

**REPORT TO:** Health Policy & Performance Board

**DATE:** 9<sup>th</sup> November 2010

**REPORTING OFFICER:** Strategic Director Adults & Community

**SUBJECT:** Customer Care end of year report for  
Adult Social Care.  
Comments, Compliments and Complaints  
1 April 2009 – 31 March 2010

**WARDS:** All

## **1.0 PURPOSE OF THE REPORT**

1.1 To report and provide an analysis on complaints processed under the statutory Social Services Complaints Procedure for Adults during 2009/10.

## **2.0 RECOMMENDATION:**

(1) That the report be accepted

## **3.0 SUPPORTING INFORMATION**

### **Context**

3.1 The aims of the Social Care complaints procedures is that people have their complaints resolved swiftly, and wherever possible by the people who provide the service.

### **3.2 New Complaint Process for 2009/10**

From 1 April 2009 a new Department of Health complaints process was introduced for dealing with complaints within both Health and Social Care services.

3.2.1 Emphasis is placed on getting the response to a complaint right first time by; understanding the complaint, selecting the most appropriate method of investigation and response, setting out a plan of how to respond to the complaint and keeping the complainant informed throughout.

3.2.2 The new complaint process is working well and under the new system there has been a reduction in the number of complaints moving to formal independent investigations from 5 down to 3.

3.2.3 The greater emphasis on “management” as opposed to administration of the complaints process has also led to positive findings and complimentary comments from the Ombudsman’s office about cases subsequently referred to them.

3.2.4 The new procedures replaced the old process that had 3 separate stages:

- Stage 1 early resolution with initial informal investigation
- Stage 2 formal investigation
- Stage 3 Review Panel – examination and re-evaluation of the Stage 2 investigation where the complainant remains dissatisfied.

### 3.3 New Complaint Procedures for 2009/10

3.3.1 The new complaints process effectively removed the old Stage 3 Review Panel stage, although procedures are flexible enough to use whatever is most appropriate for individual cases.

3.3.2 The initial aim is always to resolve the problem as quickly as possible (within a timescale agreed with the complainant). Other ways of resolving the complaint, for example through mediation where appropriate, is considered.

3.3.3 Mediation has been employed as a successful alternative to the more formal investigation (as in Stage 2 of the old procedures), although these are still used where appropriate.

3.3.4 If people remain unhappy with the response to their complaint they retain the right for it to be referred to the Ombudsman.

### 3.4.0 Complaints Closed in the year

3.4.1 The table below shows the number of complaints closed over previous years. 46 statutory complaints were closed during 2009/10. This is 9 fewer complaints than last year.

ITEM	2006/07	2007/08	2008/09	2009/10
No of Stage 1 complaints closed	63	68	55	46
% of complaints completed within 20 days	65%	76%	73%	80%
Complaints proceeding to formal investigation (Stage 2 Independent Investigation)	2	0	5	3
Complaints proceeding to Stage 3 (Review Board)	1	1	1	No longer applicable
Ombudsman Enquiries	0	1	2	2

### **3.50 Complaints, Comments and Compliments – Using data to improving the process**

3.5.1 Analysis of the complaints and comments we receive enables us to reflect on the lessons that can be learned, and to inform the development of services we provide and commission.

3.5.2 Comments, compliments and complaints provide essential information to help shape and develop services. They complement the wide range of consultation exercises that the Directorate undertakes (including postal and telephone surveys, open forums, consultation days, participation in service developments and representation of users and carers on strategic boards).

3.5.3 During the last year, the following improvements have been made to help improve complaint handling:

- the complaints database has been expanded and improved to make it easier to monitor, analyse and produce reports on complaints for adult social care.
- Quarterly reports are issued to each Divisional Manager to allow them to have an overview of the number and kind of complaints their services are receiving.
- Partnership working with colleagues in local health trusts in the development of joint complaint handling protocols.

### **3.60 What have we learned from complaints and changed as a result?**

3.61 Whilst complaints have resulted in changes for individuals, collectively we can use this information to help us improve the services we provide or commission. Examples of improvements made as a result of complaints in the last year include:

- Agreement to pay forms have been introduced to help people to understand that there will be a charge for the services they receive and how those charges will be assessed.
- Changes in various policies and procedures to prompt appropriate action and information sharing with service users and their families such as:
  - Operational staff have been made aware of the importance of clearly explaining the charging policy for adult social care services to service users and their families, to prevent confusion about charging policy. This will also be covered at induction for all new staff.
  - Appointments monitored and system in place for notifying clients of unavoidable visit cancellations.

