



## **Cheshire West and Chester Council**

Adult Social Care Complaints and Compliments

Annual Report  
2016 – 2017

## **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 2016 to 31 March 2017. It highlights performance against statutory 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, part of the Customer Relations and Information Service within the Governance Directorate, was responsible for the coordination of compliments and complaints during this period.

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 achieved as a result of complaints and compliments

## **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 10,738 customers received service from Adult's Social Care teams. 61 formal complaints were handled representing less than 1% 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 Social Services and National Health Service Complaints (England) Regulations 2009, require the local authority to have a procedure for resolving complaints received by, or on behalf of, adult service users.

In accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 new procedures for handling complaints came into effect on 1 April 2009. These new arrangements are described in the following sections.

### **1.2 Role of the Customer Relations Team**

The Customer Relations Team (previously the Solutions Team), act as a central point through which complaints can be made to the Council without the need to refer directly to the service. 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 by the Service are referred to the Customer Relations Team to be processed.

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 (safeguarding for example) 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 Ombudsman.

The Team's final role is to coordinate the completion of Learning Action Reports which allow the learning and improvements identified through responding to complaints to be recorded centrally and monitored to ensure implementation of identified, agreed actions in order to improve service delivery.

### **1.3 What is a Complaint?**

A complaint is an expression of dissatisfaction or disquiet with the service that requires 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, as long as 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 Ombudsman.

Complaints are provisionally assessed to identify any potential safeguarding risks or concerns. Where safeguarding issues are identified, matters are redirected to be considered under the appropriate safeguarding procedures. Where there are no safeguarding concerns complaints are referred via the Customer Relations Team to a Senior Manager to be considered through the social care complaints procedure. On occasion complaints are also referred through the 'corporate complaints' procedure, as appropriate.

### **1.6 Informal Complaints**

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

### **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 also the availability of 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 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 6 months unless exceptional circumstances prevent it and an alternative deadline is agreed. It is intended that as far as possible complaints should be resolved by a single response although due consideration will be given to any request from a complainant to consider further the outcome of any complaint.

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

## 1.8 Safeguarding

The Customer Relations Team liaise 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 in light of any safeguarding concerns. When Safeguarding thresholds are met, the contact will be dealt with via a Safeguarding investigation, rather than through the formal complaint process.

## 2.0 PERFORMANCE ACTIVITY 2016/17

### 2.1 Summary of Complaint Activity

A total of 136 representations were received during the course of the year. Of these 61 **formal complaints** were progressed and responded to, with 1 case still open as at 11.8.2017

Of the remaining representations:

- 34 were treated as a 'request for service' (this is when someone contacts us for the first time to make a request for something that would not be considered a complaint)
- 6 cases were declined as ineligible under the policy (the customer is sent a response explaining why they cannot complain)
- 7 did not proceed as they were withdrawn by the complainant, usually because the service has resolved the issue to the customers satisfaction without the need to progress a formal complaint
- 28 complaints were actioned under an alternate route (this could be under the Council's corporate complaint process, or via the NHS or a Provider's own complaint process)

### 2.2 Comparison with Previous Years

The table below shows the number of representations and progressed complaints for 2016/17 compared with the previous three 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
2016-17	61	34	7	34	136
2015-16	75	8	7	11	101
2014-15	68	1	13	19	101
2013-14	72	1	8	6	87

*\*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 a decrease of 19% in the number of formal complaints investigated by the Council compared to the previous year, although the total number of representations considered increased by 35%.

### 2.3 Number of Complaints - Observations

Despite an increase in contact from would be complainants, the Customer Relations Team has focussed on the initial triage of complaints identifying opportunity for and promoting early resolution of issues raised. This has resulted in a reduction in the number of complaints entering the formal complaint process.

Customer satisfaction is monitored by the Customer Relations Team to ensure that each complainant is satisfied with the resolution of their issues at an early stage.

The increase in the number of would be complainants could be a function of a number of changes within Adults Social Care, however the service can identify no particular reason and will monitor more closely in 2017-18 to help identify root cause of the increase. Despite the increase teams have focussed on and are more proactive in dealing with complaints quickly which can account for the higher number of presentations being resolved at an early stage, thereby avoiding becoming a formal complaint.

### 2.4 Complaint Outcomes

Table 2 shows the outcomes of the complaints investigated. 21% of formal complaints were classified as upheld; 36% as not upheld and 41% as partially upheld. This represents a slight increase in the number of complaints that were not upheld compared with the previous year.

