

Complaints and Compliments **Annual Report**

1 April 2013 - 31 March 2014



Adult Social Care Customer Services

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Executive Summary

This is the fifth annual report about Customer Services: Compliments and Complaints in Adult Social Care since the joint health and social care complaints regulations came into effect on 1st April 2009.

The report provides information about compliments and complaints received during the twelve months between 1 April 2013 and 31 March 2014.

The purpose of the report is to inform customers, carers, elected members, partner agencies and staff about the work of the Complaints Service within Adult Social Care, the extent to which services are meeting our customer's expectations and the action we are taking to improve the quality of the social care services that we deliver.

The year under review has been a busy, challenging and successful one for the Complaints Service. In a year of on-going change with transformation of services, the focus has been to maintain and/or raise the standard of complaints handling by focussing on strategies that will improve the customer experience when things go wrong. The Complaints Service has been involved in a number of initiatives, including:-

- Developing further effective partnership working with our NHS Partners, commissioned providers and the voluntary sector. In view of the integration of services, Adult Social Care and Leeds Community Healthcare have developed Joint information for its patients and service users.
- Training was provided to 334 members of staff compared to 312 the previous year. The training was provided to staff in Learning Disability, Mental Health, Physical Impairment and staff within integrated teams.
- 751 compliments were recorded compared to 678 in the previous year, representing an increase of 11%. Analysis of compliments evidence how the Adult Social Care Directorate are meeting the key qualities service users expect from health and social care i.e. being offered choice, treated with dignity, respect and being heard.
- 390 complaints were recorded compared to 441 in the previous year, representing a decrease of just over 11%. There may be a correlation between the training provided to staff and the reduction in the recorded number of complaints with staff being better able to resolve concerns locally.
- Improvements in acknowledging and responding to complaints within timescales agreed with the complainant are continuing. 98% of complaints were responded to within 20 working days compared to 96% the previous year and 78% in 2011/12. During this period the Complaints Service has further improved the monitoring of timescale performance and the support offered to service managers in an effort to improve performance.
- 25 enquiries were made to the Local Government Ombudsman compared to 24 the previous year. A breakdown of the 25 enquiries is in detailed in Appendix 5 of the Report.
- Monitoring of our compliments and complaints procedure has again led to a number of actions and areas for development set out in the report.

Judith Kasolo DMS, MA
Head of Complaints

1. Purpose of Report

- 1.1 This report provides information about compliments and complaints received during the twelve months between 1 April 2013 and 31 March 2014, under the complaints and representations procedure established through the Health and Adult Social Care Complaints Regulations 2009.

2. Background

- 2.1 The Regulations place a duty on Local Authority Social Services and the National Health Service to establish and implement a procedure for dealing with complaints and representations.
- 2.2 The provision of an Annual Report is a statutory requirement, providing information on the number of compliments and complaints received, lessons learned leading to service improvements and the adequacy of the Complaints Procedure.

3. What is a complaint?

A complaint, as defined in Department of Health guidelines is:

‘An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority’s adults social services and the National Health Service provision which requires a response’.

If it is possible to resolve the matter immediately, there is no need to engage the complaints procedure.

4. Who can make a complaint?

Anyone coming into contact with Leeds City Council can make a complaint. The Corporate Complaints Procedure provides a process for all customers to use. If the complaint is about Adult Social Care, the statutory complaints procedure for Health and Social Care services must be used.

A person is eligible to make a complaint under the statutory complaints procedure where the Local Authority and the Health Service have a power or duty to provide or secure a service.

A complaint can be made by the representative of a service user who has been professionally defined (under the Mental Capacity Act 2005) as having no capacity to make decisions, as long as the representative is seen to be acting in the best interests of that service user.

Anyone can complain who is affected (or likely to be affected) by the actions, decisions or omissions of the service that is subject to a complaint.

5. The complaints procedure

The complaints procedure is a two-stage complaints system, focusing on local resolution and, if unresolved, an investigation by the Health or Local Government Ombudsman.

The aim of the 2009 Local Authority Social Services and the National Health Service complaints arrangements is to make the whole experience of making a complaint simpler, more user-friendly and more responsive to people's needs. The emphasis is to offer a more personal and flexible approach, which is effective and robust. Complaints are risk assessed and graded. The level of investigation needed is linked to the potential risk and the wishes of the complainant.

Complaints Officers contact the complainant to agree the complaint, resolution plan and sought outcome. They then determine the level of risk and complexity and, using the Department of Health Complaints Toolkit, determine a resolution plan. Options include mediation, resolution by the Service Manager or an independent investigation.

Each complaint is treated according to its individual nature and the wishes of the complainant.

6. Review of compliments received

Table 1 – Compliments Received by Service Area

Service area	2013/14	%	2012/13	%
Community Support Service	301	40%	260	39%
Access and Care Assessment and Care Management	165	22%	76	11%
Leeds Shared Lives	52	7%	101	14%
Mental Health Residential and Day Services	49	6.5%	46	7%
Older People Residential and Day Services	43	6%	31	5%
Equipment and Adaptations	41	5.5%	44	7%
Learning Disability Housing and Day Services	39	5%	65	10%
Learning Disability Assessment and Care Management	23	3%	12	1.5%
Resources and Strategy	18	2.5%	22	3%
Strategic Commissioning	14	2%	10	1.5%
Strategic Commissioning Community Support	5	0.5%	8	1%
Physical Disability Day Services	1	-	1	-
Transport		-	2	-
Total	751	100%	678	100%

- 6.1 Table 1 above details the number of compliments received during 2013/14 reporting period. 751 compliments have been received compared to 678 in the previous year and represents an increase of 11%.

