



**HARTLEPOOL**  
**BOROUGH COUNCIL**

**Annual Report of  
Adult Social Care  
Complaints and  
Compliments  
2020/21**



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## 1. Introduction

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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 2020 to 31 March 2021.

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

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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**

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#### **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.

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**

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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**

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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](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**

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### **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 2020/21, 66 compliments were received relating to adult social care. This is a decrease of 11 compliments from 2019/20. These range from an expression of thanks and appreciation in the form of a thank-you card to written communication. In particular, they broadly reflect the work being delivered across adult social care, 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. Appendix A provides some examples of compliments received during the period.

### **6.2. Complaints received in 2020/21**

A total of 25 complaints were received during 2020/21. The number of complaints received has decreased by 10 from last year. Of the 25 complaints received, 7 complaints were not considered further leaving 18 complaints investigated. This is a decrease of 5 complaints being investigated from the previous year.

The number of complaints received in the first quarter of 2020/21 (April to June) was significantly low compared to previous years. This coincided with the worldwide health crisis, Covid-19, and the first national lockdown which may account for the low number of complaints received in this period.

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

- 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 service complaint about was not provided by the Council. The complainant was signposted to the correct organisation;
- 1 complaint was not accepted for investigation under the complaints framework before relevant safeguarding enquires had been completed. The complainant was advised that their concerns must conclude the appropriate S42 enquiries under the Care Act 2014 before a complaint investigation could commence if they remained dissatisfied;
- 1 complaint was withdrawn by the Council when it was found that the substance of the complaint had already been resolved to the complainant's satisfaction;
- 1 complaint was withdrawn by the Council when the complainant's family initiated legal action in relation to the substance of the complaint; and
- 2 complaints were not accepted for investigation because the substance of the complaint was deemed to be a service requests rather than complaints which could be responded to in another way.

Of the 18 complaints investigated in 2020/21, 17 complaints have concluded local statutory complaints processes and 1 complaint remains ongoing which will be carried forward to 2021/22.



### 6.3. Client groups and general data

<b>Adult Social Care</b>			
<b>Client group</b>	<b>2020/21</b>	<b>2019/20</b>	<b>2018/19</b>
<b>Older Persons</b>	10	15	13
<b>Learning Disabilities</b>	3	5	2
<b>Physical Disabilities and Sensory Loss</b>	3	3	6
<b>Adult Mental Health (Integrated Service prior to 2019/20) or AMHP function</b>	5	4	0
<b>Contracted Services</b>	4	3	9
<b>Carers</b>	0	5	1
<b>Total number of complaints received</b>	25	35	31

In 2020/21:

- Complaints were received from 8 males and 17 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 10 of the 17 complaints investigated. The remaining 7 complaints were investigated and responded to internally.
- Of the 25 complaints received, 10 complaints were received within the older person's service followed by 5 complaints within adult mental health services and 4 complaints were about contracted service providers. There was an increase in the number of complaints received in 2020/21 about adult mental health services and contracted service providers but a decrease in the number of complaints received about the older person's service and learning disability services whilst complaints about physical disabilities and sensory loss remained the same.
- Of the 25 complaints received, 10 complaints were received directly from the person concerned. There were 3 complainants who chose to have an advocate assist them with their complaint, 6 complainants signed their

consent for someone else to represent them and act on their behalf in the matter of the complaint, 5 complainants represented a deceased relative in bringing their complaint and 1 complainant represented someone who lacked capacity within the meaning of the Mental Capacity Act 2005.

#### **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 2021/22**

Of the 18 complaints investigated, 1 complaint remained the subject of investigation as at 31 March 2020 which has been carried forward to 2021/22.

## **6.6. Complaints considered by the Local Government and Social Care Ombudsman (LGSCO) in 2020/21**

There was 1 complainant who approached the LGSCO about their adult social care complaint in late March 2020 which was referred to in last year's annual complaint report (2019/20). This was at the same time 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 capacity to deliver vital frontline services to its local communities during the Covid-19 crisis was essential. The LGSCO made enquires of the Council about this complaint when their casework activity resumed in June 2020 where they found fault relating to inconsistent information being given to the complainant about the nature of a placement as well as the care costs not being made clear until after an assessment period had ended. The Council implemented actions to remedy the shortfall identified in the service delivery.

## **7. Actions taken following complaints**

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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 2020/21.

## **8. Conclusions and way forward**

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### **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 2021/22 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.
- Review the training needs of managers and commission relevant training for those managers who are allocated complaints to investigate.

## Appendix A: Examples of compliments received across Adult Social Care

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*“Just a note of thanks to you for the work you are all doing in these unprecedented times. Dedicated, committed, brave and courageous are just a few words that come to mind when I think about the work you and your work mates have done, are doing and will continue to do. As I stand on my doorstep you'll be unable to hear the noise I'll be making for the Adults Services in Hartlepool.”*

### **Service User about Reablement Services**

*“I don't know how I would have managed without our Social Worker. She has a really kind caring nature and always there to help if I was worried or not sure about anything.”*

### **Service user about a Social Worker**

*“Staff very lovely, extremely caring & friendly and went above and beyond to help her. The service you gave was fantastic. I would like to place on record the highest level of kindness and professionalism I experienced from two members of staff. The assistance I received during their visit would not be surpassed. There is a saying 'Angels walk amongst us' - I can assure you that I have met two of them.”*

