Bolton Council

Report to:	**ADULT AND COMMUNITY SERVICES SCRUTINY COMMITTEE**		
Date:	**23 SEPTEMBER 2009**		
Report of:	**DIRECTOR OF ADULT AND COMMUNITY SERVICES**	**Report No:**	
Contact Officer:	**CATHERINE OLNEY-FALZON**	**Tele No:**	337288 337241

Report Title: **Annual Report of Adult and Community Services Complaints**

Non Confidential

This report does **not** contain information which warrants its consideration in the absence of the press or members of the public

Purpose:

This report is to provide Adult and Community Services Committee with an update on the position of complaints and compliments for Adult and Community Services for the period 1 April 2008–31 March 2009.

Recommendations:

Background Doc(s):

SUMMARY OF REPORT:

Adult and Community Services is a large and diverse department covering Adult Social Care, Culture and Community Services, Community Safety and Strategy and Commissioning and has two complaints processes within this; corporate complaints and adult social care complaints.

This report sets out to highlight the performance achieved across the year (2008-9) and identify plans to develop a better customer service.

- For corporate complaints for 2008–2009, 87% of complaints responded to within the corporate standards compared to 81% for 2007-2008

- For social care complaints there has been a rise of receipt for 2008-2009 to 98 from 89 for 2007-2008.

BACKGROUND INFORMATION

1.0 BACKGROUND INFORMATION

1.1 Complaints represent an opportunity for customers to express a view about our services and therefore are a trigger for service improvement. This report looks in detail at adults' corporate and social care complaints and representations in the reporting period 1 April 2008 to 31 March 2009.

1.2 The Council has a statutory responsibility under the Health and Social Care (Community Health Standards) Act 2003 to make arrangements for the handling and consideration of complaints about services provided under social care legislation. Adult and Community Services' Policy and Customer Relations Team is charged with implementing procedures developed in response to those requirements in addition to handling more general complaints under Bolton's corporate procedures.

1.3 Adult and Community Services is required to work to the arrangements for the handling and consideration of complaints about its remaining functions within the corporate policy.

2.0 ACTIVITY FOR NON-SOCIAL CARE COMPLAINTS

2.1 Excluding Social Care complaints Adult and Community Services received 59 complaints during 2008/2009.

2.2 Complaints that are not categorised as being within the social care remit relate to Libraries, Museums, Community Safety and Regulatory Services. Sport, Health and Inclusion were also within the remit until October 2008 when this passed over to Children's Services. In April 2009, Environmental Health & Trading Standards moved into the newly established Regulatory Unit.

2.3 Response times are detailed below:-

Category	Number	Percentage
Number of complaints responded to within standard	51	86.4%
Number responded to up to **7 days** out of standard	3	5.1%
Number responded to up to **14 days** out of standard	2	3.3%
Number responded to up to **21 days** out of standard	0	0%
Number responded to **over 21 days** out of standard	3	5.1%
Total responded to	59	

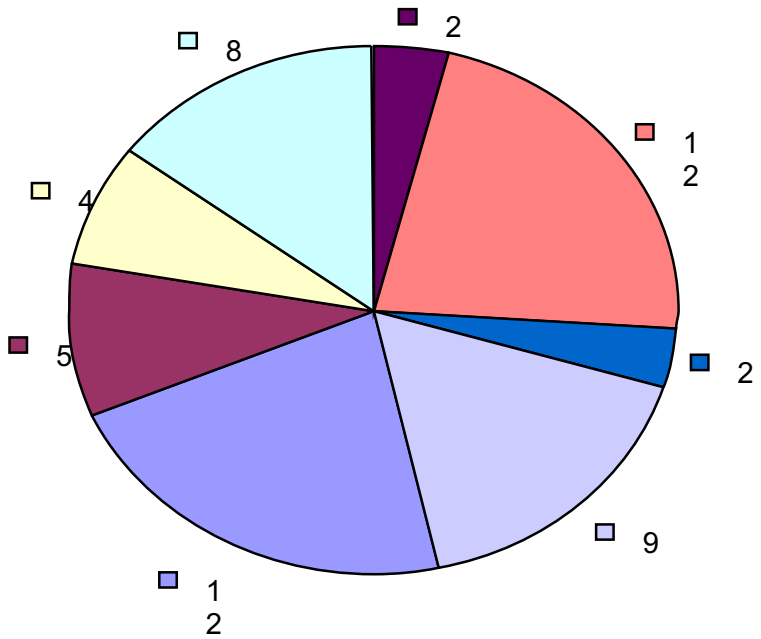
2.4 Further improvements have been made this year with almost 87% of complaints responded to within the corporate standards compared to 81% last year