The recording of compliments is largely dependent on written contact from service users or their families to the Director or other Senior Managers. Mainly individual

compliments are made directly to frontline staff either verbally or by personal letter. Whilst all staff are encouraged to share this information so that it can be recorded with the Complaints Service on the central system, many frontline staff choose to keep this information to themselves. However, as part of the Effective Complaints Handling and Customer Experience Training, staff have been reminded that Adult Social Care does learn from customer experience both good and bad to inform service planning and commissioning of services hence frontline staff now willing to forward the letters of compliments to the Complaints Service.

There is a correlation between the Frontline Staff Effective Complaints Handling and Customer Experience training and the increase in the number of compliments recorded.

- 6.2 The largest number of compliments was received by the in house Community Support Service which saw a significant rise in the number of compliments receiving 301 (40%) compared to 260 in the previous year. Of these 230 were made to the Reablement service with a further 58 to the Reablement (mental health) team and 13 to the long-term generic community support team. Service users and family members expressed their appreciation for the caring and professional help and support they had received from staff.
- 6.3 The Learning Disability Housing and Day care services which received 65 (10%) compliments last year received 39 this year (5%). The Learning Disability & Mental Health Assessment Care Management Team received 23 compliments this year
- 6.4 The Leeds Shared Lives Team received 52 compliments compared to 101 last year.
- 6.5 Mental Health Provider Services received 49 compliments this year as opposed to 46 last year. The compliments thanked Outreach Support workers for the help and support given to service users.
- 6.6 Whilst the number of compliments for commissioned independent sector home care sector providers appears to have reduced the Directorate has changed the way these compliments are logged. Providers already report the compliments that they receive directly via their quarterly Quality Standards Assessment return to the Contracts Team. The number reported this year (5), therefore, is only those that were sent to the Directorate's complaints and compliments team. In addition to this the providers received 1725 compliments which were sent to the Contracts Team as part of the Quality Standards Assessment return.
- 6.7 Compliments for the Access and Care Assessment and Care Management service rose markedly, to 165 (22%) compared with 76 in the previous year. Compliments were received across the city, thanking a variety of workers for the help and support they have given service users and their families.
- 6.8 In-house residential care homes and day services for older people received 43 (6%) compliments, compared to 31 last year. Family members gave thanks for the staff teams providing excellent care to relatives.
- 6.9 Compliments about Resources functions fell again this year from 22 to 18. Community Care Finance services received 9 compliments (up from 6 last year),

thanking staff for the work they had done regarding service users' finances; the Complaints service received 6 compliments (down from 15). 3 compliments were received for the Communication Team.

- 6.10 Equipment and Adaptation's services received 41 compliments compared with 44 last year. Some of the compliments thanked workers processing Blue Badge applications and other compliments thanked staff in area teams for the support and help given to service users.
- 6.11 Commissioning Services received a total of 11 compliments this year compared to 10 last year.
- 6.12 Small numbers of compliments were received in other services. 3 compliments were received for the private residential sector. 1 compliment was received for Physical Disability Services (the same as last year).

7. Review of complaints received

Table 2 – Complaints received by service area

Service area	2013/14		2012/13	
	Number of complaints	% of total complaints	Number of complaints	% of total complaints
Total	390	100.0%	441	100.0%
Access and Care Blue Badge Applications	137	35.1%	150	34.0%
Access and Care Assessment and Care Management	58	14.7%	93	21.2%
Support services	49	12.5%	29	6.5%
Community Support Service	31	7.8%	26	5.9%
Learning Disability Assessment and Care Management	20	5.1%	32	7.2%
Strategic Commissioning Community Support	18	4.6%	25	5.8%
Mental Health Assessment and Care Management	14	3.5%	11	2.5%
Access and Care Equipment and Adaptations	13	3.3%	15	3.4%
Other Council Department	12	3.1%	13	2.9%
Learning Disability Housing and Day Services	10	2.6%	2	0.4%
Mental Health Accommodation and Day Services	9	2.4%	13	2.9%
Strategic Commissioning Residential Care	7	1.9%	8	1.8%
Older People Direct Provision Residential Care	5	1.3%	3	0.7%
Older People Direct Provision Day Services	4	1.2%	1	0.2%
Strategic Commissioning Other Contractor	2	0.6%	15	3.4%
Safeguarding	1	0.3%	1	0.2%
Strategic Commissioning	-		4	1.0%

