Adult Social Care Annual Complaints Report

Barnet Council Adults and Communities

2017-2018

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1. Introduction

Adults and Communities is part of Barnet Council, providing statutory social care services including a range of preventative services. Social Care Direct acts as the front door for new Adult Social Care enquiries and is operated by the Council's Customer Support Group.

Comments, complaints and compliments are welcomed by the Council and are seen as a tool to help improve and develop service and practice. They provide the opportunity to learn from mistakes and to put things right for an individual when they have gone wrong.

Barnet Council is required, under statutory regulations, to report annually to the relevant Council Committee on Adult Social Care complaints.

This report provides information about adult social care complaints for the period 1 April 2017 to 31 March 2018. The report considers complaints dealt with through both the Statutory Adult Social Care and Corporate Complaints Procedures where these relate to Adult Social Care.

2. Adult Social Care Statutory Complaints Procedure

The Council is required to operate a separate Statutory Complaints and Representations procedure, in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (hereby referred to as 'the Regulations'). Any complaint which does not fall under these requirements is considered under the Council's Corporate Complaints Procedure.

All complainants that have exhausted the Council's Statutory Complaints Procedure retain the right to approach the Local Government and Social Care Ombudsman. The LGSCO are impartial and independent and act as the final stage for complaints about the Council, Social Care Providers, Care Homes and Home Care Agencies.

3. Accessing the complaints procedure

Adults and Communities continually seeks to encourage people who use social care, and carers, to provide feedback (good or bad) on the services that they have received.

The complaints process is publicised through the following means:

- The Comments, Compliments and Complaints booklets are widely distributed to public offices in the Borough.
- The Easy Read version of the booklet 'Comments, Compliments and Complaints' is also widely distributed. This is aimed at people with Learning Disabilities and people whose first language is not English.
- Information about making a comment, compliment or complaint in relation to adult social care is published on the Council website at www.barnet.gov.uk/comments-and-complaints-adult-social-care
- Managers are asked to feature compliments and complaints as a standing item in their team meetings and briefing sessions.
- Compliments are shared with staff and promoted internally through the staff newsletter, notice boards, TV screens and staff awards.
- Staff and Managers are also encouraged to utilise the support services provided by the Complaints Team.
- Information about complaints is shared with the Management Team and with staff, to improve practice.

The Council has commissioned Barnet Citizens' Advice Bureau as the local lead provider for specialist information, advice and advocacy support. This ensures that the Council has a dedicated support service in place for people who require access to independent information, advice and advocacy. Barnet Citizens' Advice Bureau works with two subcontracted partners (Advocacy in Barnet and Mind in Barnet), and with other partners, to provide a range of advocacy services and support. Council adult social care staff are trained in accordance with the Care Act 2014 and staff understand their statutory duties in relation to advocacy.

4. Overview

Between 1 April 2017 and 31 March 2018, the Social Care Direct Team received: 52,146 contacts. In addition, Barnet adult social care:

- carried out approximately 3,000 new statutory care and support assessments and approximately 4,000 reviews;
- investigated 1,675 safeguarding concerns and carried out 667 safeguarding enquiries;
- provided 35,000 items of equipment and approximately 1,740 new telecare installations;
- supported 1000 adults in residential care; 419 adults in nursing care; and 420 adults in supported living
- provided enablement to 990 people and homecare to 1860 people.
- supported over 1,000 adults through direct payments and provided direct support to 650 family carers.

The following adult social care complaints and compliments were received by the Council from service users, carers and/or their representatives.

- 59 compliments
- 83 statutory complaints
- 1 corporate complaint
- 18 Local Government Ombudsman enquiries/complaints

Of the 83 statutory complaints, 73 resulted in an outcome, set out below, and 10 were withdrawn.

- 27 (37%) were Not Upheld
- 26 (36%) were Upheld
- 20 (27%) were Partially Upheld
- The one corporate complaint was Upheld.

Of the 18 enquiries/complaints received by the LGO:

- four preliminary cases were closed after initial enquiries.
- nine enquiries were signposted back for local resolution.
- one complaint was Upheld
- four complaints were Not Upheld.

Common themes from complaints include:

- Decision disagreement with the outcome of a care assessment; with a financial decision, or a decision made as a result of a statutory duty or national policy.
- Conduct relate to the conduct of staff employed by providers or services provided directly from Barnet.
- Quality relate to the quality service from care homes, care agencies or the management of care assessments.