### **Service User about the Telecare Service**

*“X has always been kind and attentive with my needs and also helped me with information where I might find the right people. Thank you so much.”*

### **Carer about the Hospital Discharge Team**

*“I spoke to mam earlier and I just wanted to let you know that your phone call lifted her spirits. It was nice to hear her a little more upbeat than she has been of late. I've never heard her speak so highly of and trust a professional as she does you and I just wanted to say thank you.”*

### **Service User's family about a Social Worker**

*“Thank you so much! And I’d like to personally thank you for your visit today, it was very helpful and informative but most of all your empathy and understanding really help Dad & Mam feel much more confident about accessing help, which they’ve never had to do in their lives before.”*

**Service User’s family about OT**

*“Thank you. Thank you also for all the help and advice you have given in the past 4 years. You helped make a difficult time for the whole family so much easier to get through.”*

**Service User’s family about User Property and Finance Services**

*“I just wanted to let you know how amazing X has been. X has been exceptional in the way she interacted with myself but more importantly my father. It’s made caring for my father so much easier knowing we had the support of one of your dedicated team members.”*

**Service User’s family about Locality Team**

*“Thank you for all your help in the past and to praise your staff in the way that they have helped me recently in relation to my mam. X has been excellent, understanding and very helpful with advice. Also X has been excellent and very understanding. Thank you again for your professionalism and for giving me your time in the past.”*

**Service User’s family about Preventative Mental Health**

## 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 deceased service user) was unhappy that the Council failed to notify him of the death of his relative.</p> <p>The complaint was responded to by a Head of Service.</p>	<p>Although it was explained to the complainant that his late relative was under the care of the NHS rather than Adult Social Care at the time of her death, staff were reminded of the importance of communication and the need to keep interested parties updated on key aspects of someone's care and support needs.</p>
<p>The complainant (who was supported by an Advocate) alleged that a decision to remove a direct payment was made purely with regard to whether she was in a position to manage the direct payment without any consideration for her ongoing care and support needs.</p> <p>The complaint was independently investigated.</p>	<p>Although the Independent Investigator did not uphold the complaint, it was noted during the course of the complaint investigation that the service user had been waiting some time for a financial reconciliation to be completed.</p> <p>An apology was provided to the complainant for this, the reconciliation completed and the matter resolved within 7 days. The Council also considered whether the complainant had suffered any hardship as a result of the delay she encountered.</p>

<p>The complainant (a representative of the service user) was unhappy with the care workers (from a commissioned service provider) confronting her relative and allegedly making an offensive comment and other associated matters.</p> <p>The complaint was independently investigated.</p>	<p>Given the Independent Investigator had partly upheld the complaint the Council conveyed an apology to the complainant's relative in this regard.</p>
<p>The complainant (a representative of the service user) expressed his dissatisfaction about matters relating to reviewing and facilitating contact, a commissioned care provider's staff using their mobile telephones whilst supervising contact, a lack of person-centred approach, and a failure to ensure appropriate and regular communication between him and his relative.</p> <p>The complaint was independently investigated.</p>	<p>The Independent Investigator made some recommendations for service improvement with were accepted and implemented by the Council. These included:</p> <ul style="list-style-type: none"> <li>• Instructing the commissioned care provider that their staff should not use their work mobile phones during a supervised contact session unless a matter of urgency develops; and</li> <li>• Revisiting advocacy support for the complainant in his own right.</li> </ul>
<p>The complainant (a representative of a deceased service user) was unhappy about the standard and quality of care being delivered by carers from a commissioned care provider and that the Council's Safeguarding Officer did not respond to a referral made in an appropriate or efficient way.</p> <p>The complaint was independently investigated.</p>	<p>Although the Independent Investigator did not uphold the complaint made, the Council implemented a recommendation made which has led to improvements in the Council's safeguarding documentation.</p> <p>The Council welcomes the external scrutiny of Independent Investigators in this regard. Their independent scrutiny adds value to learning from complaints and enables wider service improvements to be implemented as a result of a single complaint made.</p>



<p>The complainant (who was supported by an Advocate) expressed that her support hours were inadequate to meet her care needs especially with the impacts of the Covid-19 virus and a request for an independent Social Worker had not been progressed.</p> <p>The complaint was responded to by a Head of Service.</p>	<p>Although the majority of the complaint was not upheld and the Council had considered the complainant’s request for an independent Social Worker, it was noted that the outcome had not been clearly to the complainant at the time. An apology was provided to the complainant for this oversight.</p>
<p>The complainant (a representative of a service user) was unhappy with a contracted provider. The focus of the complaint investigation related to communication issues and the processing of information.</p> <p>The complaint was independently investigated.</p>	<p>An apology was provided to the complainant for a processing anomaly. The contracted provider demonstrated to the independent investigator how they had already implemented changes to improve their processes as a result of the anomaly that had been identified before the complaint investigation had commenced.</p> <p>The Commissioned Services Team discussed with the care provider whether a greater reliance on electronic communications during the Covid-19 crisis had created some technical challenges for some people and whether assistance needed to be provided to those people requiring such support.</p>

The complainant (a representative of a service user) was unhappy that her relative had contacted the Council to request a social work assessment of need but was informed such a referral could only be made a GP or Nurse.

The complaint was responded to by a Team Manager.

A Team Manager contacted the complainant to explain the referral process and allocated her relative's case for assessment. It was believed there could have been initial confusion and the complainant expressed her appreciation for the swift response and resolution to the matter following the submission of her complaint.