- 7.1.1 The significant reduction of complaints received in almost all service areas other than the Blue Badge Scheme which is the subject of significant transformation, and Support Services, as detailed in Table 2 above does not necessarily mean that fewer people are complaining. Rather the impact of the Effective Complaints Handling and Customer Experience Training that is provided to Frontline Staff. This is some evidence of more Frontline staff understanding the Complaints Procedure, its impact and potential risks on customer relations if complaints are not handled effectively and staff making every effort, where they can, to resolve concerns and/or complaints as they arise.
- 7.1.2 137 complaints were made about Blue Badge assessments compared with 150 last year. This was a new category of complaint last year arising from the Directorate's new responsibilities for this service.
- 7.1.3 Resources and Strategy functions which also saw a significant increase in 2011/12 levelled out last year with a small decrease to 29 complaints from 33 the year before. However, this year there has been another significant rise with 49 complaints being registered and this can largely be attributed to the increase in charges for the Telecare Service. The majority of the others related to problems with charges and invoicing.
- 7.1.4 Complaints about two significant areas of transformation in 2010/11, the in-house Community Support Service and the Mental Health Accommodation and Day Services saw drastic reductions in the numbers of complaints received in 2011/12 and in this reporting year compared to 2010/11. In 2012/13 Community Support Service received 26 complaints and the mental health accommodation and day services receiving 13 in this reporting period. This year the figure rose to 31 in Community Support Service, but continued to fall in Mental Health Accommodation and Day Services with only 9 complaints being made
- 7.1.5 Traditionally large numbers of complaints are received in Access and Care Assessment and Care Management services. Whilst this remained the area in which most complaints were made, apart from Blue Badge appeals, a further significant reduction was recorded last year, with 58 received compared to 93 last year.
- 7.1.6 The next significant category is complaints relating to commissioned Community Support Services., although there has been a significant decrease in the numbers of complaints about independent sector providers, and this trend has continued this year down again from 25 to 18. This figure represents only those complaints made directly to the Adult Social Care Complaints Unit. Independent Providers also keep a record of those complaints and have resolved through their own complaints procedures and the number of those recorded this year totals 303.

As reported last year, the Social Care Complaints Service has continued to invest in Effective Complaints Handling Training for Independent Provider Registered Managers and the Contracts Team has continued its rigorous monitoring programme. The complaints service also attends every home care provider's forum to report on trends, key issues and developments, and to advise on best practice. These initiatives may be a contributing factor in the sustained positive trend in this sector.

- 7.1.7 20 (5.1%) complaints were received against the Learning Disability Assessment and Care Management service. This compares with 32 (7.2%) last year and 34 in the previous year.
- 7.1.8 Learning Disability Housing and Day services received 10 (2.6%) complaints this year compared 2 (0.4%) last year and 5 (1.2%) in 2011/12.
- 7.1.9 Access and Care Equipment and Adaptation service has seen a further small decrease in the numbers of complaints received, down to 13 (3.3%) compared with 15 last year.
- 7.1.10 Mental Health Assessment and Care Management services received 14 (3.5%) complaints this year compared to 11 in 2012/13.
- 7.1.11 Older Peoples Direct Provision Residential Services received 5 complaints this year as opposed to 3 last year, and Older Peoples Direct Provision Day Services received 4 complaints as compared to 1 last year.
- 7.1.12 Commissioned Residential Care received 7 complaints this year compared to 8 last year
- 7.1.13 Strategic Commissioning Services received 2 complaints this year as opposed to 15 last year.
- 7.1.14 13 complaints in total were received about services provided on the Directorate's behalf by other council departments the same number as in the previous year. 8 of these related to Passenger Transport Services, 3 to meals provision, 1 to Safeguarding and one was passed to another agency to respond.

7.2 Formal investigation

- 7.2.1 This year 4 of the 390 complaints were escalated to formal investigation by Independent Investigating Officers, a small decrease on 2012/13. As reported last year, a change in complaints procedure regulations on 01 April 2009 withdrew stages two and three of the complaints process, and this has resulted in a significant decrease in complaints escalating to formal investigation compared to previous years: 25 in 2008-09, 19 in 2007-08 and 10 in 2006-07. As is standard practice, complaints requiring formal investigation are investigated by Investigating Officers who are independent of Leeds City Council. Independent investigation has proved effective in resolving complex complaints.

Appendix 7 of this report contains examples of the lessons learnt during this reporting period and actions taken to improve the quality of service.

- 7.2.2 The cost of commissioning independent investigations and mediation in this reporting period was £16,673.75 compared to £7,837.45 in 2012/13. This figure includes 6 cases which were commissioned in 2012-13 but billed in 2013-14 totalling £14,350.85. The actual cost of independent investigations including mediation for the financial year 2013-14 is, therefore, £2,322.90.

7.3 The Local Government Ombudsman

7.3.1 Summary of Ombudsman Cases

25 complaints have been made to the Ombudsman in this reporting period compared to 24 the previous year. Last year the increase was largely attributable to the Council's new responsibilities for the assessment of Disabled Parking Permits

(Blue Badges). In this reporting period the number of complaints Blue Badges reduced from 16 to 10. In 9 of these cases the Ombudsman found no fault in the decision not to award a blue badge. In the remaining case the Ombudsman discontinued her investigation as a re-assessment had been offered.

12 of the remaining 15 complaints made to the Ombudsman related to Access and Care Assessment & Care Management cases.

In 4 of these the Ombudsman declared that she had completed her investigation and was satisfied with the actions the Council had taken and it was not appropriate to issue a report.

In a further four cases the Ombudsman's decision was to Discontinue the Investigation.

In two cases the Ombudsman decided the most appropriate way of resolving the complaints were by recommending a Local Settlement.

In one case the Ombudsman decided that the complaints were outside her jurisdiction to investigate.

A breakdown of the Ombudsman enquiries and the findings are detailed in Appendix 5 of this report.