Due to the relatively low number of complaints, these variations cannot be considered indicative of a trend. However, given that complaint investigations are conducted internally, the results continue to offer confidence that the outcomes from complaint investigations remain balanced and objective.

**Table 2 - Outcomes and comparisons with previous years**

Year	Upheld	Partially upheld	Not upheld	Outstanding	Total
<b>2016-17</b>	<b>13(21%)</b>	<b>25(41%)</b>	<b>22(36%)</b>	<b>1(2%)</b>	<b>61</b>
2015-16	19 (25%)	34 (46%)	21 (28%)	1 (1%)	75
2014-15	15 (22%)	25 (37%)	28 (41%)	0 (0%)	68
2013-14	18 (25%)	23 (32%)	31 (43%)	0 (0%)	72

As a result of closer integrated working some complaints contain elements requiring responses from health colleagues to complete a joint response to 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 have an effect on 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**

Service Area	Customer Numbers by Area***	Numbers of Complaints Per Year			
		2016-17	2015-16	2014-15	2013-14
<b>Prevention and Wellbeing</b>					
Northwich & Winsford Patch Team*	1,195	13	11		
Winsford Patch Team		0	0	6	8
Northwich Patch Team		0	0	8	3
Chester, Ellesmere Port & Rural Patch Team*	2,564	22	22		
Chester & Ellesmere Port Patch Team		0	0	14	19
Rural Patch Team		0	0	2	0
Learning Disability Team	977	8	4	10	1
Occupational Therapy	3,768	5	4	1	3
Advice and Contact Team	30	0	0	0	0
Intermediate Care	113	0	0	0	0
Community Mental Health	423	1	4	2	7
Emergency Duty Team		0	0	0	1
West Hospitals Social Work Team	628	5	8	9	3
Safeguarding Team**	n/a	0	3	0	2
<b>Client Finance</b>	<b>n/a</b>	<b>3</b>	<b>7</b>	<b>7</b>	<b>15</b>
<b>Provider Services</b>	<b>n/a</b>	<b>4</b>	<b>12</b>	<b>9</b>	<b>10</b>
<b>Total</b>	<b>9,698</b>	<b>61</b>	<b>75</b>	<b>68</b>	<b>72</b>

\*combined teams for 2015/16

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

\*\*\* figures provided by ASC Performance Team

Complaints made to the two area teams have remained stable when compared to last year, with the higher number of complaints for the Chester, Ellesmere Port and Rural patch reflecting the higher population in this area.

The reduction in Provider complaints is partially related to the focus on ensuring that Providers are asked to deal directly with complaints in the first instance using their own complaint procedures, although the Council will respond if 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.

The higher number of complaints across Older People's services although small, is due to delays in provision of care. Focussed work with our independent sector

partners has improved responses, and extensive work with commissioned services has meant improvements in type and geographical availability of provision of care in the community, and changes made include revised processes and improved direct communication with customers.

The increase in complaints in respect of learning disability services, although small, is likely to be related to more carer concerns over the charging policy and how Disability Related Expenditure (DRE) is calculated. Although there are national guidelines over how to calculate DRE, it involves the exercise of judgment, this can be a source of dissatisfaction on the part of carers in particular. All complaints about DRE are in relation to adults of working age, with none being logged from older people. Client finance only received 3 complaints but this may be because the complaint is made to the social work team and can be linked to other issues. Complaints in mental health are usually dealt with by CWP.

The use of a new fact sheet in relation to safeguarding which is now issued at the start of the adult safeguarding process that outlines what we can and can't do is thought to have reduced the number of complaints in relation to the Safeguarding process (Safeguarding issues themselves are dealt with outside of the complaint process as there is a separate requirement to investigate); previously we have had complaints from people who thought we could do more or something differently and this led to confusion and complaint. The fact sheet has helped to clarify the system.

## 2.6 Complaints by Subject

By their nature, complaints are 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 on the basis of the 'primary' area of concern (subject) raised by the complainant.

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

**Table 4**

<b>Complaint Subject</b> (primary area of concern)	<b>2016-17</b>	2015-16	2014-15	2013-14
<b>Standard / Quality / Appropriateness of Service</b>	<b>37</b>	37	32	44
<i>Under provision of service</i>	2	0	2	6
<i>Appropriateness of service</i>	1	0	1	2
<i>Issues with Provider</i>	5	8		
<i>Inaccuracies in assessments</i>	3	4		
<i>Lack of support</i>	17	14		
<i>Standard of care</i>	9	11		
<b>Social Worker</b>	<b>4</b>	11	14	14
Communication	<b>3</b>	7	6	3
Financial / Cost Issues	<b>17</b>	17	13	3
Safeguarding	<b>0</b>	3	0	0
<b>Total</b>	<b>61</b>	75	68	72



The majority of complaints relate to the general 'quality of service' that people have received. This has been a recurring theme throughout previous annual reports.

