



Adult Care: Complaints & Compliments

Annual Report

April 2020 to March 2021

Large Print

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1.0 INTRODUCTION

Welcome to the Adult Care Annual Report of Complaints and Compliments for the period 1st April 2020 to 31st March 2021 for adult social services provided by or commissioned by Redcar and Cleveland Borough Council.

The purpose of this report is:

- Provide an analysis of the nature of complaints received, response times, and their outcomes
- Provide information on the number of compliments received

We strive to improve our adult care service and want to hear about your experiences. Your ideas about how we can improve our services are welcomed plus we want to know when those services have not met your expectations.

All adults living within our borough have the right to expect a good service from Adult Care and to have things put right when they go wrong.

Complaints and compliments are a valuable source of feedback and provide us with an opportunity to find out what people think about the services we deliver. This report highlights our performance against statutory and internal timescales, provides assurance that improvements have been made and that we have listened and responded to compliments and complaints received in this period to enhance our future service delivery.

1.1 STATUTORY COMPLAINTS REGULATIONS

The Local Authority Social Services and National Health Service

Complaints (England) Regulations came into force on 1 April 2009 and introduced a single complaints procedure which covers health (the NHS) and adult social care services (provided by councils).

Under statutory regulations such as the Care Act 2014 and the complaints regulations cited above, we are required to have a complaint process for receiving representations by or on behalf of adults accessing our services. Those services cover social care assessments the arrangement of services, such as support at home or residential care and various other services provided by members of staff working for Adult Care and any related policy/procedure.

Representations are described as comments, compliments, and complaints.

This regulation also places a duty on NHS bodies and councils with social care responsibilities to produce an Annual Report on the operation of their Complaint's Procedure. We hope this report is informative and demonstrates our commitment to an open and transparent approach specifically the positive learning that can be achieved from complaints.

2.0 COMPLAINTS

2.1 WHAT IS A COMPLAINT?

Redcar and Cleveland Borough Council's Adult Care Complaints Procedures states a complaint is:

“When someone tells us they are not happy about a service, or something we have or have not done, that has had an impact on them.”

Complaints may focus on quality and delivery of a service, the attitude or conduct of staff, or an unwelcome or disputed decision.

If, at any time during the investigation of a complaint, it appears the

complaint raises allegations regarding the conduct of an Adult Care member of staff, the matter will be appropriately dealt with under the council's employment procedures.

We will not deal with complaints relating to services where there are existing appeals processes. We will advise the individual of the relevant appeals process and provide details of how to make an appeal.

2.2 ADULT CARE COMPLAINTS PROCEDURE

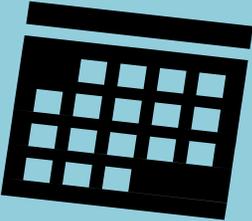
The current complaints procedure is a one stage process for all adult social care complaints in the borough of Redcar and Cleveland. We aim to respond to all complaints within 20 working days however, this can be extended up to 65 working days where the complaint is more complex and requires a more detailed investigation. If the complainant remains dissatisfied after our investigation, they can refer their complaint to the Local Government Social Care Ombudsman (LGSCO). All non- statutory complaints which do not fall under a social care provision, will be considered under the local authority's corporate complaints procedure.

2.3 PRINCIPLES OF GOOD COMPLAINT HANDLING

Our complaints procedure reflects the requirements and principles of "making complaints count" by ensuring:

- all complaints are properly investigated and dealt with efficiently.
- complainants are treated with respect and courtesy.
- complainants receive support on how to make a complaint.
- timely responses are provided to complainants with identified outcomes.
- lessons learnt are implemented to ensure continuous improvement.

Adult Care 2020/21 complaints and compliments key facts & figures.

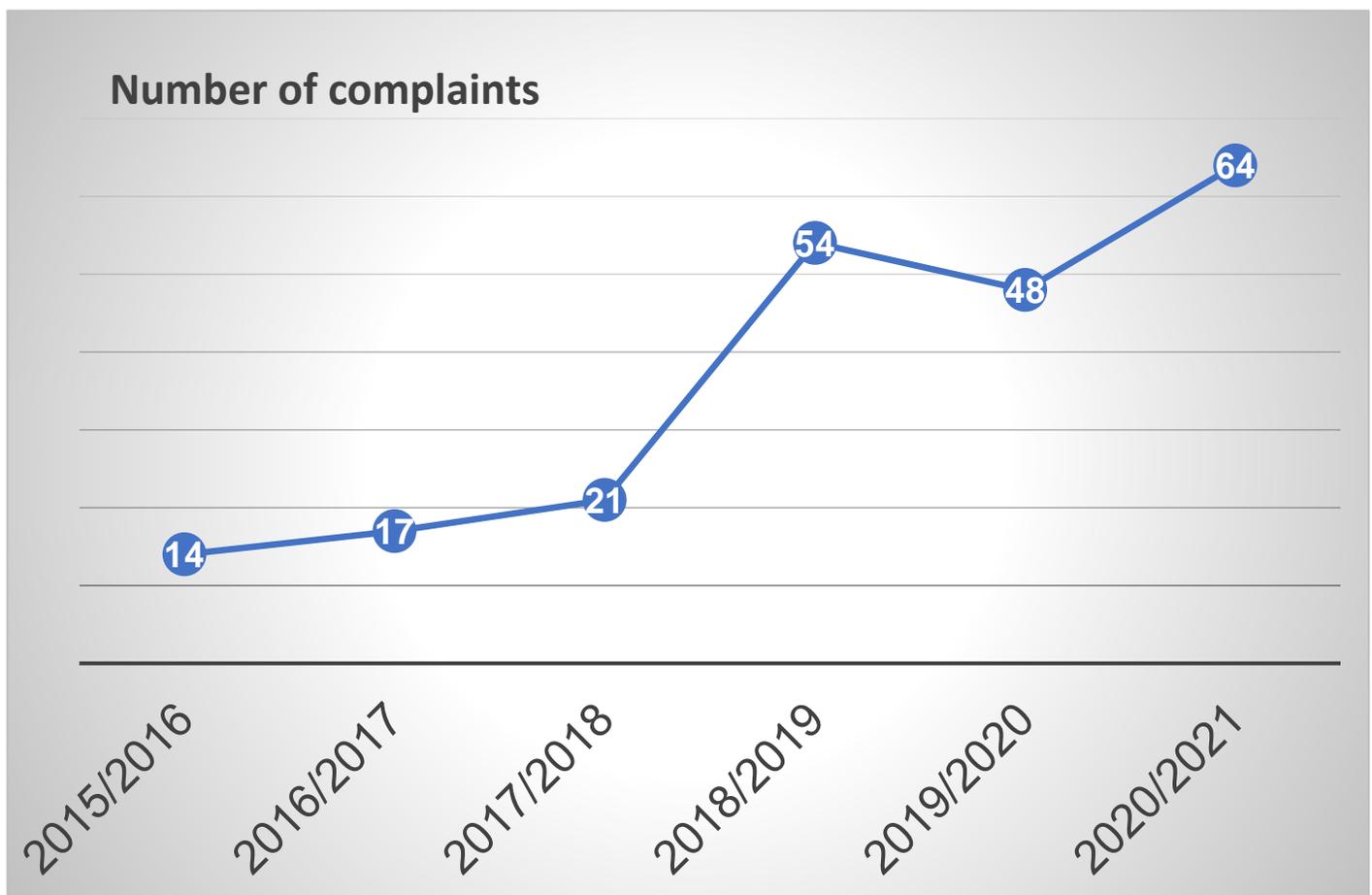
 <p>As of 31st March 2021, there were 5,265 adults receiving a service from Adult Care</p>	<p>We received 131 compliments about our services in 20/21</p> 	 <p>64 complaints were received about Adult Care</p>	<p>62% of complaints were resolved within 20 working days</p> 
<p>17</p> <p>Complains were resolved through informal stages</p>	 <p>The most common reason for complaints was poor communication</p>	<p>4</p> <p>Complaints were referred to the Local Government Social Care Ombudsman (LGSCO).</p> <p>All were investigated and “no fault” found by the local authority.</p>	<p>We have listened to feedback and made changes to our procedures including enhancing our communication methods between adults and our staff</p> 