2.5 A general summary by service area can be found here.

Area	Number of complaints
Museums and Archives	11
Sport Health and Inclusion *(moved to Children's, 10/08)*	12
Libraries	25
Community Safety Services	1
Environmental Health/Trading Standards*(moved to Reg.Unit 4/09)*	8
Adult Social Care	1
Total	59

2.6 There are cross-cutting themes across services for the subject matter of complaints and these clearly show the areas that service users feel most motivated to complain about.

Themes	Detail
Communication	Deals with communication errors including lack of communication by staff to
Sta	
He	
Se	
Co	
Po	
De	



2.7 The diagram above highlights that communication; policy and decision-making within services were the leading causes of complaints.

2.8 Communication has particularly come through within the content of the complaints, often proving to be, alongside staff attitude, a clear 'tipping-point' for a complaint to be made.

2.9 Concerns relating to policy reflect the number of complaints logged against the libraries reflecting issues with IT equipment usage and stock choices. Also contributing were issues with the enforcement of the smoking ban.

2.10 Concerns relating to decision-making were largely related to the decision by museums to withdraw the Museums Loan Service. This resulted in a large number of complaints by teachers who had planned lessons on the basis of this service being available and felt exceptionally strongly about both the withdrawal and a perceived lack of notification. Investigation identified that information had been sent out; however it was to head teachers of local schools and with a relatively short timeframe before implementation of the change. It appeared the information had not been cascaded, however the fault was perceived to be with Museums. This has been noted by the service and will be considered when any future changes are planned.

3.0 LEARNING FROM CORPORATE COMPLAINTS

3.1 As noted above lessons can be learnt from issues raised with us. The corporate system requires the consideration of learning at the point of closing the complaint and the complaint cannot be closed without this. However many complaints had been closed with limited analysis of learning. This practice has changed in order that any learning will now be built into the process and complaints will not be signed off without a thorough assessment of potential learning. Learning will also be strengthened through a better analysis and reporting mechanism to management teams to ensure that learning is fed through and changes made as a result.

3.2 However there are a couple of good examples where learning and actions have been taken forward, influencing service delivery and showing the potential for corporate complaints to identify change based on customer feed back.

3.3 ADS2729- Complaint from member of the public that every time she contacted Horwich Leisure Centre to check the opening times of their facilities, there was always an answer machine on. Customer did not think that this was good service that she should have to leave her details just to ask what time the swimming baths open. Following the complaint the telephone system was upgraded.

3.4 ADS3470- Complainant sustained injuries at Little Lever Leisure Centre and asked the staff for an ice pack but the staff had no first aid equipment and no trained first aiders on the premises. Reviewed First Aid provision and ensured ice packs to be included in the kit.