The pattern of complaints largely reflects the stresses and strains within the provider market. As a consequence 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. For 2017/18 the Council has requested the sector to be more explicit about when a top-up can be legitimately requested, holding them to the agreed rate when this cannot be evidenced. The Council's approach to setting up direct payments in 2017/18 will be made more explicit. A lack of clear guidance to service users and carers has led in some instances to complaints when people have come into debt by not realising that they are required to top up their direct payment with their own financial contribution.

## 2.7 Complaint Response Times

In line with the current legislation there is only one stage to the Adult Social Care and Health complaints procedure. There is a requirement for complaints to be resolved within 129 working days (6 months) of the complaint having been made, with a locally set policy of 20 working days for providing complaint responses. This is the timescale which is advertised to complainants.

The Customer Relations team would recommend a change to the local policy to increase the accepted complaint response time to 40 days. This would seem a more realistic and deliverable target for the majority of complaints and the change would help to manage customer expectations, the service have agreed this change.

In 2016/17 the average time for resolving a complaint was 29 working days.

The table below shows a breakdown of response times in working days of the 60 closed cases. The complaint case that took the longest to conclude was 71 days. All cases were concluded within the statutory 6 month timeframe.

**Table 5**

<b>No. of Working Days</b>	<b>2016-17</b>	<b>2015-16</b>	<b>2014-15</b>	<b>2013-14</b>
20 working days or less	<b>27</b>	27	33	48
40 working days or less	<b>15</b>	30	28	20
60 working days or less	<b>13</b>	9	5	4
80 working days or less	<b>5</b>	3	1	0
100 working days or less	<b>0</b>	4	0	0
Over 100 working days	<b>0</b>	1	1	0
<b>Total</b>	<b>60</b>	<b>74*</b>	<b>68</b>	<b>72</b>

The response times within 20 working days represents steady performance compared to the previous year. In 2015/16, 36% of complaints were responded to within 20 working days or less. In 2016/17 this increased to 44% which is an improvement, however this remains an area to focus on for the service to ensure timely responses.

Where complaint responses go over 20 days, the service endeavours to ensure the customer is informed of the delay in advance, providing an explanation for the additional time required.

## 2.8 Benchmarking of Complaints Received

During 2015-16, Members requested that benchmarking or comparative information should be included in future reports where available.

Consequently, a request was sent to number of 'statistical neighbour' authorities with a view to sharing information on the number and rate of complaints received by service user population.

To date the response is limited and the table below contains responses from only 3 other authorities at this stage, of which only 1 provided service user numbers to allow a useful comparison to be made of performance.

**Table 6: Benchmarking: Numbers of Complaints and Rates by Other Local Authorities/Statistical Neighbours, 2016-17**

Local Authority	Number of Complaints	Number of Service Users	Total of complaints as a %age of service user	Rate of complaint per 1000 service users
Cheshire West and Chester	61	10,738	0.56%	5.5
Stockport	146			
Worcestershire	177			
Cheshire East	94	8516	1.10%	11

## 2.9 Local Government and Social Care Ombudsman (LGO)

The number of cases referred to the LGO during this reporting period was:

Number of ASCH complaints referred to the LGO in 2016/2017	9
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There were only 2 cases referred in 2015/16, this has increased to 9 in 2016-17.

Of the 9 cases referred to the LGO that the Council was notified of, 1 decision remains pending, 1 the LGO would not investigate as out of jurisdiction, 1 was closed after initial enquiry, 1 was assessed as a 'premature referral' at assessment stage and referred back to the Council's complaint process, 1 was not upheld, and 4 were upheld for 'maladministration and injustice'.

The LGO Annual Review Letter for 2016-17 highlights 18 cases were referred to them in relation to Adult Social Care. The difference can be explained by the fact that the LGO report on a different calendar basis to us (i.e when they make a decision rather than when a complaint is received), and in addition do not necessarily inform us of cases where they refer the customer to come back to us for local resolution. This would usually be when the customer has approached the LGO before attempting to access the Council's own complaint process.

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.

