



Annual Report 2019/20

Adult Social Care Complaints and Commendations

For consideration by:
Adult Social Care Scrutiny Commission
Date: 9th March 2021
Lead director: Martin Samuels

Useful information

- Ward(s) affected: All
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1. Purpose of report

- 1.1 The purpose of this report is to provide members of the Adult Social Care Scrutiny Commission with a copy of the 2019/20 Annual Report, produced in relation to all complaints and commendations received by Adult Social Care (ASC). Information within this report provides a fuller picture of the contacts received across the Department and accompanying analysis.

2. Report Summary

- 2.1 The annual report details information about statutory, corporate, Local Government & Social Care Ombudsman complaints, as well as commendations that have been received by Adult Social Care during the last year. This information is provided with some further analysis of the types of complaints received, by division and across service areas.
- 2.2 The full version of the annual report is attached for information at Appendix 1.
- 2.3 For the purposes of this meeting and of particular note from 2019/20:
- I. The number of formal statutory complaints recorded during the year was 81 – a slight decrease of 6% compared to the previous year.
 - II. Officers' efforts to resolve matters at a local level were evident and 16 cases were noted to have additional actions proposed to try and address matters (for example a meeting with the complainant and/or agreeing a particular course of action, in addition to responding in writing). Positively, none of these contacts progressed to the Ombudsman.
 - III. Nine complaints were upheld (11% of total) and 22 (27% of total) were partially upheld.
 - IV. The top reason for complaints that were upheld in any way related to a lack of communication, information, or consultation.
 - V. Eleven contacts in relation to Adult Social Care were formally concluded by the Local Government & Social Care Ombudsman (LGSCO) during 2019/20: four complaints were upheld. Most complaints received by the Ombudsman concern aspects of assessment and support planning.
 - VI. The Department noted an increase in the number of commendations received for officers, reflecting the good service provided: 293 compared to 248 the year before. These commendations have been acknowledged further within the Department and with the members of staff concerned.
 - VII. Further work is continuing to make sure that the Department considers all sources of feedback that it receives holistically (including complaint information), in conjunction with the work of ASC's Practice Standards and

Governance Board. This Board focuses on the links between feedback, learning and making practice improvements.

2.4 The ASC Complaints Team has continued to work with Adult Social Care managers to ensure that efficient, robust, and thorough investigations are undertaken for all incoming complaints. Without compromising the independence of the complaint process, the Complaints Team provides support that helps to avoid additional costs that could be incurred through the engagement of external complaint investigators. The team works to ensure that quality, open and transparent responses are provided to people who draw on social care support; making sure that any corrective actions or remedies are identified and addressed as appropriate, with lessons for wider service learning also being taken forwards.

3. Recommendations

3.1 Scrutiny members are asked to note the contents of the 2019/20 annual report.

4. Financial, Legal, and other implications

Financial implications

There are no financial implications to this report.

Martin Judson, Head of Finance, Adult Services, 374101

Legal implications

There are no legal implications arising from the contents of this report.

Pretty Patel, Head of Law (Social Care & Safeguarding), 371457

Climate Change and Carbon Reduction implications

There are no significant climate change implications associated with this report.

Aidan Davis, Sustainability Officer, Ext 37 2284

Equalities implications

The Annual Report details information about the statutory, corporate complaints and commendations received by Adult Social Care during the last year. Having an accessible robust complaints procedure in place ensures fair redress to dissatisfaction experienced and reported by users of services and carers on their behalf.

This process is in keeping with one of the council's equality and diversity strategy priorities areas, to design, commission and deliver services that are accessible, inclusive and responsive to the needs of people and communities in Leicester.

This annual report provides evidence to inform progress against this outcome. In addition, recording and analysis of complaints received as set out in the report

enables the council to consider whether it is meeting the general Public Sector Equality Duty aims of eliminating discrimination and promoting equality of opportunity in its service provision.

Surinder Singh - Equalities Officer, 454 4148

No further implications identified.

5. Supporting information / appendices

5.1 The Adult Social Care complaint process adheres to the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009. The Regulations' publishing requirements for Local Authorities and complaints highlight that the following details should be made available annually:

- I. The number of complaints received within a period 1st April – 31st March.
- II. The number of complaints determined as well-founded.
- III. The number of complaints referred to the Local Government Ombudsman.
- IV. A summary of the subject matter of complaints received.
- V. A summary of any matters of general importance arising out of the complaints or the way in which they were handled.
- VI. Any matter where action has been taken or is to be taken to improve services as a consequence of those complaints.
- VII. Ensure that the annual report is available to any person on request.

Appendix 1

Annual Report 2019 - 2020 Adult Social Care (ASC) Complaints and Commendations

6. Is this a private report (If so, please indicated the reasons and state why it is not in the public interest to be dealt with publicly)?

No

7. Is this a “key decision”?

No



ANNUAL REPORT 2019 – 2020

ADULT SOCIAL CARE (ASC) COMPLAINTS AND COMMENDATIONS

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APPENDIX 1

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2. Breakdown of complaint information received across the Department
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Performance indicators relating to the management of statutory complaints

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2020/21 action plan

1. Executive summary

- 1.1 It is a statutory requirement to produce an annual report in relation to complaints addressed under the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.
- 1.2 Complaints, as well as commendations, provide valuable feedback about the services provided by a Council. They provide an indication of the areas that are performing well and highlight where further attention should be focused to improve service delivery and practice.
- 1.3 For all complaints reviewed under the statutory ASC procedure, investigations at the first stage of the process are based on an allocated response timescale that may be up to 10 working days ('green' complaints), up to 20 working days ('amber'), or up to 65 working days ('red'). Complaints that progress to the second and final stage of the process are considered by the Local Government & Social Care Ombudsman (LGSCO).
- 1.4 Five complaints were responded to in conjunction with Health partners and with whom Adult Social Care shares the same complaint procedure. Joint contributions were required for these complaints that related to hospital discharge/after-care processes.
- 1.5 The average response time for complaints addressed during 2019/20 was 18 working days.
- 1.6 The number of formal statutory complaints recorded in 2019/20 was 81: a slight decrease of 6% compared to the previous year. Seventy-eight complaints progressed to a conclusion under the complaint process, with 9 being upheld and 22 partially upheld.
- 1.7 The top reasons for upholding complaints either partially or in full in 2019/20 were considered to be in relation toⁱ:
- Lack of communication /information
 - Delay in receiving a service
 - ⁱⁱQuality issues
- 1.8 Sixteen complaints were addressed with additional actions, such as a meeting with the complainant or a reassessment.
- 1.9 During 2019/20, ASC noted the conclusion of 11 LGSCO enquiries in relation to its services. Four enquiries were upheld in regard to the department's actions, with specific recommendations to be fulfilled as a result. No public interest reports were published.

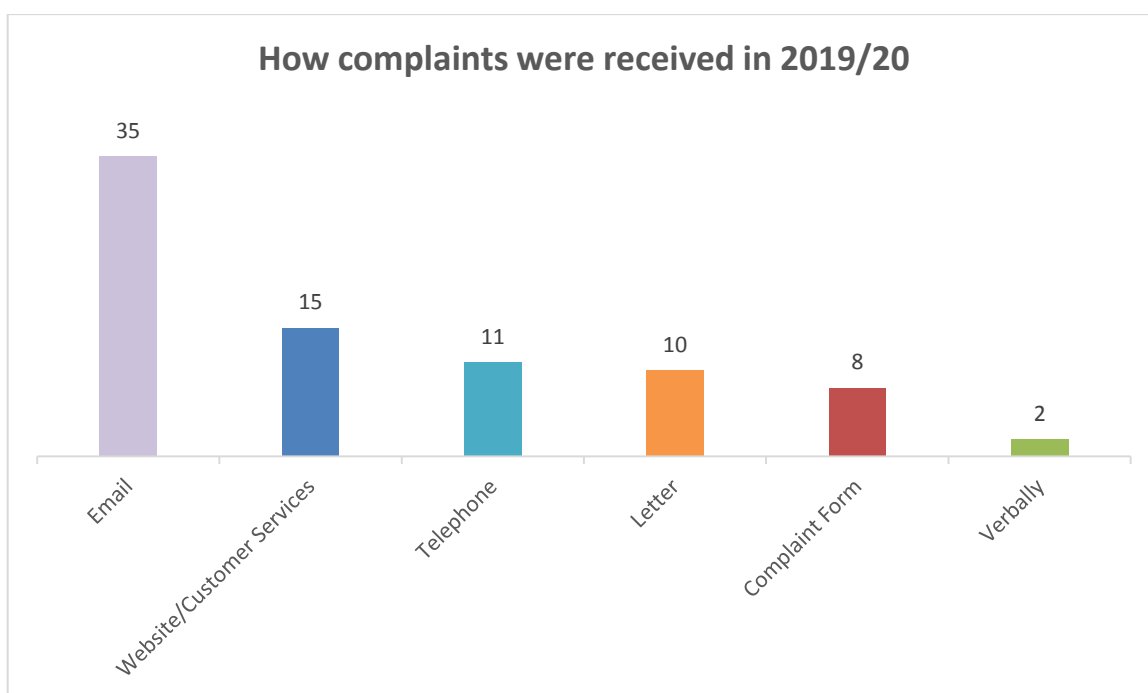
ⁱ A complaint can have more than one reason identified on receipt: information reported here is based on the highest numbers of complaints that were partially or fully upheld against a particular reason, during the year

ⁱⁱ Quality issues – these complaints can include such matters as timeliness of actions, poor recording or failures in aspects of customer care

- 1.10 An increase was noted in the number of commendations received in 2019/20 (18%), with 293 recorded, compared to 248 in 2018/19.
- 1.11 Some complaints fall outside the remit of the statutory complaint procedure but can still be investigated under the Council’s corporate procedure. Only one matter relating to ASC services was reviewed under the Council’s corporate complaint procedure last year (5 less than in 2018/19).
- 1.12 A breakdown of the complaints received across Adult Social Care, by divisions and service areas is included with Appendix 1 of this report.

2. Accessibility of the complaint procedure

- 2.1 Details relating to the Adult Social Care complaint procedure and how to make a complaint are available on www.leicester.gov.uk (which also incorporates direct access to a complaint form): new individuals to the service are also advised of the complaint procedure by care management staff as part of initial discussions about the assessment process. Adult Social Care can also take on board oversight for some matters, when it has been involved with the support arrangements for an individual’s care (i.e. for complaints in relation to residential or domestic care provision).
- 2.2 The top 2 ways of making a complaint in 2019/20 were by email (43%) and via the Council’s website (18%).
- 2.3 Complaint information signposts individuals to advocacy organisations for support but in practice most individuals, relatives or their carers make an approach directly. The percentage of complaints received via advocacy services was 6%, with other main sources of complaints being through relatives - 56% and from individuals in receipt of support directly - 38%.



