

# ADULTS & HEALTH SELECT COMMITTEE 17 DECEMBER 2020 ASC COMPLAINTS APRIL - SEPTEMBER 2020

**Purpose of report:** To provide a detailed summary of complaint activity in Adult Social Care for the period April – September 2020.

## Introduction:

- 1. This report details all Adult Social Care complaints activity within the April -September 2020 period. The report is provided to Select Committee on a sixmonthly basis.
- 2. Surrey's Adult Social Care complaints are managed in accordance with the Statutory Social Care Complaints Procedure, which is governed by the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. Any complaint that does not fall within these regulations will usually be considered in accordance with the Council's corporate complaints procedure.
- 3. When a complaint has completed the adult statutory complaints procedure and the complainant remains dissatisfied, they can take their complaint to the Local Government & Social Care Ombudsman (LGSCO) for their advice and assistance.
- 4. There is a statutory requirement on all local authorities to publish a report on Adult Social Care complaints. This is completed on an annual basis and published on the Council's website.

## **Executive Summary**

- 5. Adult Social Care received 21% fewer complaints (99) during this reporting period than the same six-month period in 2019/20 (126).
- 6. During April September 2020, Adult Social Care received 99 complaints and responded to 93 complaints. 94% of all completed complaints were responded to within the agreed timescale. 24% of the completed complaints were not upheld, 18% were upheld and a further 18% were partially upheld.
- 7. The most common issues raised as complaints related to the assessment process, service quality and finance including funding/care charges.
- 8. The main learning themes from the complaints were:
  - Better communication with service users and their families, including information provided on care provision and funding options.
  - Ensuring timely assessments and reviews.
  - Effective record keeping.
  - Improved quality of service and internal staff practice.

- 9. During April September 2020, eight complaints were investigated by the Ombudsman. Six complaint investigations were completed and upheld by the Ombudsman during this period, of which three had a financial remedy.
- 10. Going forward, there will be a continued focus on listening to customer feedback and ensuring complaints are addressed effectively with good quality responses and to make service improvement using the learning from complaints.

## Complaints

11. Complaints are a valuable source of feedback on the quality of services being provided to service users. Table 1 provides a yearly comparison of the number of complaints received within Adult Social Care.

ASC Complaints	Number received
2019/20	255
2018/19	251
2017/18	221

Table 1 Number of complaints received by year

12. For the April – September 2020 reporting period, Surrey Adult Social Care received 99 new complaints and responded to 93 complaints. Table 2 details the number of complaints received and responded to within each service area.

Area	Received	Responded	Responses Within Deadline	Responses Within Deadline (%)
East Surrey	9	7	7	100%
Guildford & Waverley	7	10	10	100%
Mid Surrey	18	19	19	100%
North West Surrey	12	9	9	100%
Surrey Heath	3	3	3	100%
PLD, Autism & Transitions	22**	18	15	83%
Mental Health	9	9	8	89%
Countywide*	14	14	12	86%
Service Delivery	5	4	4	100%
Total	99	93	87	94%

Table 2 Complaints by service team Apr - Sept 2020

\* Countywide complaints related to Financial Assessment Income Collection, Continuing HealthCare, Emergency Duty and Multi-Agency Safeguarding Hub

\*\*Breakdown included in Appendix 1

How received	Q1	Q2
Email	19	22
Letter	2	8
Telephone	12	15
Web	7	14
Total	40	59

Table 3 Mode of contact when making a complaint

### Table 4 Complaints received by month

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Year Received (2020/21)							
Month	Apr	May	Jun	Jul	Aug	Sep	Total
East Surrey	1	-	3	1	1	3	9
Guildford & Waverley	1	2	-	1	2	1	7
Mid Surrey	4	-	2	7	1	4	18
North West Surrey	2	1	1	-	3	5	12
Surrey Heath	2	-	-	1	-	-	3
PLD, Autism & Transitions	3	2	5	3	4	5	22
Mental Health	2	2	-	1	1	3	9
Countywide	-	2	2	1	7	2	14
Service Delivery	1	-	2	-	-	2	5
Total	16	9	15	15	19	25	99
		Q1 = 40	-		Q2 = 59		

- 13. During the reporting period, as detailed in Table 4, the number of complaints received remained fairly static until September. There was no sharp influx of complaints during this period when teams were dealing with the challenges of the Covid pandemic.
- 14. Table 5 illustrates the nature of complaints received. Complaints about the assessment process concerned delays and information provided. Service quality complaints related to the quality of service within teams as well as care quality. Finance and funding complaints involved the financial assessment process, disputes with care charges and provision of information related to care funding/charges.
- 15. Please refer to Appendix 1 for a brief summary of the issues raised in the 22 complaints received by the PLD Autism and Transition teams.