2.4 NUMBER OF COMPLAINTS

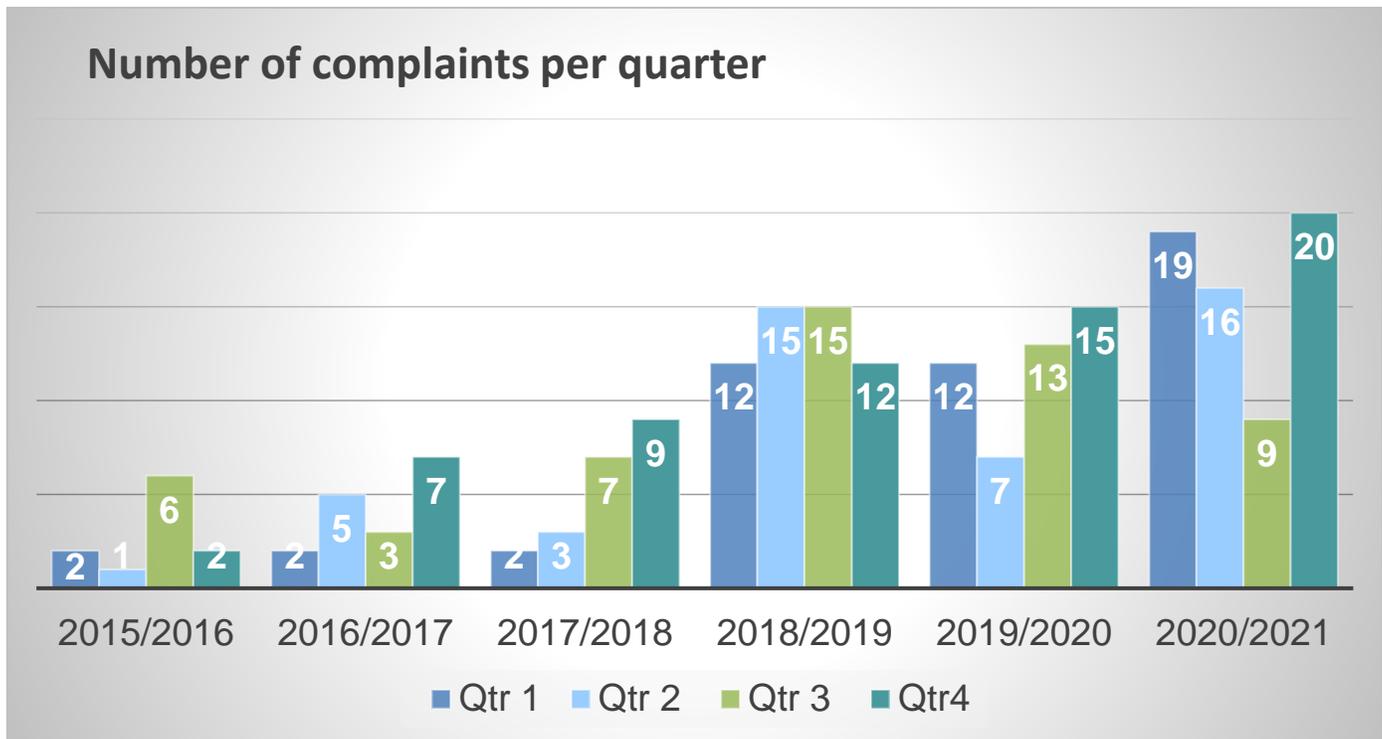
64 statutory complaints were received during 2020/21 which represents 1.2% of all adults supported by Adult Care. From the 64 complaints received, 5 were dealt with through alternative procedures, such as safeguarding or through a commissioned service providers' complaints procedure. We also had one complaint withdrawn during the investigation at the complainant's request.

This reduces the total number of actual complaints dealt with under the Adult Care Complaints Procedure in 2020/21 to 58.

The graph below shows the number of complaints received between 2015/16 and 2020/21.



The chart below shows quarterly comparative data for complaints for the last 6 years.



