FOREWORD BY ANNE WATTS ASSISTANT DIRECTOR STRATEGIC AND BUSINESS SUPPORT SERVICES

This year Adult Social Care and Housing Services provided services to over 8300 residents in the Borough and most of the time when services are provided they have run smoothly. There are times however when we do get things wrong and when this does happen, the important thing is to deal with people's concerns as effectively as possible and to make improvements to our services wherever necessary.

Trying to resolve complaints at the earliest opportunity enables us to achieve positive outcomes for both the person making the complaint and for the organisation. Although we understand some issues may be complex and will require some time to investigate, it is generally not beneficial for people to have to follow a lengthy process; especially if the matter is quite straightforward. One of the priorities for the Quality Assurance Team over the coming year will be to continue to promote early settlement of complaints and the team will support service users and staff, to resolve complaints at the first point of contact whenever possible.

We are committed to the continual improvement of the services we deliver and commission. Our customers' complaints are vital, highlighting when our services fail to meet the expected standards. Equally, compliments are also important in showing us where we have succeeded and this year, 60 customers took the time to write and tell us about their positive experiences.

Our complaints service has handled 210 formal complaints and the learning from many we have investigated has resulted in improvements to service standards. We ensure a fair and robust investigation takes place when a complaint cannot be resolved at the early stages, and have developed monitoring systems to ensure those who complain are fully informed of the progress of their complaint. We will continue with this approach of complaint resolution and ensure we continue to learn from service users' experiences of our services.

Section 1. Overview

The following report is a summary of complaints activity across adult social care and housing for the year 2011-2012. The aim of the report is to present an update on the number and type of complaints received from April 2011 to March 2012 and the lessons learnt from those complaints. Next year the annual report will bring together information across adult and children's social care and housing services.

Adult social care complaints are dealt with under the statutory complaints procedures as set out within The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009. Housing and corporate complaints are dealt with through the Council's own corporate complaints procedure.

Following a review of the Department's complaints procedures and advice from the Local Government Ombudsman the complaints procedures have been revised to make it clearer that in cases where complaints are made by third parties on behalf service users, the service user's consent should be sought where they have capacity.

This year there were 210 formal complaints handled by the ACS Department with 112 adult social care complaints and 98 corporate complaints. During the year 205 of these complaints have been resolved with 66 (32%) being upheld. Sections 2 and 3 outline the detailed social care complaints activity and section 4 outlines the corporate complaints activity.

2. Adult Social Care (Statutory Complaints)

This year the Quality Assurance Team has received 345 contacts; of these, 33% (112) were handled as formal complaints (those requiring investigation) and 20% were managed as informal complaints (could be immediately resolved by the complaints team and service involved), thus avoiding escalation. (Please see Section 6 for further information regarding informal complaints).

The table below shows the number of adult social care related contacts the Quality Assurance Team received in 2011/12.

Adult Social Care Contacts Received 2011/12							
Formal Complaints	112						
Informal Complaints	69						
Comments/Enquiries	77						
Compliments	43						
Ombudsman Enquiries	11						
MP/Member Enquiries	23						
Adult Safeguarding	9						
Other	1						
Total	345						

The 112 formal complaints received for adult social care in 2011/12 was a 40% (185) reduction on the number received for the same period the previous year; This drop can be attributed to several factors; including a marked decrease in complaints about domiciliary care services, charging and finance.

These formal complaints have been classified as operational complaints 88 (see section 2.1 for more information) and as information, lack of action and policy complaints 24 (see section 2.2 for more information).

During the year 110 (98%) of the formal complaints have been resolved, of these 95 (86%) have been resolved within the Department's 20 working day timescale; exceeding the Department's target of 85% which is a further improvement on last year's response rate of 74%. Where the timescale is unlikely to be met we have continued to ensure that clients are kept informed of the progress being made to resolve their complaint.

2.1 Operational Complaints

Most of the complaints received this year related to operational issues. The table below shows a breakdown by subject of all the operational complaints received in 2011/12; and the number that we fully or partially upheld. Of the 86 operational complaints resolved in this period, a total of 37 (43%) were upheld. Please note: 2 operational complaints received are still active.