7.3.2 Local Settlements and Public Reports

Where the Ombudsman finds fault she will either recommend a local settlement or issue a public report. Last year no cases were resolved by way of a local settlement and none resulted in a public report. In this reporting period four complaints were settled by local settlement.

7.4 Timescale Performance

7.4.1 The statutory timescale for acknowledging complaints is 3 working days. In 2013/14 performance against this timescale was at 99%, the same as in the previous year.

7.4.2 Whilst the statutory timescale for fully resolving a complaint is now up to six months based on level of risk and complexity, the service aims to provide an initial response to complaints risk assessed as low within 20 working days. This year performance against this timescale improved to 98% compared to 96% the previous year. The significant improvement in timescale performance has been as a result of joint efforts and close working with Chief Officers, Heads of Service, Service Delivery Managers, Team Managers and the Complaints Team. Other initiatives on the go include the highly effective reminder system and monitoring of complaints at risk of going overdue and circulation of schedule of outstanding complaints to Chief Officers.

7.5 Compensation Payments

- 7.5.1 Under Section 92 of the Local Government Act 2000, Local Authorities are empowered to remedy any injustice arising from a complaint. It is now practice to consider small *ex gratia* payments by way of recompense for costs incurred or compensation for a distress caused as a result of a matter complained about. The Local Government Ombudsman also has powers to direct the authority to pay compensation and to recommend the amount.

7.6 Methods of notifying complaints

- 7.6.1 There is no requirement that a complaint must be written, although a person making a complaint is always encouraged to be as specific as possible. Consequently, complaints can be received via a number of different channels and the chosen channel of communication is recorded. Leaflets providing information on how service users can send compliments and complaints are widely available across all service areas and the leaflet contains a simple form, which people can use.
- 7.6.2 There has been a decrease in the proportion of complainants who chose to make their complaints by letter down to 179 this year compared with 213 last year, although this remains by far the most popular way for people to make their complaints. The numbers using email increased to 70 (18%) from 66 (15%) last year. The numbers of people using the complaints form decreased again significantly to 16 (4%) from 28 (6%) in 2012/13.
- 7.6.3 Although there was a reduction in the numbers of people making their complaints in person it is still clear that many customers prefer to discuss their complaints by various means such as telephoning the complaints service (35); complaining directly to workers (27); telephoning the Contact Centre (41); and visiting Head Office (7). 10 complainants made their complaint through their local councillor or MP and 5 went directly to the Ombudsman. Overall 125 people made their complaints by these methods, compared with 134 in 2012/13.
- 7.6.4 The trend of relatives (100, 26%) and carers (47, 12%) making complaints than service users themselves has ended this year. This year there has been a rise in the numbers of service users complaining in their own right, down slightly to 213 (55%) compared to 220 (50%) last year.

7.7 Equality Monitoring.

- 7.7.1 All complaints are subject to equality monitoring, which now includes all the equality characteristics protected through legislation (age, disability, gender, race, religion or belief, sexual orientation). Information is most frequently provided on ethnicity, gender and disability. No information has been provided about other characteristics. 62% of all complaints have ethnicity recorded, reflecting a decrease on 64% last year, returning to the level of previous years. 97.2% have gender recorded and 81% of complaints state whether the person was disabled or not (slightly lower than 76% of people willing to provide this information in 2012/13). A breakdown of the

equality related information provided by complainants is detailed in Appendix 6 of this report.

From July 2010, the Council Customer Services in collaboration with the Council Equalities Team issued new guidance for recording equality related complaints. The focus was changed from purely equality monitoring the complainant to focusing on the nature of the complaint which may cause the service user an inequality. There were no equality related complaints in this reporting period.

- 7.7.2 Overall, data demonstrates that fewer people are willing to provide information relating to equality monitoring. Our priority is to continue focusing on the nature of any complaint which may cause the service user an inequality.
- 7.7.3 Data also demonstrates that the proportion of people from a non-UK/white background making a complaint is lower than both the proportion of the same groups receiving a social care service. This is an established trend and a better understanding of the reasons for this lack of recourse to the complaints procedure is required. A study focused on service users from an ethnic minority group will be commissioned through one of the user involvement organisations over the next year.

7.8 Lessons Learned

- 7.8.1 Where a complaint has been upheld, it is often the case that the manager undertaking the resolution of the complaint will make recommendations on how the service should be improved to avoid a similar situation arising for another service user. These actions will be brought to the attention of the complainant and there is a system in place for recording the action and the person with responsibility for implementing the action. Appendix 7 of this report contains examples of the lessons learnt during the course of the year and actions taken to improve the quality of service.

