Report No. CS12010

London Borough of Bromley

Agenda Item No.

PART 1 - PUBLIC

Decision Maker: Care Services Policy, Development and Scrutiny Committee

Date: 19 June 2012

Decision Type: Non-Urgent Non-Executive Non-Key

Title: ANNUAL REPORT ON ADULT & COMMUNITY SERVICES

COMPLAINTS RECEIVED APRIL 2011 TO MARCH 2012

Contact Officer: Aileen Stamate, Quality Assurance Manager (ECS Strategic & Business

Support Services)

Tel: 020 8313-4753 E-mail: aileen.stamate@bromley.gov.uk

Chief Officer: Anne Watts Assistant Director (ECS Strategic & Business Support Services)

Ward: Boroughwide

1. Reason for report

This report provides PDS Members with an overview of the main issues raised and lessons learnt from this year's Annual Report on Adult and Community Services Complaints received April 2011 to March 2012 (Appendix 1)

2. RECOMMENDATION(S)

The Committee are asked to consider and comment on the contents of this report.

Corporate Policy

- 1. Policy Status: Existing policy.
- 2. BBB Priority: Excellent Council.

<u>Financial</u>

- 1. Cost of proposal: N/A
- 2. Ongoing costs: N/A.
- 3. Budget head/performance centre: Complaints Service Quality Assurance Budget
- 4. Total current budget for this head: £57,925
- 5. Source of funding: Education and Care Services Approved 2012/13 Revenue Budget

<u>Staff</u>

- 1. Number of staff (current and additional): 1.67 FTEs
- 2. If from existing staff resources, number of staff hours: as above

Legal

- 1. Legal Requirement: Statutory requirement.
- 2. Call-in: Call-in is not applicable.

Customer Impact

 Estimated number of users/beneficiaries (current and projected): During 2011/12 8,301 people received adult social care and as at May 2012 there are 1,571 residents on the Bromley housing register.

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? N/A.
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 The annual report (Appendix 1) details complaints information received over the year from all areas of the Adult & Community Services Department (now part of the Education and Care Services Department). Formal adult social care complaints are dealt with under the Local Authority Social Services and National Health Service Complaints (England) regulations, 2009; complaints about housing and other adult and community services are dealt with under the Council's corporate complaints procedure.
- 3.2 Both complaints procedures follow the same process, which involves investigation, resolution, and outcomes. This year the Department received 210 formal complaints. If complainants remain dissatisfied with the Council's response, they may refer their complaint to the Local Government Ombudsman. This year we received 21 Ombudsman enquiries
- 3.3 Complaints provide the Department with information about service quality which helps to inform future planning and performance management. The Complaints Manager records informal complaints in order to capture details of underlying issues, before they become more serious or escalate to formal complaints.

4. ADULT SOCIAL CARE COMPLAINTS

- 4.1 During 2011/12 over 8300 people received a range of adult social care services and 2,447 people had an assessment of their needs. Given the volume of social care services provided to people in Bromley, there are inevitably times when service delivery may not fully meet intent or expectations. Overall, there were 112 formal complaints received by adult social care in 2011/12 which was a decrease of 40% (185) from the previous year.
- 4.2 Of the 110 adult social care complaints resolved during 2011/12 48% (53) were upheld; 86% (95) were resolved within twenty working days, which is a marked improvement on the previous year's performance of 74%. In part, this is due to improved staff awareness and skills in complaints resolution.
- 4.3 The number of complaints regarding adult social care resolved before reaching the Local Government Ombudsman (LGO) is high, at 90% (99). The LGO investigated 11 adult social care complaints during 2011/12. One was fully upheld, 2 partially upheld and 4 were not upheld. Of the remaining complaints, the Council succeeded in resolving 3 locally, while one was withdrawn by the complainant.
- 4.4 As might be expected most complaints relate to operational services; and this year we received 86 (98%) complaints have been resolved and of these 43% (37) were upheld. The table below sets out the types of complaint received.