Outcomes	Total Received	Upheld	Partially Upheld	Total
Quality of Service	14	2	7	9
Attitude of Staff	15	1	1	2
Non-Provision of Service	10	0	4	4
Incorrect Billing	6	0	4	4
Service Delay	7	3	2	5
Missed Call	2	1	1	2
Other	4	2	0	2
Disputed Decision	14	0	3	3
Assessment Quality/Delay	6	2	2	4
Funding/Back Payment Issues	10	1	1	2
Total	88	12	25	37

The table below is a breakdown of complaints recorded under the 'Quality of Service' category the area where most complaints were received; and the number that were fully and partially upheld.

Quality of Service Breakdown	Total Received	Upheld	Partially Upheld	Total
Poor service given by carer	1	1	0	1
Lack of Consistency	2	0	1	1
Manual Handling Issues	1	0	0	0
Poor English Language Skills	1	0	1	1
Damage/Loss of Personal Items	1	0	0	0
Care plan not followed	3	0	2	2
Incorrect/No medication given	4	1	2	3
Financial Statement	1	0	1	1
Total	14	2	7	9

2.2 Information, Lack of Action & Policy Complaints

This category received 24 formal complaints this year, 8 (33%) were upheld:

- 11 complaints related to the failure to communicate and the provision of incorrect information. All have been resolved and 4 were either fully or partially upheld while 7 were not upheld.
- 8 complaints related to lack of action; 4 were upheld and 4 were not upheld.
- 5 complaints related to policy and none of these were upheld.

Section 3. Complaints Received by Team

This section looks at the formal complaints received and resolved by service area. The table below shows the number of complaints received by service area over the last three years.

Teams	2009/10	2010/11	2011/12
Combined Care Management Teams	62	64	56
Learning Disability & Mental Health	39	13	11
Direct Care Services	51	36	8
Finance/Charging	43	22	18
Contracted Services	56	38	19
TOTAL	251	173	112

3.1 Combined Care Management Teams

The combined care management teams received 56 complaints during 2011/12 of the 55 resolved 20 (36%) were upheld or partially upheld and 48 (87%) were resolved within 20 working days.

		mplex e West		mplex e East		ospital Feam		Re- blement sessment	Review Team																						Intermediate Care			ontact essment
Complaints Received		15		19	8		8 4		5		2		3																					
Resolved within 20 working days	11	78%	17	89%	7	88%	3	75%	5	100%	2	100%	3	100%																				
Upheld	3	14%	6	32%	2	25%	2	2 50%		0%	0	0%	0	0%																				
Partially Upheld	3	21%	1	5%	0	0%	1	1 25%		1 20%		0%	1	33%																				
Not Upheld	8	65%	12	63%	6	75%	1	1 25%		4 80%		100%	2	67%																				
Still Active		1		0		0	0			0		0		0																				

3.1.1 Complex Care Team (West)

The team has received 15 complaints this year (this includes 9 physical disability and sensory impairment and 6 older people complaints). Of the 14 complaints resolved 6 (43%) were upheld or partially upheld. The table below sets out the types of complaints that have been upheld:

	Disputed Decision	Assessment Delay/ Quality	Attitude of staff	Lack of Action	Total						
Older People											
Partially Upheld	1	1	0	0	2						
Fully Upheld	0	0	0	0	0						
Physical Disabili	ty and Se	ensory Impair	ment								
Partially Upheld	0	1	0	0	1						
Upheld	0	0	1	2	3						
Total	1	2	1	2	6						

3.1.2 Complex Care Team (East)

The team received 19 complaints this year 17 older peoples complaints compared to 16 the previous year and 2 PDSI. Of the 19 complaints received 7 (37%) were upheld or partially upheld. The table below sets out types of complaints that have been upheld:

	Funding Issue	Disputed Decision	Assessment Delay/ Quality	Service Delay	Failure to follow procedure	Failure to Communicate	Total
Older People							
Partially Upheld	0	1	0	0	0	0	1
Fully Upheld	1	0	2	1	1	1	6
Total	1	1	2	1	1	1	7

3.1.3 Hospital Care Management Team

The team at the Princess Royal University Hospital received 8 complaints during this period, compared to 7 in the same period the previous year and only 2 (25%) of the complaints received were upheld. The table below sets out types of complaints that have been upheld:

	Lack of Action	Service Delay	Total
Partially Upheld	0	0	0
Fully Upheld	1	1	2
Total	1	1	2

3.1.4 Other Assessment Care Management Teams

The Review & Brokerage Team received 5 complaints, Assessment & Reablement Team received four complaints, the Contact Assessment Team received three complaints and the Intermediate Care Team received 2 complaints between April and March 2012. Of the 14 complaints received 5 were upheld or partially upheld. The table below sets out types of complaints that have been upheld:

	Service	Data	Quality	Total							
	Delay	Protection	Service								
Review and Brokerage											
Partially Upheld	1	0	0	1							
Upheld	0	0	0	0							
Total	1	0	0	1							
Assessment & R	Reableme	ent Team									
Partially Upheld	0	0	1	1							
Fully Upheld	1	1	0	2							
Total	1	1	1	3							
Contact Assessi	ment Tea	am									
Partially Upheld	1	0	0	1							
Upheld	0	0	0	0							
Total	1	0	0	1							

3.1.5 Care Management Lessons Learnt

Due to a miscommunication between staff following hospital discharge, all patients requiring a care package are now overseen by a duty senior to ensure all care services and correct arrangements are in place at the point of discharge.

Following an unacceptable delay assessing a client, training needs were identified and the worker subsequently attended training to address the highlighted skill gaps. The staff member has also been reminded in supervision of the importance of adhering to the Department's assessment timescales and this will be monitored to ensure similar delays do not re-occur.

As a consequence of a patient being wrongly informed that domiciliary care services would be free of charge, clinical staff employed by the NHS have been reminded that social care staff must provide this information in relation to an individual's assessed care package.

Following a complaint where incorrect information was sent to a client; the member of staff concerned attended a course on effective information management. This included a component on the Data Protection Act 1984 and training on, how to safely manage and process personal client data.

3.2 <u>Learning Disabilities & Mental Health</u>

LEARNING DISABILITIES & MENTAL HEALTH 2011/2012									
	Assess	ment & Support	Tran	sition Team	Mental Health				
Complaints Received		8		3	0				
Resolved within 20 working days	5	63%	3	100%	0	0%			
Upheld	1	13%	0 0%		0	0%			
Partially Upheld	3	37%	0 0%		0	0%			
Not Upheld	4 50%		3	3 100%		0%			
Still Active		0		0	0				

3.2.1 The Learning Disabilities Assessment & Support Team received 8 complaints during this period; the same as received in the previous financial year. The table below sets out types of complaints that have been upheld:

	Non Provision Service	Attitude of staff	Failure to Communicate	Total
Partially Upheld	2	1	0	3
Upheld	0	0	1	1
Total	2	1	1	4

3.2.2 The Learning Disabilities Transition Team received a total of 3 complaints, compared to 4 received in the previous year. None of the complaints received were upheld.

3.2.3 Learning Disabilities Lessons Learnt

Following a complaint from a client's family it was alleged the client's funds had been inappropriately managed by care support staff following the client's move into a new supported living placement; the learning disabilities team has agreed to take the following actions in future:

- Support staff will encourage clients to purchase items locally so that faulty or unwanted items can easily be returned.
- Staff will ensure receipts are kept at all times so they are available when required.
- There is to be greater consultation between all those involved with the client's care, so families are fully advised of forthcoming outings where clients might make use of their personal funds.
- An inventory is to be kept for clients in supported living placements so it is clear which items should or should not be purchased.
- Deputyship is now required for clients who do not have capacity to sign their tenancy agreements.
- The team has developed a 'tool kit' for support staff and care managers to refer to when planning for a client's move into supported living.

3.2.4 Mental Health

Complaints relating to Mental Health Services are handled by Oxleas NHS Foundation Trust and are monitored through the joint contract monitoring meeting with Clinical Commissioning Group, Oxleas and the Council. A variety of patient and staff satisfaction surveys are reported in their annual report which can be accessed at http://www.oxleas.nhs.uk/site-media/cms-downloads/OXLEAS_ANNUAL_REPORT_single_pages_2.pdf

3.3 <u>Direct Care Services</u>

This year the Direct Care Services has seen a 74% reduction in the number of complaints received compared to last year. Of the 8 complaints received 2 were upheld. The Reablement Service received no formal complaints. Whilst the Home Care Service (which transferred the last packages of care during summer 2011) saw the largest decrease from 19 to 1 complaint this year, Extra Care Housing reduced from 4 to 2 complaints and Care Link from 4 to 1 complaint.

