

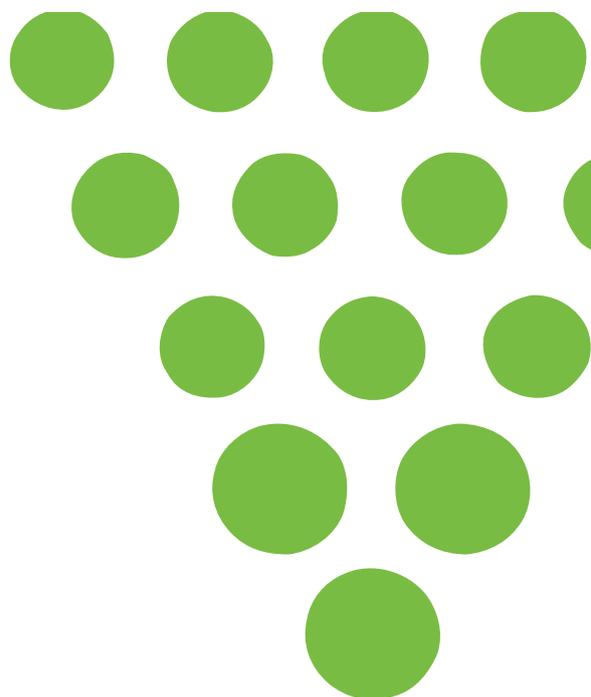


Adult Social Care Annual Report 2018/19

Compliments, Comments and Complaints

05/07/2019 Version 1.0

Information Governance and Feedback



Adult Social Care Annual Report 2018/19

Compliments, Comments and Complaints

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Executive Summary

A revised Adult Social Care complaints policy was implemented from 1 October 2018 providing a one stage complaint investigation with oversight by the relevant Head of Service. Prior to October 2018 and for the period 1 April 2018 to 30 September 2018 covered by this report, the Adult Social Care complaints policy detailed a two stage complaint process, the second stage being undertaken by an independent officer.

During this reporting period, a total of 78 complaints were closed, compared with 66 in the year ending 31 March 2018. This represents an 18% increase in complaints compared to the year ending 31 March 2018. This report highlights a higher number of complaints being closed within the Adult Care and Support – Mid teams even after the higher population number, population of individuals in receipt of a service, and the number of informal resolutions is taken into account.

- During the reporting period 86% of all complaints were responded to within the timescale agreed with the customer.
- The main themes of complaints were Delay Failure (28), Lack of information (27), and Actions/conduct of Staff (16).
- The outcomes were that 44 (56.4%) upheld, 8 (10.3%) partially upheld, 16 (20.5%) not upheld and the remaining 10 (12.8%) a no finding conclusion.
- £14,339.99 was paid out in reimbursement.

A total of 18 Ombudsman final decisions were issued, 11 were upheld which represents 61.1% of the total being upheld. This is compared to 9 decisions in the year ending 31 March 2018, when 3 decisions (33.3%) were upheld. There has been a 100% increase in decisions issued since the last financial year, with a 28% increase in the number of these decisions being upheld.

- Payment was awarded by the Ombudsmen in regards to eight cases where the finding was ‘Upheld – Maladministration and Injustice’, totalling £29,836.04.

We have recognised the need to do better at capturing lessons learned and applying those across Adult Social Care in a more systematic way. We are currently making plans on how to do this and making it a priority for 2019/20.

Introduction

Local Authorities have a statutory duty to publish an Annual report in respect of Social Care Complaints. The purpose of this report is to ensure complaints information for the Adult Social Care Directorate is available to the public, Members of Cornwall Council and Staff.

The report is an indication of the importance of feedback from service users and their representatives on the Directorate's performance. Through monitoring and evaluating complaints and compliments, the Directorate's Leadership Team gains information on the services that are delivered to good standard and those that need improvement. The Directorate can then instigate changes to policies, procedures and practices as a result of the learning recorded from Feedback.

This report relates to the full year 1 April 2018 to 31 March 2019 and relates to statutory complaints closed by the directorate, and contains details regarding the number and type of complaints received by the service including timescales and outcomes and where appropriate any service improvement identified.

It evidences how information from complaints contributes to practice development and service improvement.

A revised Adult Social Care complaints policy was implemented from 1 October 2018 providing a one stage complaint investigation with oversight by the relevant Head of Service – the legislation allows us to be flexible in dealing with complaints – they do not prescribe specific timescales or method of resolution as long as we agree a complaint resolution plan at the outset.