Table 5 Nature of complaints received Apr – Sept 2020

Nature of Complaint	East Surrey	Guildford & Waverley	Mid Surrey	North West Surrey	Surrey Heath	PLD, Autism & Transitions	Mental Health	Countywide	Service Delivery	Total
Assessment process	2	1	3			5	4	2	2	19
Service quality		2	4	4	1	2	2		2	17
Financial/Funding		1	2		1	3		7		14
Safeguarding	5		2	1		2			1	11
Service provision		1	1	3		3	1	2		11
Staff	1	1	3		1	4		1		11
Communication			3	3		1	1	1		9
Decision making	1	1		1		2	1			6
IG or Data protection breach								1		1
Total	9	7	18	12	3	22	9	14	5	99

## **Response Times**

- 16. There is no statutory timescale for responding to a complaint within the Adult statutory complaint procedure, although a complaint should be fully completed within six months. This enables a more customer centred and flexible approach to addressing complaints, including those that are complex or require multi-agency involvement and working closely with external agencies such as health. The focus is on establishing a consistent approach to getting it right and putting things right.
- 17. The Adult Social Care complaint procedure operates as a single stage for processing complaint. This allows for more flexibility to respond to a complaint and timescales can be extended as there is no escalation stage. However, the complainant is always kept informed of the progress of their complaint.
- 18. Adult Social Care has a performance target of 90% for responding to complaints on time. The complaints are often complex and whilst the Council has adopted a timescale of 20 working days as an initial response timeframe, this can be extended depending on the circumstances of the issues being investigated. The response times are detailed in Table 2 and shows that 93 complaints received a response during this reporting period and 87 (94%) complaints were responded to within the deadline date.

## **Complaint Outcomes**

19. Table 6 details the outcomes from complaints and shows that 24% of the complaints were not upheld, although 36% of the complaints were either upheld in full or partially upheld (18% upheld and 18% partially upheld complaints).

- 20. The 'still pending' complaints relate to those that are still in the process of investigation.
- 21. Sixteen complaints were resolved outside the complaint process where the investigating manager was able to discuss and resolve the complaint without proceeding with the full investigation. Under the legislation, services are encouraged to address and resolve complaints in whatever way is helpful.

Outcome of Complaint	East Surrey	Guildford & Waverley	Mid Surrey	North West Surrey	Surrey Heath	PLD, Autism & Transitions	Mental Health	Countywide	Service Delivery	Total	Total (%)
Not upheld	2	3	1	2	2	9	1	3		23	24%
Still Pending	2		2	4		4	2	2	2	18	18%
Upheld		2	3	1		5	3	2	2	18	18%
Partially Upheld	1	2	6	2	1	2	2	1	1	18	18%
Resolved Outside Process	3		6	2			1	4		16	16%
Complaint Withdrawn	1			1				2		4	4%
Paused						2				2	2%
Total	9	7	18	12	3	22	9	14	5	99	100%

### Table 6 Outcomes for Complaints Apr - Sept 2020

## **Ombudsman Complaints**

- 22. Where a complainant remains dissatisfied, following completion of their complaint under the Adult complaint process they can refer their complaint to the Ombudsman, and it may result in an investigation.
- 23. Table 7 shows the number of Ombudsman investigations completed for the first two quarterly periods of 2020/21.

LGSCO investigations	Q1	Q2	Total	Total (%)
Completed – Not Upheld	-	-	0	0%
Completed – Upheld	3	3	6	60%
Closed after initial enquiries	1	2	3	30%
Closed - No Further Action	1	-	1	10%
Total	5	5	10	100%