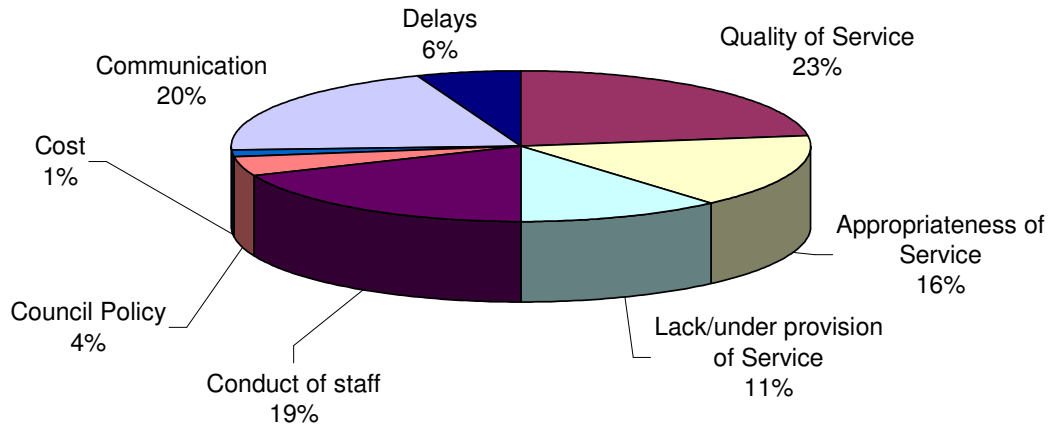
- New procedures have been agreed with colleagues in Health to improve the process around discharge from hospital and prevent unnecessary delays.
- A comments book has been introduced at the restaurant at Dorset Gardens to enable people to offer their thoughts and suggestions about the food served.
- Close cooperation between the Contracts Team and Operational Teams to resolve complaints concerning independent providers that have been commissioned to provide care services.
- Complaints have helped to the creation of an integrated Halton Home Improvement & Independent Living Services. The team's partnership working with local Registered Social Landlords has been strengthened, to fund disability adaptations to properties. A register of suitably adapted properties has been created to help matched vacant properties to the needs of people who require them. Additionally, an Adaptation Liaison Officer has been appointed to improve communications with Registered Social Landlords to minimise delays and keep people informed of progress against planned timescales.

### **3.70 Types of Complaint**

3.7.1 The graph at 3.7.2 shows the reason for complaint broken down into category for the period 1 April 09 – 31 March 10.

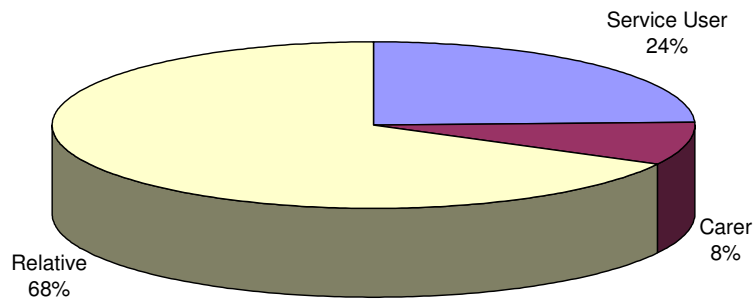
#### **3.7.2 Reason for complaint by type**

**Categories of Complaints  
2009/10**



**3.80 Category of people making complaints**

**Category of Complainant  
2009/10**

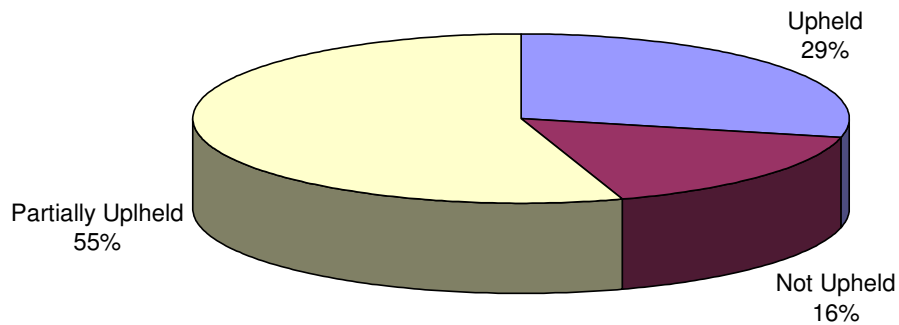


3.8.1 The high proportion of complaints being initiated by a relative or representative can be attributed to the vulnerability of individuals who access adult social care services.

**3.90 Outcome of Complaints**

3.9.1 The following graph gives an indication of the outcome of the investigation of complaints for the period 1 April 09 – 31 March 10.