Common themes identified for improvement from lessons learnt were:

- Staff/people work to address issues relating to the behaviour or conduct of a member of staff.
- Provider work with a provider to review working practices, policies and contract compliance.
- Procedure updates and amendments to, or staff reiteration of procedure.

The most common theme from compliments was praise for the work of individuals.

5. Compliments

Compliments are just as useful as complaints in helping the Council to improve its services. By having people tell the Council when things are done well, the Council can make sure that it continues to recognise and build on its strengths.

59 written compliments were received in 2017/18. 81% of these praised the work of individuals with the remaining 19% praising the work of the whole service.

The table below provides a more detailed picture of compliments by service area.

Service Area	2016-2017	2017-2018
Localities (Older People & Physical Disabilities)	15	11
Integrated Care Learning Disabilities	9	13
Integrated Care Quality	16	7
Assessment & Prevention	8	12
Other teams / functions	17	16

In addition, the Network (the Council's mental health enablement service) recorded high customer satisfaction results; 54 compliments were received via customer feedback questionnaires relating to The Network's impact on the client's life and recovery. 445 Enablement Group questionnaires were received complimenting the service's helpfulness, relevance to their needs and the effectiveness of staff.

Many service users that compliment staff and teams provide verbal feedback in care meetings or by phone; it has not been possible to reflect these in the above figures.

Learning from Compliments

The adult social care management team are appraised of all compliments received from service users and their families. Achievements are highlighted by managers in briefings to staff. Staff or teams who provide excellent customer service to internal or external customers are also recognised through the newly introduced Star Card Awards.

Examples of the compliments received in 2017-2018:



"Well done to you all for your amazing work, you really do change lives!"

"Big thank you for all your help and assistance with Dad's respite care. You have been amazing."

"Thank you for providing Care Facilities for my mum. The professionalism and dedication of your team and Care Staff was second to none. We are grateful to you all for your valuable support through this difficult time."

"XXX has been the epitome of professional, person centred, family orientated and sensitive practice. She alone has restored my confidence that ultimately my son will be safe and have a decent quality of life while living in Barnet."

"Thanks to XXX's assessment and recommendations XXX is now able to attend social activities within the shared living accommodation."

"XXX comes across as someone who truly cares. His sympathy for my family's situation was heartfelt and sincere. I would like to summarise by saying that XXX is a true asset to the Barnet Social Work Team."

Benchmarking data

The following benchmarking data compares the number of statutory compliments received against a selection of our nearest statistical neighbours¹:

Compliments received (Adults Social Care)	2016-2017	Per 100k population: ²
Barnet	65	21.9
Bexley	*	*
Brent	19	7.6
Bromley	50	19.6
Ealing	23	8.8

^{*} No published figures

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¹ Based on members of the group of nearest statistical neighbours identified by CIPFA, who also publish data on compliments and complaints.

² Population data based on the 18+ population according to ONS mid year estimates for 2017.

6. Complaints

6.1 Overview of performance

From 1 April 2017 to 31 March 2018, the Council received a total of 83 statutory adult social care complaints and one corporate complaint, a reduction from 2016-17 of 12.5%.

100% of complaints were closed within the statutory six-month timeframe and 100% of complaints were acknowledged within 3 days.

6.2 Complaints received by category

Of the 84 complaints received between 1 April 2017 and 31 March 2018, 83 were dealt with under the Statutory Social Care Complaints Procedure. The one corporate complaint received was resolved within corporate deadlines and was Upheld.

Of the 83 Statutory Complaints received:

- 67 were considered as straightforward complaints
- 6 were considered as serious and/or complex complaints
- 10 were withdrawn

Category	2016- 2017	%	2017- 2018	%
Statutory Straightforward (Low/Moderate risk)	75	78%	67	80%
Statutory Serious and/or Complex (High risk)	5	5%	6	7%
Withdrawn	13	14%	10	12%
Corporate	3	3%	1	1%
Total complaints	96	100%	84	100%

6.3 Statutory Complaint outcomes

Of the 73 complaints with an outcome:

- 27 were Not Upheld (37%)
- 20 were Partially Upheld (27%)
- 26 were Upheld (36%)

6.4 Statutory Complaints by Service Area

The table below provides a breakdown of statutory complaints figures for complaints with an outcome:

Service Area	Statutory Complaints (2016-17)	Statutory Complaints (2017-18)	DOT	No. of cases Upheld (2017-18)	No. of cases Upheld (2016-17)	No. of cases Partially Upheld (2017-18)	No. of cases Partially Upheld (2016-17)
Localities (Older People & Physical Disabilities)	47	26	<	7(27%)	16 (12%)	7 (27%)	19 (40%)
Assessment & Prevention	-	5	-	1	-	0 (0%)	-
Review Team	-	7	-	2	-	3	-
Social Care Direct	1	0	<	-	0 (0%)	-	0 (0%)
Integrated Learning Disabilities	14	10	<	5 (50%)	6 (43%)	3 (30%)	5 (36%)
Mental Health	3	5	>	2 (40%)	1 (33%)	2 (40%)	1 (33%)
Customer Financial Affairs	3	6	>	0 (0%)	0 (0%)	2 (33%)	1 (33%)
Integrated Care Quality	2	6	>	5 (83%)	1 (50%)	1 (17%)	1 (50%)
Hospitals & Health Partnerships	10	7	<	4 (57%)	2 (20%)	1 (14%)	6 (60%)
Safeguarding	0	1	>	0 (0%)	-	1 (100%)	-
Total	80	73	<	26 (36%)	26 (33%)	20 (27%)	33 (41%)

The Localities, Assessment & Prevention, and Review Teams all deal with older people and people with physical disabilities. Review Team figures were previously reported under Localities, however to improve our analysis they are now independently monitored.

The majority of complaints were Not Upheld in 2017/18, in contrast to last year when the majority of complaints were Upheld or Partially Upheld.

The Integrated Care Quality Team Upheld or Partially Upheld all complaints received into their area; of the six complaints received, five related to dissatisfaction with their homecare agency and one related to a care home experience.

Complaints regarding the quality of service received from care providers and care homes are passed to providers for initial investigation. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, Adults and Communities may take further action.

Adults and Communities' approach of learning from all Upheld or Partially Upheld complaints improves not only our procedures and operations but the services delivered by providers.

6.5 Complaints by category

The table below identifies complaints by subject and the investigation outcome:

	Category	Upheld	Partially Upheld	Not Upheld	Total
	Care Assessment - Assessment disagreement (including unhappy with decision)	0	3	6	9
Decision	Finance - Assessment disagreement (including unhappy with decision)	0	1	6	7
De	Care Home - Assessment disagreement (including unhappy with decision)	0	0	1	1
	Total	0	4	13	17
	Care Assessment - Conduct of staff (attitude/behaviour)	2	2	2	6
rct	Care agency - Conduct of staff (attitude/behaviour)	2	0	0	2
Conduct	Care Home - Conduct of staff (attitude/behaviour)	1	0	0	1
Ö	Staff Conduct behaviour – General	0	2	3	5
	Total	5	4	5	14
	Care agency - Quality of service	3	1	0	4
<u>li</u>	Care Assessment - Quality of service	0	3	1	4
Quality	Care Home - Quality of service	2	0	1	3
	Total	5	4	2	11
and	Care Assessment - Assessment delay (including delay in making a decision)	3	0	0	3
Timeliness and Delays	Care agency - Assessment delay (including delay in making a decision) Finance – Timeliness	0	0	0	1
imel		·			
-	Total	4	1	0	5
äti	Care Assessment - Lack of communication	5	2	0	7
Communic	Finance - Lack of communication	0	3	1	4
Con	Total	5	5	1	11
	Care Assessment - Equipment provision/ Installation	0	0	2	2
	Care Assessment -Assessment request (process)	1	0	1	2
Other	Other	3	2	2	7
DE C	Hospitals – Quality of Service (Hospital)	2	0	0	2
	Hospitals - Discharge process	1	0	1	2
	Total	7	2	6	15
		26	20	27	73

Decision

The largest number of complaints received were due to dissatisfaction with a decision reached by the Council; for example, the outcome of a care or financial assessment, or disagreement in relation to a financial decision. Over 76% of these complaints were Not Upheld as the complaint results from a statutory duty in relation to regulations or national policy, where the Council has to implement the statute, such as the regulations regarding financial assessment.

Where complainants are unhappy with the outcome of an assessment, Adult Social Care can offer a reassessment or take into consideration changes of circumstances where these are relevant.

Conduct & Quality

These complaints relate to services provided directly by Council staff or relate to the quality or conduct of staff employed by social care providers. Quality issues with Barnet's own services are addressed through Adults and Communities Learning from Complaints procedure and through line management. Any resulting changes to policy or procedure are monitored by a dedicated management group. Quality issues with provider services are addressed through the Council's contract management procedures and lessons learned are fed into the work of the Integrated Care Quality team to inform their work with providers to improve quality.