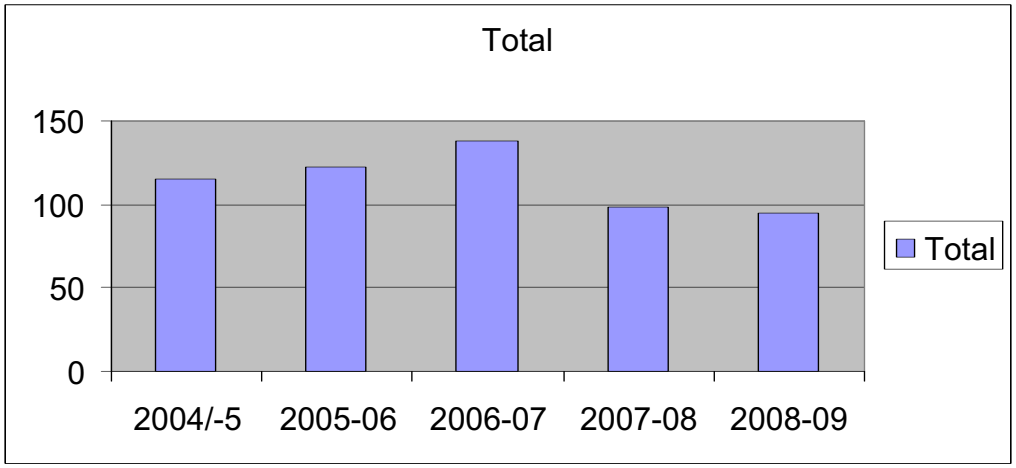
4.0 ACTIVITY FOR SOCIAL CARE COMPLAINTS

4.1 During 2008-2009 95 complaints were received in relation to Adult Social Care compared to 89 in 2007 – 2008

4.2 Of these 95 representations

- 90 were Stage One Complaints
- 3 were Stage Two Complaints
- 1 was a Stage Three Complaint
- 1 was an Ombudsman Complaint

4.3 Comparisons to previous year's activity:-



4.4 Of these 95 representations for 2008-09;

- 65 (68%) were answered within the 20 day response time
- 29 (31%) were not answered within the 20 day response time
- 1 (1%) has still to be answered (however this is an ongoing matter)

4.5 High level analysis reveals the majority of representations are broken down as follows:

- 26 % are regarding Residential Care (25 representations)
- 24% are regarding Homecare (23 representations),
- 8% are directly regarding Bolton Council employees or policy decisions (8 representations)
- The remaining 41% concern other areas (39 representations)

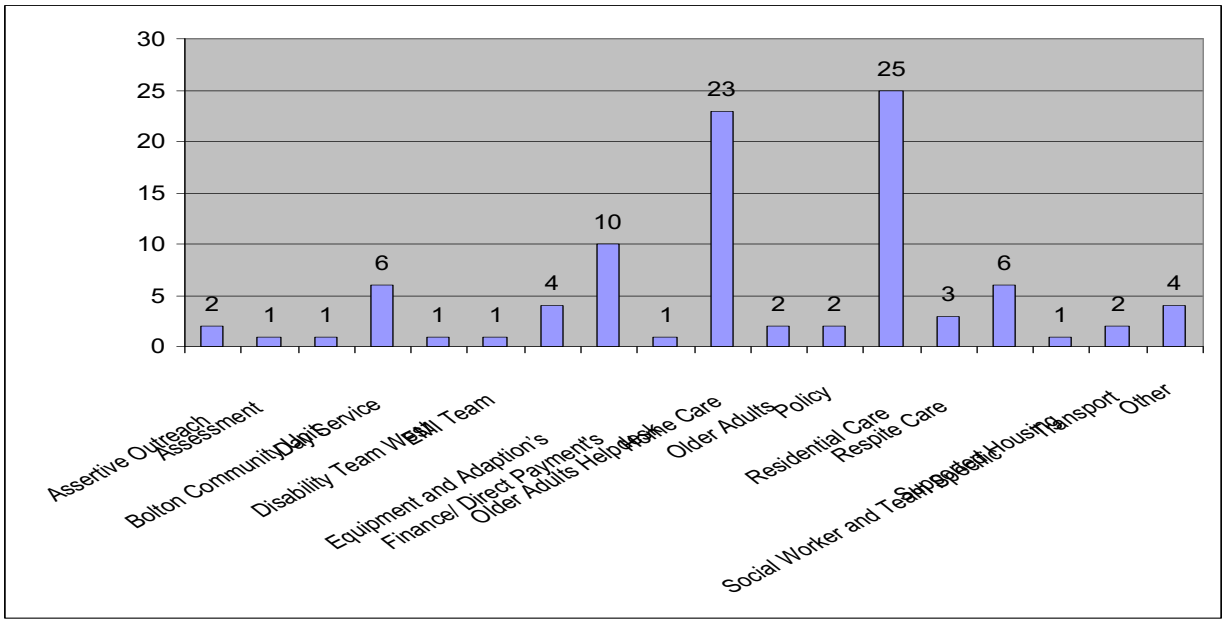
4.6 Analysis reveals that there is a wide spread of complaints across various providers.