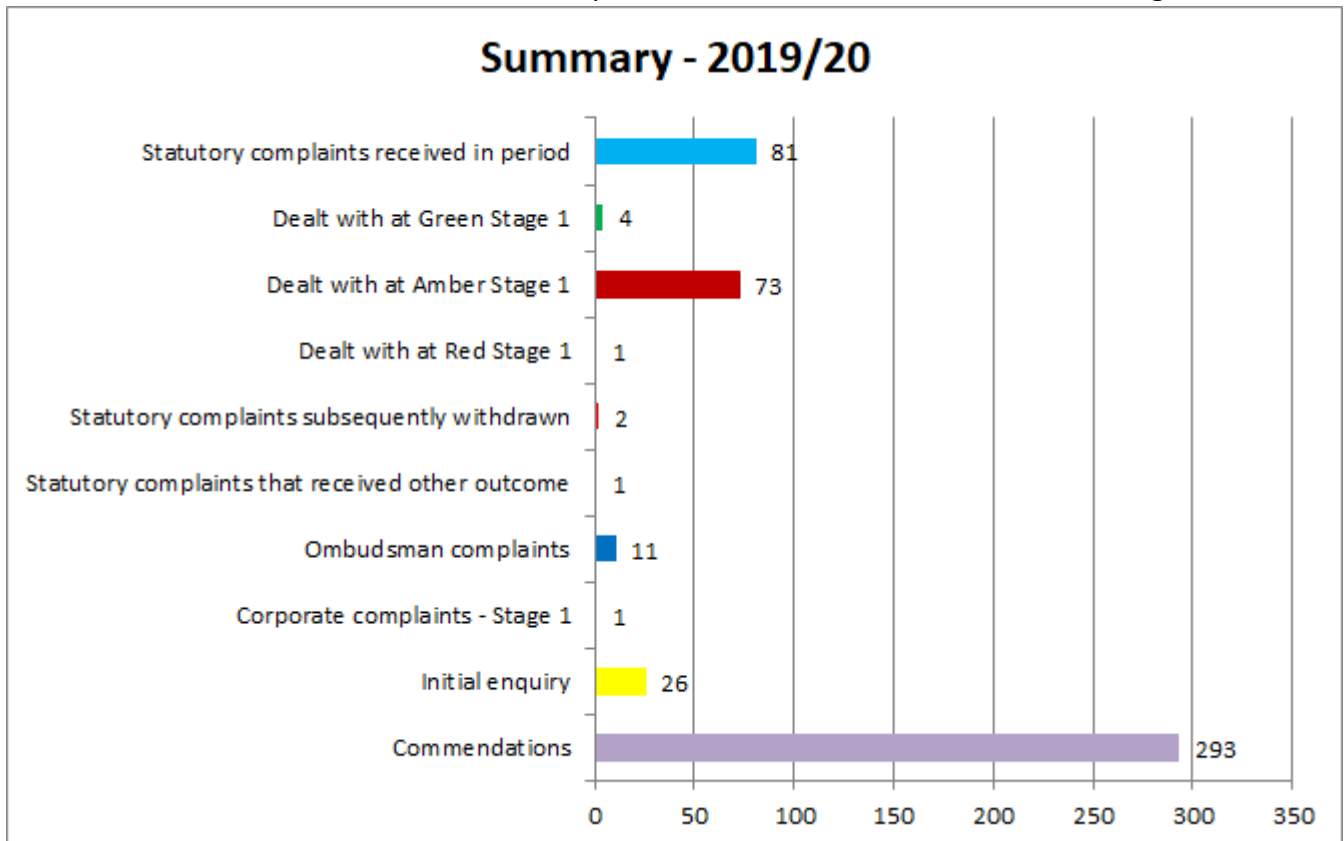
- 2.4 Adult Social Care has an open and accessible approach to complaints, which is reflected in the numbers of complaints considered by the Council each year (although the overall

number of complaints received Vs service provision remains relatively small). With each formal complaint that is addressed, the complainant is advised of their right to direct matters to the Local Government & Social Care Ombudsman and the Department may receive Local Government & Social Care Ombudsman enquiries further to this.

2.5 Complaints received concerning ASC services and other partner agencies, such as the NHS, University Hospitals Leicester, Leicestershire Partnership Trust and Leicestershire County Council are also responded to under the same statutory complaint regulations. A locally agreed protocol is in place to help the experience run more efficiently and effectively for the complainant. Five complaints were managed under these arrangements during 2019/20 (three complaints more than the previous year). The common reason for these complaints concerned hospital discharge and onward support arrangements.

3. 2019/20 complaint contacts

3.1 All contacts recorded in relation to complaints and commendations **received** during



2019/20 are highlighted in the following chart:

To explain further:

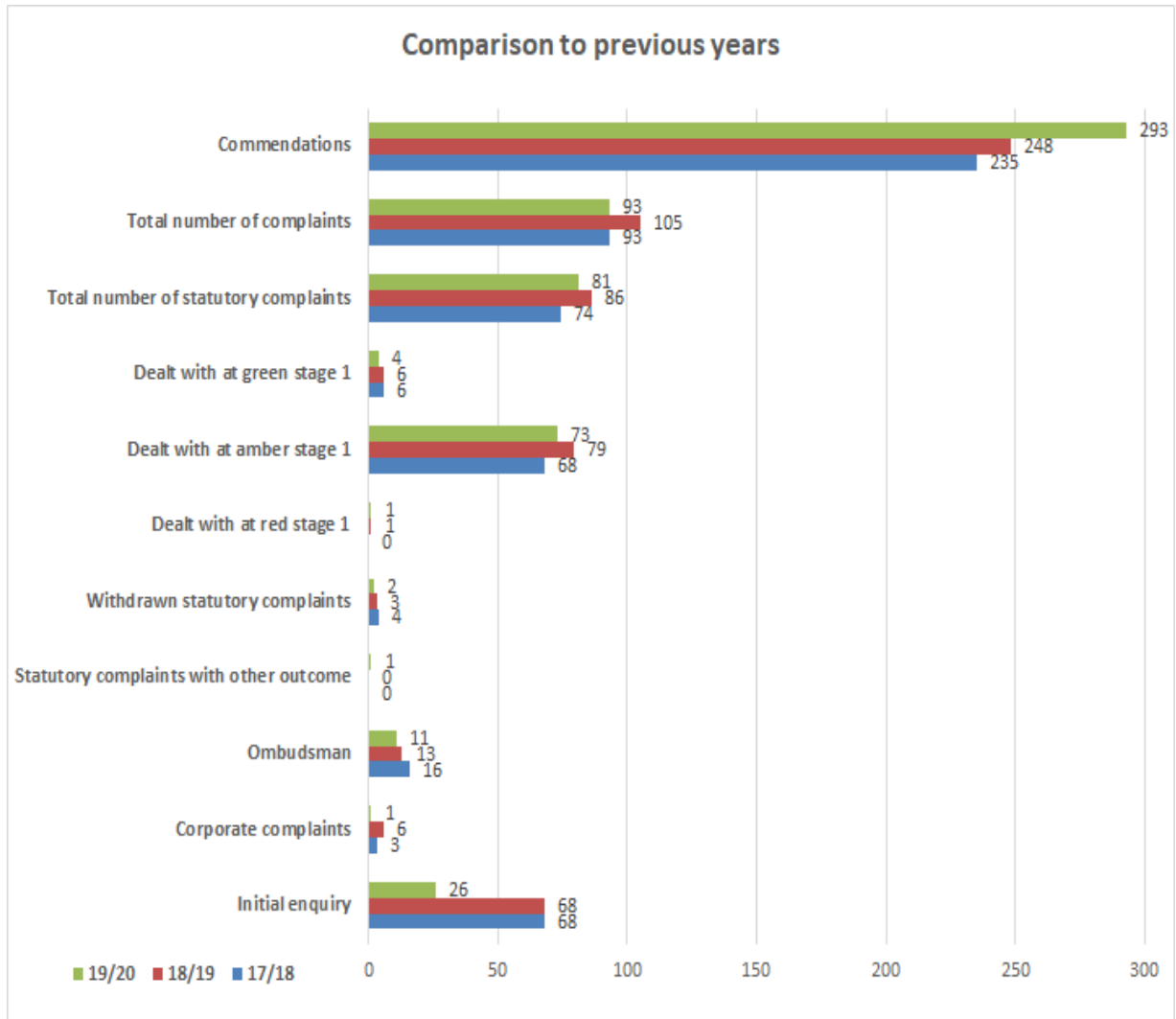
3.2 All contacts received were formally recorded during the reporting period, either as an initial enquiryⁱ or as a complaint. Eighty-one statutory complaints were acknowledged during 2019/20 in total.

ⁱ An initial enquiry is a contact that falls outside the definition of a statutory complaint as it has been resolved within one working day. Additionally, a concern may be classed as an initial enquiry when clarification is pending as to whether the complaint procedure is the appropriate route for addressing the matter further.

- 3.3 A number of complaints (4) were allocated a 'green' response timescale of 10 working days. A further 73 contacts were determined as 'Amber' Stage 1 complaints and were allocated up to a 20-working day response timescale. One complaint was addressed under the more extensive 'Red Stage 1' timescale due to its complexity, which allowed up to 65 working days for the reply.
- 3.4 Out of the 81 statutory stage 1 complaints recorded, 78 progressed to conclusion (2 were withdrawn after acknowledgement, and a further complaint received subsequently progressed with the Ombudsman, as part of an existing, ongoing enquiry). Nine complaints (12%) were upheld and 22 (28%) were partially upheld.
- 3.5 One complaint was logged under the corporate complaint procedure in 2019/20: this was not upheld and did not progress to the Ombudsman.
- 3.6 During 2019/20, ASC recorded 11 enquiries concluded by the Local Government & Social Care Ombudsman (LGSCO) in relation to its services. Five outstanding complaints were carried over to 2020/21 for onward consideration. (More details about LGSCO complaints are provided at section 9).
- 3.7 Regular contact is maintained with complainants and wherever appropriate a flexible approach is employed to address the issues being raised. On occasion, open communication between the complainant and the Council encourages the situation to be resolved earlier on in the complaint process.
- 3.8 During the year ASC undertook 16 'alternate dispute resolution' actions (for example, in the form of a meeting with a complainant or arranging a care reassessment or review), to try and resolve matters at a local level.
- 3.9 Positively, the number of commendations received in 2019/20 increased by 18%: 293 compared to 248 in the previous year. Commendations are always welcomed by staff and the importance of sharing good news has continued to be encouraged throughout the year.
- 3.10 Commendations received are highlighted in SCE's newsletter and any significant customer feedback is acknowledged further with the member of staff concerned, by the Director. The Complaints Team also flags up the positive feedback received for a service with the respective Heads of Service, for their further attention.
- 3.11 As an example of how the complaint process works in practice, a case study of a statutory complaint in action (anonymised) is noted at Appendix 2.

4. Comparison to previous years

To provide some more general information about the nature of contacts received over the



past 3 years by the City Council’s Adult Social Care Department, a snapshot of the type of contacts recorded by the Complaints Team appears as follows:¹

5. Profile information in relation to 2019/20’s complainants

- 5.1 Each complaint received by Adult Social Care is considered on an individual basis and in relation to the specific concerns raised. Any resolution actions for individual complaints are usually addressed at the point of providing a full written response to the complainant.
- 5.2 All complaints are subsequently analysed further, to identify any wider lessons and to identify any themes or common issues arising across the board. Although the overall number of complaints received is representative of a small percentage of people in receipt of support from ASC, further analysis has been undertaken in terms of complainants’

ⁱ Data available from other local authorities does not offer like for like information for benchmarking purposes, as those issues/services that a local authority define as part of the statutory complaint process varies significantly.

profiles, as recorded below, to ensure that the complaint procedure remains accessible and equitable to all.

- 5.3 A total of 1464 individuals were deemed eligible to receive support following a completed assessment in 2019/20. From available data, 4907 people were noted to be in receipt of long-term support from ASC as at 31st March 2020.

