



HARTLEPOOL
BOROUGH COUNCIL

**Annual Report of
Adult Social Care
Complaints and
Compliments
2019/20**



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1. Introduction

Welcome to Hartlepool Borough Council's Annual Report of Adult Social Care Complaints and Compliments. The report covers statutory complaints and compliments received for adult social care services for the period 1 April 2019 to 31 March 2020.

The report outlines:

- Details of the complaints and compliments received over the reporting period;
- Actions implemented and resulting improvements following enquiries into complaints;
- Performance in relation to handling of complaints.

2. Background

Complaints and compliments are valued as an important source of feedback on the quality of services. Each complaint is investigated and, where appropriate, redress is made. Equally important is the work to improve services to prevent a repeat of failure in service quality and continually improve services.

2.1. What is a complaint?

A complaint is any expression of dissatisfaction about a service that is being delivered, or the failure to deliver a service. The Local Government and Social Care Ombudsman define a complaint as *“an expression of dissatisfaction about a council service (whether that service is provided directly by the council or on its behalf by a contractor or partner) that requires a response.”*

A complaint can be made in person, in writing, by telephone or email or through the council's website. It can be made at any office. Every effort is made to assist people in making their complaint and any member of staff can take a complaint.

2.2. Who can complain?

A complaint can be made by:

- A person who uses services;

- A carer on their own behalf;
- Someone who has been refused a service for which they think they are eligible;
- The representative of someone who uses services or a carer acting on their behalf. This could be with the consent of the service user or carer or in the case of someone who does not have the capacity to give consent (within the meaning of the Mental Capacity Act 2005), where they are seen to be acting in the best interests of that person; or
- Anyone who is or is likely to be affected by the actions, decisions or omissions of the service that is subject to a complaint.

3. Adult Social Care Complaint Framework

3.1. Complaint management arrangements

The statutory complaint function for adult social care sits within the Quality and Review Team under the management of the Head of Service (Quality and Review). The remit of the Complaints Manager's function is:

- Managing, developing and administering the complaint procedure;
- Providing assistance and advice to those who wish to complain;
- Overseeing the investigation of complaints that cannot be managed at source;
- Supporting and training staff; and
- Monitoring and reporting on complaints activity.

3.2. The complaint regulations and procedure

A single level integrated complaints process was introduced on 1 April 2009 with the implementation of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

These regulations place a duty on NHS bodies and adult social care organisations to coordinate handling of complaints and to advise and support complainants through the procedure.

A local joint protocol for the handling of complaints that span more than one health or social care organisation has been developed to ensure a

comprehensive response is provided to complaints that cross more than one organisation.

The complaints procedure aims to be as accessible as possible. The policy is flexible to ensure that the needs of the complainant are paramount and allows the Department and the complainant to agree on the best way to reach a satisfactory outcome. On receipt of a complaint the level of impact is determined and complaints are screened according to their content as being red (high impact), amber (moderate impact) or green (low impact). The process for handling the complaint is dependent on the impact.

3.3. Timescales for the resolution of complaints

Staff will always try to resolve problems or concerns before they escalate into complaints and this ensures that, wherever possible, complaints are kept to a minimum.

Since the introduction of the 2009 regulations the only mandatory timescale is that the complainant receives an acknowledgement within 3 working days. The legislation allows for a maximum 6 month timescale to investigate and respond to a complaint. This offers a more flexible approach to the amount of time in which complaints should be dealt with. The Council's policy aims for even the most complex of complaints to be resolved within 65 working days. If timescales cannot be met, a new timescale should be discussed with the complainant. Locally, timescales have been introduced for amber and green complaints of 40 and 20 working days respectively.

There is a time limit of 12 months from when the matter being complained about occurred to when a complaint may be made. After this time, a complaint will not normally be considered. However, there is discretion to accept a complaint after the 12 month time limit where the local authority is satisfied that the complainant had good reason(s) for not making the complaint within that time and where it is still possible to investigate the complaint effectively and fairly.

Whilst the Council accepted all adult social care complaints made and continued with its ongoing complaint investigations during the worldwide health crisis, Covid-19, there were minor practical adjustments made with different ways of working implemented to eliminate any face-to-face meetings taking

place. In some cases, these adjustments increased the timescales to respond but complainants were kept informed at regular intervals and acknowledged the unprecedented situation which was beyond the Council's control.