7.9 Customer Satisfaction

- 7.9.1 The Complaints Service sends a satisfaction questionnaire to all complainants after they have received a response to their complaint. The purpose of the questionnaire is to seek complainants' views on how easy they found it to complain and how satisfied they are with key aspects of the process and outcome.
- 7.9.2 This year 35 (9%) complainants returned completed questionnaires. 83% of respondents said they found it either very easy (46%) or quite easy (37%) to make their complaints. Satisfaction with the time taken to respond increased to 74% with 46% of respondents being very satisfied and 28% being quite satisfied. 52% of respondents were satisfied with the outcome of their complaint, which compares to 57% last year, with 29% reporting that they were very satisfied and 23% that they were quite satisfied.
- 7.9.3 Amongst the 15 complainants who were dissatisfied with the outcome of their complaint the reasons given were
- 7.9.4 6 respondents (17%) said that they found it difficult to complain. They gave a variety of reasons as to why they felt this way. Of these 3 said that they were not

confident that their complaints would do any good. Some respondents reported that they had feared adverse consequences from making a complaint, with 1 stating that they were worried about reprisals by workers, and 1 concerned that their service may be withdrawn. 1 respondent said that workers had not helped them to complain, and 1 said that they did not know who to make their complaint to. 3 gave other reasons why they found it difficult to complain, one being that a worker had filled out their complaint form without checking the complaint with them; another complainant was worried that they would be labelled as racist; and another who made a mixed sector complaint about health and social care felt that no one agency would take responsibility and that a worker may be scapegoated. The above feedback will be shared with staff as part of the frontline effective complaints handling training.

8. Updates - 2013/14

The year under review has been a busy, challenging and successful one for the Complaints Service. In a year of on-going change with transformation of services, the focus has been to maintain and/or raise the standard of complaints handling by focussing on strategies that will improve the customer experience when things go wrong.

8.1 Training

8.1.1 Training for front line support and professional staff has continued from the previous year. 334 support and professional staff have been trained compared to 312 the previous year. The training focusses on customer experience, staff behaviour and the role that staff have in resolving complaints before they become formal. The training is building on the progress being made in promoting a positive complaints culture in Adult Social Care Directorate.

8.1.2 The training sessions have been very well received and staff in attendance have fed back on how useful the training has been in changing their attitude towards managing complaints and that the training has given them the opportunity to reflect on their practice; learned the importance of being proactive in responding to complaints and to view complaints as an opportunity to learn from customer feedback. A correlation is already emerging between frontline staff training and its impact on positive customer feedback evidenced in 6 of this report.

8.2 Review of information literature for service users

8.2.1 Monitoring and review of information for service users to ensure that the Complaints Procedure is accessible to all service users and carers is one of ongoing monitoring, development and review.

8.2.2 In view of the integration of Leeds Community Health and Adult Social Care teams, joint information for patients and service users within integrated services has been developed.

8.2.3 Information for people with a Learning Disability as well as information for Deaf people who use British Sign Language are in the process of being updated.

8.3 Working in partnership/Integration

Working in partnership with our NHS Partners, commissioned providers and the voluntary sector to influence best practice and good outcomes for the people of Leeds is continuing. Some examples of joint initiatives includes providing joint training of staff within integrated teams as well as developing joint information for customers within integrated services.

8.4 The Local Government Ombudsman – Changes Update

8.4.1 The Ombudsman has announced changes to its business model in response to challenges it faces in respect of increased volumes of complaints (which it predicts will increase in the current public spending climate) and a reduction of 13.5 % in its funding. The Ombudsman calls its new approach “Intake, Assessment, Investigation” and it aims to target its investigative resources remedying the most serious injustices. The Ombudsman intends to assess, investigate and take decisions on complaints much more quickly. In short, at Intake the Ombudsman intends to inform complainants within 1 to 2 days if their complaint is “viable” i.e. worthy of further consideration. It is anticipated that the majority of complaints will be asked to make their complaint to the local authority. If the complaint is viable, it will be passed to an Assessment team which will decide whether the complaint should progress to investigation referred back to the Local Authority as premature or closed with no further action necessary.

8.4.2 The Ombudsman is also keen to publish more complaint decisions. At the moment only those investigations that result in a full public report are published, but from April 2013 the Ombudsman intends to publish all its decisions including those that are remedied without recourse to a public report on its website.

8.5 Care Quality Commission (CQC)

Following the appointment of their first Chief Inspector of Adult Social Care Services, CQC are in the process of changing the way they inspect and regulate care services. By March 2016 every Adult Social Care Service will be rated. People’s voices and experiences will be key to inform assessments against the five essential standards. CQC will be measuring service performance against the 5 main questions:-

- **Safe** – are they safe?
- **Effective** – how good are they at doing what they say they are meant to be doing?
- **Caring** – do they care?
- **Responsive to people’s needs** – do they change quickly when they need to?
- **Well-led** – do they have good Managers?

In addition, there will be other rules which services will have to meet in addition to the above 5 essential standards.

8.6 The Care Act

The Care Bill became Care Act in May 2014– The Care Act represents the most significant reform of care and support by putting people and their carers in control of their care and support. Key elements of the Care Act include the following:-

- People will be confident about the quality of care
- People will be treated with dignity and respect
- Everyone will know what they are entitled to
- Focus on people's wellbeing and support them to stay independent for as long as possible
- Introduce greater national consistency in access to care and support
- Provide better information to help people make choices about their care
- Give people more control over their care
- Improve support for carers – carers will have new rights to public support
- Improve the quality of care and support and
- A duty to integrate services

The above vision will raise the bar for quality, independence, information, choice and control.

The challenge for all services is to anticipate the changes, make the necessary adjustments and ensure that service users, carers and staff are aware of the proposed changes and the impact this may have on their service.

8.7. Healthwatch

- 8.7.1 An important part of the Health and Social Care Act 2012 was the establishment of a new consumer champion for health and social care called Healthwatch. Healthwatch came into force on 1st April 2013.