Complaints in relation to ethnicity

- 5.4 A detailed breakdown of the ethnicity of those individuals at the heart of complaints received in 2018/19 and 2019/2020 is as follows:

Ethnicity of individual in receipt of support	2018/2019 Number/ percentage of complainants	2019/2020 Number/ percentage of complainants	Overall Number/ percentage of ASC individuals in long term support as at 31 st March 2020
Asian or Asian British – Indian	28 (32.6%)	25 (30.9%)	1687 (34.4%)
Asian or Asian British – Pakistani	2 (2.3%)	1 (1.2%)	
Asian/Asian British – Other	4 (4.7%)	-	
Chinese	-	-	
Arab/Arab British	-	1 (1.2%)	3 (0.06%)
Black or Black British – Caribbean	4 (4.7%)	4 (4.9%)	289 (5.9%)
Black or Black British - African	2 (2.3%)	1 (1.2%)	
Black or Black British – Other	-	1 (1.2%)	
Dual Heritage	2 (2.3%)	2 (2.5%)	65 (1.3%)
White – British	37 (43%)	40 (49.4%)	2762 (56.3%)
White – European	1 (1.2%)	1 (1.2%)	
White – Other	2 (2.3%)	3 (3.8%)	
Other	-	-	27 (0.6%)
Not known	4 (4.7%)	2 (2.5%)	74 (1.5%)

- 5.5 In 2019/20: 54.4% of complainants identified as white individuals; 32.1% identified as Asian individuals, 7.3% identified as black individuals and 3.7% were complainants with other ethnic identities (including 2.5% where ethnicity was not known). Based on ethnicity, complainants in 2019/20 closely reflect (proportionately) the breakdown of ethnicity of those individuals in receipt of services from Adult Social Care. ^[1]

^[1]For further information, the breakdown of ethnicity across the City as per the March 2011 census was: 50.5% - White; Asian – 37.1%; Black – 6.2%; Mixed/multiple ethnic – 3.5%; Other ethnic – 2.6% (data source - www.ukcensusdata.com)

5.6 The following complaint outcomes were noted as follows:

Outcome	Black, Asian & other minority ethnic	White	All complainants*
Not Upheld	20 (59%)	24 (53%)	44 (56%)
Partially Upheld	9 (26%)	14 (31%)	23 (29%)
Upheld	3 (9%)	6 (13%)	9 (12%)
Upheld – Not related to Council Actions	0 (0%)	0 (0%)	0 (0%)
Withdrawn	1 (3%)	1(3%)	2(2%)
Other outcome	1 (3%)	0 (0%)	1 (1%)
Total	34	45	79*

***81 complaints received in total – ethnicity data for 2 complainants unknown**

- 5.7 The top complaint reason for either partially upheld or upheld complaints from a Black, Asian or Minority Ethnic perspective was ‘Lack of Communication / Information / Consultation’, with ‘Delay in Receiving a Service’ a close second.
- 5.8 The top complaint reason identified for either partially upheld / upheld complaints from White individuals was also ‘Lack of Communication / Information / Consultation’.
- 5.9 The top primary service reasons for individuals from Black, Asian and Minority Ethnic groups and White groups were the same and were recorded as: physical disability, mental health and frail/temporary illness.
- 5.10 Given the number of complaints received, the information under consideration here is not statistically significant, which makes it difficult to draw any firm conclusions in relation to information concerning ethnicity, complaints and any potential impacts arising from this. However, a slightly higher number of complaints were upheld for white individuals in 2019/20 and this is an area that the Complaints Team will continue to monitor closely over the next year. The ASC complaint process operates to robust standards which are designed to be customer-focused, open, fair, and accountable for all individuals that access it: continuous learning from complaints, whether at an individual, themed or departmental level also remains an active part of the process.

Profile information according to age

- 5.11 The highest number of statutory complaints received related to adults aged between 25-50 (a total of 20) in 2019/20.ⁱ The top primary service reason for this age group was identified to be ‘mental health’. This figure is up on the previous year when 15 complaints were received.
- 5.12 Seventeen complaints received concerned individuals aged 51-64. The top primary service reason for this age group was also ‘mental health’.
- 5.13 For those complainants in the age range of 18-50, the prevailing primary service reasons were: ‘physical disability’, ‘mental health’ & ‘learning disabilities’.
- 5.14 The complaint outcomes determined by age range groups for 2019/20 were as follows:

Outcome	18-24	25-50	51-64	65-74	75-84	85-94	95 +	All complainants
Not Upheld	4 (8%)	14 (70%)	8 (47%)	5 (56%)	6 (55%)	9 (53%)	0 (0%)	46 (57%)
Partially Upheld	1 (20%)	3 (15%)	5 (29%)	3 (33%)	3 (27%)	6 (35%)	2 (100%)	23 (29%)
Upheld	0 (0%)	3 (15%)	2 (12%)	1 (11%)	2 (18%)	1 (6%)	0 (0%)	9 (11%)
Upheld – Not related to Council Actions	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Withdrawn	0 (0%)	0 (0%)	1 (6%)	0 (0%)	0 (0%)	1 (6%)	0 (0%)	2 (2%)
Other Outcome	0 (0%)	0 (0%)	1 (6%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (1%)
Total	5	20	17	9	11	17	2	81 (100%)

According to gender

- 5.15 Last year, 45 statutory complaints (56%) were made in relation to female individuals, and 36 (44%) were in relation to males.ⁱⁱ
- 5.16 The leading primary service reason recorded for female complainants was physical disability and for males - mental health.

Repeat complainants

- 5.17 As a matter of course, the complaint process remains open to individuals wishing to raise concerns and there may be some occasions when individuals find it necessary to raise more than one complaint during the course of a year, as interactions between individuals and ASC progress. However, some individuals do opt to revisit the complaint process on a more

ⁱ The mean age of Leicester’s population in 2011 was 34 years.

ⁱⁱ March 2011 Census data for Leicester City population: 51% females, 49% males

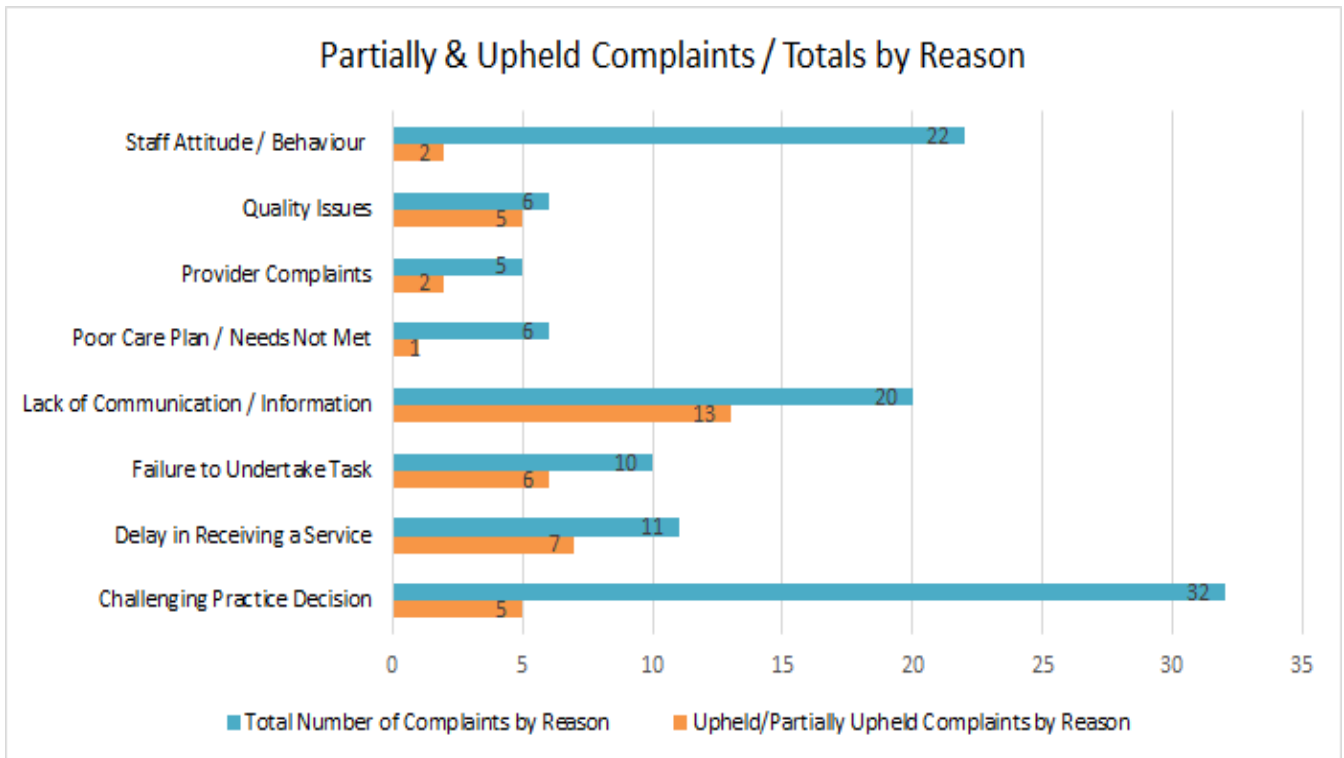
routine basis, turning to this as the first port of call for their concerns. On occasion, and as appropriate on receipt of such contact, the Complaints Team will attempt to redirect concerns to the relevant service to be followed up and addressed outside of the complaint process.

- 5.18 In 2019/20 four individuals accessed ASC's formal statutory complaint process on more than one occasion: two of these complainants proceeded to approach the Ombudsman (and one individual raised two separate complaints with the Ombudsman's service).
- 5.19 On occasion, and according to the merits of the situation, the Department does have to consider the amount of resources called upon to address some individuals' contact. There are times when the Department feels that it is necessary to consider special measures for addressing complaints/complainants that have been ongoing or that have become vexatious in nature: this may also include occasions when individuals have presented with abusive or threatening behaviour towards officers. The Department's response to such situations addresses the circumstances at hand but can include formally limiting or ceasing an individual's contact with the Department for a specific period or advising that the Council will not respond further to the same issues that may have already been reasonably addressed.

6. Complaint reasons

- 6.1 Adult Social Care's statutory complaint database currently records 8 specific reasons for raising a complaint: more than one reason per complaint may be identified. The principle reasons behind any complaint are noted at the point of receipt by the Complaints Team and full consideration is given to all points raised, whether a major or more incidental part of the complaint.ⁱ The complaint points noted at the start of the process are then reconsidered on completion of the investigation to establish whether the initial reasons for complaint were upheld or not.
- 6.2 The following chart shows a more detailed breakdown of the key complaint reasons identified on receipt (i.e. pre-investigation) during the last year, together with a picture of those complaint reasons that then went on to be partially or fully upheld after investigation (includes those complaints that progressed to an outcome).

ⁱ Adopting an all-embracing approach when determining what constitutes a complaint can drive-up the numbers recorded against a specific reason at the start of the process.



- 6.3 As a further fail-safe, where particularly high numbers of the same complaint reason arise, action is taken to explore why such concerns may be arising and to see if there are any underlying issues to address as part of a trend or a theme (rather than on a 'case-specific' basis).
- 6.4 During the year, the Complaints Team reviewed those complaints that noted concerns around staff attitude/behaviour further, to get a better understanding of the trigger for such complaints and to see if there were any common issues at the root of these matters. It was found that a common reason for such concerns to be noted in the first place often arose as a result of a worker's choice of language or how matters had been phrased. Improving communication skills is something that is of further note for the Department and work around this is a key part of the Department's ongoing training and learning.
- 6.5 It is also of note that complaints highlighting staff attitude/behaviour as a concern commonly arise alongside complaints where 'challenging practice decision' is also recorded as an issue too (i.e. those complaints where there is some expression of disagreement about a particular decision or action).

7. Lessons identified from complaints received in 2019/20

- 7.1 The following highlights some of the specific learning points/actions identified from complaints received and upheld during 2019/20 that have been presented to Adult Social Care's Leadership Management Team and Lead Member during the course of the year and some broader themes that are currently being considered further in the context of '8' below.
- i. A second opinion can help determine whether practice/decisions are too risk averse.
 - ii. Issues raised in relation to the role of appointee highlighted the need for some individuals to have access to some information relating to their finances (to be determined on a case by case basis, with capacity etc in mind).

- iii. Further to a complaint resolution meeting with Health, it was widely communicated to contracted care providers and ASC care management teams that the use of wet wipes was not recommended in the delivery of personal care.
- iv. A complainant's experience highlighted the difficulties that can arise when family members are involved in care but not living with the person in receipt of support - the complaint identified how family members can remain unaware of significant decisions that have been discussed with the individual directly when they have capacity. The need to achieve a suitable balance with communication and how/who key information is shared with, was noted as a point for further discussion.
- v. The importance of accounting for the outcomes of previous involvements when deciding on a new referral, was highlighted.
- vi. Ensuring people have as much information as possible to hand, when making decisions about which provision to choose.
- vii. Further action has been followed-up within ASC to ensure that there is a shared clarity around workers' responsibilities for giving individuals/families feedback, when care provider concerns are raised (i.e. following the submission of a quality referral by an ASC worker). Further discussions have taken place between care management and the Contracts and Assurance Service regarding the way in which this could work more effectively.
- viii. The Team Support Worker (TSW) system has been changed: cases are no longer kept with a TSW over a week. When case matters remain unresolved, these are now passed on to duty or for allocation.
- ix. The need for clarity has been stressed in relation to recording any private care arrangements within an individual's case records, with the aim of avoiding any future confusion with the existing/agreed ASC care arrangements that are noted on a support plan.
- x. Forms shared between the Integrated Crisis Response Service and Brokerage have been revised to ensure that additional or relevant information can be passed on at the point of submission, to help inform future conversations/actions and avoid any misunderstandings.
- xi. The importance of evidencing decision making clearly has continued to be highlighted to teams.