There has been an increase in the number of complaints from 48 in 2019/20 to 64 in 20/21. This represents a 33% increase on the previous year. Although Adult Care staff made significant efforts to provide continued care and support to meet the needs of our communities over the last year throughout the pandemic, it is acknowledged this may have affected our service delivery. Practice changes had to be implemented in response to restrictions and to ensure we minimised the risk of virus transmission; this in turn affected our service offer and delivery.

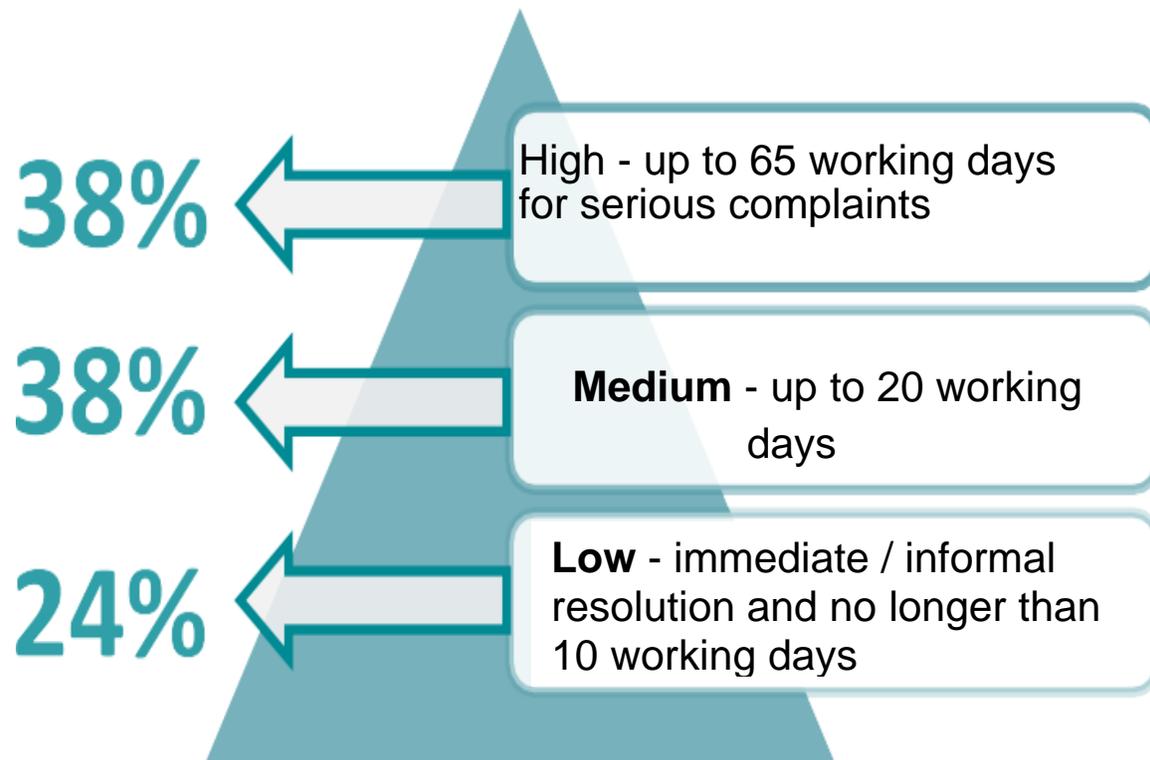
We have also made changes to improve public engagement and made it easier for people to make a complaint to Adult Care. We have reviewed our public information literature and created a dedicated complaints email address.

2.5 CATEGORIES & TIMESCALES

There are no statutory timescales for adult complaints however, the complaints regulations state the timeframes should be reasonable and the complaint process must not exceed six months.

Within Adult Care, we have an internal guideline whereby complaints are categorised as low, medium, or high depending on the nature of their complaint. The majority of complaints (62%) within Adult Care are completed within 20 working days.

Each category has different timescales associated with the length of the investigation.



The percentage of high and medium complaints received in this reporting year were 38% for both categories. We also dealt with 24% of low complaints which were handled informally within 10 working days.

Whilst we work towards completing most complaint investigations within 20 working days, the response time of 22 high category complaints (38%) were extended slightly due to the COVID pandemic (because of staff and complainants self-isolating), accessing information held by care providers and other multi-agency involvement. There were 4 complaints extended to the maximum 65 working days response time due to their complexities involving external agencies and other professionals.

All complainants were updated with an achievable response date and were notified of any further unavoidable delays throughout the complaint process.

Timescales	2020/21	2019/20
Within 10 working days	14 (24%)	4 (9%)
Within 20 working days	22 (38%)	37 (86%)
Over 20 working days	22 (38%)	2 (5%)
Total	58	43

