Adult Social Care Complaints and Compliments Annual Report (2020-2021)



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Introduction

This is the Adult Social Care Customer Relations' report for the business year 1 April 2020 to 31 March 2021. It covers activity in Adult Social Care relating to complaints made to the Directorate, complaints raised with the Local Government Ombudsman (regarding Adult Social Care) as well as compliments.

With regard to complaints, all Councils in England that deliver Adult Social Care have a statutory duty to investigate complaints about care under the Local Authority Social Services and National Health Service Complaints (England) Regulations, 2009. In Surrey County Council, such complaints are overseen by the Adult Social Care Customer Relations Team.

When someone makes a complaint, we aim to:

- 1. Acknowledge their complaint within three working days.
- 2. Propose a plan for how we will respond to their complaint.
- 3. Invite their confirmation of what the complaints are and what outcome they are seeking.
- 4. Inform the complainant who will respond to their complaint and when they can expect to receive the substantive response.
- 5. Act quickly to resolve the issues.
- 6. Maintain contact with the complainant during the investigation as appropriate.
- 7. Respond in full within twenty working days or extend our response time if needed.

Executive summary

- 218 complaints were received in the period 1 April 2020 to 31 March 2021. This represents a decrease of 14.5%, compared to 255 complaints received in the previous year.
- The Local Government and Social Care Ombudsman (LGSCO) issued 26 final decisions on complaints about the Council's Adult Social Care services. The number of financial settlements the Ombudsman recommended increased substantially to £28.069, although this includes payments for refunds and reimbursements.
- Twelve (46%) of the 26 final LGSCO decisions were upheld and 2 (8%) were not upheld. The remainder were closed after initial enquiries (23%); out of jurisdiction (8%) or referred back for local resolution (15%).
- Compliments recorded as received declined slightly by 5% (to 455) when compared to the previous year, 2019/2020 (480).
- The most common causes for complaint relate to staff (20.1%), assessment process (19.4%), service provision (18.3%) and financial / funding (11.8%).
- 172 (95%) complaints were responded to within the agreed time frame. On average, the Directorate sent responses within 22 working days.
- A total of 111 (61%) complaints had an outcome of either upheld or partially upheld, while 71 (39%) had an outcome of not upheld.

Section A: Complaints and Compliments Activity

Table 1 provides the key activity data for compliments and complaints activity for the reporting years 2016/17 to 2020/21.

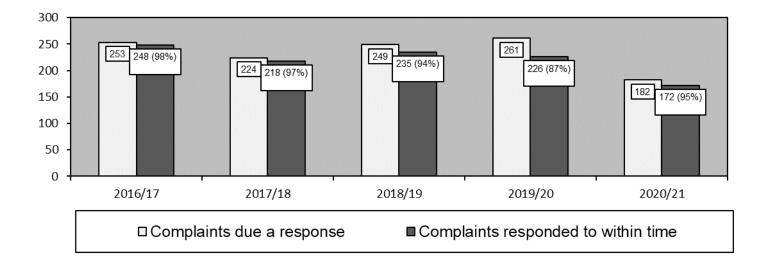
Table 1:

Complaints and Compliments	2016/17	2017/18	2018/19	2019/20	2020/21
Compliments Received	1009	847	526	480	455
Complaints Received	255	221	251	255	218
Individuals making a complaint	244	200	233	237	204
Number of complaints due a Response	253	224	249	261	182
Target for responses to complaints by agreed date (%)	90%	90%	90%	90%	90%
Number of complaints responded to within agreed timescales (%)	248 (98%)	218 (97%)	235 (94%)	226 (87%)	172 (95%)
Average response times (days)	21 days	22 days	25 days	24 days	22 days
Best practice response times	20 days				

Section B: Performance

Chart 1 details the yearly trend for number of complaints that were due for response within the reporting period, alongside the number of complaints that received a response within the agreed timeframe, over the period 2016/17 to 2020/21.

Chart 1:



Time taken to respond to complaints in 2020/21

Table 2 shows how many working days were taken to respond to all complaints, providing both the number and overall percentage of the complaints responded within the reporting year.

Table 2:

Days	Number of Complaints	%
1 – 9	18	9.89%
10 – 19	91	50.00%
20 – 29	38	20.88%
30 – 59	32	17.58%
60 - 89	2	1.10%
90+	1	0.55%
Total	182	100.00%

Responses to complaints

There is no statutory timescale by which Councils should respond to Adult Social Care complaints, although a complaint must be completed by six months, which allows time for further consideration and review as Adult Social Care operates under a single stage complaints response process. Surrey County Council has set its own timescale of twenty working days for response. This timescale is flexible and can be varied with the complainant's agreement.

In 2020/21, Adult Social Care responded on time to 95% of complaints (172 out of 182 completed complaints). This is an increase on the previous year, when 87% were responded to within time, and is above the 90% target that the Adult Leadership Team set for the Directorate.

In addition, 109 complaints (59.89%) received a response in under 20 working days. A further 38 complaints, (20.88%) received a response in less than 30 days. This means that the majority of complainants, 147, (80.77%) received a response within 30 working days or less.