### Outcome of Complaints 2009/10

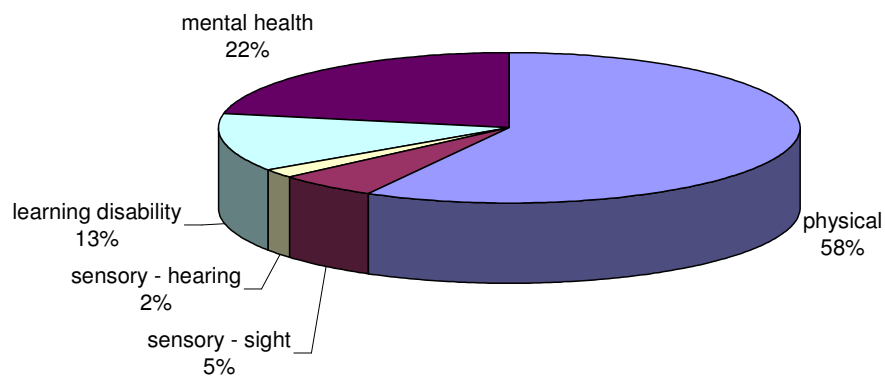


### 3.10 Monitoring Diversity

3.10.1 The graphs below give an indication of the data that is now being recorded and monitored by disability, age and gender for trend analysis:

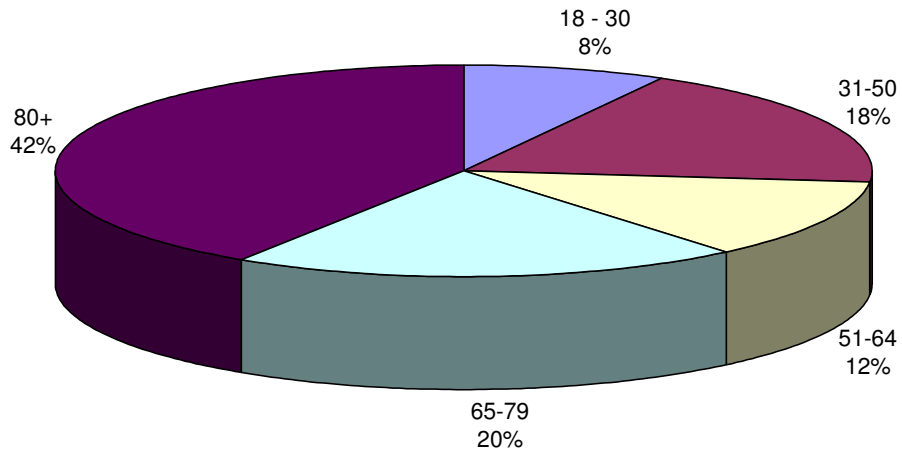
#### 3.10.2 People with Disabilities accessing the complaints process

### People with disabilities accessing the complaints process 2009/10



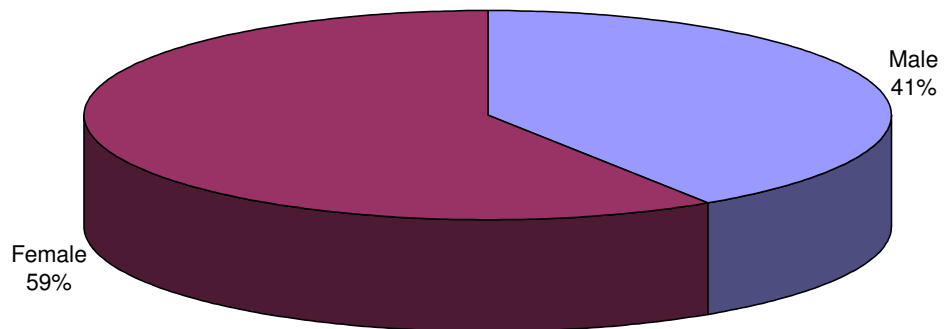
### 3.10.3 Age profile of Complainants

**Age profile of complainants  
2009/10**



### 3.10.4 Gender of Complainants

**Gender of Complainants  
2009/10**



### 3.10.5 Ethnicity

All complainants were white British.

### **3.11 COMPLIMENTS**

A total of **98** compliments were recorded between 1 April 2008 and 31 March 2009 for Health and Community Directorate. This is 10 more than last year. It is encouraging to note that the number of compliments received exceeded the number of complaints (46).

### **4.0 POLICY IMPLICATIONS**

Complaints, comments and compliments provide essential information and inform the development of Halton Borough Council services and policies.

### **5.0 OTHER IMPLICATIONS**

5.1 Improvement and quality assessment agendas increasingly consider the robustness of Complaints procedures and how they are demonstrably used to inform and drive change.

### **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Children and Young People in Halton** – Adult Social Care has a close relationship with Children and Young Peoples social care services, particularly to support young people during transition from Children and Young Peoples services to Adult Social Services and we will continue to work closely with each other on relevant complaint issues.

6.2 **Employment, Learning and Skills in Halton** – social care aims are often closely associated with these, to improve people's life chances and to be as independent as possible.

6.3 **A Healthy Halton** – another core aim in social care is to prevent or delay reliance on institutional care, enabling people to be as independent as possible.

6.4 **A Safer Halton** – adult social care has a close relationship with protection procedures for the vulnerable adults, the frail etc.

6.5 **Halton's Urban Renewal** – many social care initiatives surround housing issues, enabling people to live as independently as possible in their community.

### **7.0 RISK ANALYSIS**

7.1 A weak complaints process will fail individuals who want to use it and the organisation from learning from complaints.

### **8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 Ethnicity of complainants is monitored. To date all complainants have been from the group where they described themselves as White British.