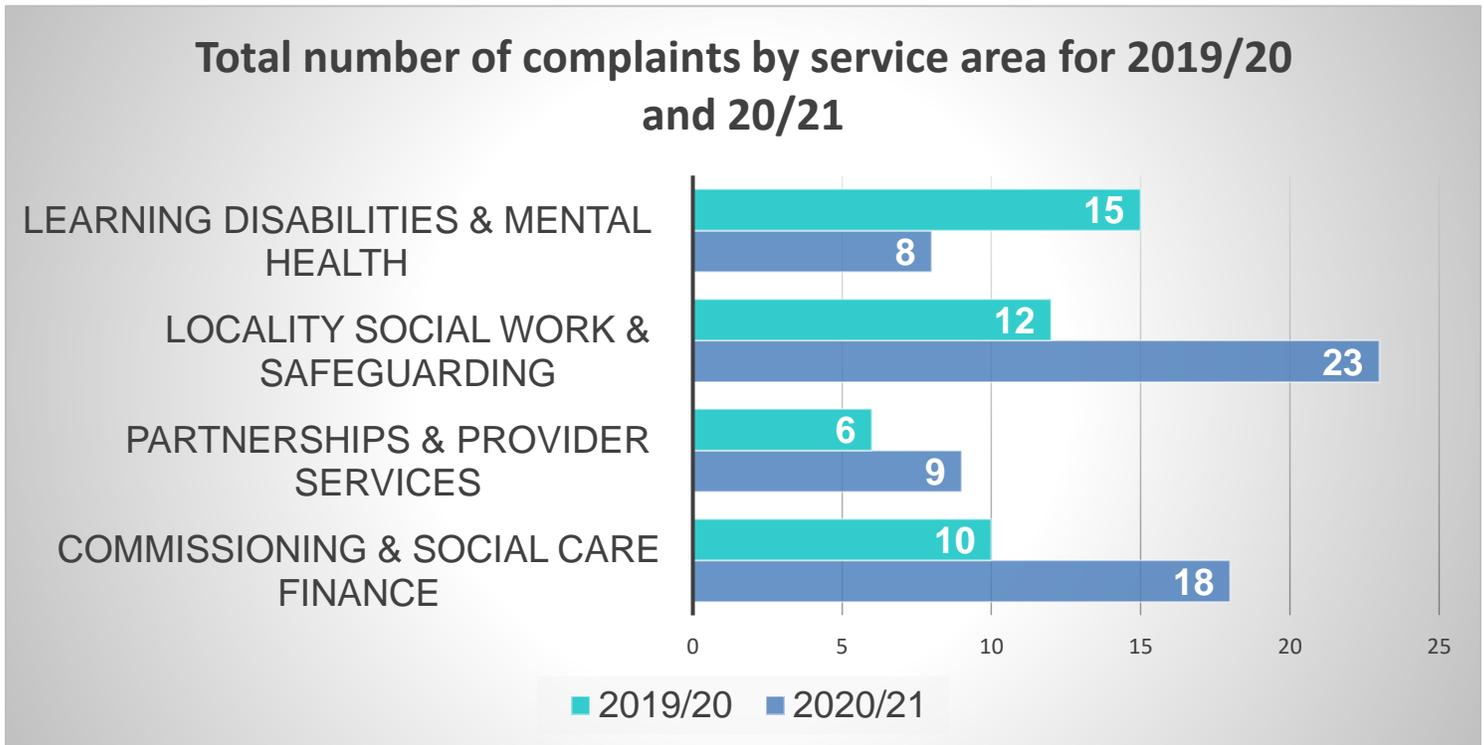
The average length of investigation for this reporting year was 17.5 days.

2.6 DETAILED ANALYSIS

Adult Care comprises of four main service areas:

- Learning Disabilities and Mental Health Social Work
- Social Work and Safeguarding
- Partnerships and Provider Services
- Commissioning and Social Care Finance

The chart below shows complaints by service area in 2019/20 and 2020/21.



The table shows an increase in the number of complaints received from the social work locality and safeguarding teams in this reporting year. Within this area, the complaints focused on dissatisfaction with the completed assessment, support planning and resource allocation. There was a slight increase in complaints around communication and staff attitude than in previous years. It is important to note that any concerns regarding the welfare of a vulnerable adult were dealt with outside of the complaints process in line with the safeguarding requirements of the Care Act 2014.

We saw an increase in complaints from 4 in 2019/20 to 7 in 2020/21 regarding residential and nursing care homes. Many of those complaints were around the belief that the commissioned care provider was failing to provide a quality service for their loved ones. They were initially dealt with through the care provider’s complaint procedures and referred to the Adult Care complaints process as families were unhappy with the outcome they

received.

Financial assessments are an area where we continue to see an increase in complaints, 13 were received in this reporting year, compared to 5 in the previous year. They included concerns raised by family members of the means testing to complete a financial assessment, misunderstanding of how the assessment is calculated, and direct payments for an individual to manage their own care and support needs.

2.7 CAUSE OF COMPLAINT

By their nature, Adult Care complaints are specific to an individual's circumstances and can relate to more than one aspect of a service that has been received. The complaints received are classified based on their "primary" area of concern raised by the complainant using the categories shown in the table below.

Detailed below are the number of complaints received by the primary area of concern.

Complaint by type			
Communication / Information	5	Poor Service Delivery	24
Financial	13	Attitude / Staff Conduct	16

2.8 COMPLAINT OUTCOMES

When reaching a decision on the outcome of the complaint, we use one of the following definitions: Informal Resolution, Not Upheld, Partially Upheld and Upheld.

For recording purposes where a complaint has 5 elements, and for example 2 are upheld, 3 are not upheld, then we will record the overall outcome as the majority of determinations i.e., not upheld in the example provided.

The percentage of “upheld” complaints has decreased by 58% and “not upheld” cases have increased by 100% in this reporting year. From the complaints upheld and partially held, the main causes of the complaints were around staff conduct and behaviour, and communication including a failure to explain our processes and procedures to adults accessing our services.

As all complaints recorded in 2020/21 were investigated internally, the results shown above demonstrate our commitment to be open and accountable for when something has gone wrong. The completed investigations were dealt with from a balanced and objective viewpoint with Adult Care staff accepting fault when it was identified, offering a remedy, and having a positive approach to learning from complaints.

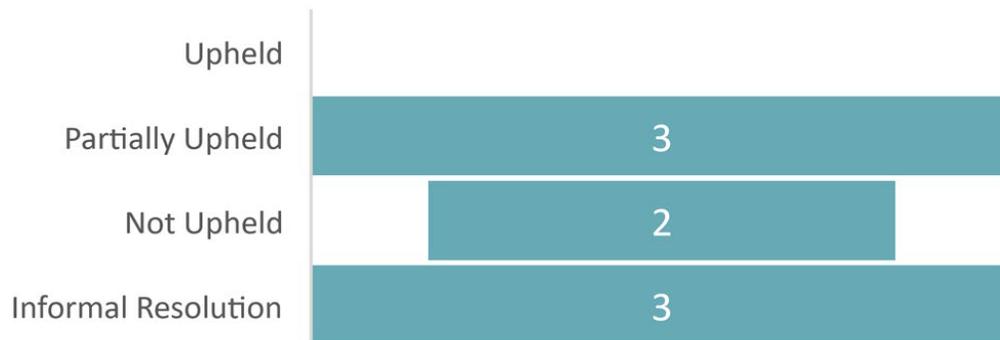
Complaint by Outcomes 2020/21
Upheld - 5
Not Upheld – 10
Informal Resolution - 17
Partially Upheld - 26

2.9 BREAKDOWN OF COMPLAINTS BY SERVICE AREA

Detailed below is a breakdown of complaint determinations per service area.