The Ombudsman produces an Annual Report and this can be found at: <http://www.lgo.org.uk/information-centre/councils-performance/council/Cornwall%20Council>

We believe that Compliments and Comments are also important elements of feedback and we have included these in this report.

Adult Social Care Complaints

Overview

This report provides information about the feedback received by the Adult Social care directorate during 2018/19.

The Local Authority has a duty to ensure that any individual (or appropriate person acting on their behalf) who wishes to make a complaint about the actions, decisions or apparent failings of a local authorities' social care provision have access to the appropriate Adult Social Care statutory complaints procedure.

Adults Social Care services complaints are governed by The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. This legislation allows us to be flexible in dealing with complaints – they do not prescribe specific timescales or method of resolution as long as we agree a complaint resolution plan at the outset.

A revised Adult Social Care complaints policy was implemented from 1 October 2018 providing a one stage complaint investigation with oversight by the relevant Head of Service.

When people have concerns we listen to them, and, where possible, will negotiate and agree a way forward to resolve the concern. We deal with complaints in a fair and transparent way, treating those who make them with courtesy and respect. We encourage compliments and comments as well as complaint, as part of our commitment to continuous learning and improvement.

Our directorate procedure is in line with the statutory requirements and allows managers dealing with complaints to take a flexible and personalised approach. The complainant is put at the centre of the process and is expected to contribute to a complaint resolution plan which sets out the nature of their concerns, what the person complainant would like to happen as a desired outcome, and how long the complaint investigation is likely to last.

The Head of Service will oversee the complaint investigation or actions agreed, and will sign-off the complaint once everything possible has been done to resolve it.

Prior to October 2018 and for the period 1 April 2018 to 30 September 2018 covered by this report, the Adult Social Care complaints policy detailed a two

stage complaint process, the second stage being undertaken by an independent officer.

Complaints which fall outside of the statutory social care regulations but relate to the services provided by Adult Social Care are addresses under the non-statutory Cornwall Council complaints procedure. These are reported in Cornwall Council's complaints report for 2018/19. During 2018/19 2 non-statutory complaints were investigated by Adult Social Care, both were resolved within timescale, and both were upheld or partially upheld.

It should be noted that cases investigated by the Ombudsman may not have previously been considered by the council as a complainant retains the right to contact the Ombudsman at any time. However before investigating a complaint the Ombudsman must normally be satisfied that the council has had an opportunity to investigate and to reply.

The Ombudsman will consider complaints against Charging Assessment that have not been considered under the complaints policy but have been through the relevant appeals route and these will therefore only be shown under the Ombudsman section of this report.

Overview for 2018/2019

A total of 79 complaints about adult social care were resolved in 2018/19.

Number of formal complaints closed 2018-19			
	Option 1	Option 2	Ombudsman
2013-2014	89	12	4
2014-2015	94	36	8
2015-2016	86	3	10
2016-2017	113	8	17
2017-2018	66	5	9
2018-2019	78	1*	18

*For the period 1 April 2018 to 30 September 2018, the Adult Social Care complaints policy detailed a two stage complaint process. From 1 October 2018 the implemented Adult Social Care complaints policy does not have an Option 2.

During this reporting period, a total of 78 complaints were closed, compared with 66 in the year ending 31 March 2018. This represents an 18% increase in complaints compared to the year ending 31 March 2018. During this reporting period, a total of 1 complaint at option 2 was closed in April 2018.

During this reporting period, a total of 18 Ombudsman final decisions were issued, compared with 9 in the year ending 31 March 2018 which represents a 100% increase in decisions issued. This will be detailed further into this report.

It should be noted that an individual can make more than one complaint, as long as the subject matter of each complaint differs, numbers of complaints presented in the table above relate to the number of complaints rather than number of individual complainants. And the numbers of complaints closed up to 31 March in the reporting year.

None of the 78 complaints received were investigated under the Multiagency Protocol with health. This protocol provides a framework for the effective management of complaints involving organisations across health and social care. It is complimentary to each organisation's complaint policy and procedures and does not define how complaints are managed by each individual organisation. It does however promote better joint working to ensure complaints can be resolved efficiently and within as timely a manner as

possible. The protocol details a shared approach to consent that removes the need to delay investigations while people sign multiple consent forms across health and social care.