Delays & Timeliness

All complaints relating to timeliness have been Upheld. This category relates to the time taken to carry out an assessment or provide a service. Waiting times for assessments and for reviews are the main cause of complaints relating to timeliness.

The Council always seeks to avoid delays in assessing or reviewing clients, but as social care is a demand led service this is not always possible. The service targets resources to ensure the most urgent cases and people with the highest levels of need are prioritised but this can understandably still be dissatisfying for members of the public whose assessments have not been prioritised.

Communication

A high number of complaints due to lack of communication have been Upheld or Partially Upheld. These are generally between workers, teams or departments within the Council; many cases stemming from the hand-over of cases from staff who have left the organisation. As a result of these issues being identified, services have implemented absent worker policies and a leavers handover checklist.

6.6 Timeliness of responses to statutory complaints within the internal 20 working day target

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 Statutory Complaints guidance allows six months (commencing on the day on which the complaint was received, or such longer period as may be agreed before the expiry of that period) for the resolution of Social Care statutory complaints.

To ensure that this statutory target is met, Barnet sets an internal target of 20 working days for straightforward complaints and 25 days for more serious or complex cases to ensure that complaints are responded to in a timely manner.

The table below provides a quarterly overview of response times and a quarter by quarter comparison to 2016-17.

	2016-17		201	7-18
Quarter	No of complaints (ex withdrawn)	Average no of working days to respond	No of complaints (ex withdrawn)	Average no of working days to respond
1	17	18	27	17
2	24	17	19	23
3	18	20	14	18
4	21	18	13	22
Total	80	18.25	73	20

More than 70% of the complaints responded to outside our internal timescales are complaints requiring joint investigations with either external social care providers or the NHS.

Complaints about external providers being received through the Council's complaints process must be either signposted to the provider's internal complaints process or managed through our complaints procedures on behalf of the complainant. We do ask partner organisations to work within our timeframes; however, the Council has limited power to enforce this.

There are an increasing number of complaints which deal with integrated care; these are joint Adult Social Care/NHS complaints, and therefore require a multi-agency approach. This can have a detrimental impact on the Council's performance against its internal response target as the co-ordination of responses means that the Council may be obliged to work to the Statutory Social Care and National Health Service timescales, which allow a six-month timeframe for complaints to be investigated and responded to.

It is standard practice to send holding letters prior to the target response date, to inform complainants of any anticipated delays and to advise revised deadlines. Investigating managers maintain communication with complainants (with their agreement), informing them of progress throughout the investigation of their complaint and offering support, guidance and advice prior to formal complaint resolution.

Adult Social Care Statutory Complaints – Benchmarking

The following benchmarking data has been collected to compare the number of statutory complaints received against figures for a selection of our nearest statistical neighbours:

Borough	2016-17 Total statutory complaints received	Per 100k population:
Barnet	73	24.6
Bexley	44	23.2
Brent	83	33.0
Bromley	245	96.0
Ealing	103	39.5

7. Learning from Complaints

Learning from the complaints we have received provides us with an opportunity to ensure that improvements are made.

Lessons learnt are captured for all complaints which are Partially or fully Upheld. Any learning or training needs identified are required to be recorded by theme, with relevant actions identified and implemented to prevent further occurrences.

Lessons learnt actions and the themes drawn from complaints are presented regularly for discussion and challenge at a senior adult social operational group tasked with improving the quality of social care practice.

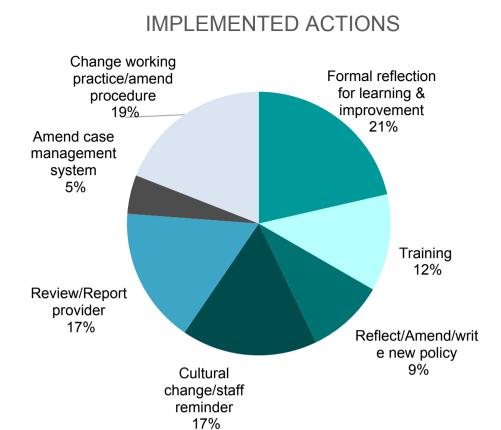
In 2017-18, 89% of lessons learnt forms identified that there was learning to be gained from the complaint; but in many instances, outcomes to complaints are case specific and there are no general learning points that would influence policy or procedure. Individual issues and staff/team specific learning is addressed through training, reflection, supervision and team meetings.