3.4. Referral to the Local Government and Social Care Ombudsman

If, at the end of the complaints procedure, the complainant remains dissatisfied with the outcome or the way in which their complaint has been handled, they may ask the Local Government and Social Care Ombudsman (LGSCO) to investigate their complaint. Complainants may also approach the LGSCO directly without accessing the complaints process. In these cases it is usual for the LGSCO to refer them back to the Council for the complaint to be examined through the relevant complaints process before they intervene.

4. Principles and outcomes

Good handling of complaints and representations involves:

- Keeping the complainant at the centre of the complaints process;
- Being open and accountable;
- Responding to complainants in a way that is fair;
- Being committed to try to get things right when they go wrong; and
- Seeking to continually improve services.

Statutory complaints are underpinned by the following:

- A procedure that aims to be fair, clear, robust and accessible;
- Support being available to those wishing to make a complaint;
- Timely resolution following enquiry into complaints/representations;
- Action taken following complaints and the quality of services improved as a result; and
- Monitoring being used as a means of improving performance.

5. Public information

Information about the complaints and representations framework is accessible via the Council's public access points and also the Council's website at:

https://www.hartlepool.gov.uk/info/20076/adults_and_older_people/93/get_in_touch

Service users and carers are provided with factsheets explaining the procedure when they take up a new service and when support plans are agreed and reviewed.

Information in other formats such as large print, Braille or translation in languages other than English are made available upon request.

6. Summary of representations

6.1. Compliments

Compliments are generally recognised to be an indicator of good outcomes for service users and carers. They also serve to provide wider lessons regarding the quality of services.

During 2019/20, 77 compliments were received relating to adult social care. This is an increase of 18 compliments from 2018/19. These range from an expression of thanks and appreciation in the form of a thank-you card to written communication. In particular, they reflect the work being delivered by the Direct Care and Support Team, service users expressing thanks for pieces of equipment which improve their daily living and a general appreciation of the social work teams who have made a difference to the lives of service users and their carers. In addition to this, verbal expressions of thanks and appreciation were received from service users, carers and their families who have participated in providing feedback about newly qualified social workers. Appendix A provides some examples of compliments received during the period.

6.2. Complaints received in 2019/20

A total of 35 complaints were received during 2019/20. The number of complaints received has increased by 4 from last year.

Although there has been an increase in the number of complaints received, 7 of the 35 complaints received were not considered further leaving 28 complaints for investigation. Overall, this is an increase of 6 complaints investigated from

the previous year where 22 complaints were investigated from the 31 complaints received.

Of the 7 complaints not considered further, this was because:

- 2 complaints were withdrawn by complainants and were therefore not considered any further;
- 1 complaint was not accepted for investigation because the service user had not provided their consent for someone else to act on their behalf in the matter of the complaint;
- 1 complaint was not accepted for investigation because the substance of the complaint related to an Order made by the Court of Protection;
- 1 complaint was not accepted for investigation because the service complaint about was not provided by the Council. The complainant was signposted to the correct organisation;
- 1 complaint was not accepted for investigation because the subject matter of the complaint had previously been investigated by the LGSCO and statutory complaint regulations do not permit a complaint that has already been the subject of an investigation by the LGSCO to be considered further.
- 1 complaint was not accepted for investigation because the substance of the complaint had already been considered by the Council. The complainant was reminded of their right to refer their continued dissatisfaction onto the LGSCO.

Of the 28 complaints investigated in 2019/20, 25 complaints have concluded local statutory complaints processes and 3 complaints remain ongoing. These 3 complaints will be carried forward to 2020/21.