LEARNING DISABILITIES & MENTAL HEALTH SOCIAL WORK SERVICES

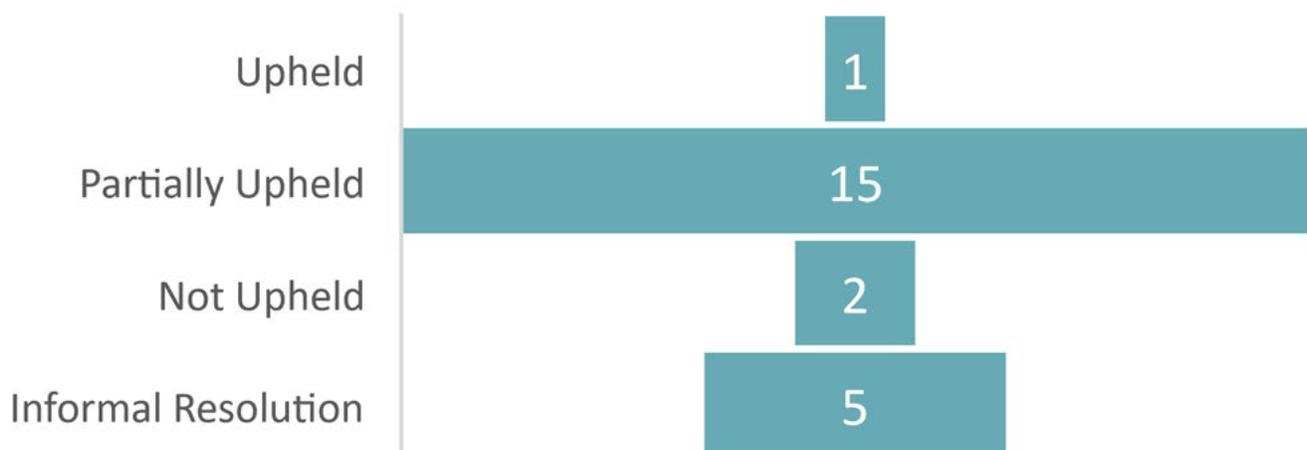
Outcomes Analysis



The service area covers social work for Adult Mental Health, Older Person’s Mental Health, Adults with Learning Disabilities and Deprivation of Liberty Safeguards.

SOCIAL WORK & SAFEGUARDING

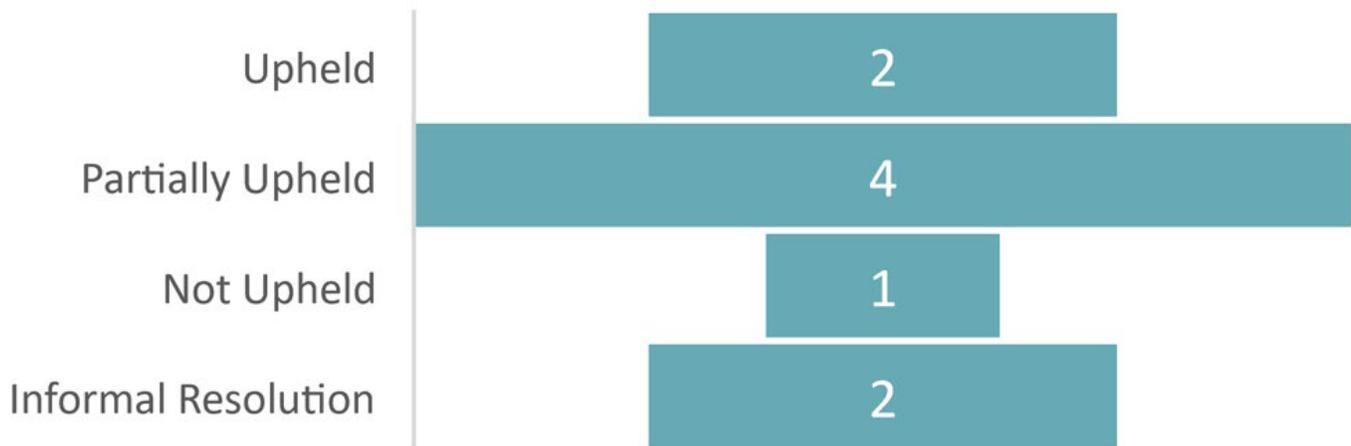
Outcomes Analysis



The service area covers social work for Adult Access, Locality Assessment Teams and the Hospital Social Work Team.

OCCUPATIONAL THERAPY, PARTNERSHIPS & PROVIDER SERVICES

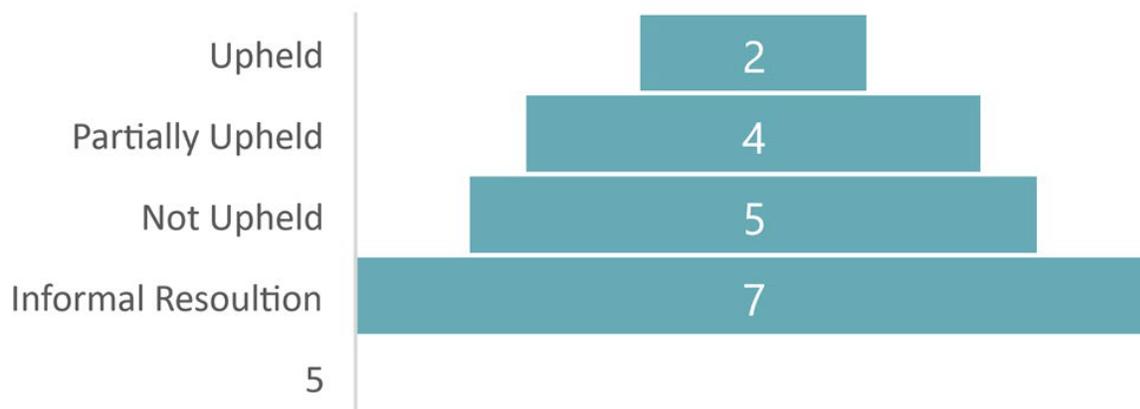
Outcomes Analysis



The service area covers the Occupational Therapy Team, Pathways to Independence Teams and other Provider Services.