A smaller number of complaints, 2 (1.10%) were completed within 60 and 89 days, and only 1, (0.55%) took longer than 90 days. The average time to respond to a complaint in 2020/21 was 22 working days, which is an improvement from the preceding year, where it was 24 working days.

Nature of complaint 2020/21

Typically, complainants will raise more than one issue in their complaint, hence for the purposes of reporting, the nature of complaints will not match the number of complaints received. This graph details the different categories of complaint issues and the quantity of complaints received for each category.



Key activity headlines (2020/21)

- The largest number of complaints received related to staff (20%), assessment process (19%), service provision (18%) and financial (12%).
- Compensation payments are at an historical high in excess of £28,000 in 2020/21. However this includes reimbursing £11,000 that had been paid to a care provider as an unofficial third-party top up and a backdated Direct Payment of £9,603 for a separate complaint.
- The average number of working days to respond to a complaint has decreased for the second year running to 22 working days and is now nearer to the Council's target of 20 working days.
- Compliments received have continued to decrease, 455 received in the year.

Section C: Outcome and resolution of complaints

Table 3 shows the trend by year, for the complaint outcome, by number and the overall percentage of complaints received, over the past five reporting years. Complaints resolved outside the process were not included in previous years reports.

Table 3:

Outcome of Complaints Received	2016/17	2017/18	2018/19	2019/20	2020/21
Complaints upheld in full	44 (17%)	32 (14%)	47 (19%)	60 (23%)	36 (17%)
Complaints upheld in part	89 (35%)	84 (38%)	81 (32%)	84 (33%)	67 (31%)
Complaints not upheld	106 (42%)	90 (41%)	109 (43%)	101 (40%)	71 (32%)
Complaints withdrawn	16 (6%)	15 (7%)	14 (6%)	10 (4%)	10 (4.5%)
In Progress / paused					1 (0.5%)
Complaints ROTP*					33 (15%)
Total	255	221	251	255	218

*ROTP = (Resolved outside the process)

Outcome headlines

- The trend of complaints upheld, has decreased from the previous year.
- The overall percentage share of complaints upheld in full or in part has also decreased slightly at (48%) from the previous couple of years where this has been consistently over (50%).
- Withdrawn complaints is broadly consistent at (4.5%) with the previous year.

The Council has changed how we report on the resolution of Adult Social Care complaints to reflect the fact there are often multiple resolutions. In 2020/21, there were 231 actions resulting from the 182 complaints responded.

Table 4:

Resolution of Complaints	2020/21
Advice/Information Given	80 (34.6%)
Apology	79 (34.2%)
Service provided	19 (8.2%)
Staff training	17 (7.4%)
Explanation	14 (6.1%)
Financial redress	9 (3.9%)
Review communications	4 (1.7%)
Process/policy change	3 (1.3%)
Process/policy review	2 (0.9%)
Case Review	1 (0.4%)
Communication improved internally	1 (0.4%)
Provider failure, ongoing review of practice.	1 (0.4%)
Re-assessment	1 (0.4%)

Section D: Local Government and Social Care Ombudsman Activity

Table 5 shows how many complaints were escalated to the Ombudsman each year in the period 2016/17 to 2020/21 and the total sum of the Ombudsman's financial remedies in each year.

Table 5:

Local Government and Social Care Ombudsman Activity	2016/17	2017/18	2018/19	2019/20	2020/21
Complaints escalated to LGSCO	42	27	23	30	26
Investigations Upheld by the LGSCO	18	9	10	14	12
Financial remedies recommended for upheld complaints by the LGSCO*	£6,353	£7,775**	£1,200	£6,695***	£28.069****

*These figures include remedies for reimbursement of care charges by the provider ** £2,475.00 was a direct payments refund

***£3,769.72 of this figure was a refund of incorrect charges for residential care and paid directly by the provider

****This includes reimbursing £11,000 that had been paid to a care provider as an unofficial third-party top up and a backdated Direct Payment of £9,603 for a separate complaint.

Section E: Learning from complaints

Learning from complaints is an important source of information for implementing service improvement. The focus on identifying learning and putting things right and making a difference to service delivery is a key requirement across all services and monitored closely by the Customer Relations Team.

Examples of learning from complaints for this reporting year are detailed below:

Communication with families

The complaint - The appeal process to challenge the care package was never explained to the family and their requests for copies of documents were ignored. Complainant was unhappy with the care provision in place. The family were not provided with the relevant information on how to amend the care provision and how to complain if dissatisfied. Information was not clearly explained about the use of equipment (hoist) and the duty on the Council to ensure all manual handling processes are safe.

Finding - The complainant should not have felt the need to be the second carer for the service user without support.

What we put right - The care package was amended with two carers provided for all care calls, regularly reviewed to ensure they met the service user's needs safely. The carers assessment was reviewed to ensure the complainant had adequate carers support and breaks to enable her to continue her role as a carer. The training and practice needs of the relevant worker were reviewed in line with the learning from this complaint.