	DIRECT CARE SERVICES 2011/2012															
	Hom	e Care		ement vice		Extra Care ousing	Ca	re Link	Tr	ansport	Invi	cta/OOH		ICES		
Complaints Received		1	(0 2 1 1 2		1 1 2		1								
Resolved within 20 working days	1	100%	0	0%	2	100%	0	0%	1	100%	2	100%	1	100%		
Upheld	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%		
Partially Upheld	1	100%	0	0%	0	0%	0	0%	0	0%	1	50%	0	0%		
Not Upheld	0	0%	0	0%	2	100%	1	100%	1	100%	1	50%	1	100%		
Still Active		0	()	0		0 0		0		0		0		0	

- **3.3.1 Home Care** received 1 complaint which was partially upheld relating to non-provision of expected service.
- **3.3.2 Out of Hours** the complaint related to non-provision of expected service and this was partially upheld.

3.4 Charging & Finance

CHARGING & FINANCE 2011/2012										
	Charging Charging Domiciliary Residential Care Care			Direct Payments						
Complaints Received	12 4			2						
Resolved within 20 working days	11 92%		3	75%	2	100%				
Upheld	1 9%		0	0%	0	0%				
Partially Upheld	4 33%		2	50%	2	100%				
Not Upheld	7	58%	2 50%		0	0%				
Still Active		0		0	0					

During this financial year, we received 16 complaints relating to the charging of domiciliary and residential care; compared to 21 received last year. This represents an overall drop of 24%. Two complaints related to dissatisfaction of the new charging policy and were not upheld.

There has been an improvement with regard to complaints about incorrect billing. Last year the Department received 13 complaints about incorrect billing and all of these were either fully or partially upheld; while this year 6 complaints were received and only 4 were partially upheld. This represents a 69% drop in upheld complaints for this category.

Breakdown of Charging and Financial Complaints Upheld:

- 4 complaints relating to incorrect billing; partially upheld.
- 1 staff error complaint; upheld.
- 1 complaints relating to incorrect information; partially upheld
- 1 complaint relating to quality (financial statements); partially upheld.
- 1 disputed decisions; partially upheld
- 1 concerning funding issues; 1 partially upheld

Two complaints regarding direct payments were received and partially upheld.

3.4.2 Charging and Financial Lessons Learnt

The complaints received throughout the year for both the care management and finance teams have highlighted the need for information to be provided to clients at the earliest opportunity. As a result a letter showing charges for services is now given to the service user at the point the service agreement is put in place. The Exchequer Services Team has also improved the quality of information provided to clients and has reviewed processes and introduced training in the charging systems for improving staff knowledge. The Council's charging policy has also been updated to include additional information and provide a clearer explanation of how charges are calculated.

3.5 Contracted Services

There has been a continued reduction in the number of complaints received this year as set out in the table below.

Contracted Services – 3 year trend for individual services										
Teams	2009/10	2010/11	2011/12	%Up/Down						
Domiciliary Care	43	33	13	▼						
Residential Care	13	5	6	▼						
TOTAL	56	38	19	▼						

During the year 19 complaints have been received in relation to contracted services 11 (61%) of which were upheld or partially upheld. Timescales were met in 89% (16) of resolved complaints.

CONTRACTED SERVICES 2011/2012										
	Domic	iliary Care	Resid	Residential Care						
Complaints Received	13 6									
Resolved within 20 working days	12	92%	4	80%						
Upheld	4	31%	1	20%						
Partially Upheld	6	46%	0	0%						
Not Upheld	3 23%		4	80%						
Still Active		0		1						

3.5.1 Domiciliary Care

The total number of complaints received this year about contracted domiciliary care agencies is 13, which is a 61% drop compared to 33 received in the same period last year. There were 2 complaints about missed calls this year a reduction of 82% (16) last year. This could be attributed in part to the continued roll out of the data capture system; which records when carers arrive and leave the clients' premises.

Following an increased robustness in contracts monitoring, and the lessons learnt by agencies and actions they have taken following previous complaints; there has been a marked decrease in formal complaints about domiciliary care.

a) Quality of Service Category

Of the 13 complaints received about contracted domiciliary care agencies, all except three of the complaints received were about the quality of service provided. The Contracts Monitoring Team continues to monitor the service provided by these agencies. Set out below are the types of upheld complaints received:

- 3 incorrect or no medication given 1 upheld (*Sure Care*) and 2 partially upheld (*Care UK & Kentish Homecare*).
- 1 poor English language skills; partially upheld. (ACSC)
- 1 poor service given by carer; upheld. (AG Care)
- 1 lack of consistency; partially upheld. (Bridges)
- 2 care plan not followed; 1 partially upheld. (Sure Care)

b) Other complaints Category

There have been 2 complaints relating to missed calls of which 1 was upheld (*Beckenham Mindcare*) and the other was partially upheld. (*Mackleys*). A further complaint, that was also upheld related to the lack of action. (*Westminster*). The table

below shows domiciliary care complaints that were upheld or partially upheld and the proportion of the home care service they provide.