## 2.10 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 co-ordination are working well, with those sent into the service re-directed to the Customer Relations Team. While Table 7 shows an increase in preference of customers for contacting us using the on-line complaint form.

**Table 6**

Point of receipt	2016-17	2015-16	2014-15	2013-14
Service Area	24	22		
Customer Relations Team	33	49		
Director	1	3		
Chief Executive	3	0		
Other	0	1		
<b>Total</b>	<b>61</b>	<b>75</b>	<b>68</b>	<b>72</b>

**Table 7**

Method of receipt	2016-17	2015-16	2014-15	2013-14
Letter	26	31		
Telephone/verbal	13	15		
Email	16	29		
Online complaints	6	0		
<b>Total</b>	<b>61</b>	<b>75</b>		

### 3.0 COMPLIMENTS RECEIVED

The service recorded a total of 301 compliments during the year, which represents a 9% increase on the previous year's figures of 275.

**Table 8**

Year	2016-17	2015-2016	2014-15	2013-14
No. of Compliments	301	275	136	241

Positive compliments recorded include:

**N&W Social Work Team** - Letter received from service user.

*“Just a note to thank you for all that you have done for me and mum during what was one of the most distressing times of my life. The kindness shown is always very much appreciated and your professional understanding was unexpected but nonetheless welcome. The personal face of a large organisation. Thank you so much.”*

**West Hospital Team** - Letter to Social Worker

*“Thank you so much for your invaluable input shown towards XXXXXX. I cannot express my true feelings of gratitude but would like to say that the promptness with which everything was done, has almost worked a miracle. Each contact I have made to the team in the Hospital has been a joy. The team has pulled together to create a real difference in XXXXXX life. Your cheerful and helpful attitude shone like a beacon. Thank you so much.”*

**Gateway Team Ellesmere Port** -

*“Many thanks for your recent visit and for your help and assistance in providing useful information and contacts to make my parents' lives a little easier. They have already attended two sing along sessions at the Salvation Army hall in Ellesmere Port, which they enjoyed. Following your contact with Age UK we are arranging for a home care agency to visit 3 times a week. Yesterday a gardener, whose name was on the list you provided, started work on my parent's garden. Next Friday we have arranged for someone from Age UK to visit us to complete application forms to apply for enhanced Attendance Allowance. My mother has also been in contact with the transport organisations you provided and hopefully they will be able to get out a little more with their assistance. We have yet to contact the Cheshire Carers Centre for the carer's personal budget, carer's essentials fund and a carer's emergency card. But considering we are at the same time also now obtaining quotations for replacing the bath with a shower, it will take a little time to fully implement all the recommendations you have made. All these things would not have been possible without your initial visit and guidance. Many thanks once again.”*

**Occupational Therapy Team** - Thank you Card received from service user.

*“An enormous belated thank you for all the help you have given me. The XXXX, XXXX, XXXX and XXXXX have made my life so much easier so I just wanted to let you know how much it means to me so thank you, thank you so very much.”*

### **Chester Ellesmere Port & Rural Patch Team –**

*“Also just a little feedback for yourself from our meetings and subsequent phone conversations XXXXXX and I have been very impressed and we feel a lot less stressed about the situation having witnessed your calm, controlled and professional manner in addressing what is best for Mum. XXXXXX and I spoke last night and XXXXXX is also very impressed with your handling and approach.”*

### **Learning Disability Team –**

*“I am thankful that I am able to be open with you and appreciate your support for us. “*

Compliments and complaints learning points are discussed in teams and team meetings, as well as with the individuals in their supervision meetings.

## **3.1 Compliments by Service Area**

**Table 9**

Service Area	Number of Compliments Received			
	2016-17	2015-16	2014-15	2013-14
<b>Prevention and Wellbeing</b>				
Northwich & Winsford Patch Team*	14	21		
Chester, Ellesmere & Rural Port Patch Team*	6	10		
Learning Disability Team	25	28		
Occupational Therapy	6	15		
Advice and Contact Team	0	0		
Intermediate Care	0	0		
Community Mental Health	0	0		
Emergency Duty Team	0	2		
West Hospitals Social Work Team	13	6		
Safeguarding Team**	0	1		
<b>Client Finance</b>	0	1		
<b>Provider Services</b>	224	191		
<b>Total</b>	<b>301</b>	<b>275</b>	<b>136</b>	<b>241</b>

\*Data not reported by service prior to 2015-16

## **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	2016-2017	2015-16	2014-15*	2013-14*
Care recipient	15	14		
Parent/s	6	2		
Grandchild	0	2		
Husband / Wife	5	8		
Sibling	3	4		