COMMISSIONING & SOCIAL CARE FINANCE

Outcomes Analysis



The service area covers Commissioning, Brokerage, Social Care Income & Payments and Property and Financial Affairs

Social Work and Safeguarding along with Commissioning and Social Care Finance have seen increases in the overall number of complaints and it is apparent that this is predominantly associated with practice changes that have occurred because of the pandemic.

2.10 COMPLAINTS TO THE LOCAL GOVERNMENT SOCIAL CARE OMBUDSMAN

The Local Government Social Care Ombudsman (LGSCO) investigates a complaint when it has not been resolved by the local authority through their complaint's procedure. The current complaints procedure is a one stage process for all adult social care complaints in Redcar and Cleveland. Complainants can refer their complaint to the Ombudsman should they remain dissatisfied with the response received from us.

The Local Government Social Care Ombudsman will reinvestigate the complaint fairly and independently and make a final decision.

The decision will be communicated with the local authority by providing us with either recommendations on how we can put things right, changes to our processes to prevent the situation from happening again or they can agree with how we have handled a complaint.

Four cases were progressed to the Ombudsman during 2020/21. This represents 6% of the complaints received in this year.

The Ombudsman confirmed that they were satisfied with the processes we followed and our actions in determining and resolving three of the complaints. One investigation is still ongoing.

Outlined below is an extract from the Local Government Social Care Ombudsman findings of three of the four cases that were referred to them.

Summary of Complaint Response from LGSCO

LGSCO did not investigate *“Mrs B’s complaint about the Council’s communication with her. This is because the Council has apologised for the failings and any distress the poor communication caused. We could achieve no more than this even if we investigated. We are satisfied the actions taken by the Council remedy the injustice caused to Mrs B.”*

“Mrs X complained the Care Provider commissioned by the Council over medicated her mother, Mrs Y, to manage her behaviour. She said this negatively affected her mother’s health and caused her and mother distress and upset. There was no fault in the Care Provider’s actions.”

The Ombudsman will not investigate *“Ms B’s complaint about charging for her father’s, Mr D’s care. This is because the Council has acknowledged the fault and paid Ms B the money agreed. The Ombudsman is satisfied with the actions taken by the Council.”*

2.11 LESSONS LEARNT

Learning from complaints is an important aspect of our Adult Care complaints procedure to highlight when things have gone wrong and identify remedial and development actions required to improve our service delivery. The actions identified from a complaint are used to enhance an adult’s experience of Adult Care and to avoid similar incidents from happening in the future.

31 actions have been identified in the reporting year 2020/21 to improve standards and prevent further occurrence. The table below outlines some of the learning identified from complaints upheld during this period.

Area	Learning from complaints
Quality of Care of Service	<ul style="list-style-type: none"> • We reminded staff of the importance of ensuring the adult and their families are informed of the hospital discharge date as soon as possible. This included being involved with discussions about discharge arrangements, ongoing care needs, best interest meetings and capacity assessments.
	<ul style="list-style-type: none"> • We considered what additional training and guidance we need to give to staff to provide the best service delivery.
Finance	<ul style="list-style-type: none"> • We have reviewed the exceptional circumstances form so that it mentions information in relation to the direct payment form.
	<ul style="list-style-type: none"> • We recognised we needed to develop a debt panel appeals process.
	<ul style="list-style-type: none"> • We will review the letter templates to ensure information is clear and transparent for the adult and/or their representative.
Communication	<ul style="list-style-type: none"> • We implemented a follow up call to be completed when there is an indication the adult, carer or family is upset and to ensure appropriate support is offered and action is taken.
	<ul style="list-style-type: none"> • We improved communication with families by amending our standard letters, enhanced some of our public guides plus created easy read versions of our guides to meet the information accessible standard. We reinforced to our teams that adults and their families must be kept updated and involved

throughout each stage of our processes.

- We reminded staff of the importance of recording standards and ensuring information is accurate and correct.

In addition to the above we continue to review and develop our public information offer to support the work of our teams by ensuring we have effective communication methods to prevent any misunderstanding of our processes.

The learning we capture from complaints feeds into a clearly defined practice improvement process that ensures as a department we grow and learn from our mistakes. This process starts at ground level where the investigating officer identifies the lessons learnt. This is fully recorded within our investigation templates and actions are forwarded to relevant managers to implement.

This is additionally reinforced through staff debrief sessions which involve the investigating officer, the staff member who has been subject to a complaint along with their team manager, and service manager if appropriate.

These sessions cover in detail what actions are required, their implementation status and what has been learnt.

The sessions also provide valuable time for any additional support to staff members, an opportunity to reflect and bring closure to the matter. Individual issues about specific staff and/or teams are dealt with through supervision with their team manager and/or service manager.

The information from the investigation report and these debriefing sessions feed into full departmental records collating all lessons learnt. This information is shared at Senior Management Team meetings and at our Practice Improvement Meetings where key themes arising from complaints are discussed and lessons learnt implementation plans are reviewed. Case studies are also presented for open discussion, sharing of new ideas and implementation of those ideas where appropriate.

Both of these forums ensure performance is monitored, all managers have oversight and contribute to practice development, service planning and improvements to our processes as a result of lessons learnt from complaints.

2.12 EQUAL OPPORTUNITIES MONITORING

Whilst efforts have been made to monitor the ethnic origin of the Councils' complainants many have elected not to complete the diversity questionnaire. Due to the limited data returned, a true and accurate reflection of equalities monitoring cannot be reported.

