

**Statutory Complaints
Report
Adult Social Care**

**London Borough of
Richmond upon Thames**

2019-20

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1. Introduction

- 1.1 The production of a complaints report is a statutory complaints requirement for adult social care to provide an overview of the complaints received and handled through the Local Authority's statutory complaints procedure.
- 1.2 The Local Authority has a duty to ensure that any individual (or appropriate person acting on their behalf) who wishes to make a complaint about the actions, decisions or apparent failings of a local authority's social care provision have access to the Adults statutory complaints procedure.

2. Legislation

- 2.1 The Local Authority is legally required to have in place, a complaints procedure, in accordance with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 for the management of social care complaints.
- 2.2 The Regulations cover Adults social care and Health services and/or any of its commissioned services and/or independent services.

3. Overview of the Statutory Adults Complaints Procedure

- 3.1 The complaints procedure is a single stage process for both Health and Social Care which operate to the same response timescales. Complaints should be recorded and monitored by the complaints team. All complaints should be assessed for risk by the complaints team liaising with the relevant social care team. Complaints that are deemed very high risk will be referred to the appropriate investigation route such as invoking safeguarding procedures.
- 3.2 The complainant can expect a response within 25 – 65 working days and by 6 months. The complaint can be progressed to the Local Government and Social Care Ombudsman following the final response from the Local Authority or at any time.
- 3.3 A complaint is defined as *“an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social services provision that requires a response.”*
- 3.4 Complaints can be made by the service user receiving a direct service from Adults social care or by a person on their behalf such as an advocate or family member where the service user has provided their written consent.
- 3.5 Where a service is provided by a contractor on behalf of the Council, a complaint can either be made directly to the provider service or to the complaints team.

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- 3.6 Service users who fund their own care for services that are regulated by the Care Quality Commission do not fall under this procedure.
- 3.7 Complaints will be considered if they are made within 12 months of the incident although the Council can apply their discretion to waive this time limit in some instances.

4. Adult social care complaints received

- 4.1 The services addressed 74 complaints (which includes 14 provider related complaints). This is 18 more than the previous year (56 complaints), an increase of 32%.
- 4.2 The volume of complaints should be set in context by looking at the overall level of contact and interaction Adult Social Care has with its residents and service users. During 19/20 74 complaints were received but that is a low proportion given that the department handled approximately 7,300 contacts and supported 2,000 people during the year. Also, while the Financial Assessment Team recorded 8 complaints in 2019/20 it is responsible for processing in excess of 1,200 financial assessments each year.
- 4.3 Receipt of Complaints should also be viewed positively, they **provide valuable insight** into service performance. A good complaints process is one which promotes learning and provides for opportunities for services to be improved and shaped by feedback. It is vital to understand the reasons why things go wrong so that the same mistakes are not repeated and that services can continually improve.

Table 1: Number of complaints received since 2014:

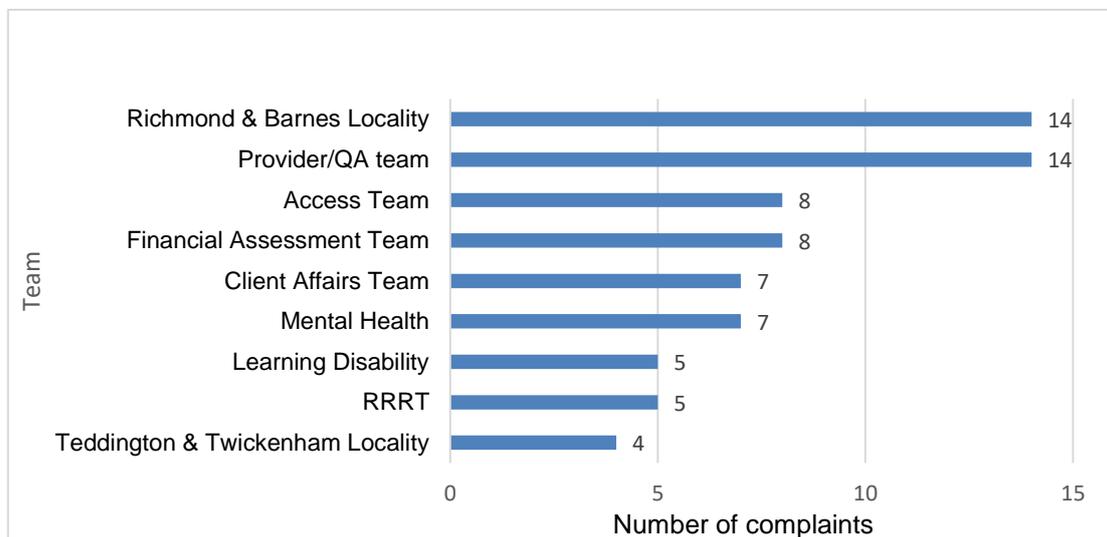
| Richmond | 2016/17 | 2017/18 | 2018/19 | 2019/20 |
|----------|---------|---------|---------|---------|
| | 109 | 66 | 56 | 74 |