The table below categorises the learning themes and the percentage of all lessons learnt which fell into that category. The table also identifies the agreed actions the service has taken to mitigate any further complaints.

Theme	% of lessons identified	Action
People - issues relating to the behaviour or conduct of a member of staff	40%	Formal reflectionTrainingStaff reminder
Policy review or amendment of a formal policy to reflect the need for change	10%	Review of policyAuditAmend policy
Systems preventative updates /amendments to system/s, staff training on systems or applications	3%	Amend systemChange working practice
Procedure changes to current procedures and working practice as a preventative measure	27%	Change working practiceAmend procedureCultural change
Provider work with a provider to review working practices, policies and contract compliance	20%	 Report finding to provider Review contract Suspend provider

7.1 Positive improvements

The graph below identifies the actions implemented in the year to address the issues identified in our learning from complaints.



Examples of some of the preventative change resulting from learning from our complaint investigations:

Lesson Identified	Outcome
Preventable delays in identifying and securing supported living accommodation	Quality plan implemented: sets out expectations (Managers & practitioners) to ensure that case reviews and communications are improved.
Delay in the progression of Disabled Facilities Grant Application	Absent Worker Policy developed by Head of Service and distributed to all Locality Team Managers.
Quality of care provided by agency. Issues with attendance and attitude of staff	Providers instructed to include quality checks in their mitigation plans. Contract Monitoring Officers to evidence documents for quality checks during visits.

8. Local Government Ombudsman (LGO)

The Local Government and Social Care Ombudsman (LGSCO) is an external body that looks at complaints relating to councils and Adult Social Care providers. The LGSCO investigate matters where there is an alleged or apparent 'maladministration' or service failure.

A complainant has the right to raise a complaint with the LGSCO at any time, however the LGSCO request that complainants contact the authority before they will consider a complaint to give the authority the opportunity to resolve any issues.

8.1 Complaints and enquiries dealt with by the LGSCO 2017-2018

The table below shows the total number of new LGSCO enquiries received by Adults and Communities for the period 1 April 2017 to 31 March 2018 and provides a comparison to previous years:

	2015-2016	2016-2017	2017-2018
Enquiries/Complaints	19	22	18

18 enquiries were received:

- four preliminary cases closed after initial enquiries.
- nine enquiries were signposted back for local resolution.
- one complaint was Upheld
- four complaints were Not Upheld.

The Ombudsman Annual Review: A Tool for Change report (July 2018), highlights that London accounts for the highest proportion of complaints, of all the regions, with 25% of all complaints being about London authorities. The report also highlight that London also has the highest uphold rate, with 63% of all detailed investigations being Upheld.

The low number of complaints investigated by the Ombudsman for Barnet suggests the investigations being undertaken by Managers are clear and transparent. The low number of complaints Upheld indicates that good complaint investigation and practice is taking place.

8.2 LGSCO Benchmarking

Borough	Enquiries/Complaints	Per 100k population:
Barnet	18	6.1
Bexley	8	4.2
Brent	16	6.4
Bromley	21	8.2
Ealing	7	2.7

9. Maturity Model

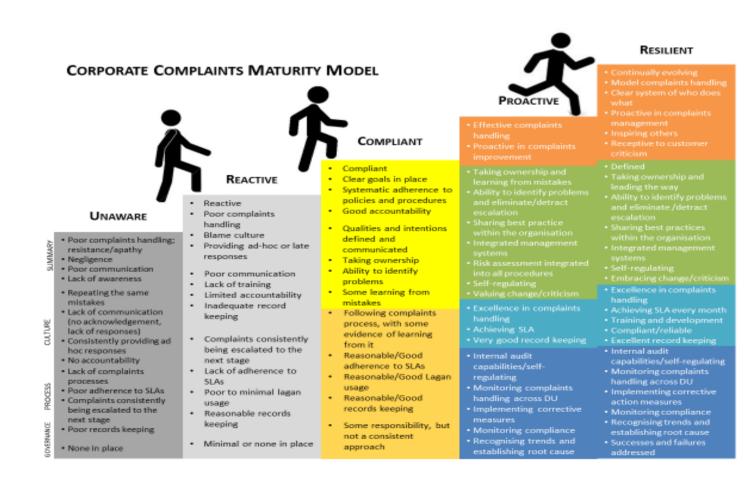
In 2017 the Complaints Maturity Model (MM) was launched to help improve complaints handling across the Council.