3.0 COMPLIMENTS

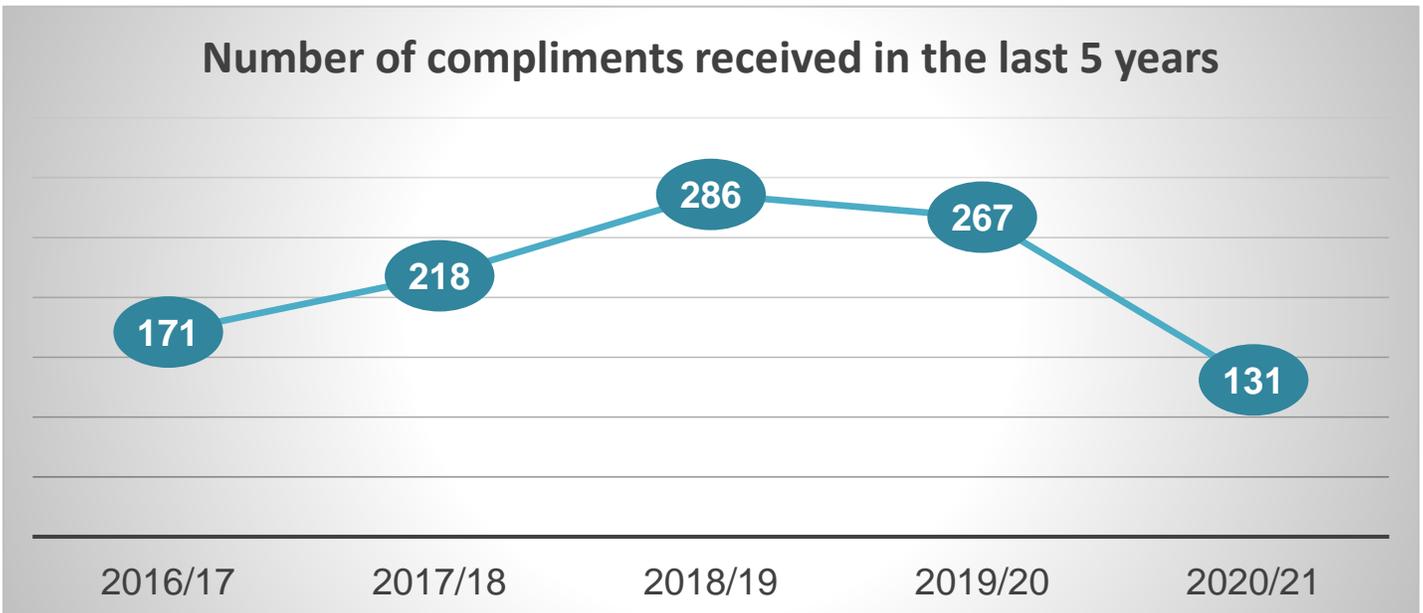
3.1 WHAT IS A COMPLIMENT?

Redcar & Cleveland Borough Council’s Adult Care Complaints and Compliments Policy states a compliment is: *“When someone is happy with the service they have received and wishes to express their thanks or appreciation.”*

3.2 NUMBER OF COMPLIMENTS

We received 131 compliments in 2020/21; a reduction of 136 which is likely to be caused by the effect of the COVID-19 pandemic and lockdown restrictions on our practice arrangements and service delivery abilities.

The table below shows the number of compliments received over the last 5 years.

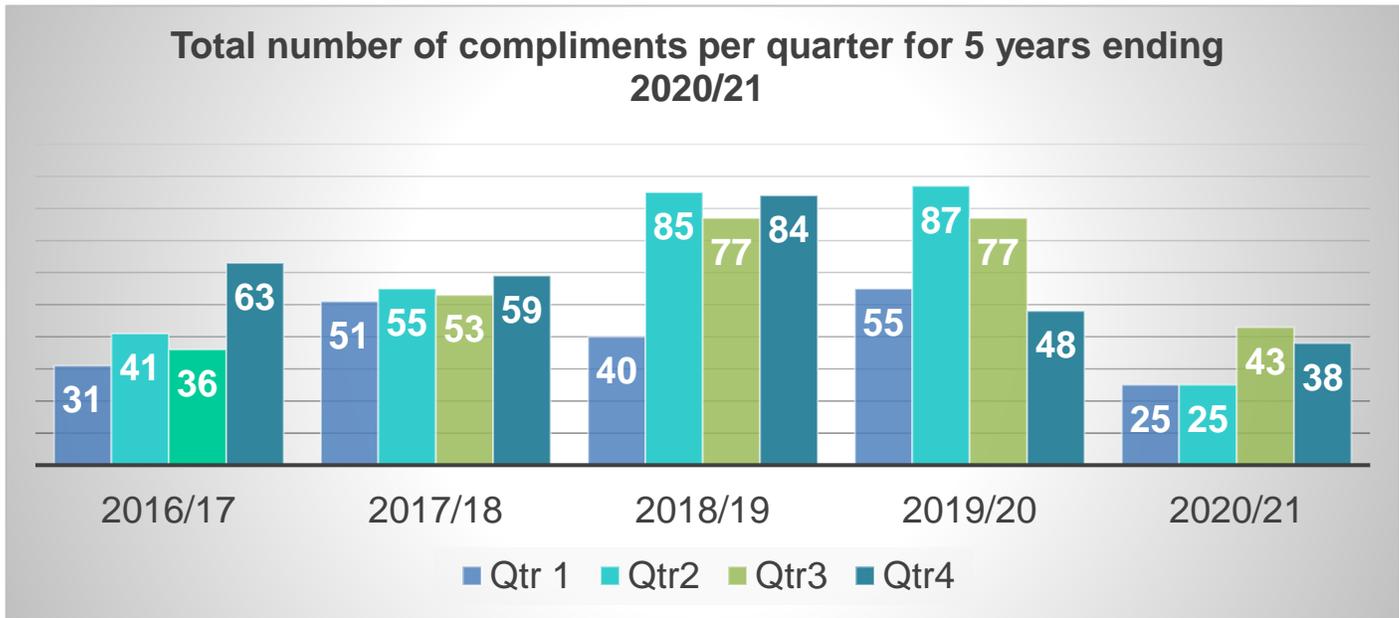


Compliments are received by letter, email, thank you cards and feedback forms. They are recorded and the members of staff involved are congratulated by the senior management team on their good practice. We