- Carewatch and Anchor Care were the most complained about domiciliary care agencies, with 5 representations each (22% of the representations each)
- Firwood was the most complained about care home with 3 representations (12% of the representations).

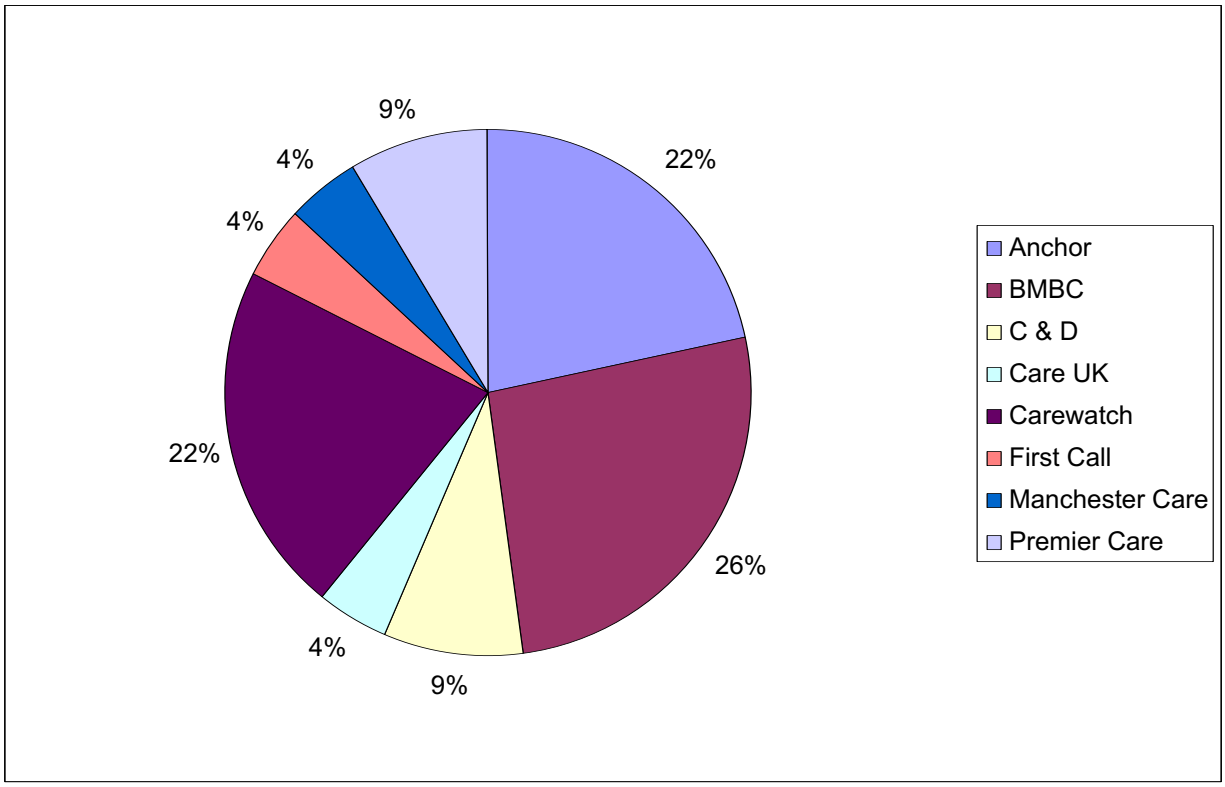
4.7 The tables below provide further analysis:

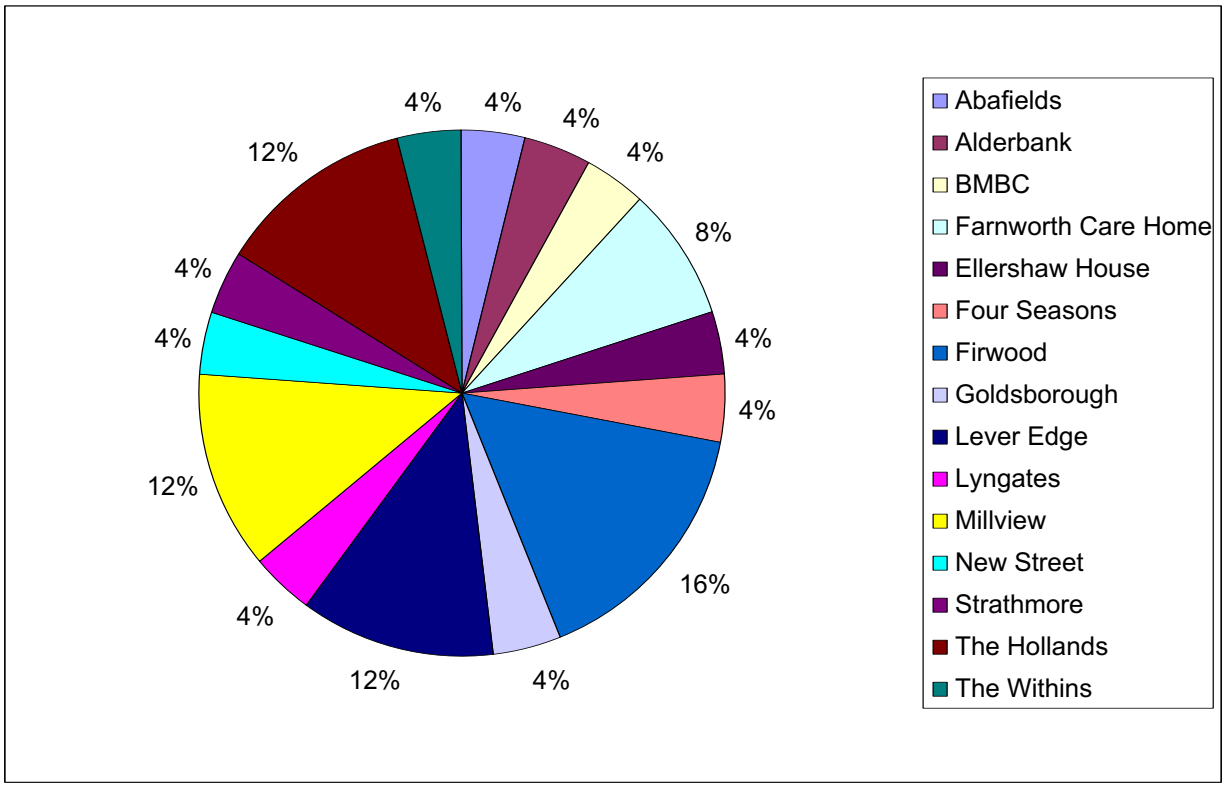
Breakdown By Client Group	
Older Adults	54
Learning Disability	16
Physical Disability	14
Mental Health	4
Carers	2
HIV/AIDS	1
Substance Misuse	0
Other	4

4.8 Clearly the majority of complaints appear to be raised within the Older Adults client group. We are unable to determine definitely why this is; however they are the largest group of recipients of services.