5. Complaints by service team

- 5.1 Table 2 and Chart 1 below detail the breakdown of complaints received within the teams during the reporting year. Some complaints involved more than one service area. Both the Richmond and Barnes Locality and the Provider / Quality Assurance Team received the highest number of complaints with 14 each (although it should be noted that complaints in relation to the Quality Assurance Team tend to be about providers that the team acts as the interface with). This was followed by The Access and the Financial Assessment Teams (both with 8 complaints), the Client Affairs and the Mental Health Teams both (with 7 complaints), the Learning Disability and the Richmond Response and Rehabilitation Teams (RRRT) (both with 5 complaints) and Teddington and Twickenham Locality (with 4 complaints).

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- 5.2 The volume of complaints should be set in context by looking at the overall level of contact and interaction Adult Social Care has with its residents and service users. For example, the Richmond and Barnes locality teams recorded 14 complaints for 2019/20.

Chart 1: Complaints by Team 2019/20:**Table 2: Complaints by service team:**

| Service | Qtr 1 | Qtr 2 | Qtr3 | Qtr 4 | Total |
|--|-----------|-----------|-----------|-----------|-----------|
| Provider/QA Team | 2 | 3 | 3 | 6 | 14 |
| Richmond & Barnes Locality Team | 2 | 4 | 5 | 3 | 14 |
| Financial Assessment Team | 2 | 1 | 1 | 4 | 8 |
| Access Team | 2 | 4 | | 2 | 8 |
| Mental Health | | 3 | 3 | 1 | 7 |
| Client Affairs Team | 6 | | | 1 | 7 |
| Richmond Response and Rehabilitation Team (RRRT) | 1 | 1 | 1 | 2 | 5 |
| Learning Disability Team | 1 | 1 | 2 | 1 | 5 |
| Teddington & Twickenham Locality | 1 | 1 | | 2 | 4 |
| Reviews Team | | 1 | 1 | | 2 |
| Hospital Team | | | | | 0 |
| In House Day Services Team | | | | | 0 |
| Commissioning Team | | | | | 0 |
| Safeguarding Team | | | | | 0 |
| Total complaints * | 17 | 19 | 16 | 22 | 74 |

**complaints can cover more than one service team*

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5.3 Teams regularly receive feedback from service users and/or carers. Most issues tend to be resolved directly and quickly outside the complaint process.

6. Complaints by Issue

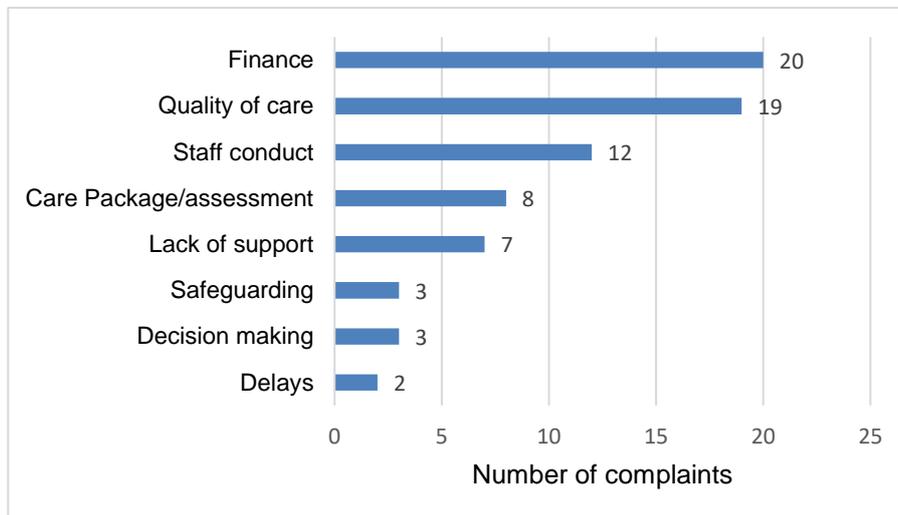
6.1 The complaints issues raised most frequently related to care charges, queries with invoices, the financial assessment and direct payments. Also, communication and the quality of care provision. This is detailed in Chart 2.