The Maturity Model assessed the following areas of complaints management:

- complaints performance (including Local Government Ombudsman cases)
- audit processes and observations
- risk assessment
- compliance with policies
- behaviour.

Each assessment area was audited and scored against a range of criteria and warranted as either; Poor, Room for improvement, Good, Very good or Excellent. Adults and Communities engaged fully in the process and were awarded scores of Good, very good or excellent in all categories.

Our assessment outcome was 89%, the highest of all awards for Level 4 maturity. This rates Adults & Communities as 'Proactive' in its management of complaints. There were no awards at Level 5. Further detail of the maturity model and the different ratings is set out in the diagram below. To respond to the assessment, Adults and Communities is working with the Corporate Complaints Manager to formulate a specific improvement plan to address areas requiring development in a bid to continuously improve our complaints management.



10. Responding to complaints and concerns about quality relating to external service providers

The Council is responsible for ensuring its contracted providers meet the high standards they have been set.

The Council requires all external providers of care and support services to operate a complaints procedure. For services regulated by the Care Quality Commission under the Care Standards Act 2000 (Homecare, Residential Care and Supported Living), this is a statutory requirement. For services that are not regulated, there is no statutory requirement but all new contracts for services commissioned by the Council include a requirement to have a complaints procedure. This is also examined during the procurement process.

Where a person who used social care services or their representatives raises a concern about the quality of an external provider with the Council, the Care Quality Service logs the matter and passes it to the provider to investigate, in line with their complaints procedure. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, Adults and Communities may take further action, through the complaints process if this is the most appropriate route.

We take complaints about providers very seriously, both to ensure individuals and their carers receive high quality services and to learn lessons and make improvements more widely where necessary.

If it is found that a provider regulated by the Care Quality Commission (CQC) does not meet the CQC's fundamental standards, the Council will inform the Commission, taking action first and foremost to ensure the safety of individuals and, once this is established, working with the provider to improve their standards.

Monitoring Care Quality

The quality of care and support services is monitored by the Care Quality Service through a range of contract compliance mechanisms. These include:

- Contract monitoring visits, which include a review of complaints management by the provider.
- Quality alerts, which are written / telephone / electronic communications alerting us to a shortcoming in the delivery of a service.
- Working with the Care Quality Commission as appropriate when services do not meet the fundamental standards below which the provision of regulated activities and the care people receive must never fall.
- Responding to any other events, including safeguarding incidents which indicate that the provider is not fully complying with contractual requirements.

The table below provides a breakdown of concerns about external provider quality that were passed to those providers to investigate and those that were managed within Adults and Communities in the past three years:

	2015 - 2016	2016 - 2017	2017-2018
Complaints and quality alerts	146	123	94
Complaints managed within Adults and Communities	28	7	3
Total	174	130	97

The number of complaints and quality alerts managed through the Care Quality Team has reduced from 130 last year to 94 in 2017/18. Analysis of these events shows that:

- 47 were about the quality of service provided
- 7 related to the conduct of staff
- 28 concerned the non-delivery of service
- 12 were in relation to timekeeping.

Issues about non-delivery of service and quality of service and staff provided by homecare agencies accounted for the majority of both complaints and quality alerts managed by providers, and complaints about providers managed by Adults and Communities, in 2017-18.

Improving Care Quality

The Care Quality Service works with both:

- Care Homes and Supported Living Providers
- Home & Community Services

The teams include staff from a range of different disciplines, including social work professionals, registered managers, the Care Quality Commission and qualified nurses to work with providers in partnership to deliver high quality services.

The service delivers a range of practice sharing and training events including:

- Monthly Practice Forums (supported by Skills for Care).
- Action Learning Sets.
- Specialist Network Support groups including Learning Disabilities, Mental Health, Older Adults, Activity Co-ordinators and Nurses.
- Specialist workshops run in conjunction with other professionals, for example Barnet CCG,
 North London Hospice, Safeguarding month and Mental Capacity month events.
- End of Life care planning.

The reduction in complaints and alerts highlights the positive work carried out with providers by these services. Through the provision of training, monitoring, support and engagement strong working relationships have been formed. This approach facilitates providers in raising concerns with us, and to seek guidance/support before they become an issue or complaint.

An example of the positive impact of this level of engagement is that currently all contracted homecare providers in Barnet have a CQC inspection rating of 'requires improvement' or above. None are rated as inadequate or contractually under formal action.