7.2 Learning points that arise from complaints are shared in a number of ways across the department and this can be via individual supervision sessions, team meetings, service away days or through the various other forums that are held within the department, feeding into training and practice as appropriate.

Repeat complaint themes identified between 2018/19 & 2019/20

7.3 Complaint issues that have arisen on a common basis over the past two years have been considered. Aspects of communication are often noted as the key reasons for complaining. Some other more specific reasons that are noted to have arisen are:

- I. Lack of clarity in regard to advice given re processes and anticipated timescales to help manage expectations
- II. Timeliness in relation to sending out assessments or support plans
- III. Timeliness of actioning any changes
- IV. Delays in assessments or referrals
- V. Timeliness in follow up action to prevent escalation
- VI. The way we spoke to customers
- VII. What we said
- VIII. Management of issues not seen through to resolution
- IX. The need for relevant and targeted communication/feedback with those individuals not directly in receipt of care (i.e. family members or carers)

The details above are reported within the department, as described in more detail at section 8.

8. Putting learning from complaints into further action

- 8.1 It is expected that appropriate actions are undertaken 'locally', at the point where a matter first arises, in a timely way, to remedy individual concerns as part of the complaint process. Generally, the investigating Head of Service is responsible for identifying and overseeing such action.
- 8.2 Further to a complaint investigation that highlights specific findings of failure or error, the Head of Service is also asked to consider and provide an update on the actions that may have been taken within their wider service area or across the Department; demonstrating how any changes have been implemented as a result of complaint feedback. This information is then also discussed at the Heads of Service's meeting, with further reporting on any actions to ASC's Leadership Team and Lead Member.
- 8.3 Throughout 2019/20, various departmental forums have been used by the service areas concerned to highlight issues identified from specific complaints, to emphasise good customer care practices, communication and the need for clarity of advice or instructions given to individuals.
- 8.4 All complaints received are also reviewed by the Complaints Team, in order to establish whether there are any common trends or issues emerging across the Department and to see if any previously identified themes continue to be repeated (see 7 above). This wholesale review of complaints is intended to provide the Department with a broader awareness of the issues that arise concerning its services and to further identify the impact that our actions have on individuals, so as to identify any wider improvements that may need to be taken into account.
- 8.5 The correlation between learning and any follow-up actions, as well as the impact of such actions, have been explored further in conjunction with the work of the Practice Standards and Governance Board with the aim of establishing how, as a Department, we are clearly

demonstrating the way in which key customer feedback is translating into practical and tangible service improvements or actions.

8.6 Key feedback identified from complaints is also considered alongside other sources of departmental feedback, in order to establish any other evident, shared themes. Progression of these issues are managed through other departmental improvement mechanisms such as the Practice Standards and Governance Board, Heads of Service meetings or the First Line Supervisor's Forum. The Complaints Team also provides feedback to the wider department managers and staff, as part of ongoing activity in relation to complaints.

8.7 Some examples of the actions and learning we have taken from complaints information during 2019/20, as well as other sources of feedback in the Department, are recorded below:

- Collaborative work between ASC management and Health took place to establish a person's right to S117 aftercare: the case in question reaffirmed that changes need to be communicated and recorded clearly, as they occurred.
- Any decision to determine a residential care banding rate should be clearly documented and recorded on the Notification of Placement and Individual Placement Agreement at the time of the review: a complaint was received where this action had been missed by a worker before it transferred to the Supported Residents Care Team. This point was reflected on and highlighted with the management of the relevant team.
- Any private care call arrangements should be recorded clearly and highlight that separate funding arrangements need to be made in relation to these: this was not made explicitly clear on a support plan by a worker. Issues arising from this were identified as key learning points.

Locality East

We have changed the way that our duty team functions to ensure queries are passed on at an earlier stage for a duty worker to resolve.

We are ensuring that there is a clear role and responsibility for complaints made about contracted providers and that communication is improved for the Contract's team, the social work team and the person receiving services.

Locality West

Discussions at team meetings /reflective supervision have occurred to enable practitioners to consider the impact of not formally assessing mental capacity.

Discussions around mental capacity versus the right for someone to make unwise decisions have also been initiated in team meetings.

Learning Disabilities Service

The importance of good communication is an issue that has arisen through a few of Adult Mental Health's (AMH) complaints. This is an area that has been particularly addressed through the wider work that Adult Social Care is undertaking to develop a Strengths Based approach to working with people. A Strengths Based Toolkit, Practice Principles and a document co-produced with people who access our services and entitled 'Tips for Working with Me' all offer advice and support on communication skills and what's important to people.

A new assessment form has also been designed which aims to support workers to have much more open conversations with people about what's important to them (leading to more open, honest conversations). AMH's Strengths Based Action Plan includes the importance of reflective practice in supervision to enable workers to consider whether they have been using these communication skills within their practice.

Adult Mental Health

- 8.8 During 2019/20 the Complaints Team attended an away-day for newly qualified social workers, as part of their Assessed and Supported Year in Employment (ASYE - Adults) programme. This provided an opportunity to share details of the complaint procedure and to highlight some of the key messages and learning that can be taken from complaints and commendations, to help build a picture of where things can potentially fall down, but also to identify what good practice looks like and what is positively acknowledged by individuals in receipt of our services.

A presentation providing a brief introduction into the ASC complaint process, with some of the key messages arising from complaints, has also been prepared for inclusion as part of the induction process for all new starters in Adult Social Care.

9. Contact with the Local Government & Social Care Ombudsman (LGSCO)

- 9.1 The total number of Ombudsman complaints received for the **entire City Council**ⁱ in 2019/20 was 112: the contacts recorded in relation to Adult Social Care services for Leicester City Council made-up an 18% share of this total (17% in the previous year).
- 9.2 The LGSCO receives a number of contacts in relation to Leicester City Council's services and although reflected with their own statistics, not all of these contacts are directed to the Authority for further attention. Consequently, there is usually a slight difference in the data sets published by the LGSCO and the Local Authority for that year.
- 9.3 From ASC's records, **eleven** complaints were formally determined against the Department by the LGSCO during 2019/20: five of these complaints were carried forward from the previous year.

The eleven enquiries in relation to ASC's actions in 2019/20 were concluded with the following outcomes:

Upheld: maladministration and injustice	3
Upheld	1
Not upheld, no maladministration	2
Closed after initial enquiries, no further action	2

ⁱ Figure taken from 'The Ombudsman's Review of Local Government Complaints 2019 – 2020'

9.4 The four complaints upheld against the authority required formal recommendations to be agreed and completed, with actions confirmed to the Ombudsman's office. A summary of these individual complaints and the associated recommendations - since met - are as follows:

i. Complaint Ref: 18 001 026
Outcome - Upheld: maladministration and injustice

Complaint raised concerning ASC's involvement with the Continuing Healthcare Checklist process, the progression of this and the suitability of an assessment and support plan produced.

The LGSCO's formal recommendations included an apology, a payment of £100, and the creation and implementation of further procedural guidance in relation to the CHC application process.

ii. Complaint Ref: 18 008 692
Outcome - Upheld: maladministration and injustice

The complainant disagreed with a decision that they were ineligible for services, following an OT assessment undertaken with the Enablement Service.

ASC was asked to apologise for failing to properly complete a care needs assessment in May 2018 and to pay £350 to the complainant. A new care needs assessment was requested, with the need to ensure that the eligibility decision was properly recorded. The Department was also asked to review its procedures in relation to capturing fluctuating needs.

iii. Complaint Ref: 18 016 053
Outcome - Upheld: maladministration and injustice

Complaint that the Council reduced the individual's care package without proper consideration of needs.

The Council was asked to undertake a further, full reassessment of needs, taking account of all physical and psychological needs and the fluctuating nature of these, and to draw up a support plan following this. The Council was asked to issue an apology and to make a payment of £250 and to consider any training needs for officers completing an assessment, to ensure accordance with the Care Act.

iv. Complaint Ref: 19 008 310
Outcome - Upheld

A complaint was made that ASC had repeated information to a third party, further to its recordings on a safeguarding incident from some years ago, and that this was also against previous findings made by the LGSCO.

A finding was reached on the balance of probability and the Department was asked to apologise for any distress caused and to pay £300. ASC was asked to evidence that the

LGSCO's view, that the conclusions of a 2017 safeguarding investigation were faulty, was clearly recorded within its records.

- 9.5 One of the Ombudsman's most common areas of complaint against ASC services nationally relate to assessment and care planning. The highest proportion of the City Council's ASC complaints also tend to reflect these themes.
- 9.6 The LGSCO's national average for upheld complaints relating to Adult Care Services in 2019/20 has recently been published as 68%: Leicester City Council's performance is below this average.
- 9.7 The Ombudsman's office publishes most decision statements recorded in an anonymised format on their website: www.lgo.org.uk. These can be searched for by local authority, subject matter or reference number. They also provide a regular public summary bulletin that notes all decisions found, by authority.
- 9.8 The ASC Complaints Team has continued to take on a proactive role with the preparation of responses to all LGSCO enquiries. It is considered that this action has been of benefit to the Department, providing additional support to service areas that would otherwise be involved in addressing time-consuming enquiries. This action also allows for a further 'independent' overview of complaint issues to take place, prior to any response being returned to the LGSCO, as well as supporting the provision of timely responses.

10. The good things our customers tell us

- 10.1 Another side to the Complaints Team's work involves capturing the positive customer feedback and commendations that arise across the Department for further acknowledgment and for sharing. In those situations where staff have clearly gone above and beyond their duty, an individual's good work is shared and acknowledged further in writing by the Director.
- 10.2 Details of those individuals that have received commendations acknowledging the value of their work on behalf of the Department have been reported in the Department's newsletter 'Just ASC' (now SCE Newsletter). Heads of Service are provided with the positive reports received for their respective areas, to help determine how to share good news stories more widely within their own service.

What people who draw on social care support and their families told us in 2019-20

During 2019-20 we logged some 293 commendations: all positive and welcome messages about the quality of the service ASC staff provided. Some of the stand-out messages told us:

"He spoke of how you went the extra mile in supporting his mother, stating you have a great attitude for work and support and how proud the department should be to have you."

"She said how supportive you had been and managed to build confidence, and she was feeling much happier."

"He mentioned you gave him hope during a time when his mental health was suffering, and he was at a complete loss."

"... felt she had never had a social worker who understood her as well as you do"

“She said you were brilliant, clever, kind, friendly and delivered on all actions you promised. She spoke of your warm nature, and how you made a massive difference to the quality of life of her parents.”

“They felt they had been lucky to have a worker as caring as you, and said you are an asset to the department.”

“He said for the first time in a long time he will be able to go to sleep knowing that his mother’s health issues are being resolved.”

10.3 Many more comments, often personal to the individual or the family’s experience, have been received within the Department - confirming the importance and the value of ASC’s work within the City. Commendations normally reflect the good interpersonal skills demonstrated by staff, notably:

- good and clear communication
- empathy
- humility
- caring nature
- the ability to reassure or put the person at ease
- politeness

They also reflect those instances that have resulted in a positive difference to an individual’s life and the receipt of useful equipment or guidance, is often mentioned.