4.9 Looking at the breakdown of service area above, it can clearly be seen that Home Care and Residential Care were the main areas of concern. This is unsurprising as this is often the point of interface that the majority of service users regularly encounter and therefore it could be anticipated that the majority of concerns would centre on these areas.





4.10 Information surrounding independent agencies has been used historically to pinpoint areas of concern and the complaints linked to Anchor resulted in part in a review of the contract with them.

4.11 However liaison with the Contracts Team has been strengthened and information is being passed on a monthly basis advising on outstanding complaints relating to independent providers so that contracts officers are more aware of outstanding concerns and use this to conduct reviews with providers and influence their decision-making.

4.12 Learning is also identified where complaints relate to independent providers and the liaison with Adult and Community Services in the investigation of the matter. This has resulted in complaint management being highlighted more regularly to providers.

4.13 Plans are also being developed to include quarterly complaints analysis from complaints handled by providers so that Adult and Community Services can have a more comprehensive picture when looking at complaints in relation to individual providers.

5.0 LEARNING FROM SOCIAL CARE COMPLAINTS

5.1 Communication

5.1.1 A clear theme throughout many complaints is communication issues. This has been seen both externally from the customer perspective and internally when attempting to answer complaints

5.1.2 Key points are;

- unanswered phones,
- duty systems,
- message-taking,
- messages not being responded to
- perception of not listening to what the client/customer is actually saying

5.1.3 There is a cross-over here to the work currently being undertaken at a departmental level regarding phone responses and also at a corporate level as there is a review being undertaken to further develop customer care.

5.2 Speed and Clarity of Response

5.2.1 Customers have made it clear that lengthy waits for responses aggravate and distress people in vulnerable and difficult positions

5.2.2 Developments following on from Making Experiences Count and Adult and Community Services' policy; 'Valuing Customer Feedback' will help to alleviate this area of concern. Regular person-to-person contact is a cornerstone of these developments and the message is being re-iterated that regular contact can make complainants feel listened to even where final responses are not immediately available.

5.3 Staff Manner

5.3.1 Whilst customers acknowledge the high workloads social workers face, complaints have described their interactions as short, sharp and not person centred. Clients for home care have particularly noted the importance of compassionate and responsive staff.

5.3.2 Again, customer care is high on the department's agenda and messages from Valuing Customer Feedback and operational managers are reiterating that we need to listen to service users and make them feel that we are taking matters seriously, as well as feeding back changes that will be made as a result of a matter being raised.

6.0 LEARNING AFFECTING SERVICE DESIGN

6.1 Learning is key in adult social care as much as it is in corporate complaints. As part of the complaints process, complaints are scrutinised for any learning that can be derived and this is flagged up with service areas involved. Service areas are then engaged in formulating learning to develop the service where appropriate in line with learning from complaints and any developments are monitored.

6.2 Examples

6.2.1 A complaint showed that a specific duty system was not appropriate as despite a rota system being in place the phone was not being answered and the system was not updated with holidays or cover provided when staff were away from the office. This has led to a comprehensive review of the duty system for Bolton Assertive Outreach, delivered by Greater Manchester West Mental Health Trust.

6.2.2 A complaint showed that there are issues with complaints not being forwarded to customer relations in a timely fashion. Reminders have been issued about customer relations function and contact numbers and addresses.

6.2.3 A complaint showed that a factsheet about the "28 day linking rule" was not clear enough to explain the rule adequately to service users. This has been reviewed and re-issued following feedback from the service user and a plan established that all future factsheets will be subject to public consultation prior to publication.

6.2.4 A complaint showed that a service user had been contacted by a survey researcher despite having died. The family was distressed by the call. The agreement in future is that from the point of collation of survey contacts, there would be a mid-point update on status of service users to check there have been no changes, such as hospitalisation or death.