Healthwatch England will provide a national collective voice for people who use the NHS and Social Care Services, whilst local Healthwatch will be expected to act as a local champion for patients and the public and hold commissioners and providers of services to account through its role on Health and Wellbeing Boards.

Healthwatch England launched its first Annual Report to Parliament, press release published on 9 October 2013. The Annual Report followed their research to dig deep into people's experiences of health and social care services, to find out how things really are on the ground. The outcome of their research demonstrated that the public has serious concerns about the way they are being treated and cared for – “yet on the surface satisfaction levels are high”. A national campaign to measure people's satisfaction levels of health and social care services has been launched. Over the next year they will be collecting evidence from across the network of 152 local Healthwatch on whether or not people's rights are being respected and will report their findings to Parliament. The eight core consumer rights are detailed below:-

- **The right to essential services:** we all have the right to a set of basic and essential treatment and care services at a defined standard.
- **The right to access:** we all have the right to access services on an equal basis with others, when we need them and in a way that works for us and our families.
- **The right to a safe, dignified and quality service:** we all have the right to high quality, safe services that treat us all with dignity, compassion and respect.
- **The right to information and education:** we all have the right to information and education about how to take care of ourselves and what we are entitled to within the health and social care system.
- **The right to choose:** we all have the right to choose from a range of high quality services, products and providers within health and social care.
- **The right to be listened to:** we all have the right to have our concerns and views listened to and acted upon. We have the right to be supported in taking action if we are not satisfied with the service we have received.
- **The right to be involved:** we are equal partners in determining our own health and wellbeing. We have the right to be involved in decisions that affect our lives and those affecting services in our local community.
- **The right to live in a healthy environment:** we all have the right to live in an environment that promotes positive health and wellbeing.

9. Other priorities to be taken into account during 2014/15 includes:-

- Contributing to achieving the Council and Adult Social Care Strategic Priorities by working closely with Service and Programme Managers in ensuring that customer feedback from compliments and complaints positively influence assessment and care management, commissioning and service planning in improving outcomes for vulnerable people.
- Continuing with the training programme to staff and managers on the statutory complaints procedure, incorporating learning from customer feedback. The target groups for the coming year are the Commissioned Provider Registered Managers and Supervisors.
- We will continue to explore ways to ensure continuous learning from complaints is widely shared.
- We will continue to inform performance management
- We will continue to monitor and evaluate information provided to service users and carers to ensure that the complaints procedure is accessible to all service user groups.
- We will contribute to the Leeds City Council Change Programme through work undertaken by Departmental Customer Relations Officers for Customer Strategy Board.

10. Conclusion

- 10.1 2013-2014 has been a busy, challenging and successful year for the Adult Social Care Complaints Service. In a year of on-going change with transformation of services, the focus for the Complaints Team has been to maintain and/or raise the standard of complaints handling by focussing on strategies that will improve the customer experience when things go wrong.
- 10.2 The complaints service continues to work with staff at all levels to ensure that the complaints procedure is effective and trusted by people wishing to access it, and encourages workers to have a positive attitude towards complaints. This reporting year has seen, through the collective efforts of Service Managers and the Complaints Service significant progress in respect of the key principles of the complaints process, such as the speed of response, respecting and listening to service users and a positive approach to dealing with complaints.
- 10.3 The Government's agenda for Health and Social Care Services i.e. the introduction of Healthwatch and the Care Act 2014 requirements will further raise the bar for quality, independence, information, choice and control. The Complaints Service looks forward to a period of productive change, with on-going collaboration with both internal and external partners to improve social care service delivery to the citizens of Leeds.
- 10.4 Effective monitoring of customer feedback from compliments and complaints and ensuring that lessons from such customer feedback are learned and understood by staff and incorporated into service planning, commissioning and practice is crucial. It is equally important to acknowledge that staff are working in difficult and complex situations, often where there is no clear cut and right answer. It is vital that staff feel able to acknowledge mistakes but equally they should be supported and given praise when this is due. Complaints continue to be a complex and difficult service area with both legal and insurance implications.

If you would like to comment on this report, or to receive it in large print, Braille or other format, please contact:

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Complaints Team Members include:

Judith Kasolo, Head of Complaints, Dominic Wyatt, Complaints Manager;

Ian Nicholson, Adult Complaints Officer, and Tina Price, Complaints Officer

Appendix 1 - Compliments received by service area

Service area	2013/14	%	2012/13	%
Community Support Service	301	40%	260	39%
Access and Inclusion Assessment and Care Management	165	22%	76	11%
Leeds Shared Lives	52	7%	101	14%
Mental Health Residential and Day Services	49	6.5%	46	7%
Older People Residential and Day Services	43	6%	31	5%
Equipment and Adaptations	41	5.5%	44	7%
Learning Disability Housing and Day Services	39	5%	65	10%
Learning Disability Assessment and Care Management	23	3%	12	1.5%
Resources and Strategy	18	2.5%	22	3%
Strategic Commissioning	14	2%	10	1.5%
Strategic Commissioning Community Support	5	0.5%	8	1%
Physical Disability Day Services	1	-	1	-
Transport		-	2	-
Total	751	100%	678	100%