Review/Improve internal communications

The complaint - The poor timeliness of communication from staff and inadequate record keeping containing factual errors in the assessment.

Finding - There was fault with the quality of some of the communication with the family and the case recording was not satisfactory.

What we put right – Discussion was held with each staff member regarding the need for accurate and timely communication to families and advised them of findings of complaint investigation. The process for follow up actions in safeguarding cases was reviewed to ensure regular meetings with the NHS safeguarding lead take place, timely follow ups on the request for reports and information from health, and training and reflective session held for practitioners on the safeguarding process and outcomes.

Quality of care

The complaint – Related to a home care provider and issues about the care workers not following the hospital discharge plan, administering medication and timekeeping issues.

Finding - The issues were mostly resolved directly between the complainant and agency. The issue of catheter care was taken forward with the agency.

What we put right - The concerns were referred to the Quality Assurance team for monitoring purposes and the agency was asked to complete spot check audits around catheter care and provide reassurance regarding their training.

Review/Improve Internal staff practice

The complaint - The family complained that they were not informed by the Council that there would be a charge for the Sitting Service and had not received the financial assessment. They felt that staff were not helpful in their communication.

Finding - The family had not been informed correctly and the complaint was upheld.

What we put right - All staff were reminded of the importance of discussing financial assessments and charges for services early on when talking to service users and their families/carers.

LGSCO complaints and learning

Of the 218 complaints received, 175 were investigated and responded to under the Adult Social Care complaints procedure. When a complainant remains unhappy with the outcome, they can refer their complaint to the Local Government & Social Care Ombudsman (LGSCO). 26 complaints were escalated to the LGSCO, of which 12 were investigated and upheld during 2020/21. Overall, the Ombudsman is finding fault more often and has upheld more complaints nationally during 2021/21, than the previous year. The issues that were identified and completed as learning from the 12 upheld complaints are summarised below.

- To take action to routinely enter a written agreement with any care provider at the start of the placement, and ensure Council routinely informs service users how it will deal with price increases before entering into a contract with a care provider.
- To ensure there is a procedure in place to monitor care provider complaints.
- To ensure process is in place on the care management system to alert the Council of cases requiring a review to avoid delays.

- To have a procedure in place for completion of timely assessments, reviews and care plans with effective monitoring and auditing.
- To provide effective monitoring of care providers, specifically regarding end of life care and staffing.
- Ensure needs assessments are not delayed and care needs continue to be met while awaiting Continuing Healthcare decisions.
- The financial assessment form has been updated in respect of property under consideration for disregard.
- To have in place, a robust Continuing Healthcare procedure with clear guidance.
- Staff training is in place for supporting service users with Autism.

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.

Comparative data for Ombudsman investigations 2020/21

Table 6 compares how many Ombudsman Adult Social Care complaint investigations have been upheld or not upheld in 2020/21 for Surrey and other Councils that are similar in size and nature.

County Council	Upheld	Not upheld	Uphold rate %
Hertfordshire	8	1	89%
Surrey	12	2	86%
Essex	22	5	81%
Kent	20	6	77%
West Sussex	9	3	75%
Hampshire	7	3	70%
East Sussex	10	6	63%
Cambridgeshire	3	2	60%
Buckinghamshire	1	2	33%

Table 6:

Section F: Compliments

Table 7 shows the total number of compliments that have been received by service areas in Adult Social Care Services in the period 2016/17 to 2020/21.

Table 7:

Team	2016/17	2017/18	2018/19	2019/20	2020/21
East	115	141	91	98	48
Guildford and Waverley	90	61	156	79	34
Mid	153	118	91	156	96
North West & Surrey Heath	168	123	175	116	86
Countywide	33	18	13	31	3
PLD, Autism & Transition	-	-	-	-	27
Operations Total	559	461	266	480	294
Service Delivery	433	379	259	180	129
Mental Health Service	17	7	1	0	32
Total	1,009	847	526	480	455

Section G: Summary of achievements

- a) The Adults Customer Relations Team have continued to support the teams in complaints handling and providing robust responses to complaints and Ombudsman investigations.
- b) The Team regularly reviews provider complaints with the Commissioning and Quality Assurance Teams, to ensure effective monitoring of complaint issues and learning.

A new complaints leaflet has also been produced, together with an Easy Read version which is widely circulated and available for colleagues to access on the Adult Customer Relations Team's SharePoint site.

- c) The Team has delivered training for Adult Social Care Managers and practitioners handling complaints and responding effectively. The training is provided throughout the year.
- d) The Team have supported the Service Delivery function, providing advice and guidance to the In-House Home managers that transitioned back to the Adult Social Care Directorate and supported the newly created Learning Disability and Autism and the Mental Health services.
- e) The Team continues to lead on most joint complaints with the NHS and has strong partnership working with our health partners to address and resolve complaints.
- f) The Team supported staff to manage complex and difficult complaints effectively.

If you have any comments concerning the content of this report, please contact the Adult Social Care Customer Relations Team:

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