6.3. Client groups and general data

Adult Social Care			
Client group	2019/20	2018/19	2017/18
Older Persons	15	13	4
Learning Disabilities	5	2	1
Physical Disabilities and Sensory Loss	3	6	6
Adult Mental Health (Integrated Service prior to 2019/20) or AMHP function	4	0	2
Contracted Services	3	9	4
Carers	5	1	1
Total number of complaints received	35	31	18

In 2019/20:

- Complaints were received from 12 males and 23 females.
- Complaints which were considered either complex or have a number of elements to them are usually investigated by someone independent of the Council. Independent Investigators were appointed to 7 of the 28 complaints investigated. The remaining 21 complaints were investigated and responded to internally.
- Of the 35 complaints received, 15 complaints were received within the older person's service followed by 5 complaints within the learning disability service and 5 complaints about matters related to a carer. There was an increase in the number of complaints received in 2019/20 about the adult mental health service but a decrease in the number of complaints received about contracted services and physical disabilities and sensory loss.
- Of the 35 complaints received, 17 complaints were received directly from the person concerned. There was 1 complainant who chose to have an advocate assist them with their complaint, 7 complainants signed their consent for someone else to act on their behalf in respect of the complaint, 9 complainants represented someone who lacked capacity within the

meaning of the Mental Capacity Act 2005 and 1 complainant represented a deceased relative in bringing their complaint.

6.4. Timescales and the Grading of Complaints

There is a maximum 6 month statutory timescale for investigating and responding to a complaint relating to adult social care. However, the overall aim is to respond to complaints in a timely manner. The likely timescales for investigation are discussed with the complainant at the outset of a complaint investigation and updates on progress of the investigation are provided by the Investigating Officer at regular intervals. There are a range of factors that can impact upon timescales such as:

- Whether the complaint has been considered low, moderate or high impact;
- The number of points of complaint for investigation;
- The availability of the complainant and other key people the Investigating Officer needs to interview;
- The time taken to conduct interviews with key people;
- Seeking appropriate consent for obtaining information from partner agencies and awaiting the necessary information to inform the complaint investigation;
- Reading case files and records and obtaining copies of local policies and procedures;
- Consideration of all available information and the drafting of a complaint investigation report; and
- Carrying out factual accuracy checks on the draft report and providing feedback to the complainant before finalising and submitting the final report.

6.5. Complaints carried forward to 2020/21

Of the 28 complaints investigated, 3 complaints that were the subject of investigation as at 31 March 2020 have been carried forward to 2020/21.

6.6. Complaints considered by the Local Government and Social Care Ombudsman (LGSCO) in 2019/20

There were 4 complainants who approached the LGSCO about their adult social care complaints in 2019/20. Of these:

- One complainant, whose complaint was not accepted for investigation in 2019/20 because the subject matter of the complaint had previously been investigated by the LGSCO, approached the LGSCO again about their complaint. In this case, the LGSCO decided that they had previously considered the complaint and they would not investigate the same matter again without any fresh evidence.
- One complainant, whose complaint was received and responded to in 2018/19, approached the LGSCO about their complaint in 2019/20. Although the LGSCO did not uphold the substantive complaint made, they concluded that the Council's Independent Investigating Officer did not have access to all the relevant records as part of the Council's complaint investigation. This was because the complaint related to a period when the service being complained about was managed by a partner agency on behalf of the Council under a third-party arrangement. This particular arrangement with the third-party no longer exists so a similar situation is unlikely to be repeated.
- One complaint, whose complaint was received in 2019/20, approached the LGSCO about their complaint. In this case, the LGSCO decided not to investigate the complaint because the Ombudsman was satisfied with the Council's remedies to any injustice arising from the complaint.
- One complainant, whose complaint was investigated and responded to in 2019/20, approached the LGSCO about their complaint in late March 2020. This was at the same time as the LGSCO made the unprecedented decision to pause all their casework activity. This was because the LGSCO did not want to place an additional demand upon Councils and Care Providers in having to respond to their enquiries at a time when the capacity to deliver vital frontline services to its local communities during the Covid-19 crisis was essential. The LGSCO will make any enquiries of the Council in respect of this complaint when they resume their casework activity.

7. Actions taken following complaints

Actions implemented are an important aspect of the complaints framework. Appendix B outlines some improvements that have been put in place as a direct result of complaints and representations received in adult social care during 2019/20.

8. Conclusions and way forward

8.1. Going forward

There is an ongoing commitment to ensure that a person-centred approach is adopted for the handling and investigation of each complaint. The Council is focused on ensuring that: complainants receive appropriate and timely feedback on complaints; appropriate apologies are offered; any redress is made and any service improvement recommendations are delivered.