Appendix 2 - Complaints by service area

	2013/14		2012/13	
Service area	Number of complaints	% of total complaints	Number of complaints	% of total complaints
Total	390	100.0%	441	100.0%
Access and Inclusion Blue Badge Applications	137	35.1%	150	34.0%
Access and Inclusion Assessment and Care Management	58	14.7%	93	21.2%
Resources and Strategy	49	12.5%	29	6.5%
Community Support Service	31	7.8%	26	5.9%
Learning Disability Assessment and Care Management	20	5.1%	32	7.2%
Strategic Commissioning Community Support	18	4.6%	25	5.8%
Mental Health Assessment and Care Management	14	3.5%	11	2.5%
Access and Inclusion Equipment and Adaptations	13	3.3%	15	3.4%
Other Council Department	12	3.1%	13	2.9%
Learning Disability Housing and Day Services	10	2.6%	2	0.4%
Mental Health Accommodation and Day Services	9	2.4%	13	2.9%
Strategic Commissioning Residential Care	7	1.9%	8	1.8%
Older People Direct Provision Residential Care	5	1.3%	3	0.7%
Older People Direct Provision Day Services	4	1.2%	1	0.2%
Strategic Commissioning Other Contractor	2	0.6%	15	3.4%
Safeguarding	1	0.3%	1	0.2%
Strategic Commissioning	-	-	4	1.0%

Appendix 3 - Complaints—how received

How received	2013/14	%	2012/13	%
Letter	179	45.8%	213	48.3%
Email	70	17.8%	66	15.0%
Corporate call centre	41	10.6%	31	7.0%
Telephone	35	9.0%	43	9.8%
Via staff	27	7.0%	33	7.5%
Form	16	4.1%	28	6.3%
Via an elected member	10	2.6%	20	4.5%
In person	7	1.8%	1	0.2%
Via the Ombudsman	5	1.3%	6	1.4%
Total	390	100.0%	441	100.0%

Complaints—received from

Complainant—how involved	2013/14	2012/13
Service user	213	220
Relative	93	104
Carer	47	69
Other	18	10
Parent	7	17
Other agency	6	18
Advocate	3	2
Worker	3	1

Appendix 4 - Timescale performance

	Acknowledged within			Responded within		
	Average days	% within 3 days	% after 3 days	Average days	% within 20 days	% after 20 days
Access and Care	1	98.7%	1.3%	17	98.0%	2.0%
Strategic Commissioning	1	100.0%	-	18	96.0%	4.0%
Care Delivery	1	100.0%	-	28	94.0%	6.0%
Other Council Services	1	100.0%	-	10	100.0%	
Resources	1	100.0%	-	15	100.0%	
Total	1	99.7%	0.3%	18	98%	2.0%

Appendix 5 - Breakdown of Ombudsman complaints and enquiries received between 1 April 2013 and 31 March 2014

			Outcome			Total
	Investigation complete. Satisfied with Council's actions.	Discontinue Investigation	Outside Jurisdiction	Local Settlement	Ongoing	
Mental Health Accommodation and Day Services		-	-		1	1
Care Delivery - residential	1					1
Learning Disability Assessment and Care Management	-	-		1	1	2
Access & Care Assessment and Care Management	4	4	2	1		11
Access and Inclusion Blue Badge	9	1	-			10
Total	14	5	2	2	2	25

Appendix 6 - Complainants by ethnicity provided by complainants

Ethnicity	2013/14 Number	%	2012/13 Number	%
UK/E	211	55.0%	243	55.1%
Not known	150	38.0%	162	36.7%
Indian	8	2.0%	6	1.4%
Pakistani	8	2.0%	15	3.4%
Black Caribbean	7	1.6%	9	2.1%
Other	3	0.7%	4	0.9%
Black African	3	0.7%	1	0.2%
Bangladeshi	-		1	0.2%
Total	390	100.0%	441	100.0%

Complainants by gender

Gender	2013/14 Number	%	2012/13 Number	%
Female	217	55.8%	274	62.2%
Male	152	39.1%	138	31.2%
Not known	12	2.8%	7	1.6%
Joint (Mr and Mrs)	9	2.3%	22	5.0%
Total	390	100.0%	441	100.0%

Complainants by disability provided by the complaints

Disability	2013/14 Number	%	2012/13 Number	%
Disabled	208	53.7%	214	48.4%
Non-disabled	108	27.2%	121	27.4%
Not known	74	19.1%	106	24.2%
Total	390	100.0%	441	100.0%

Appendix 7 - Lessons learnt

Access and Care - Community Support complaint	Lessons Learnt
Following a complaint about a service user being administered her medication twice in one day the manager of the service has taken the following action:	The staff member has attended a Medication Refresher Training course which she has recently completed and has implemented a 3 month action plan for the staff member, which will involve observational supervisions and monitoring whilst undertaking medication tasks.
Access & Care - Assessment & Care Management	Lessons Learnt
Following a complaint where the complainant felt that the system had let her and her daughter down as there was nothing put in place when she most needed it.	<p>the manager apologised and identified issues for staff to be addressed. These were:</p> <p>Will meet with the Health professionals to look at better ways to work together.</p> <p>Will remind and arrange training for staff regarding the role of social workers and helping parents who have children.</p> <p>Will contact Children's Services and remind them about referring people on to other agencies.</p>
Access & Care Assessment & Care Management	Lessons Learnt
A formal investigation in respect of the role of the learning disability care management team in a case where a support provider withdrew their services recommended the following: (Formal investigation initiated last year but completed in 2013/14)	<p>That Adult Social Care has effective systems in place for developing contingency plans when it is identified that the provision of services are subject to significant levels of concern.</p> <p>That Adult Social Care ensure that meetings to review service provision are held in a timely manner and are held at the latest within 10 working days of the identification of a significant concern.</p> <p>That Adult Social Care endeavour to ensure a consistency of care</p>