Domiciliary Care Agency	Upheld/ Partially Upheld	%age of business
ARK	1	5
Care UK	1	5
Westminster	1	8
ACSC	1	4
Kentish Homecare	1	8
Beckenham Mind care	1	2
Bridges	1	5
Sure Care	2	23
Mackleys	1	4
Total	10	64

3.5.2 Residential Care

Contracted *residential care* services received 6 complaints this year, which is a slight rise from last year's total of 5. Of the 5 complaints resolved only 1 complaint relating to Ashcroft Nursing Home was upheld. The Contracts Monitoring Team continues to monitor the residential and nursing care homes. The latest Quality Monitoring of Residential Care Report is published on the Bromley website http://www.bromley.gov.uk/info/100010/health_and_social_care. All homes are registered by the Care Quality Commission (CQC) who publish inspection reports on their website http://www.cqc.org.uk/

3.5.3 Contracted Services Lessons Learnt

A complaint was received about a carer who failed to prompt a client to take the correct medication shortly after the care package began. The procedures have been changed for new care packages to prevent any similar misunderstandings occurring, where care is arranged at short notice. In future, a team leader will make sure the relevant paperwork is placed in the client's home prior to the commencement of carer visits.

Following an incident where a care worker failed to notify the appropriate services of the client's condition, the agency has increased the regularity of senior staff monitoring visits. All care workers have been reminded about the importance of reporting back any concerns they may have, particularly if they feel the client is deteriorating. Refresher training in adult safeguarding has also been provided to the agency's care workers.

Following a complaint about incorrect medication, the care workers have attended refresher training. The manager of the agency has also undertaken to carry out spot checks to ensure medication is prompted correctly. The agency has reviewed its procedures on commencement of new packages where medication is involved and the initial assessment also provides greater clarification regarding the service user's medication requirements.

We received a complaint following an incident where residential staff failed to respond to a client's emergency call. As a consequence of the findings, the home has installed a more reliable emergency call system.

Section 4: Housing & Other Corporate Complaints

Formal Complaints	98
Comments/Enquiries	47
Compliments	17
Ombudsman Enquiries	10
MP Enquiries	65
Member Enquiries	95
Housing Appeals	10
Total	342

In 2011/12 the ACS Department received 342 corporate contacts 29% (98) of these contacts were handled as formal complaints. The sections below cover the 53 formal complaints relating to Housing and Residential Services and the 45 relating to other areas.

4.1 Housing & Residential Services

Between April 2011 and March 2012 we received a total of 53 complaints for Housing & Residential Services compared to 83 complaints the previous year. This represents a decrease of 36%. The drop in complaints is due to several factors and does not indicate a drop in housing related enquiries.

Where applicants are unhappy with the outcome of their housing register banding, they are advised to submit a banding appeal, rather than a complaint. Housing enquiries from MPs and Councillors has increased following the revisions to the housing allocation scheme and the housing register at the beginning of 2012. These changes were effectively managed along with information provided to applicants by the housing teams and there has been fewer complaints received than expected.

This year 50 of the 53 complaints have been resolved and of these, 28 (56%) were responded to within 20 working days and 13 complaints were either fully or partially upheld while 37 (74%) were not upheld. The table below shows the number of housing & residential services complaints received over the last three years.

Housing Services- 3 year trend for individual teams											
Teams	2009/10	2010/11	2011/12	%Up/Down							
Housing Options and Advice	28	28	13	▼							
Housing Initiatives	1	4	5	A							
Housing Solutions	30	37	28	▼							
Resettlement	8	7	4	▼							
Residential Services	2	7	3	A							
TOTAL	69	83	53	•							

4.2 Housing & Residential Services Complaints by Team

Housing and Residential Services received 37 operational complaints. Of these 34 complaint investigations have been completed and, of those, 10 complaints were either upheld or partially upheld, while 24 (70%) were not upheld.

There were 16 complaints relating to lack of action, information provided and policy, all have been resolved 2 were upheld or partially upheld.