8.2. Action plan

Actions for 2020/21 are as follows:

- Continue to raise awareness of and promote appropriate use of the complaints procedure for adult social care.
- Continue to raise awareness of lessons learnt from complaints and ensure that they are fed into policies, procedures and practice.
- Continue to remind and encourage the workforce to inform the Quality and Review Team when expressions of thanks have been received. These provide an indication of satisfaction with services and should be recorded and reported.
- Conduct a complaint training needs analysis to determine any learning and development gaps and implement any relevant training to meet the needs of the workforce as well as those managers who may investigate complaints.

Appendix A: Examples of compliments received across Adult Social Care

“I appreciate your job must be very busy, but taking time to discuss some issues, meant a great deal to me. I would like to mention staff have gone above and beyond that which they would be expected to do. They have shown me kindness, patience, compassion and understanding. All staff who care for my needs are helpful and supportive.”

Service User about Reablement Services

“On behalf of my family I wanted to thank you for your help and support over the past weeks. Your help in arranging short notice SALT team visit was much appreciated. We really appreciate your kind understanding and great support that you provided our family and everything else you did for us' advice in a very professional but calm and nice manner.”

Service user about a Social Care Officer

“Thank you to all member of excellent telecare service for answering so quickly and reassuringly. A comfort to hear a friendly and reassuring voice.”

Service User about the Telecare Service

“We would like to say a big thank you for the support and help provided. Member of staff was sympathetic, very knowledgeable, professional and enthusiastic to support and help through problems. We very much appreciate the first class service provided.”

Carer about the Hospital Discharge Team

“I'm always impressed by the excellent level of support I encounter from officers and workers across the 'Social Services' team.”

Carer about her encounter with a number of adult social care teams

“Can you please pass on my thanks for some fantastic partnership working last night - showing the level of dedication to people they work with.”

From a Police Officer about the Learning Disability Social Work Team

“Our first contact was with X who was so helpful, patient and caring. Her dedication to her job was exemplary. The electrical contractor his application to his work and pleasant demeanour were a credit to his company. Working non stop for over 6 hours. The team representing HBC are deserving of praise. What wonderful people you have working for you.”

Service user about OT and Special Needs Housing Services

“...Staff at the home have been wonderful. Have been very helpful and supportive - a blessed relief. Thank you for your involvement, it has been appreciated very much.”

Carer about a Social Worker and Care Home

“A very big thank you for all your help and advice. You really do work as a team. Very impressed by the support you gave. Thank you for very very much.”

Carer about User Finance and Property Team Manager

“Mr ‘A’ very big thank you for all your help and advice. You really do work as a team. Very impressed by the support you gave. Thank you for very, very much ‘K’.”

Service User about OT and Reablement Services

Appendix B: Examples of complaints and actions taken in Adult Social Care

Details of complaint/Outcome	Actions following findings
<p>The complainant (a representative of a service user) was dissatisfied with the standard of care his relative (who lacked mental capacity) received from a contracted care home provider.</p> <p>The complaint was allocated to be independently investigated but the complainant agreed to the early resolution of his complaint following actions being undertaken by the Commissioned Services Team.</p>	<p>The complainant was satisfied that the Council had listened to his dissatisfaction and the actions of the Commissioned Services Team to:</p> <ul style="list-style-type: none"> • review records held within the care home to check what efforts care workers have made to assist residents with bathing and personal care (particularly those with dementia); and • ensure adequate systems are in place to monitor dietary intake of residents, particularly those suffering with dementia and declining to eat in the dining room.
<p>The complainant (a service user) was unhappy about the outcome of a financial assessment, his support plan not having been reviewed for some years as well as his support plan having ceased and his case closed without an explanation.</p> <p>The complaint was responded to by a Head of Service.</p>	<p>Although there was no evidence to support a financial assessment had been flawed in any way, it was found that despite the complainant's direct payment continuing, his support plan had not been reviewed as it should have been. An apology and financial recompense was provided for this.</p> <p>It was also acknowledged that communication with the complainant, including the reason why his support plan had ceased and his case closed, could have been handled better.</p>