6.2 These complaints focused on the quality of information and advice received regarding care provision and financial decisions. Care issues, particularly in respect of domiciliary care is a continuing trend for complaints and the direct interface of care staff with service users.

6.3 Examples of complaints received included: family unhappy about the delay in assessing the service users care needs; family of a service user raised issues with the quality of care received and subsequently challenging the invoice for home care costs; unhappy with the lack of information and updates from the service; advocate for service user unhappy about errors in deferred payment statement; service user unhappy with the attitude of the OT and the suitability of equipment.

6.4 Complaints analysis is regularly reviewed at senior management level and there is an ongoing focus for service improvement.

Chart 2: Complaint Issues:



7. Response Times

7.1 The Council's timescale for responding to adult social care complaints is 25 working days. The complaint regulations do not provide a statutory timescale for completing

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responses, although the complaint should be completed in its entirety within 6 months.

- 7.2 Unlike the other complaint procedures within the Council, the adult social care complaints procedure does not have stages for escalation. It is a single stage procedure and if the complainant remains dissatisfied, they can approach the Local Government and Social care Ombudsman.
- 7.3 Complainants are kept informed of the progress of their complaint if the investigation is going to take longer to complete.

Table 3: Richmond Response times 2019/20:

| Response time | Number of complaints |
|---------------------|----------------------|
| 20-25 days | 34 |
| over 25 days | 46 |
| Total closed | 74 |

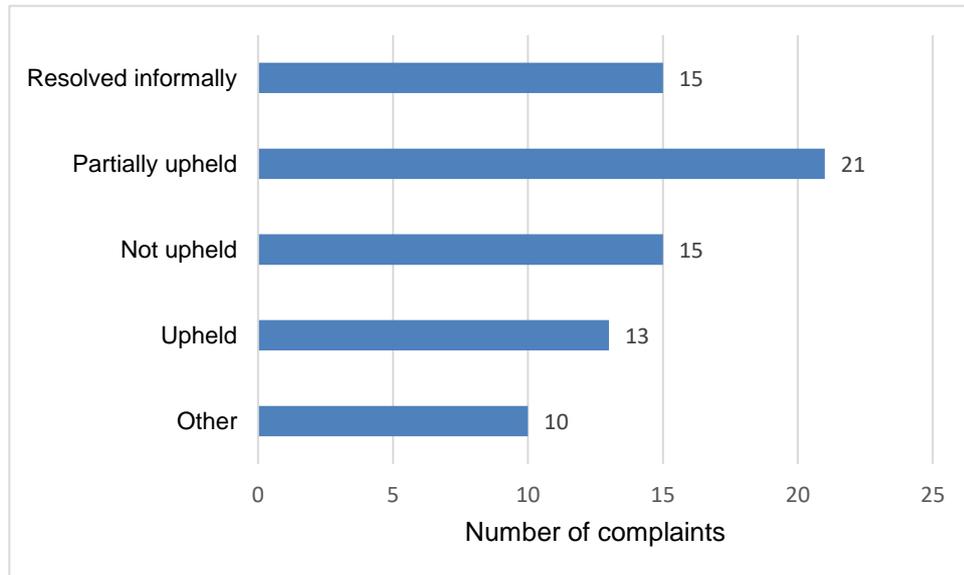
Table 4: Richmond Complaint response times by year:

| Within 25 days | 2016/17 | 2017/18 | 2018/19 | 2019/20 |
|----------------|---------|---------|---------|---------|
| | 75.9% | 77%* | 58% | 45% |