Table 7 Ombudsman Investigations completed (Apr – Sept 2020)
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- 24. As detailed in Table 7, six completed complaint investigations were upheld by the Ombudsman. Nationally, the Ombudsman is finding fault more often across Council services for complaints and the percentage of all adult social care complaints upheld was 69% in 2019/20. The Ombudsman upheld 67% of Surrey Adult Social Care complaints in 2019/20. The six complaints that were upheld in Q1 and Q2 are summarised below:
  - Not reviewing and revising the care and support plan in line with s.27 Care Act 2014
  - Not informing the individual of an increase in the care home charges.
  - Delay in carrying out a needs assessment and producing a support plan, delay in providing an appropriate personal budget and direct payments and delay in making a referral to an Occupational Therapist.
  - Quality of care and service (provider related).
  - Failing to inform the individual of the amount of their personal budget, resulting in the person not knowing the potential cost of their weekly care.
  - Ensuring individual had full time care when relative was unable to provide the care due to illness.
- 25. The Ombudsman will recommend a remedy where there has been fault resulting in an injustice to the service user. A financial remedy is recommended only when the complaint has resulted in a quantifiable financial loss as a reimbursement and/or to acknowledge identified distress, time and trouble.
- 26. The Ombudsman's focus is not on the quantity of complaints received by an organisation but the quality of the response and willingness to put things right. This aligns with the direction being taken by Adult Social Care, to ensure that complaint learning is implemented in a timely manner and as a quality service improvement.
- 27. Table 8 presents the yearly summary of Ombudsman complaints with a financial remedy.
- 28. Table 9 provides a breakdown of the financial remedies arising from Ombudsman investigations during this reporting period and includes reimbursment payments.

### Table 8 Ombudsman Complaints resulting in a financial remedy by year

	2017/18	2018/19	2019/20	2020/21*
Financial remedies as recommended by the LGSCO	£7,775	£1,200	£6,695	£12,598

\*completed investigations from April to September 202

Table 9 Financial Remedies arising from Ombudsman investigations (Apr – Sept 2020)

G&W Area Waverley Locality Team: Q1 (Upheld: Maladministration & Injust	ice)	
To complainant in recognition of the avoidable distress caused,		
and time and trouble pursuing the complaint with the provider and Council.		£300
	Total	£300
PLD Autism Team: Q2 (Upheld: Maladministration & Injustice)		
Refund the cost of unpaid support that client self-funded		£945
For the frustration, time and trouble		£250
Reimburse the daughter, the payments owed to her as a result of the fault.		£9,603
	Total	£10,798
Countywide (FAIC) Team: Q2 (Upheld: Maladministration & Injustice)		
In recognition of the inconvenience and distress caused		£300
For the lack of carer's or disabled person's assessment.		£200
Towards their legal costs incurred in 2017.		£1,000
	Total	£1,500

Total for (2020 /21) £12,598

## Learning from Complaints

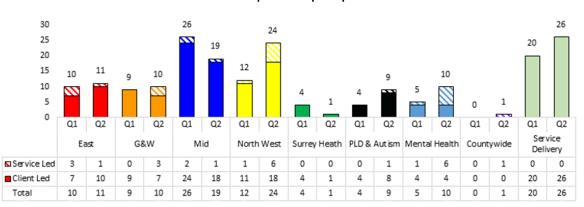
- 29. Adult Social Care continues to focus on putting things right with complaints and ensuring services are improved. The service teams recognise that complaints provide a key source of information for improving service performance.
- 30. Customer Relations works closely with the service teams to ensure that learning from complaints is successfully implemented. This includes quarterly meetings with commissioning and quality assurance to review complaints to providers regarding commissioned services. Learning from complaints will continue to be a key objective going forward and is supported by the new corporate complaints management system which enables us to monitor complaints learning.
- 31. The Adult Leadership Team receives a detailed summary of complaints where learning was identified and implemented, as an informative measure of what has improved as a result of complaints.
- 32. The following are the main learning themes identified from upheld complaints:
  - Better communication with service users and their families, including information provided on care provision and funding options
  - Ensuring timely assessments and reviews
  - Effective record keeping
  - Improved quality of service and internal staff practice
- 33. Below are examples of complaints upheld and the actions taken to put things right.
  - Complaint regarding the quality of support that the individual received in the time leading up to their sudden death, resulted in the process of allocating

work within the team being revised to make it more efficient and to minimise delays occurring.

- Complaint regarding the poor quality of communication, errors and inadequate record keeping. Discussions were held between the managers regarding the need for accurate and timely communication to families. There was a review of the process for follow up actions in safeguarding cases in the hospital team to ensure regular meetings with the NHS Safeguarding lead take place and timely follow up on the request for reports and information from Health.
- The next of kin was not informed when the service user's case was transferred to a different team. The complaint resulted in more robust checking system being put in place prior to cases being transferred between teams and ensuring a process for sending the appropriate correspondence to the relevant next of kin, to keep them informed.
- Complainant was not informed of the care costs before the care package was arranged. Reminder was sent to all Adult Social Care staff of the need to share personal budgets as soon as they have completed the care and support assessment.

