed in teams and team meetings, as well as with the individuals in their supervision meetings.

5.4 Professional Practice

- The Authority takes seriously the range of professionals it employs and who are required to register with professional bodies as part of their fitness to practice. It requires Social Workers to develop evidence which is submitted to the Health and Care Professions Council (HCPC) as part of an annual registration process.
- Internally, employee supervision ensures that Council officers are meeting the requirements of these professional bodies through performance management.

5.5 Personal Development

- Through supervision sessions and the Council's performance management framework, Social Workers and other ASC officers are required to demonstrate continuous improvement in practice including reflecting on feedback which would include both complaints and compliments.
- During the Covid 19 pandemic the service had to change and adapt the way in which it worked at pace. Quickly adapting to working from home, achieving a balance between virtual and face to face working and implemented a new hospital discharge model. We issued new Practice Guidance and amended policies and procedures as required. The service made daily/weekly calls to those people who cancelled care due to concerns about people going into their homes. We looked at alternative types of support where possible. The 'live well Cheshire West' site was updated to provide information and support to adults at risk. The service adapted the way in which we communicated with service users and their families, some of the compliments received reflect the positive response we have had from families and people we support in maintaining services and contact.

6.0 FUTURE PLANS FOR COMPLAINT HANDLING

6.1 ICT: Last year's report confirmed that a new Complaint Management system had been commissioned. This was delayed for social care whilst the corporate complaint system was embedded. It was then intended to be developed and tested

in 2019/20 to support the requirements of the Social Care and Customer Relations teams. It was expected to improve efficiency and data recording, with an enhanced reporting facility, and planned to become operational from April 2020.

Plans for this were on track in early February/March 2020 but the impact of responding to the pandemic shelved these. Whilst this report focuses on 2019/20 data, it should be noted that the ICT plans will be scheduled for review in 2020/21 as part of the recovery and return to 'business as usual' following the pandemic.

As part of considering new ways of working in social care, the system is planned to be part of a wider review of complaints handling in the service and Customer Relations team which will include a review of policy, processes, roles and responsibilities. It will also refresh policies and processes to link into the Council's planned update of its Customer Care Policy and supporting processes.

6.2 Stats on provider complaints: currently the Customer Relations Team does not receive any figures from the contracts team with regards to complaints against providers. Provider complaints are managed through the contract management process. As we move to a model of commissioning which expects strong performance management processes in place we need greater oversight of complaint management and customer satisfaction within specific elements of our commissioned portfolio. The Customer Relations team will work with the service to identify those specific contracts that we require this increased overview of, undertake some process mapping to determine the existing and recommended flow of information, review the contractual agreements and identify areas of improvement in relation to complaints and make proposal which will enable provider complaint data to be shared at a service level across the health and wellbeing directorate.

End report