8. Complaint Outcomes

- 8.1 Over a quarter of complaints (28% or 21 complaints) investigated during 2019/20 were partially upheld, while just under a fifth (18% or 13 complaints) were upheld. Around a fifth (20% or 15 complaints) were not upheld and the same proportion were resolved informally. The outcome of 10 complaints has been classified as other which includes complaints that maybe on hold for a variety of reasons (i.e. due to safeguarding proceedings).
- 8.2 This is detailed in Chart 3 and demonstrates that whilst complaints are carefully considered and investigated, some identified a need for improvement.
- 8.3 For this year, the upheld findings were in respect of acknowledging delays caused in providing services and ineffective communication. Staffing and work pressures in some teams were at times, a contributory factor.

Chart 3: Complaints by Outcome:



9. Provider complaints

- 9.1 The Quality Assurance Team manages and reports on contracted provider complaints for social care, which includes residential and domiciliary care services. This does not include complaints by ‘self-funders’ who are able to complain directly to the care provider and/or Local Government and Social Care Ombudsman.
- 9.2 For this reporting year, 14 external provider complaints were received and recorded by the complaints team and all related to domiciliary care. Complaints can be made directly to the care provider as well as to the Complaints team or Quality Assurance team.
- 9.3 The issues were mainly regarding late or missed visits and the quality of care provided.
- 9.4 Providers have in place their own complaints procedures and will usually investigate the issues directly, monitored by the Quality Assurance team. Complaints are escalated to the Local Authority if the complainant is unhappy with the provider’s response and are then dealt with through the adult social care procedure.

10. Ombudsman Cases

- 10.1 A complainant has the right to refer their complaint to the Local Government and Social Care Ombudsman at any time. Generally, the Ombudsman will seek to ensure that the Local Authority has been provided with the opportunity to first respond to the complaint in accordance with the Council’s own statutory complaints process.

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10.2 During 2019/20, 5 complaints were received from the Ombudsman in relation to Adult Social Care matters. The outcomes were as follows:

- 1 complaint was not investigated as it concerned Richmond Housing Partnership.
- 2 complaints, about a care plan and a financial assessment, were 'premature' and returned to the Council to be addressed through the adults' complaints process.
- 1 complaint concerned contract monitoring but was closed as the Investigator was not satisfied with the consent form provided and the complainant did not respond when it was queried. This is a holding decision, and the case will be reopened if a new consent form is received.
- 1 complaint requesting information about a relative's accommodation was not investigated as it falls under the ICO's remit.

11. Learning from complaints

11.1 Complaints learning is a key component of service improvement and quality assurance for the department. Complaints provide invaluable information which can be used to identify issues in services, help staff learning and also identify any risks and so improve services for the future, based on people's own experiences. Some of the learning identified is detailed as follows:

- Several complaints during 2019/20 centred on the quality of care delivered by some of the Adult Social Care commissioned services. The Directorate's Quality Assurance and Contract Monitoring Team manages its commissioned care providers very carefully, has good working relationships with them and is in regular contact. Any issues are monitored closely and detailed actions to rectify issues are implemented satisfactorily. Examples of actions and learning taken forward include:
- the family of a service user raised concerns about the quality of home care, the agency acknowledged some protocols (food expiry and missing keys) had not been followed as expected. Going forward the agency sought to improve adherence to the protocols and sent communications to all staff emphasised these issues.
- The RRRT health and social care team has added suspension of care to the admission screening template to ensure this action is not overlooked or omitted. In addition a Senior Social Worker will have oversight when transferring cases.
- Some complaints focused on the length of time it has taken to undertake care assessments and complete care plans. The Directorate acknowledges that there is more to be done in this regard, for example referrals from the Access Team to the Locality Teams need to be done in a timely manner to avoid delays.