Executor	1	1		
Son / Daughter	27	39		
Advocacy service	4	5		
<b>Total</b>	<b>61</b>	<b>75</b>		

*\*Data not recorded prior to 2015-16*

Advocacy services have been promoted in teams and we are seeing 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 learning points from complaints cases which have led to service improvements, and the following examples highlight the changes made to improve services as a result of receiving complaint:

**Provider Services** – A complaint expressing dissatisfaction with a stay in hospital and lack of care package led to the Council improving communication and adopting a more flexible approach to prescribed times (requesting time slots rather than specific times) for all care and purchase of care rounds of care from contracted Providers in order to free up re-ablement services.

**Chester, Ellesmere Port and Rural Patch Team** - A Complaint was received about a decision to refuse to pay a domiciliary care provider to keep care available while a service user was in respite. This meant that the service user's family went on holiday and placed the service user in respite but when they returned the care was no longer available. There was no contractual arrangement to insist that it was and at the time the decision was made not to pay the provider. We have since agreed that we will pay providers to ensure care is available after respite periods. We have also highlighted the issue around respite so that arrangements for care availability can be included in any new domiciliary care contract.

**Adult Learning Disabilities Team** - A complaint was received expressing dissatisfaction with the Council which delayed responding to issues raised and failed to take account of disability in the way it responded to the complaint. The Council apologised for the delay in responding to the complaint and has reviewed and updated its complaints procedures and guidance to ensure it considers what, if any, reasonable adjustments are required when dealing with complaints.

**West Hospital Teams, Gateway and Intermediate Care** – A customer was unhappy with their recent adult social care experience, as a result a comprehensive directory of carer support services has been produced and our Carers lead officer has been in direct contact with the carer concerned.

**Community Mental Health Team** - Respite care was agreed for father, when son drove him to care home on the morning due to start they received a phone call from Social Care to say the placement had not been authorised. No other care had been sourced. The poor service left the mother (primary carer) extremely distressed and the family not receiving support they needed. The service has considered ways of improving the assessment process with regard to referrals - where there is doubt about a facility's ability to meet the needs of the customer a process for further assessment may be offered before the offer of a placement is made.

## **5.2 Policy and Procedure**

During 2015-16 the Customer Relations Team has updated and re-written the Policy and Procedure documentation supporting the Adults Social Care Complaint Process. A Toolkit has also been developed to support Managers in responding to complaints. These updates are currently submitted for approval will be rolled out during complaints training sessions, planned for Quarter 3, 2017-2018.

## **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. Improved internal communications and appropriate peer review will ensure that complaints are answered in full with a satisfactory remedy. The aim is to reduce the number of complaints escalated to the LGO, and those that are should be closed after initial enquiries as the cases have no grounds for further investigation.

To ensure teams learn from issues raised team managers include updates in staff briefings, conferences and individual supervision of investigation outcomes of complaints issues raised. This process highlights both negative and positive comments which assist with service improvement transfer into practice.

## **5.4 Care 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.

## **5.6 Working with Partners**

During 2016-17 the Customer Relations Team focussed on triaging complaints to ensure that where a complaint was in relation to a Provider service, those services were required to respond directly to the complainant in the first instance.

This methodology appears to be working in that the number of Provider related complaints directly dealt with by the Council during 2016-17 has reduced (from 12 to 4). As customers are advised to return their complaint to the council if they remain dissatisfied with the direct Provider response they receive, this suggests that providers are dealing effectively with complaints raised with them by service users.

In 2016-17 the Customer Relations Team is undertaking further work with a focus on Provider complaints with the intention of being able to report figures for Provider complaints back to the service. There is an expectation that all Providers have a formal complaint process in place.

## **6.0 FUTURE PLANS FOR COMPLAINT HANDLING**

During 2017-18 the Customer Relations Team plan to progress the following with regard to complaint management:

- Review and update of both the Intranet and Internet to ensure complaint information and guidance for staff and customers is up to date and reflects current processes.
- Roll out of an Adult Social Care Complaint Toolkit to provide detailed guidance and support to staff about the complaint process, includes process and templates.
- Approval of the updated ASC Complaint Policy, and publication of that Policy and associated Equality and Diversity Questionnaire.
- Delivery of Complaint Training to ASC staff.
- Improve recording and reporting in relation to capturing information around Provider Service Complaints.
- Investigate, commission and develop a new Complaint Management System with a view to implementation of the system from 2018-19.

End report