However, we are clear that complaint volumes alone do not tell us enough about the quality of services, or people's experience of them. Rising numbers of complaints may be a positive by-product of people feeling able to speak up and raise concerns because the council demonstrates to them a willingness to listen and learn from feedback.

The complaints by service area are outlined below.

Complaints closed 2018-19 by Service Area and Theme						
Service Area	Actions of Staff/ Conduct	Lack of Service/ response	Lack of Information	Delay/ Failure	Quality	Total
Adult Care and Support *	5	0	12	4	1	22
Adult Care and Support - Mid	1	0	5	8	0	14
Adult Care and Support - East	0	1	1	2	0	4
Adult Care and Support - West	2	0	1	3	0	6
Adult Provider Services *	8	0	4	2	0	14
Charging Technical	0	2	0	4	0	6
Direct Payments	0	1	2	0	0	3
Brokerage	0	0	0	0	1	1
Commissioning	0	1	1	3	0	5
Independent commissioned providers	0	0	1	1	0	2
Quality Assurance and Improvement	0	0	0	1	0	1
Total	16	5	27	28	2	78

* Service areas only recorded prior to 1st October 2018

Complaints closed by Adult Care and Support Area 1 October 2018 and 31 March 2019

	Complaints Closed	Number of Service Users*	Complaints per 1,000	Population 18 yrs. + **	Complaints per 10,000
Adult Care and Support - Mid	14	3,997	3.50	186,866	0.75
Adult Care and Support - East	4	3,567	1.12	137,013	0.29
Adult Care and Support - West	6	3,576	1.68	132,320	0.49
Total	24	11,140		456,199	

* These figures represent the number of service users who had an open commitment purchase order in the specified time period. They do not consider any individual awaiting a package of care.

** Source: ONS, 2017 Mid-Year Small Area Population Estimates

Three of the 14 mid cases were complaints relating to the hospitals team.

Taking into consideration the higher population number and population individuals in receipt of a service, this does not provide reasoning for the higher number of complaints in the Adult Care and Support – Mid teams.

Informal Resolutions to Concerns closed by Service Area 1 October 2018 and 31 March 2019

Adult Care and Support - Mid	17
Adult Care and Support - East	10
Adult Care and Support - West	9
Other	32
Total	68

Taking into consideration the number of informal resolutions in the Adult Care and Support area teams, although Adult Care and Support – Mid teams resolve a higher number - this is to be expected when consideration service user population, they still receive a higher number of concerns in total than the Adult Care and Support – East or Adult Care and Support – West.

Complaint volumes alone do not tell us enough about the social care landscape, the quality of services, or people's experience of them. Rising numbers of

complaints may be a positive by-product of people feeling able to speak up and raise concerns because we demonstrate to them a willingness to listen and learn from feedback. Equally, the increase may be indicative of poorer quality care and experiences.

Timescales

During the reporting period 2018-19 86% of all complaints were responded to within the timescale agreed with the customer. For the months of December 2018 to March 2019 all complaints have been responded to within timescale.

It should be noted that The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 does not impose fixed timescales for responding to complaints, as the complaint should be investigated in accordance with the complainant's timescales. However, it is usually reasonable to expect a complaint investigation to be completed in line with those for other social care complaints and this is reflected in the current Adult Social Care complaints policy - complaints should be responded to within 20 working days. A longer timescale, if required, can be negotiated with the Complainant, by the investigating office, up to a maximum of 65 working days.

Between **1 April 2018 and 30 September 2018** complaints investigated under Stage 1 of the former policy were due within 10 working days, with an extension of a further 10 working days if required. The extension was commonly applied but not routinely negotiated with the complainant.

Complaints closed between 1 April and 30 September 2018

Cases responded to within 20 working days	31 (77.5%)
Cases responded to outside of 20 working days	9
Cases responded to within agreed timescale	77.5%
Average response time	15 days
Longest response time*	56 days

*The longest response time, this was due to the complainant requesting meetings with the investigating officer be rearranged on several occasions.

Between **1 October 2018 and 31 March 2019** complaints should be responded to within 20 working days. A longer timescale, if required, can be negotiated with the Complainant, by the investigating office, up to a maximum of 65 working days.