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- 11.2 Poor attitude by front-line staff leads to a negative experience of the Council's customer service was also a complaints issue – officers in the Directorate work very hard to ensure all customers have a positive experience; in the rare circumstances where this is not the case, staff retraining is quickly implemented and service users regularly communicated with. For example:
- the Brokerage Service is requesting more frequently up-to-date care provider lists from surrounding boroughs to aid the sourcing of a care provider when someone is not residing in the borough.
 - to ensure good customer service, improve communication and prevent delays in care needs assessments. The Access Team have held briefing sessions with staff and key issues (i.e. accurate case recording) are part of team meeting agendas. The team is also ensuring there is an emphasis on call backs to keep service users and their families updated and caseloads are being monitored more closely.

12. Compliments

- 12.1 Positive feedback regarding staff or service delivery is another way in which the department can learn how well things are going. Staff are reminded to report compliments they receive and recognise the value of sharing this feedback.

What people said:

"I would like to thank you very much for everything you have done for me and my back up carer. Thanks to your determination and will to help us you have achieved everything we needed"

"I would like to express how grateful I am to you and everyone in your department for all your help. A few short months ago XX visited my home to discuss my care package. As I was experiencing such problems at this property, I literally blurted out everything to her about my situation and how I was experiencing a real low episode. Unfortunately, in the last few years I have lost faith a little in human kind so it came as a surprise to encounter such a kind, empathetic and sincere person. XX is very special and has made my life so much more tolerable and in fact since I encountered her I have started making efforts to improve my life particularly in the area of getting a transfer from this property where I have been living in abject hell and misery .My mood and actions have improved so much entirely because of Richmond Social Services and in particular XX. Yourselves are having a major positive impact on my life and whatever happens in the future I shall always be eternally grateful. Please could you forward this email to your bosses? I am glad to live in an area where the Local Authority genuinely cares for the people that live within it."

"My wife and I were at the Full of Life fair and spoke to XX. I have recently been registered blind with the Council and asked a few questions regarding assistance available through the Richmond Council. XX was most helpful and put us both at ease whilst fully explaining the help on offer. Today XX came to our home and informed me of various items and services to assist me now. XX had an approach to

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her work that was both friendly and professional which put us at ease at this difficult time. XX is a credit to your service.”

“I just wanted to thank you for your incredibly professional help in arranging for xxx to move. We will be forever grateful as we think it is the right place for her.”

13. Going forward

13.1 The key priorities for 2020/21 are as follows:

- There have been several Challenges during 2019/20 within the Complaints Team in relation to staffing capacity and turnover, as well as around complaint processes and practices that have impacted on the support the central team can provide. There is however a significant change and improvement programme underway including:
 - **Stabilising staffing in Complaints** – the priority is to finalise recruitment to existing vacancies at Management level within the team that are being filled on an interim basis. While also ensuring there is sufficient capacity at complaint officer level particularly during the change programme that is nearing completion (detailed further below). This will help bring further stability, consistency and continuity to the support the Complaints Team provides to Adult Social Care and Public Health Services.
 - The Implementation of a **new case management system (CMS)** across all complaints types which will improve workflow, processes and reporting including insight into and learning from complaints. It will also **overcome the IT fragmentation and vulnerabilities** of current complaints recording, enabling more effective monitoring and reporting and will provide more accurate and timely oversight of complaint volumes and performance.
 - The new CMS is due to go live for **Corporate Complaints by 1 January 2021** followed by **Statutory Adults and Childrens Complaints in early in the New Year**. Reporting on complaints to Adults Service is currently limited to the Annual Report and bi-weekly open complaints reports that are circulated to the Senior Management Team. The New CMS will enable Quarterly and Annual Reports to be produced on a more, timely basis as well as real time and service specific and tailored reporting on the status, timescales, outcomes and learning from complaints that is not currently possible. The automation and capacity benefit's the CMS will bring, will enable the complaints team to provide more advisory support, quality assurance and training to services.
 - The Complaints Team will also look to **actively promote the Complaints procedure** across all social care teams to ensure that staff are aware of the requirements of the process and know how to deal with a complaint. Once the permanent Complaints Manager is in post key areas of focus will be **attending operational team meetings** to directly

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address the importance of complaints awareness. The Complaints Manager will also **re-establish regular meetings** with key personal in Adults around learning from complaints to ensure it is fed into ongoing service development, quality assurance and staff development and training.

- The complaints team will ensure that any changes to the national guidance and regulations are reviewed regularly.