11. Report contacts

For more information relating to this report please contact:

Joanne Tansey, Customer Feedback & Complaints Manager or

Kane Dickinson, Complaints Officer (ASC)

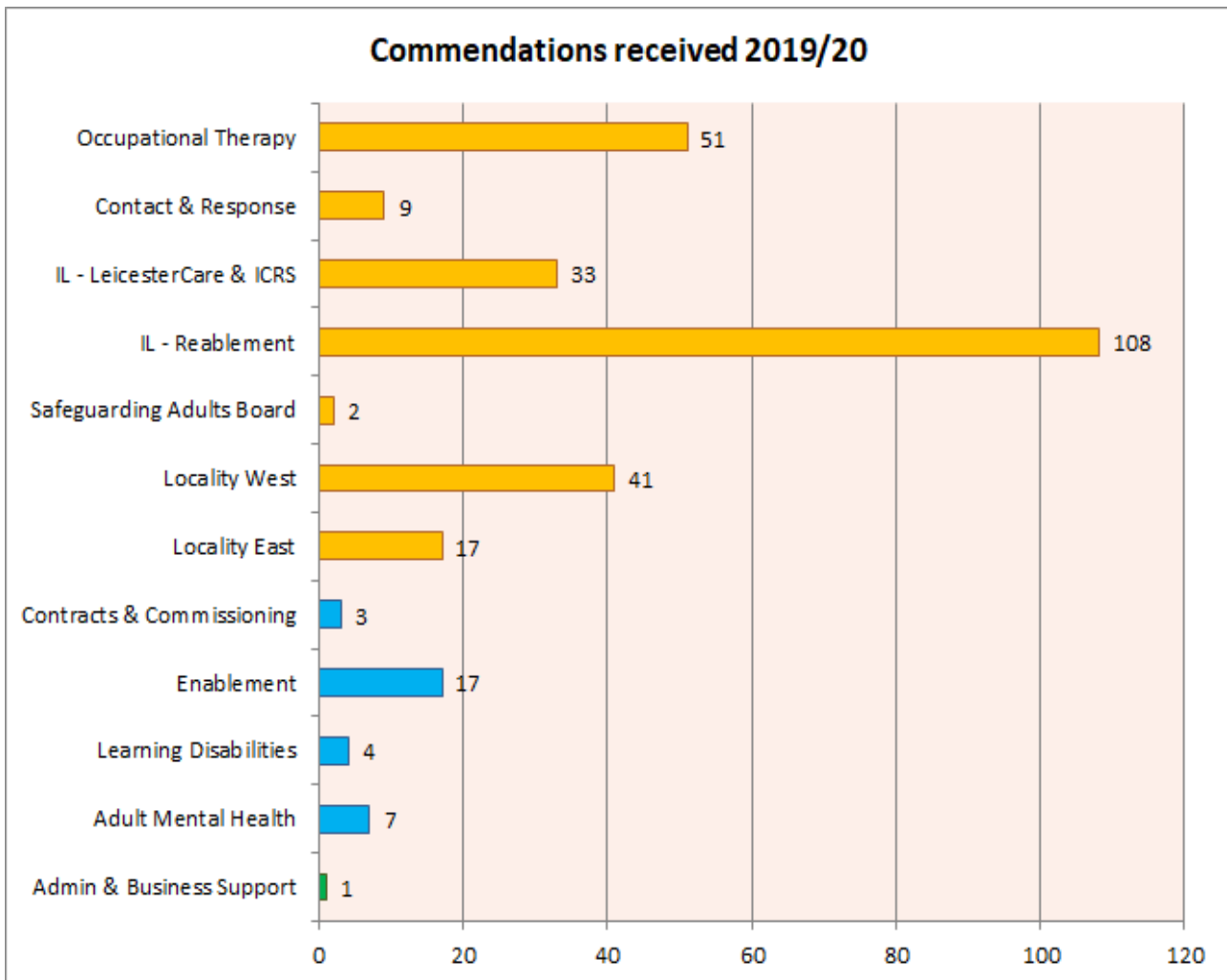
Social Care & Education

Email: Adultsocialcare-complaints@leicester.gov.uk

Tel: 0116 454 2470

APPENDICES

APPENDIX 1

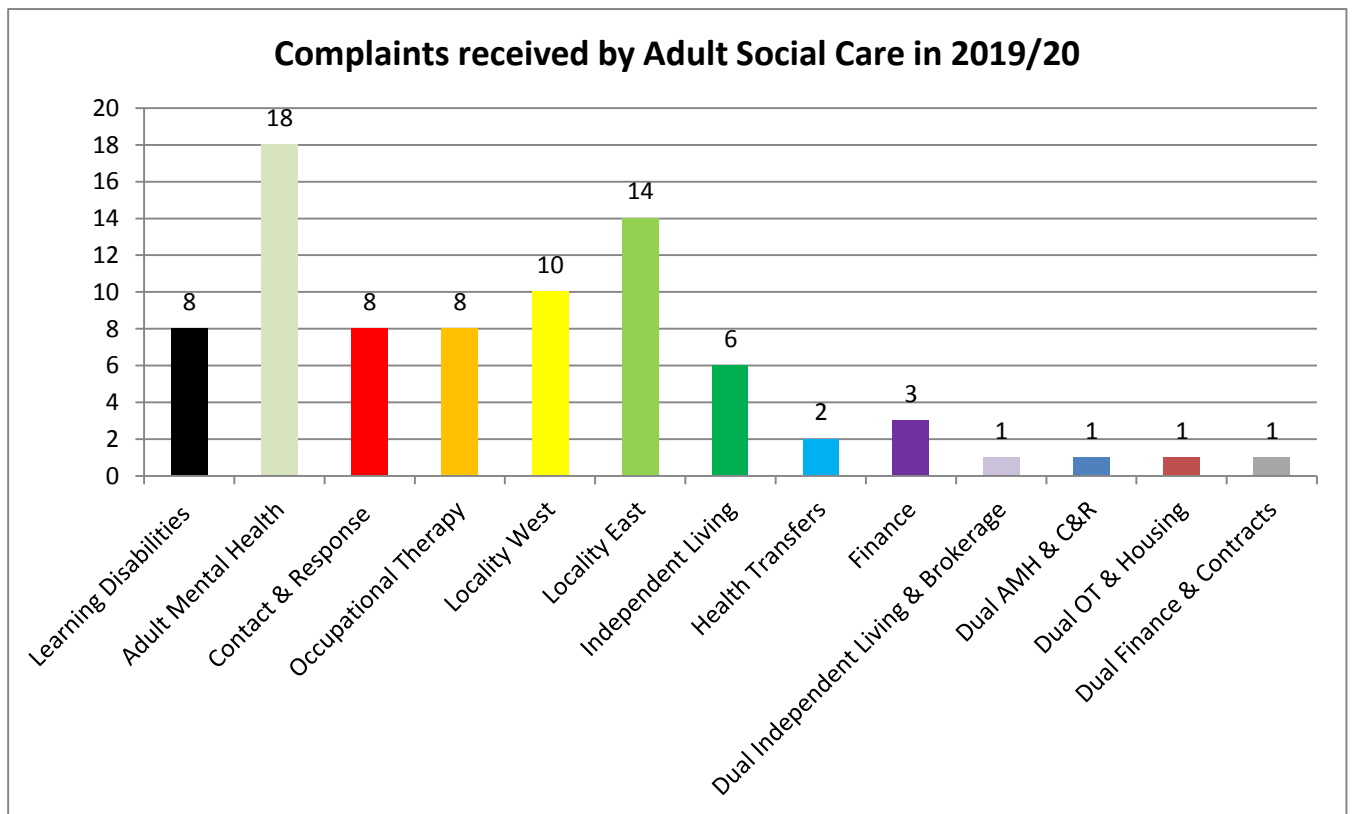


1. Commendations by service area

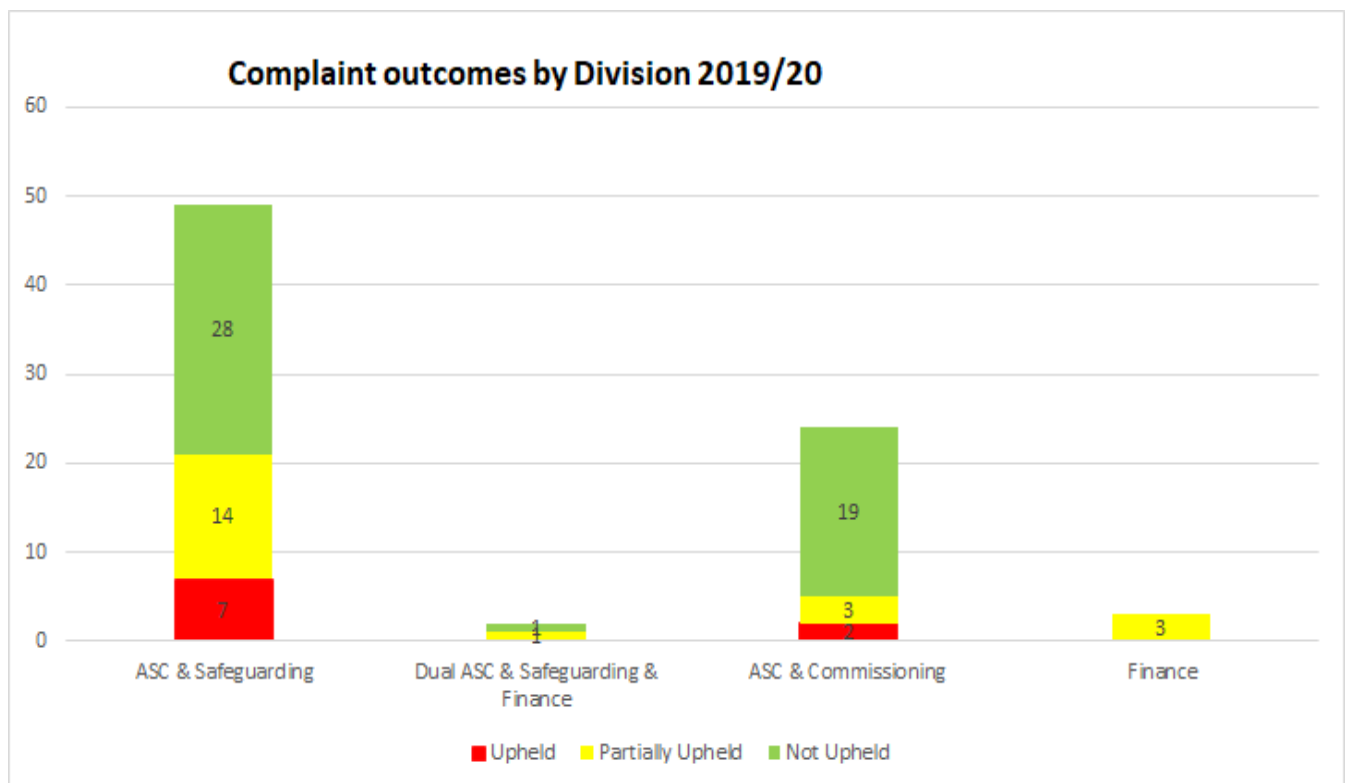
2. Breakdown of complaint information received across the Department

- 2.1 It is perhaps worth noting that teams receiving a higher number of complaints are not necessarily ones providing a poorer service than others. Higher numbers of complaints may indicate that staff are aware of their responsibilities in terms of recording and formally reporting matters, helping to ensure that the complaint procedure remains open and accessible to all. A clearer picture of the Department's 'health' rests with issues that go on to be upheld and where common patterns of concern may arise.
- 2.2 It is to be noted that the ratio of complaints received to individuals in receipt of ASC services remains relatively small.