The table below shows the breakdown of complaints received and upheld by team:

HOUSING & RESIDENTIAL SERVICES 2011/2012											
	Housing Options & Housing Solutions Initiatives Resettlement Services										
Complaints Received		13		28		5		4		3	
Resolved within 20 working days	7	54%	14	54%	3	75%	2 100%		2	67%	
Upheld	0	0%	5	19%	1	25%	0 0%		0	0%	
Partially Upheld	4	31%	1	4%	2	50%	0 0%		0	0%	
Still Active		0 2 1				0	0				

- **4.2.1 Housing Options & Advice Team** received 13 complaints during this period, a drop of 54% from last year's figure of 28. Of these 4 (31%) were partially upheld. There were 3 complaints relating to service delay; and 1 to the non-provision of an expected service.
- **4.2.2 Housing Solutions Team** received a total of 28 complaints this year, compared to 37 complaints received last year; a drop of 24%. Of the 26 resolved so far 6 (23%) were upheld or partially upheld. There were 2 complaints relating to delays in providing a service, 3 involving staff attitude/ error or failure to communicate and 1 concerning the decision to withdraw a service.
- **4.2.3 Support & Resettlement** teams received a total of 4 complaints none of which were upheld.
- **4.2.4 Residential Services** received 3 complaints none of these complaints were upheld.
- **4.2.5 Housing Initiatives** received five complaints this year of the 4 resolved so far 3 (75%) have been upheld or partially upheld. The 3 complaints related to a disputed decision, non-provision of an expected service and incorrect information being given.

4.2.6 Housing & Residential Services Lessons Learnt

Following a complaint by a resident who was provided with incorrect advice when seeking assistance in securing private rented accommodation, the Housing Solutions Team has reviewed its procedures and officers have been instructed that specific advice about property size and rent levels can only be given, once they have checked that referrals include details of family composition and financial circumstances. This will avoid raising the expectations of prospective tenants and causing disappointment and loss of confidence in the advice provided.

4.3 Other Corporate Complaints

We received a total of 45 corporate complaints, 35 of which related to the private clients of the *Carelink* monitoring service. These complaints related to lack of notice of the increased charges for this service, 43% of the complaints were upheld.

We also received one complaint about a commissioned service provided by *Inspire*. This related to incorrect information and was not upheld. The table below shows the breakdown of complaints received and upheld by team.

CORPORATE COMPLAINTS 2011/2012												
		e Badge axi card	As	Quality Drug Carelink Transport ssurance Action Team Team		Action Serv		Carelink		Carelink Transport		missioned ervices
Complaints Received		2	1		1		35		1		5	
Resolved within 20 working days	2	100%	1	100%	0	0%	34	97%	1	100%	3	60%
Upheld	0	0%	0	0%	0	0%	0	0%	0	0%	0	0.0%
Partially Upheld	0	0%	1	100%	0	0%	15	43%	0	0%	0	0.0%

Section 5: Ombudsman Enquiries

5.1 Overview

The gradual rise in Ombudsman complaints may be attributed to the change in the adult statutory complaints regulations in 2009, which allows complainants to approach the LGO at an earlier stage in the process if they wish to.

In 2011/12 we have seen a rise in the number of Local Government Ombudsman (LGO) complaints from 15 to 21, of which 3 were upheld. Adult Social Care received 11 with 3 being upheld, Housing received 9 Ombudsman complaints received this year for the service, none were upheld by the LGO and Strategy & Performance received 1 which was not upheld.

5.2.1 Adult Social Care

Between April and March 2012, 11 adult social care Ombudsman enquiries were received. Of these 1 case was withdrawn, 3 were resolved locally, 3 were upheld/upheld partially and 4 were not upheld. The 3 complaints that were upheld/upheld partially are set out below:

- One related to delays around the approval of a DFG application by occupational therapy and was partially upheld by the Ombudsman, they recommended financial redress.
- b) A complaint where a client withheld payment after claiming fees had not been adequately clarified was upheld. The Ombudsman recommended that that compensation be paid.
- c) A complaint about the length of homecare visits being received and the amount being charged for short visits. The Ombudsman recommended that the charging information provided was unclear and that compensation be paid.

As a result of the 3 upheld enquiries a total of £3100 compensation has been paid. In addition to these the Department also received an adverse report from the Ombudsman which was presented to the Executive in July 2011. This related to a complaint from the previous year and resulted in the Ombudsman recommending that a sum of £2000 be paid in compensation and confirmation that £2000 in care home fees be written off.

5.2.2 Lessons Learnt (Adult Social Care)

The department received several complaints and two ombudsmen enquires regarding the quality of information given to service users in relation to short term interventions and long term care packages.