	manager in complex cases and avoid any unnecessary transfer of worker.
Access & Care Assessment & Care Management	Lessons Learnt
A formal investigation into the care management of a service user with learning disabilities recommended the following: (Formal investigation initiated last year but completed in 2013/14)	The service reviews how complex cases are managed. Managers should ensure that in complex cases working agreements are in place, ground rules are established, and that there is clarity relating to expectations, timescales and boundaries and that these are communicated to service users and their families.
Access & Care Assessment & Care Management	Lessons Learnt
A formal investigation of a complaint from the parent carer of a service user with learning disabilities recommended the following: (Formal investigation initiated last year but completed in 2013/14)	<p>That if the disputes concerning the completion of the support plan cannot be resolved as a matter of urgency they should be referred to arbitration.</p> <p>That regular monthly meetings are held until agreement on the support plan is reached for the complainant, the service user's representatives and the agencies responsible for providing services, in order to ensure full consultation and information sharing takes place.</p> <p>That Leeds Adult Social Care should seek to ensure that, wherever possible, the same care manager in complex cases works with the service user for a consistent period.</p> <p>That the Head of Service visits the complainant and service user to seek ways in which trust can be rebuilt for all parties to work together in the future.</p>

	That minutes of meetings involving different agencies should always be produced and distributed within agreed timescales.
Access & Care Assessment & Care Management	Lessons Learnt
A relative living abroad complained that workers had failed to share information about a service user's health and well-being. In particular an incident occurred which resulted in a worker from an independent sector home care provider accessing the service user's bank account via a PIN number in order that shopping could be done (at the service user's request). (Formal investigation initiated last year but completed in 2013/14)	The independent investigation found that the joint care management team and the service provider had acted in good faith, in line with the service user's wishes, and with the best interests of the service user at heart. However, the investigator recommended that a social worker, rather than a home care worker, should have taken the lead in these circumstances.
Access and Care Assessment & Care Management	Lessons Learnt
Following a complaint regarding the delay in a referral being allocated and a lack of co-ordination between different teams within Adult Social Care,	The Service Delivery Manager agreed that whilst there was no role for her team the referral should have been re-directed to the appropriate resource. She will be taking this up with colleagues in her own team and with the manager of the Emergency Duty Team

Strategic Commissioning - complaint	Lessons Learnt
<p>A formal investigation into a support provider to a service user with learning disabilities recommended the following:</p>	<p>That the management ensure that they address in their responses to a complaint all the points that are raised by complainants.</p> <p>That Adult Social Care and the provider have effective systems in place to ensure carers and users of services are fully informed at an early stage when concerns are expressed by staff.</p> <p>That Leeds City Council - Adult Social Care work closely with Contract and Commissioning colleagues to ensure that effective service specifications are in place with independent service providers in advance of services being provided.</p>
Strategic Commissioning	Lessons Learnt
<p>A complaint was made to an independent community support provider regarding missed visits to a service user.</p>	<p>The company instigating disciplinary proceedings against the carer in question. In addition a memo has been issued to each carer covering the importance of covering their rota to eliminate any risk of error and the disciplinary procedure that this can lead to.</p>

Strategic Commissioning	Lessons Learnt
Following a complaint regarding carers from an independent community support provider charging for more hours than they provide and questioning the quality of care they provide	<p>The manager provided assurances that the carers had been briefed about completing the tasks and interacting with the service user on all visits and that all carers go through induction and are given basic information about a range of illnesses. An information sheet about Alzheimer's disease will be circulated to staff.</p> <p>Adult Social Care will monitor the provider and ensure that the timesheets will be used rather than the times on the rota for billing purposes.</p>
Strategic Commissioning	Lessons Learnt
A complaint regarding the regular late arrival of carers from an independent community support provider	<p>All staff notified to attend the service user on time and to report any lateness to the supervisor.</p> <p>Communication was sent to the workers of the process if they are going to be late.</p> <p>The supervisor has made spot checks re carer's attendance.</p> <p>There will be ongoing telephone monitoring.</p>
Strategic Commissioning	Lessons Learnt
A complaint regarding missed or late calls by carers to a service user from an independent provider	<p>The senior manager has put an action plan in place to address the problems which should provide a clearer managerial oversight which has been the main source of the problems arising.</p>

Care Delivery	Lessons Learnt
A complaint was made regarding the lack of a proper and professional response from staff in a residential unit following an accident to a service user whilst on respite care.	The manager met with the complainant and told her of the action she had taken. She had reminded her staff team of the consequences of failing to deal with such incidents under the home's policies and procedures.
Resources and Strategy - complaint	Lessons learnt
A complaint was made regarding the accuracy of details in a directory for service users and carers.	It was acknowledged that an error had occurred and the manager will ensure that the on-line version is immediately amended and that the error is amended on the hard copy when it is reissued. The manager will remind his staff of their proof-reading responsibilities.

Complaints and Compliments

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