2.3 The distribution of Stage 1 complaints received in 2019/20 across ASC was as follows.



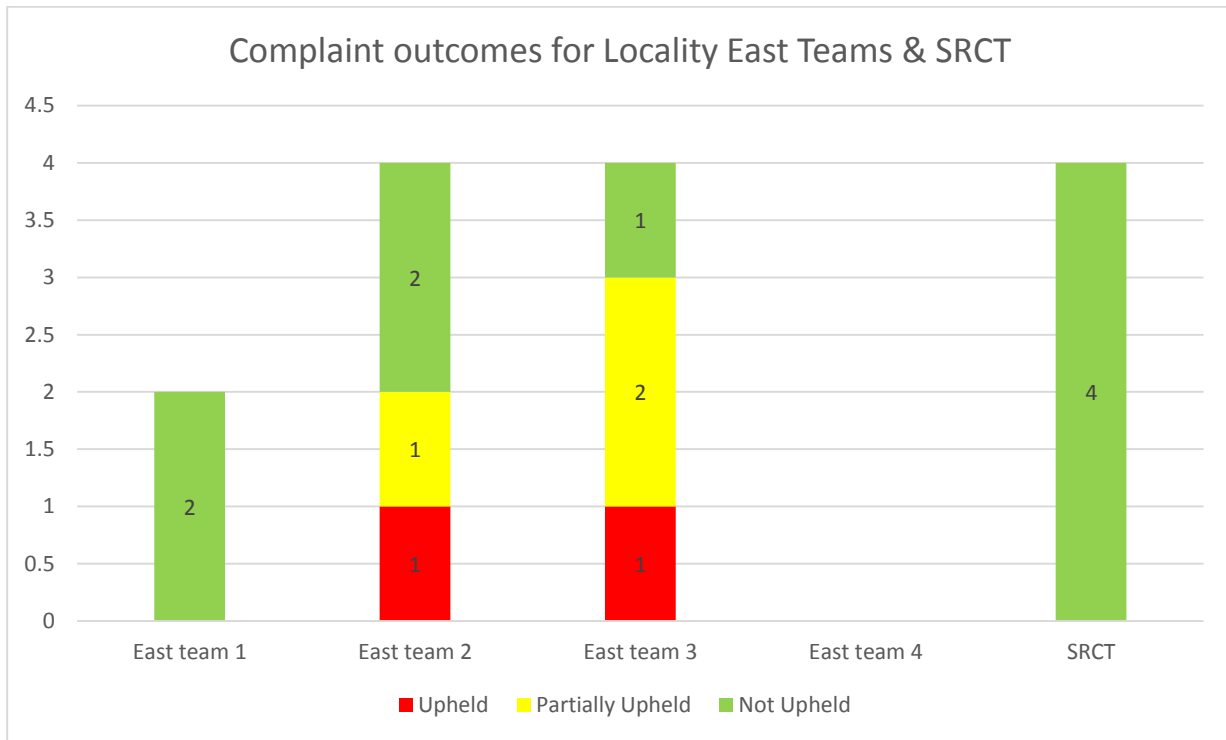
2.4 Complaint outcomes determined by division are as followsⁱ:



ⁱ Graph excludes 3 complaints as these did not record a formal outcome

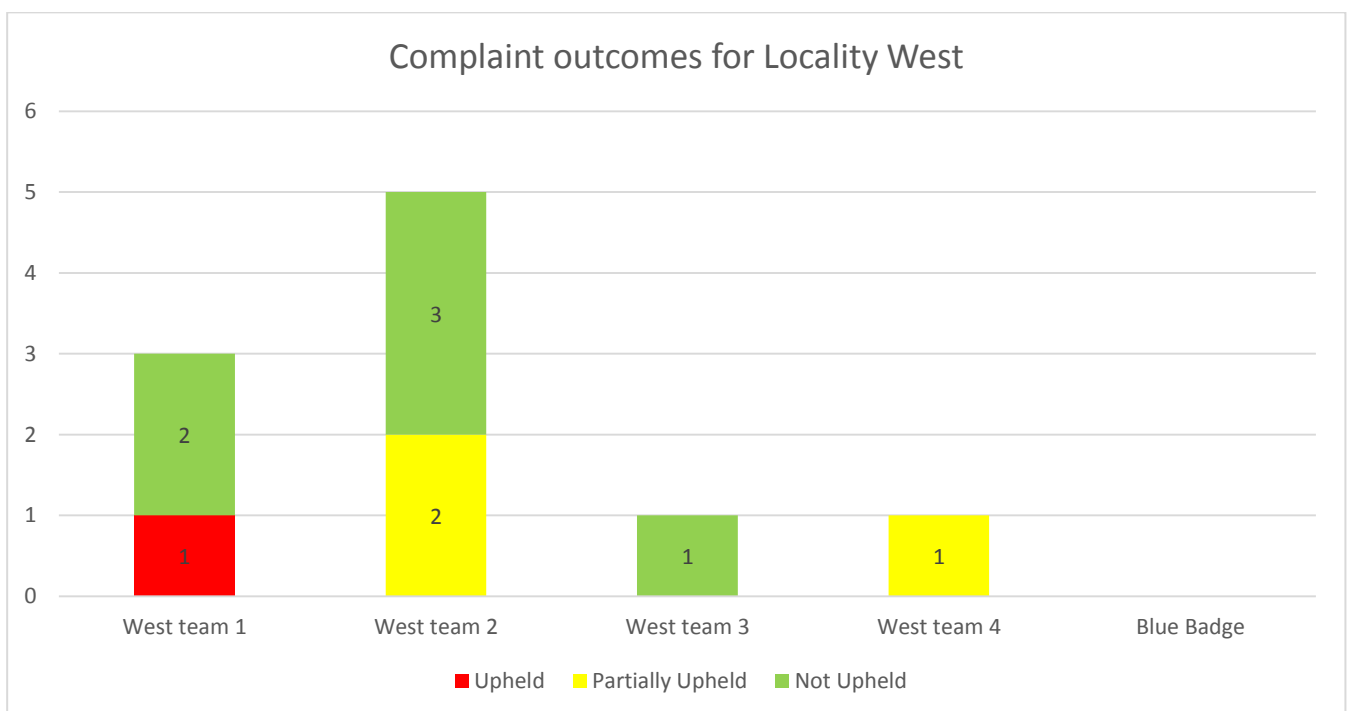
3. By service areas in Adult Social Care & Safeguarding

3.1



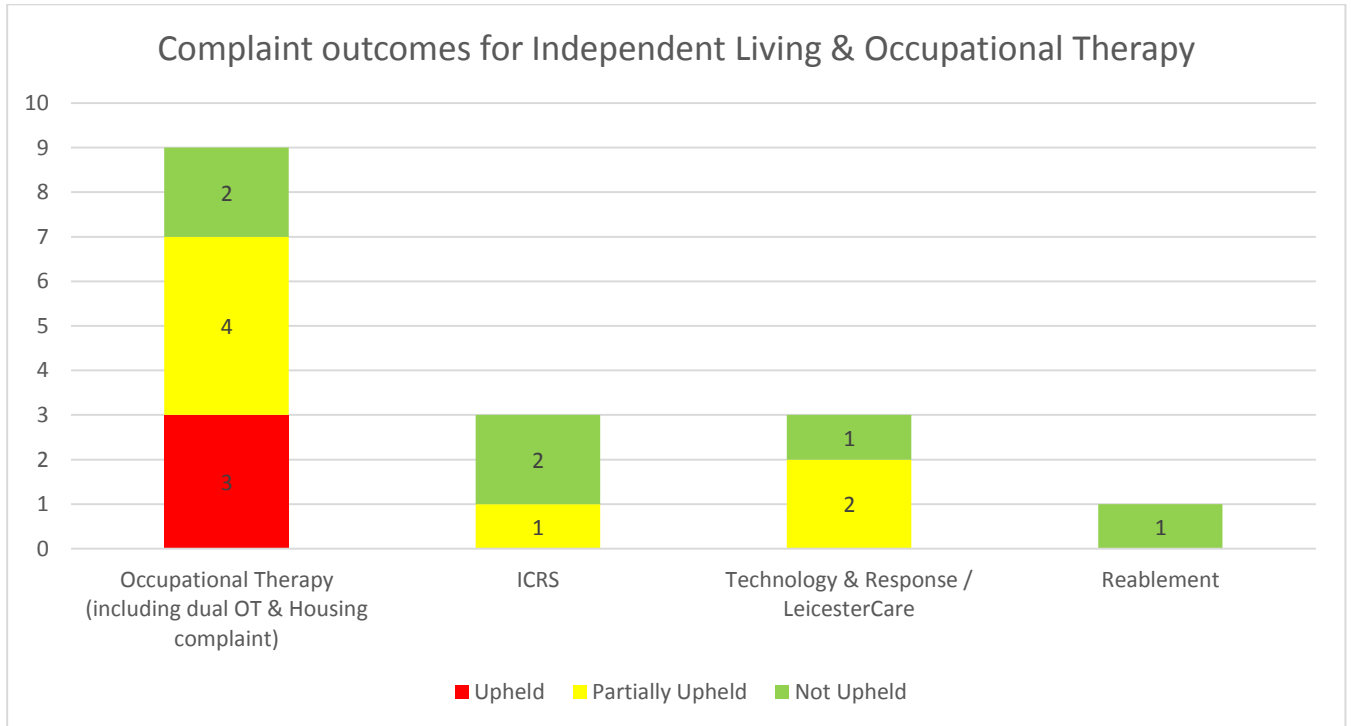
3.2 Locality East Teams and the Supported Residents Care Team received a total of 14 complaints. Twelve complaints were responded to within the initially agreed timescale and no complaints were withdrawn. In total 3 complaints were partially upheld and 2 were upheld.

3.3



3.4 Locality West recorded a total of 10 complaints. All 10 complaints were responded to within the agreed timescale. In total, 3 complaints were partially upheld and 1 was upheld.

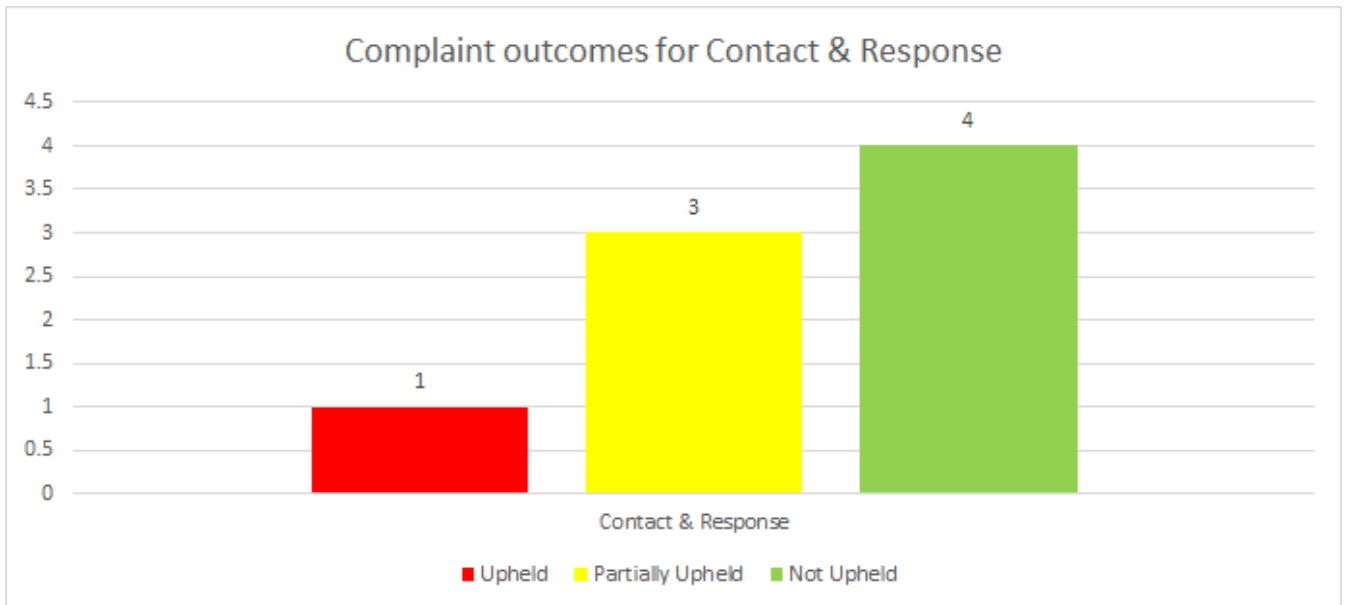
3.5



3.6 Independent Living services (ICRS, Technology & Response/LeicesterCare and Reablement) received a combined total of 7 complaints in relation to their services; one of these complaints was considered with Brokerage input. All 7 complaints were responded to within the agreed timescales. In total, 3 complaints were partially upheld.