In response to this issue, managers in assessment and care management reviewed the written information provided to clients prior to receipt of a care package and now clients are asked to sign to confirm they have understood and agree to the terms set out.

5.3 Housing

Housing & Residential Services received 9 Ombudsman enquiries during this period and most complaints related either to homeless applications and disputes around housing register applications and none were upheld.

5.4 Corporate

An Ombudsman's enquiry was received following the conclusion of a safeguarding investigation of a self-funding client whose family disputed the outcome of the investigation. This enquiry has now been concluded and was not upheld.

Section 6: Informal Complaints (Adult Social Care)

The complaints regulations encourage front line staff to deal with and, whenever possible, resolve less serious complaints orally and within 48 hours.

The aim is for less serious concerns or issues that do not require detailed investigation to be dealt with quickly and without the need to go through a lengthier formal complaints process. This prevents complainants experiencing unnecessarily delays in resolution and further inconvenience or distress.

Although there is no requirement under the complaints regulations to record informal complaints, the Department understands the importance of recording this information in order to help identify problems in service provision, before they present more serious risks to both service user and the organisation and possibly lead to formal complaints.

Between April and March 2012, frontline staff dealt with 69 informal complaints that did not escalate to the formal process. All of these have been resolved to the service user's satisfaction and this information is used as part of the contracts monitoring process to identify themes, trends and areas for improvement. For more information on the types of issues resolved in this way please see the latest Quality Monitoring of Domiciliary Care Services Report at http://www.bromley.gov.uk/info/100010/health_and_social_care

Section 7: MP Enquiries, Comments and Compliments

Between April 2011 and March 2012 we recorded 160 MP and Member enquiries for housing and 23 MP and member enquiries for adult social care.

In addition the Department received 43 compliments for adult social care; of which 27 were for the re-ablement service. 17 compliments were also received for housing. The following is a sample of some of the compliments we received during this year:

7.1 Adult Social Care

"I wish to put on record how much I appreciated Linda for her manner and efficiency on the phone."

"I cannot praise the re-ablement staff too highly for the consideration, courtesy and efficiency with which they have treated my husband and me."

"A big thank you to the re-ablement carers who helped me throughout my first 6 weeks back at home; when I was very vulnerable and frail. They were jolly, chatty and bright."

"The service received from the re-ablement service was a revelation."

"I just wanted to write to thank the team for all they did to help us. The re-ablement service took a seamless handover and supported us during difficult times."

"I found all members of the re-ablement service that attended me helpful, efficient and very pleasant. It was a pleasure to have them in my home to aid me in my recovery."

"I would like to express our very sincere thanks for the excellent service you have given us in recent weeks."

"Please thank our care manager for helping out and taking the time to get his head round all the problems we faced."

"I would like to compliment your service for the excellent way my wife was looked after. Nothing was too much trouble for this dedicated officer. The worker is a credit to your service."

Mr X is delighted with everybody at Apsley Court. He said "his mum is looked after as if she was the Queen, and the difference in her whole attitude is unbelievable. She has made new friends, is clean and tidy and has her sense of humour back; he said she is like his mum was 20 years ago."

7.2 Housing

"I must write to thank you and the London Borough of Bromley for giving me the opportunity to have my home fitted with cavity wall insulation, free of charge, due to my age. I really do appreciate this wonderful gesture and thank you so much."

"This email is to let you know you have contributed to making a sick woman very happy. She got one of the newly built adapted houses today. It was touching to see her crying as she walked around aided by her son."

"This is a short note to say thank you for helping me every time I have been down to the Civic Centre."

"I know that had you not worked hard to secure her a new home, she would have been on a rapid downward spiral."

"Thank you very much for all of your assistance and persistence in 'tracking me down'. I found your e-mail and our subsequent our conversation most helpful."

"A big thank you to all in the housing division who were involved in re-housing Mr Y and his family as an emergency over the weekend and then into a flat today. He gave me a big hug and if you hadn't been on the other side of the counter I'm sure he'd have given you a hug too!"

Section 8: Listening to our service users

The recent survey of people who use adult social care services shows that the levels of satisfaction with the services received has increased. Of the 551 people who responded to the survey 65% (356) of people stated that they were extremely/ very satisfied compared to 58% (270) last year. There has also been a slight decrease in the number of people who were dissatisfied with the services they receive.

The survey also showed that 58% (320) of respondents found it easy to find information and advice about support and services compared to 53% (246) last year.