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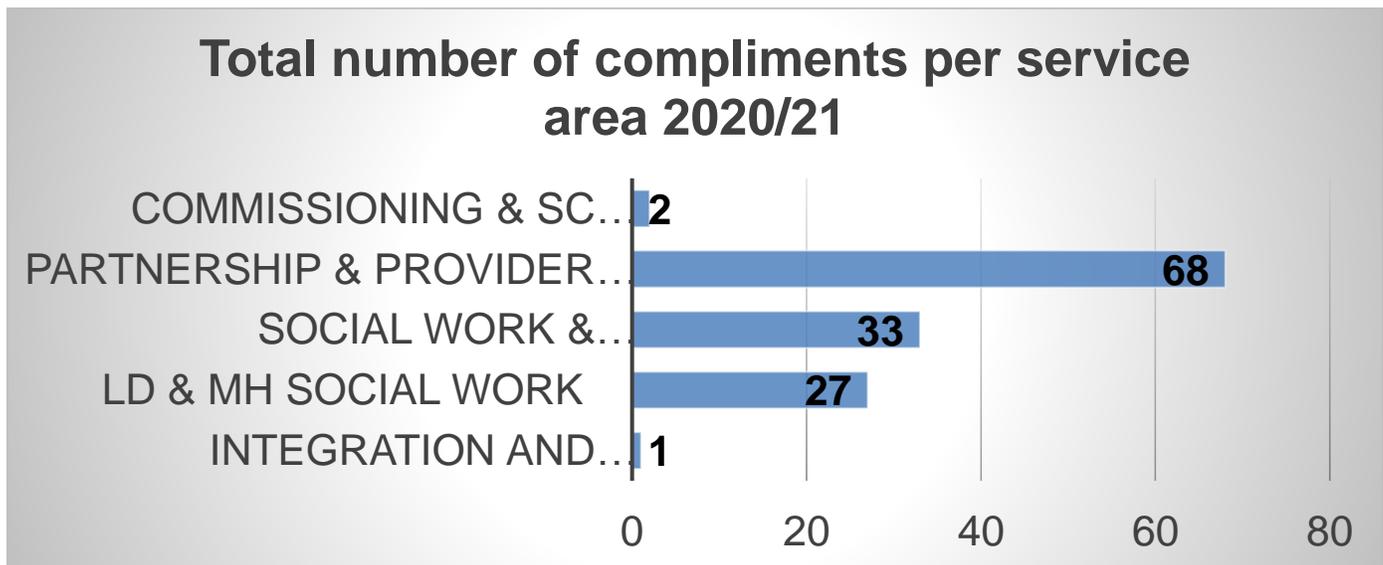
use feedback received from compliments to affirm when services are working well and have made a positive impact on adults accessing our service.

The chart below shows the quarterly breakdown of compliments over the last five years.



3.3 DETAILED ANALYSIS

The chart below shows the number of compliments received per service area.



The number of compliments for our Recovery and Independence Team is consistently high, followed by Locality Social Work Teams and Mental Health Social Work Teams. The remaining services are back-office functions and therefore, would not attract as many compliments from the public.

Adult Social Care 2020/21 Compliments

“Jasmine was an absolute diamond and was there to answer and help sort out any problems we had, I felt I was in very good hands, and she couldn't have helped anymore, she was always there at the end of a telephone offering good sound advice and helping me feel at ease and I began to see light at the end of the tunnel.”

“I would like to express my thanks to all concerned about the treatment I have received. Everybody has been most helpful and has gone out of their way to make my life easier”.

“Mr X son just wanted to pass on his thanks to you and said how helpful, supportive, and understanding you were to him, his brother and his father – you were ‘Top Class’ and he just wanted to say thank you for arranging his support and placement.”

“Mrs. X has had a stair rail fitted and it has made a great deal of difference to her life. She stated that the two men who fitted it were brilliant, and she would like to thank everyone for their help.”

“I would like to express my thanks and appreciation to the RIT team for their kindness and care in helping me on my recovery after a fall.”

“I would like to say a big thank you to Clair from your team, she has been extremely supportive while leading on a very complex safeguarding issue, she has been reactive, approachable, and professional throughout.”

“I can say that Gayle has excellent communication skills, she explains matters to us very clearly, so we know what to expect in the future.”

“I was treated with great care and respect, and I am thankful for the service provided.”

The level of courtesy and attention that the said Social Workers gave to me was exemplary and I cannot stress enough how much the valuable help and advice has alleviated my problems. Certainly, my daily activities are so much more manageable and in this, I am of course delighted and indebted to the visiting Social Workers.

“I would like to say how brilliant, helpful, and proactive Jodie has been with one of our complex patients on PICU. Jodie has gone above and beyond for this young lady and as a team on Bedale we really appreciate this, please could you thank Jodie on behalf of our team.”

4.0 CONCLUSION

2020/21 was a challenging year and our priority was to continue to deliver vital care and support to our most vulnerable adults throughout the pandemic whilst balancing the risk of the virus.

We have had to adapt and change the way we delivered our services. Difficult decisions were taken to close some services temporarily, such as our day services to help stop the spread of the virus. Other services were reconfigured to assist with the pressures on the health service, ensuring essential care was provided.

Initially social work practice had to change to reduce social contact in all but the most urgent and complex cases. We refocused our activity to provide virtual solutions where possible and telephone assessments were introduced. Our staff had to quickly adapt to a different way of working, working from home and striking the right balance from face to face working to virtual interaction with colleagues, other professionals and adults accessing services.

Within Adult Care, we did not underestimate the challenges faced by our social care practitioners in not only meeting their professional duties but also with the potential infection risk in doing so to them and their families. Adult Care staff closely monitored the safety and wellbeing of our service users but acknowledge that managing the pressures the pandemic brought to the care sector, affected the delivery of our core services.

Throughout the pandemic we have not lost sight of the importance and learning that can be achieved from both complaints and compliments. We have completed a review of all complaint responses in the previous year and instigated new procedures for investigating officers. Comprehensive training and guidance have been rolled out to all investigating officers with a focus on the quality of complaint investigations and embedding lessons learnt.

We have also improved our reporting standards, introduced an easy read guide for complaints that meets the accessible information standard, and developed a complaints privacy notice to ensure compliance with data protection legislation when handling complaints.

Although complaints have increased and the number of compliments has reduced in this reporting year, we are confident we have built resilience, stayed true to our purpose and values, and will remain open to learning from feedback from those accessing our services. This will enable Adult Care to improve continuously, strive to deliver high-quality adult social care services and improve the wellbeing of adults using our services.