Occupational Therapy received 9 complaints, one of which included a joint response with the Housing Division. Two complaints were responded to within the initially agreed timescales, with further time extensions agreed for the others. Of the 9 complaints received, 3 went on to be upheld and four were partially upheld.

3.7



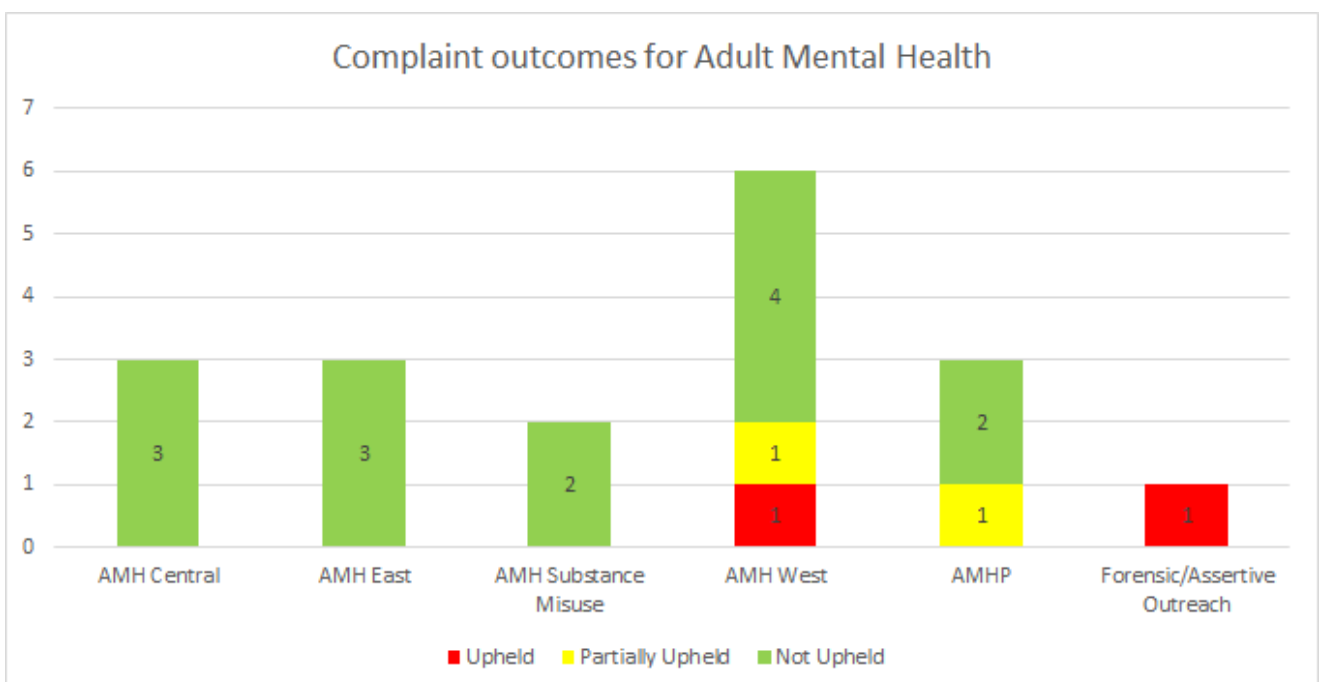
3.8 Contact & Response received a total of 8 complaints: one of which included a joint response with Adult Mental Health. Seven complaints were responded to within the initial timescale set. In total, 1 complaint was upheld and 3 were partially upheld.

3.9 **Health Transfers** received a total of 2 complaints, one of which was responded to within the agreed timescales (the other complaint was received at the beginning of the Covid-19 Lockdown in March 2020 and so a revised timeframe was set accordingly).

In total, 1 complaint went on to be partially upheld.

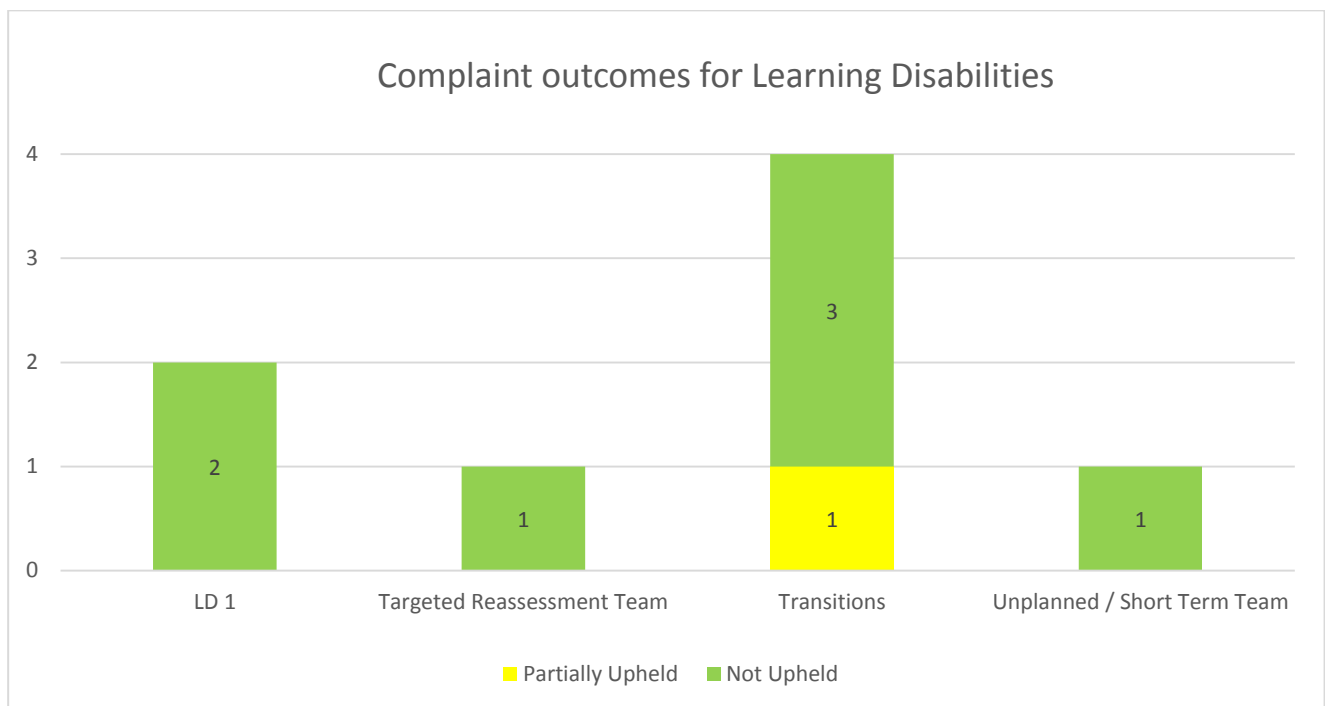
4. By service areas in Adult Social Care and Commissioning

4.1



4.2 Adult Mental Health Services addressed 18 complaints (2 involved joint responses with the Leicestershire Partnership Trust as well as Contact & Response). All 18 complaints were responded to within the agreed timescales. Two complaints were partially upheld and 2 were upheld.

4.3

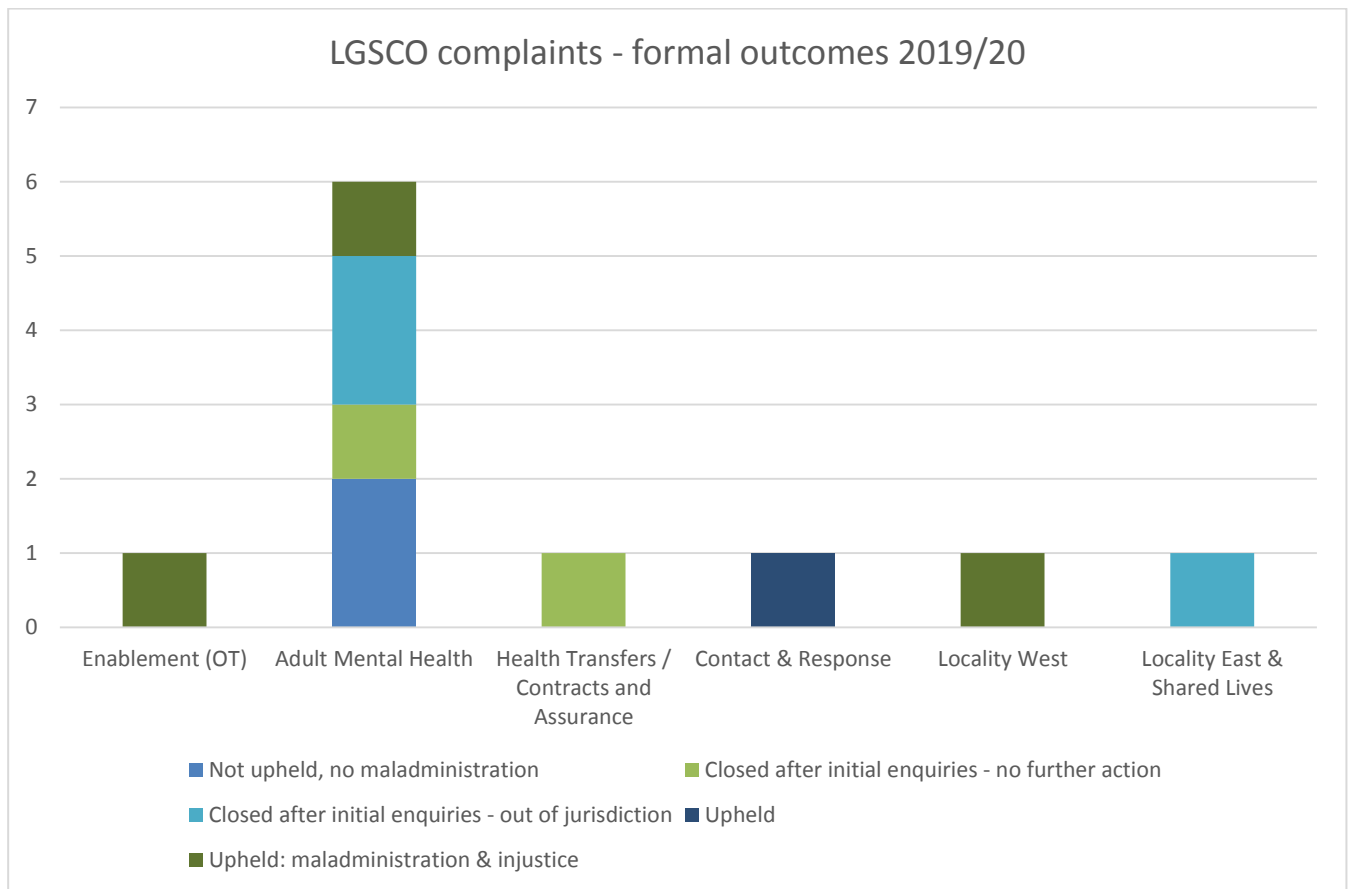


4.4 **Learning Disabilities** received 8 complaints: 7 of which were responded to within the initially agreed timescales. Seven complaints were not upheld: one was partially upheld.

4.5 **Social Care – Finance:** three statutory complaints were progressed in 2019/20 solely in relation to the Finance Team’s actions: all three went on to be partially upheld. A further complaint was jointly responded to by the Finance Team and the Contracts and Assurance Service and was also partially upheld.

4.6 **Corporate complaints** - only one corporate complaint was considered during 2019/20, raised by a care provider. This was not upheld.