6.3 Homecare

6.3.1 A clear theme throughout the complaints around homecare is regarding the timing of visits. Complainants are concerned that visits do not fit with their required schedules, coming either too early or late and also a lack of flexibility which affects their independence.

6.3.2 Additional issues have also arisen around transfers of contracts which raise the risk of errors occurring or for the complainant to feel dissatisfied with the service as communication could have been improved.

6.4 Care Homes

6.4.1 In relation to the care home concerns, many complainants raised issues around perceived lack of concern by staff around the exact needs of service users such as not following care plan instructions.

6.4.2 There have also been a couple of incidents this year with the use of hoists and the correct policy not being applied for the hoisting of residents.

6.4.3 We need however to ensure that lessons learnt in relation to one service are passed effectively on to other services for reminders or to promote changes to services. Further work will be done in 2009-10 to look at how best to develop this.

7.0 COMPLIMENTS

7.1 There have been 19 compliments between February 2009 and end March 2009.There has been an increase in receipt of compliments as we have encouraged them being forwarded to Customer Relations through Bulletin entries and word of mouth.

7.2 Prior to February 2009 compliments were recorded in a manual system which made analysis and reporting difficult. The change to an electronic system of recording and processing is part of an increased emphasis on the value of compliments as customer feedback, including acknowledgement to service users who take the time to contact us in this way and 'thank you's' to staff who have performed well.

7.3 We acknowledge compliments where we have the person's details

7.4 Where the compliment has not been sent to the team, we send a thank you to the team members concerned.

7.5 Below are some of the most praised although others have received compliments

EMI	7
	5
Intermediate Care	2
Winifred Kettle	3

7.6 Some compliments relate to more than one service as they have thanked more than one service

7.7 Throughout 2009-10 further consideration needs to be given to how best ensure that these positive comments can add value to the service.

8.0 ROLE OF POLICY AND CUSTOMER RELATIONS TEAM

8.1 The Adult and Community Services Policy and Customer Relations Team are currently located in the Council Offices in Le Mans Crescent. In October 2008 the Customer Relations function was incorporated into the wider Performance Management Team, better reflecting the organisational role of complaints in service monitoring, organisational learning and service development.

8.2 The Policy and Customer Relations Team wishes to raise the profile of the team and to promote a positive attitude to complaints by engaging in staff development programmes. The forthcoming implementation of the Valuing Customer Feedback policy will provide an opportunity to further engage with managers and staff.

9.0 MAKING EXPERIENCES COUNT/ VALUING CUSTOMER FEEDBACK

9.1 In line with the Making Experiences Count initiative, a new policy called Valuing Customer Feedback was approved by the Executive Member on 29 July 2009.

9.2 This will change the approach taken to complaints and will improve the customer experience of providing feedback to the Department. Although these changes are about to be implemented, the complaint recording and analysis will allow comparison and benchmarking.

10.0 POLICY AND CUSTOMER RELATIONS TEAM IN 2009/10

10.1 The Customer Relations Team has the following aims:-

- To implement Valuing Customer Feedback
- To build a working relationship with the complainant and actively listen to what the complainant wants and manage their expectations
- To deal with issues as efficiently as possible with regular updates for the complainant
- To liaise with staff in order to effectively resolve a complaint
- To facilitate representations from those who are potentially disadvantaged from approaching the Department
- To promote a positive attitude to complaints
- To identify learning from complaints, highlight weak or unsatisfactory areas of service and then use customer feedback to influence thinking around service design and future commissioning.

10.2 In seeking to achieve the above aims the Section is making a contribution to service development for the benefit of our customers. The positive strategic and operational day-to-day management of complaints within Adult and Community Services provides a solid foundation with proven results. It effectively reflects the ethos of “putting customers at the heart of everything we do”. The approach, aims and objectives and high standard of customer care is a positive model, as customers feel that they are making a positive contribution towards improved service delivery.

11.0 RECOMMENDATIONS

The Executive Member for Adult Services is asked to approve the Annual Complaints Report 2008-9.