## Compliments

- 34. All feedback regarding Council services is useful for evaluating service improvement, including compliments which provide a good insight when things are working well and in relation to staff.
- 35. Chart 1 details the number of compliments recorded as received by each service area. Adult Social Care generally receive good feedback when services are well received. Staff are encouraged to report and share their compliments within their teams.





36. A total of 201 compliments were recorded for this reporting period.

What they said...

- Thank you for all your hard work during my mother's spell in hospital. I was regularly kept up to date throughout, at a time when information was hard to come by due to the Coronavirus. J was supportive and professional and made what was a difficult situation easier by being clear and always at hand. She didn't speak about 'a patient', she spoke about my mother, and so I felt that she cared and understood what I was going through Ashford & St Peters Hospital
- Thank you for the beautiful arrangement of flowers that Meadowside sent to my mother's funeral. It was a really thoughtful gesture from you and the team. Meadowside Care Home
- Your team at Dorking, including the MH team are amazing always return calls if they can't answer straight away – such an example for other LA to follow. Teams have struggled to get through at all to other LA. Please would you pass this onto your team with thanks from us, at this time it's appreciated more than ever. **Mole Valley** Locality and Mental Health services
- Thank you on behalf of my Mum. Getting Mum out of hospital and looking after her at home would not have been possible without the kindness and professionalism of the team. With the virus threatening us all, they were cheerful and caring which made Mum feel safe. She came home unable to walk, depressed and unable to hold a cup. With the help of your team she is now walking with support, eating well, washing, dressing and going upstairs to her own bed. **Epsom & Ewell Reablement Team**

## **Conclusions:**

- 37. Adult Social Care received 21% fewer complaints (99) during this reporting period than for the same six-month period in 2019/20, which recorded 126 complaints.
- 38. It is noted that 94% of all completed complaints were responded on time, which is an improvement on the previous report (86%). Adult Social Care has a performance target of 90% for responding to complaints on time. Complaints regarding Adult Social Care can often be complex by nature and require more time for investigation. The statutory complaints procedure allows for flexibility and wider scope to address a complaint within the single stage process, although it should be completed in full within six months.
- 39. The Customer Relations Team continues to work closely with the service teams to ensure complaints are handled well and the learning from complaints are successfully implemented with the new corporate management complaint system in place, for recording and tracking complaints.

## **Recommendations:**

40. The report to be noted by all members of the Select Committee.

## Next steps:

- 41. Going forward, the focus within Adult Social Care will continue to be on putting things right and ensuring complainants receive high quality, timely responses as well as the implementation of learning from complaints to help shape future service improvement.
- 42. The Adult Leadership Team will continue receiving enhanced reporting data, as an informative measure of what has improved as a result of complaints.
- 43. Training for managers and complaints awareness sessions for staff will continue to run virtually through the year to ensure best practice on handling complaints.

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## Sources/background papers: None

# Appendix 1

Breakdown of Complaint issues received – PLD Autism & Transition

No	Team	Nature of complaint
1	PLD Autism	Finance/funding related and the quality of communication with the service
2	PLD Autism	Dissatisfied with the assessment process
3	PLD Autism	Unhappy with the care provision
4	PLD Autism	Lack of support by the care provider for the service user when being sent to hospital
5	PLD Autism	Poor communication and lack of contact
6	PLD Autism	Reduction in support hours
7	PLD Autism	Feeling intimidated by staff/service
8	PLD Autism	Unhappy with the support plan and Direct Payments
9	PLD Autism	Unhappy with the care setting
10	PLD Autism	Lack of care and support
11	PLD Autism	Alleged breach of duty under s.18 Care Act to provide services under care plan
12	PLD Autism	Quality of support provision in place
13	PLD Autism	Concerns raised about the care provider
14	Transition	Direct payments and not being able to fund for exercise
15	Transition	Decision to transfer service user's case from the team to the locality team
16	Transition	Unhappy with the assessment review
17	Transition	Decision to refuse family member being employed as a PA for the service user
18	Transition	Unhappy with the Carers' Assessment
19	Transition	Decision to refuse funding for a live-in carer
20	Transition	Decision regarding Direct Payment reclaim
21	Transition	Unhappy with the level of support from the social worker
22	Transition	The quality of support from the social worker

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