<p>The complainant (a service user) was unhappy that she could not use her direct payment to appoint her partner as a Personal Assistant. Additionally, she was also unhappy with the standard of service from a commissioned advocacy provider.</p> <p>The complaint was independently investigated.</p>	<p>An apology was provided to the complainant for not being made aware that the decision reached by the Risk Enablement Panel could be appealed against as well as an oversight on the part of the advocacy provider.</p> <p>The Chair of the Risk Enablement Panel re-issued guidance to all operational staff emphasising:</p> <ul style="list-style-type: none"> • the Terms of Reference; • the appeals process; and • a reminder to be inserted on the Risk Enablement Panel minutes that there is an appeal mechanism which can be utilised. <p>Operational staff making referrals for an advocate will now check an advocate has been allocated one week after making a referral as well as a proposed timetable for engagement between the advocate and person has been devised.</p>
<p>The complainant (the daughter of a service user) expressed her dissatisfaction about a home visit made by a social care officer. The complainant believed she was speaking to a qualified social worker and alleged the social care officer presented herself as a qualified social worker.</p> <p>The complaint was responded to by a Head of Service.</p>	<p>The Head of Service spoke to the complainant about the issues she raised and it was agreed that staff would be reminded to:</p> <ul style="list-style-type: none"> • ensure they wear and present their identification at all times, especially when undertaking home visits, to eliminate any uncertainty about a worker's role; and • confirm and make clear their role and function during home visits.

The complainant (a representative of the service user) was unhappy about the standard and quality of care being delivered by carers. The complaint focussed upon timings of care calls, parking arrangements at the service user's address, dignity and respect, cancellation of the service and communication.

The complaint was responded to by the Integrated Community Services Lead.

The Integrated Community Services Lead made enquiries into the specific areas the complainant had raised and was able to implement changes to both practice and service delivery as follows:

- the carers, who are all issued with mobile phones, were reminded of the importance and significance of communication around contacting a service user if they were running late for any reason and ensuring any practical information from the service user or their family was cascaded to all carers attending the home address;
- carers have now been provided with overshoes to wear when entering someone's home; and
- a procedural change to practice was made to include escalation if the allocated social care worker has not been able to confirm the service user's cancellation of the service before the next planned care call.

An apology was provided to the complainant who considered his negative experiences of the service had been considered and appropriate action had been taken to improve the service which highlighted the value of complaints.

<p>The complainant (a representative of a service user) was unhappy that a carer's lanyard had caused a skin tear to the service user whilst care was being delivered to her relative. A concern was also raised about infection control in relation to ID badges and lanyards.</p> <p>The complaint was responded to by the Integrated Community Services Lead.</p>	<p>The complainant was assured that the carer concerned appropriately followed relevant reporting procedures at the time of the incident and that carers have since been advised to tuck their ID badges and lanyards into their tunics/tops.</p> <p>It was explained to the complainant the reason why all staff are expected to wear ID badges attached to lanyards but, in light of the complaint, clips rather than lanyards had been explored as an alternative. This ensures the ID badge remains visible whilst, at the same time, reducing the risk of infection. The policy was also updated to reflect this change from lanyard to clip.</p>
<p>The complainant (a carer of a service user) alleged that she had not been included in a meeting about the service user's future housing and support needs, the decision reached had been communicated to her inappropriately and there was no consideration or support shown to her about how the decision reached impacted upon her and her son.</p> <p>The complaint was responded to by a Head of Service.</p>	<p>The Head of Service and Team Manager met with the complainant to discuss her complaint. The complainant was informed that she should have been included and informed about the service user's decision in a timely way rather than the decision being communicated to her via a third party.</p> <p>An apology was provided to the complainant for not engaging with her about matters concerning the service user and practical assistance was provided to the complainant in relation to impact the decision had upon her housing situation.</p>

The complainant (a representative of a service user) was unhappy that the contracted care home provider was unable to assess the service user's needs for 2 days when he was considered fit for hospital discharge. This resulted in the service user paying the full cost of his care for the 2 days he remained in hospital.

The complaint was responded to by a Head of Service.

The Head of Service spoken to the complainant, explained the care home had been short staffed at the time and provided an apology for the 2 day gap between his relative being fit for discharge and the assessment taking place.

The service user was reimbursed the care home fees for the 2 day period and the Commissioned Services Team confirmed with the care home the circumstances when a Community Matron can assess residents.