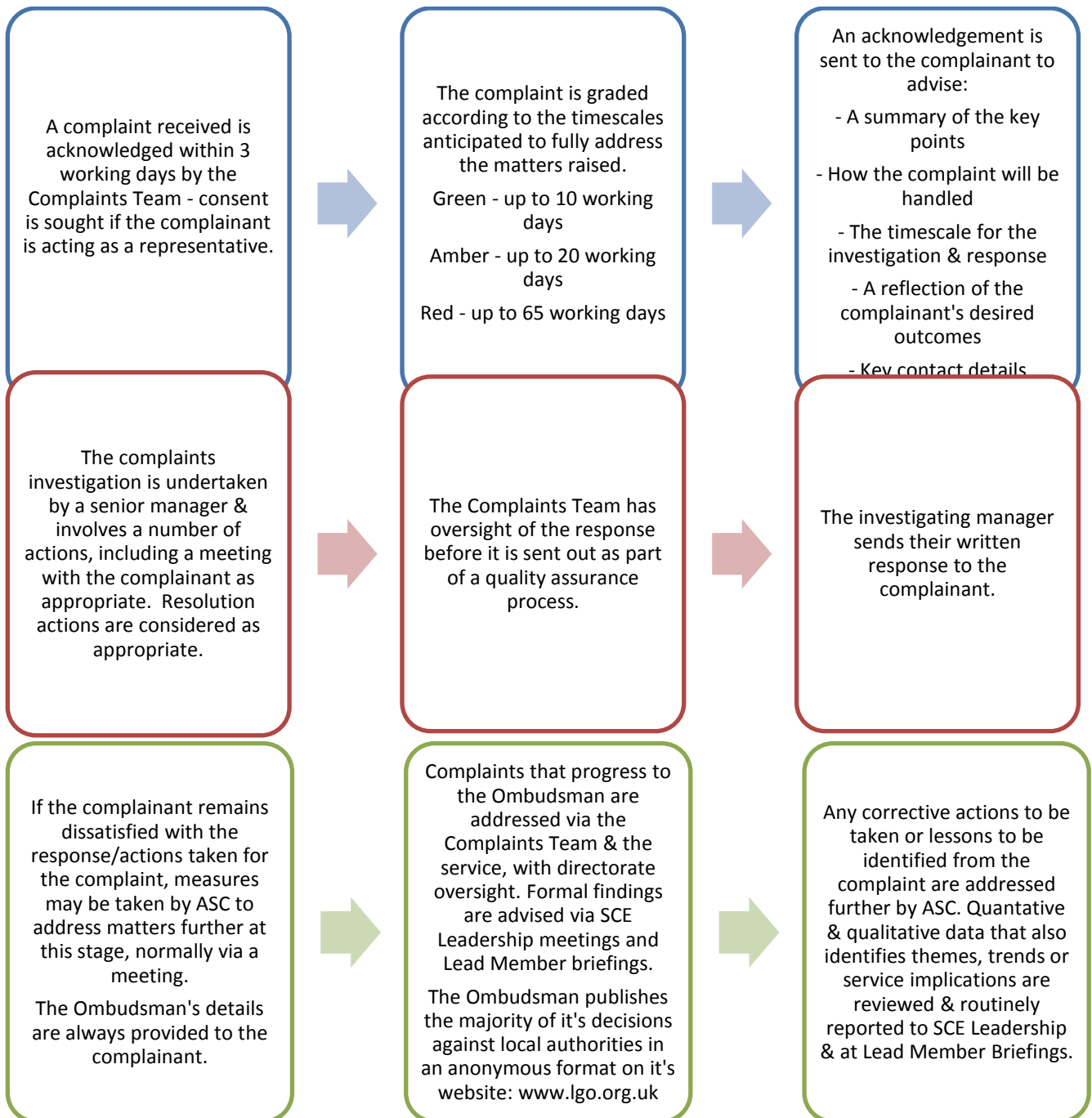
5. LGSCO complaints received by service



APPENDIX 2

1. Adult Social Care (ASC) complaint process in brief (chart)

Verbal complaints that are resolved to the complainant's satisfaction within one working day fall outside the complaint procedure.



2. Complaint case study 2019/2020

Background

A complaint was received from Ms A, in relation to the support considered for her father (Mr S) following his discharge home from hospital. As part of the complaint, the daughter raised matters in relation to aspects of his care, communication and how a recommendation by an ASC Occupational Therapist (OT) for him to receive care on his bed had been made without further consultation with him and without other family members being made aware. The complaint also included issues for the Leicestershire Partnership Trust and the care agency to comment on further.

Ms A went on to comment that decisions reached about her father's care had made him fully reliant on formal support and had impacted on his ability to do things for himself (including accessing drinks during a hot period). Ms A was also concerned that her father had not been able to get out of his home to attend his day centre which had impacted on his mood and had also meant that he'd missed an important GP appointment.

Overall, Ms A felt that more consideration had been given to the welfare of attending carers, rather than her father's needs and that the imposed lack of mobility had caused his health to worsen, hindering his rehabilitation and recovery. Mr S was subsequently readmitted to hospital after a short period at home.

Actions taken under the complaint procedure

Putting the complainant at the heart of the matter

Before responding further, consent was sought for Ms A to complain on her father's behalf. A formal acknowledgement letter seeking agreement to the specific complaint points for investigation and the outcomes being sought was provided within 3 working days of receipt of the concerns. This letter explained the complaint process in further detail and highlighted that the complaint would be allocated a 20 working-day response time. It also identified the investigating officers and provided their contact details, should any further matters need to be discussed in the meantime.

With consent, details of the complaint were also shared with the Leicestershire Partnership Trust (LPT) and the care agency for further comment, as aspects of the complaint also concerned their services.

Investigation processes

Following direct contact with Ms A to acknowledge the complaint, the Principal OT and Head of Service went on to review the Council's records and to consider the relevant policies and processes that had guided the Council's actions during the period concerned. As part of the investigation, the officers looked at ASC's involvement with Mr S, the assessments that had been undertaken, the evidence that had been gathered and the recommendations that had been made.

The allocated workers' actions and liaison with all family members and other relevant parties was also considered. Staff members with prior involvement in the case were also consulted in relation to their involvement, as appropriate.

A full written response to the points raised was drafted

The outcome to the investigation was considered further in relation to the concerns raised by Ms A and a formal written response was drafted on this basis. With its response, ASC reviewed the actions that been taken following its direct contact with Mr S after his hospital discharge.

Findings

It was confirmed that the OT visit had taken place to look at his transfers around the home and to assess his abilities further (Mr S was able to make his own decisions regarding such matters).

It was further confirmed that the prospect of all care being provided on the bed was intended as a short-term measure and had been discussed with Mr S directly to ensure his safety and wellbeing. The family member had also been contacted directly to discuss the outcome to Mr S's assessment and the actions that had been identified from this. A later, functional review of all the equipment put in place had concluded that the provision of the equipment was satisfactory and that the care agency had been advised of the need for two members of staff to visit to support Mr S.

With the complaint response, an assurance was offered to Mr S's daughter that his care needs were the primary consideration, that they had been discussed with him directly but that regard also needed to be paid to the carers' moving and handling arrangements, so that all support was delivered safely, for all parties' sakes.

It was also confirmed that, at the time, the OT had also suggested that Mr S contact his GP further, due to concerns about aspects of his abilities and physical deterioration and that these could be related to ongoing health issues.

Further comments were also provided by the care agency to confirm that the management of Mr S's fluid intake had always been considered and sufficient drinks were available and accessible.

As part of its reply, LPT also proposed some changes to their processes, to ensure that contacts were not closed on their system prematurely, when they had not been responded to. An apology was offered for the fact that the family had needed to keep chasing contact up.

Before the complaint reply is sent

Prior to sending the complaint reply – and as with all complaints addressed - the Complaints Team reviewed the complaint response and the robustness of the investigation undertaken, ensuring that all complaint points were fully addressed and that the responses and outcomes were clearly explained and stated.

On this occasion, most aspects of the complaint (from ASC's perspective) did not go on to be upheld. However, some actions were identified by the care agency and LPT for further attention.

Conclusion of stage one of the statutory complaint procedure

The complainant is always provided with the contact details of the Local Government & Social Care Ombudsman in a response letter. However, the option to contact the ASC Complaints Team to discuss matters further is also provided, to allow for any further conciliatory actions to be considered.

Further to the complaint response, Ms A noted her ongoing disagreement with some of the replies that had been provided although did not wish to enter into an ongoing debate regarding the matters she disagreed with or held a different perspective on.

Conciliatory actions

In response to the situation, a meeting was proposed for all key individuals to attend, to allow for further discussions and to gain a better understanding of Mr B and the family's experience. This meeting provided the opportunity for further, open discussion and the chance to gain a further insight into the family's experience. Some further actions were identified as a result of the meeting, with messages shared across ASC and LPT.

Escalation to the Local Government & Social Care Ombudsman

On this occasion, the actions taken to respond to the complaint brought matters to a suitable conclusion, without the need to escalate matters to the Ombudsman

APPENDIX 3

Performance indicators relating to the management of statutory complaints

INDICATOR	2018/19	2019/20	Target for 2020/21
% Acknowledge Stage 1 complaints (combined) within 72 hours	100%	100%	100%
% Allocate Stage 1 complaints (combined) to investigating officer within 72 hours	100%	100%	100%
Green % Completion of Stage 1 complaints within 10 working days	66%	100%	95%
Amber % Stage 1 complaints completed within initial timescale of 20 working days (25 for joint protocol complaints)	92%	84%	90%
% Stage 1 complaints completed between 21-25 working days	7%	3%	-
% Stage 1 complaints completed between 26-35 working days	1%	7%	-
% Stage 1 complaints completed at 36 working days or over	0%	6%	-
% Completion of Amber Stage 1 complaints within agreed timescale extension	100%	100%	100%
Average complaint response time	16 working days	18 working days	N/A
Red % Acknowledge Stage 1 complaints within 72 hours	100%	100%	100%
% Allocating Stage 1 complaints to investigator within 72 hours	100%	100%	100%

APPENDIX 4 Outcomes for 2019/20 action plan

Action identified	Outcome
Ensure business continuity and performance in meeting core tasks and targets.	Performance was measured continuously throughout the year with quarterly reports routinely presented to Social Care & Education’s Leadership Team and Lead Member.
Encouraging better communication with complainants.	With each complaint allocated for investigation, the responding manager was encouraged to ensure that they made initial contact and maintained this communication throughout the complaint process.
To encourage direct resolution actions.	Each complaint was considered on its merits and at the point of investigation responding managers were asked to consider any potential actions for resolution – outside of a written response – to address those situations where a difference of view was still held, to try and bring about an agreeable resolution if possible.
To establish and embed a formal process of learning that embraces all feedback that the department receives (including complaints) and that ensures learning is communicated and evidently acted upon, with improvements to be measured.	A number of activities are routinely taking place as part of the cycle of learning from complaints. Repeated complaint themes are being reviewed year on year.
To develop the regular reporting currently undertaken in Just ASC to provide a wider perspective to staff on all issues relating to complaints and commendations and make this more editorial in nature. Information to be included on Interface and further use of First Line Supervisors Forum and Just ASC as reporting channels.	Reporting via the Social Care & Education newsletter has continued. An introductory PowerPoint presentation has been created for new starters to identify the importance of the complaint procedure and to provide key information about the reasons why complaints can arise.

APPENDIX 5 2020/21 Action Plan

Action identified	Action required	Anticipated outcome	Timescale
Ensure business continuity and performance in meeting core tasks and targets.	Continuous performance monitoring against timescales to take place: proactive approach employed to ensure responding managers are aware of requirements and timescales and prompted to meet these.	Measurable actions are addressed within specified timescales.	Specific detail of the targets worked to is outlined in the table at Appendix 3.
Encouraging better communication with complainants.	Heads of Service to ensure contact with complainants at the start of the investigation process to discuss concerns being raised directly and to ensure open communication is maintained throughout the process.	That further direct engagement with the complainant encourages a more satisfactory resolution and better outcome for all parties.	Required on a continuous basis – but to be considered further with each quarterly review of complaints.
To encourage direct resolution actions.	When it is apparent that matters remain unresolved/disputed for complainants, Heads of Service to be reminded of options open to attempt further resolution.	Alternate dispute resolution actions in 2019/20 indicated that this action can influence a more positive outcome for complaints and prevent further escalation.	Alternate dispute resolution actions to be considered with quarterly complaint report.
Review how we advise individuals about the complaint procedure.	Evaluate what actions are being taken presently across ASC and what improvements may be required. Also consider whether there are further aspects of communication that need to be improved.	That clear and consistent information is being provided to all individuals that are new to the Department and receiving support.	By 31 st March 2021