During this year the Complaints Team has sent 88 customer feedback questionnaires to clients who had made formal complaints in 2011/12 and, of those, 17 (19%) were returned. The purpose of the survey is to ask complainants how well they feel their complaint was handled.

Overall, we found the survey results painted a positive picture of the complaints service. 81% of those who responded said they have not experienced a re-occurrence of the issues which caused them to complain and 73% of respondents felt the letter of response they received was well written.

Most encouraging of all is, 73% felt the person who handled their complaint was helpful while 87% of respondents said they were treated with courtesy and respect as their complaint was dealt with.

Although face-to-face meetings are now routinely offered by the complaints service, 80% of respondents did not think their complaint would have been better handled if they'd had met an officer. In addition, none of the respondents felt they required advocacy in order to progress their complaint.

Section 9: Achievements & Objectives

The aim of the Quality Assurance Team is to ensure all but the most serious and complex complaints are resolved locally at an early stage and that resources are not unnecessarily stretched, as a result of ineffective complaints handling and subsequent referrals to the Local Government Ombudsman, to enable this there are numerous ways to support team managers.

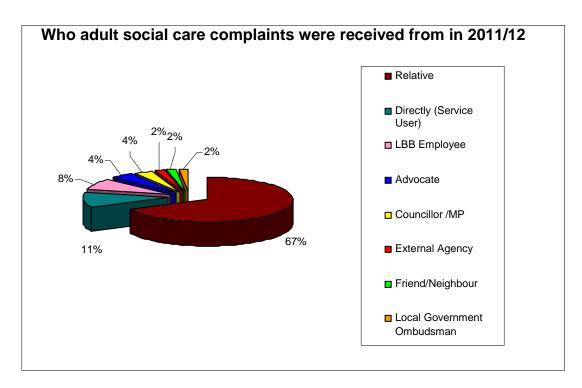
The Quality Assurance Team has developed an in-house complaints training course and delivered training to social care front line staff. The team plans to run several sessions over the year so officers within the Department are conversant with the complaints procedures and enabled to manage complaints effectively. The training includes Housing and Children's complaints.

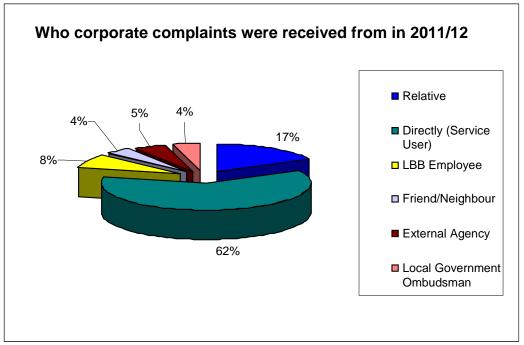
Regular complaints surgeries are held for managers and heads of service that require assistance to draft complaint response letters. As a result of these surgeries, the Department has seen an improvement in the quality of responses and response times. This year, 86% of social care complaints have been responded to within 20 working days, compared to 74% in the previous year.

The Quality Assurance Team liaises regularly with colleagues in the Contracts Monitoring Team, to monitor any trends and ensure any concerns regarding contracted domiciliary and residential care providers are fully addressed. As a result of prompt action taken by the Department to address the issues raised by customers, the Department has recorded a drop in formal complaints in this area.

The Complaints manager continues to send out follow up letters and customer satisfaction questionnaires to clients who have made formal complaints this year. As well as ensuring those who have made complaints are happy their concerns have been addressed in full, this provides an opportunity for customers to share with us their experience of the complaints service.

Appendix 1 - Who complaints were received from





Monitoring information (Adult Social Care)

Fair Access Of the 112 adult social care complaints received 57% were from female service users (64) and 86% of female service users who complained were over 65. This greater proportion of female complainants is consistent with the overall profile of service users in the borough. Most of those who made an adult social care complaint this year considered themselves to be White British (**98%**), and 1% considered themselves to be Asian British and 1% British Caribbean.

Disability Out of the 112 of those in adult social care who complained, 35% considered themselves elderly and frail; 27% physically disabled, 12% have a learning disability and 4% are living with sensory loss (either partial sightedness or hearing loss). In addition, 18% of complaints received were made on behalf of clients living with Dementia.

Appendix 2 - How complaints were received

There has not been a significant change in how adult social care complaints are received compared to last year as 70% of our customers contacted us in writing. There has been an adjustment in how housing complaints are received. With the introduction of the electronic complaint form on the Council's website there is a 25% increase in usage of this facility, but a slight reduction in email.