Type of Complaint	Total Received	Total Upheld
Quality of Service	14	9
Attitude of Staff	15	2
Non-Provision of Service	10	4
Incorrect Billing	6	4
Service Delay	7	5
Missed Call	2	2
Other	4	2
Disputed Decision	14	3
Assessment Quality/Delay	6	4
Funding/Back Payment Issues	10	2
Total	88	37

- 4.5 Of the nine complaints upheld about quality of service, there were 2 complaints about care plans not followed and 3 complaints about incorrect or no medication given. The Contracts Monitoring Team works with domiciliary care agencies to investigate these concerns; and to ensure changes and improvements to service provision is made as a result. The points raised by these complaints have been discussed at the Domiciliary Care Forum and issues around medication will remain a priority over the coming year.
- 4.6 Minimising instances of missed calls by domiciliary care providers is a priority for the Department and last year the Department upheld/partially upheld 2 complaints about missed calls compared to 16 complaints upheld during 2010/11. The continued roll out of the data capture system; which records when carers arrive and leave the clients' premises; and the support to the agencies from the contracts monitoring officers, has helped to lessen the instances of missed calls.
- 4.7 The Department has received a small number of complaints and the outcomes from two Ombudsman's decisions regarding lack of information in relation to charges. In response to these concerns, the Department has revised the written information it provides to clients and their family, so they are fully informed of the charges they will incur prior to commencement of services. Since the information has been revised, there have been no further complaints relating to the information about charges.
- 4.8 The Quality Assurance Team has developed an in-house complaints training course and the first session was held in May 2012, with more planned over the coming year. The training is aimed at helping our front line staff focus on resolving concerns early, without the need for service users to engage the formal complaints procedure. The team continues to offer regular complaints surgeries for managers and heads of service requiring assistance in complaint handling.

5. HOUSING COMPLAINTS

- 5.1 During 2011/12 there were 53 complaints received about housing services compared to 83 in the previous year, a reduction of 36%. This reduction has been achieved during a time of significant change with the implementation the revised housing allocation scheme. Officers worked to ensure that the changes were effectively managed by providing applicants with improved information. Of the 50 complaints resolved 26% (13) were upheld. It is noteworthy, that housing enquiries are increasingly being received via MPs and Members.
- 5.2 Of the 9 complaints taken to the Local Government Ombudsman (LGO) this year about housing, none were upheld. The LGO was satisfied in all instances that the Council's housing service had acted appropriately and correctly followed their procedures.

6. CHANGES AS A RESULT OF LESSONS LEARNT INCLUDE:

- 6.1 Following a miscommunication between hospital and care management staff all cases requiring a care package are checked by a duty senior to ensure appropriate support is in place prior to hospital discharge.
- 6.2 Following a complaint from a client's family that a client's funds had been inappropriately managed by care support staff following a client's move into a new supported living placement; the Learning Disabilities Team has new guidance and procedures for developed a 'tool kit' for support staff and care managers to refer to, when planning for a client's move into supported living.

6.3 Senior managers in the Assessment & Care Management Team reviewed the information provided to clients prior to receipt of a reablement package. Improvements in the text of these documents have been made and will ensure clients are provided with the Council's policy on charging; so misunderstandings do not occur and in future. The care manager will ensure the document is signed by the client or their family once it is agreed the information contained has been read and understood.

7. POLICY IMPLICATIONS

The provision of an effective complaints procedure and the regular monitoring of this process with a view to improvement, are consistent with the key aims of the Council as set out in Building a Better Bromley.

8. FINANCIAL IMPLICATIONS

There is no specific budget identified for resolving complaints, and any compensation payments are covered from within service budgets. The total expenditure of £7100 in payments resulting from complaints has been managed in overall resources of the Department.

9. LEGAL IMPLICATIONS

- 9.1 The Social Services Department of a Local Authority is required under the provisions of The Local Authority Social Services Act 1970 (as Amended) and The Local Authority Social Services (Complaints Procedure) Order 1990 to have in place a complaints procedure to deal with matters brought to the Authority's attention.
- 9.2 In 2011/12 Social Care complaints for adults and older persons were dealt with using the Local Authority Social Services and National Health Service Complaints (England) regulations, 2009.

Non-Applicable Sections:	Personnel Implications
Background Documents:	Ombudsman's Report Executive Report RES11068 July 2011
(Access via Contact	Annual Report on Adult & Community Services Complaints April
Officer)	2011 to March 2012