Complaints closed between 1 October 2018 and 31 March 2019

Cases responded to within 20 working days	32 (84.2%)
Cases responded to outside of 20 working days and extended with agreement from the complainant	6
Cases responded to within agreed timescale	100%
Average response time	16 days
Longest response time	34 days

Complaint Categories / Themes

The categories below give an overview of the types of complaints received for all complaint investigations

	2015-16	2016-17	2017-18	2018-19
Actions of staff/conduct	17	17	9	16
Cost of service	3	3	0	0
Delay Failure	23	31	11	28
Lack of information	9	16	18	27
Lack of service/responses	5	15	5	5
Quality	25	27	15	2
Dissatisfaction with policies	4	4	4	0
Bullying / Harassment	1	0	1	0
Human Error	2	0	0	0
Not categorised	0	8	3	0

Complaints Outcomes

During 2018/19 52 (66.7%) of all complaints were upheld or partially upheld. Where this is the outcome the recording and reporting system expects Lessons Learned and Actions to be recorded following the complaint investigation and the Information Governance and Feedback Team monitor these.

Of the complaints completed within the reporting period the outcomes were that 44 (56.4%) were upheld, 8 (10.3%) were partially upheld, 16 (20.5%) were not upheld and the remaining 10 (12.8%) reached a no finding conclusion.

Complaint findings by service area are detailed below:

Complaints closed 2018-19 by Service Area and Finding					
Service Area	Upheld	Partially Upheld	No Finding	Not Upheld	Total
Adult Care and Support *	13	3	2	4	22
Adult Care and Support - Mid	6	2	0	6	14
Adult Care and Support - East	2	1	0	1	4
Adult Care and Support - West	3	1	2	0	6
Adult Provider Services *	5	1	4	4	14
Charging Technical	5	0	1	0	6
Direct Payments	2	0	1	0	3
Brokerage	1	0	0	0	1
Commissioning	4	0	0	1	5
Independent commissioned providers	2	0	0	0	2
Quality Assurance and Improvement	1	0	0	0	1
Total	44	8	10	16	78

Reimbursement and payments

Reimbursement and payments		
Reference	Amount	Why we paid it
101003520977 (Stage 2)	£5,964.02	Six week delay in sending out the care and support plan, which was then sent to the home address rather than the care home address. Contribution of £5964.02 to the complainant to meet some of the assessed contribution/charge for the temporary period in which the individual was in the placement (£3130.66) and part of the 12 week disregard (£2833.36)
101004188287	£4,768.17	Outstanding payment to care agency; the figure included client contribution that was requested to be paid back to Adult Social Care.
101004148579	£3,232.80	Financial Assessment was not completed when individual had fallen below the funding threshold.
101004219816	£375.00	Reimbursement of unpaid carer's payment from 2017
Total	£14,339.99	

Who raised the complaint?

22 of the 78 complaints came from Service Users, with 58 from representatives, ranging from family members to solicitors.

Complaints by Channel

Complaint Channel	
Channel	Number
Email	25
Phone	14
Letter	39

Complaints referred to the Local Government and Social Care Ombudsman (LGSCO)

Final Decisions issued by the Ombudsman		
Outcome	2017-18	2018-19
Closed after initial enquiries – no further action	2	3
Closed after initial enquiries - out of jurisdiction	1	1
Upheld: maladministration and injustice	3	9
Upheld: maladministration, no injustice	0	2
Not upheld: no maladministration	3	3
Total	9	18

During this reporting period, a total of 18 Ombudsman final decisions were issued, 11 were upheld which represents 61.1% of the total being upheld. This is compared to 9 decisions in the year ending 31 March 2018, when 3 decisions (33.3%) were upheld. There has been a 100% increase in decisions issued since the last financial year, with a 28% increase in the number of these decisions being upheld against Cornwall Council Adult Social Care.

In the year ending 31 March 2017 17 Ombudsman final decisions were received, which is a comparator figure to the number received this year. 10 of these were upheld which is again consistent with the figure reported in 2018/19 of 58.8%.

Work has been undertaken during 2018-19 with the Standards Committee Working Group to look at the level of complaints and how these may be reduced; with the focus on:

1. Evidence of lessons learned and the actions put in place to prevent reoccurrence from the 2016/17 and 2017/18 upheld Ombudsman complaints;
2. Whether there are any trends in respect of those complaints from 2016/17 to those in 2017/18;
3. Any evidence of systems/programs put in place or being implemented in the future to assist with the service and to reduce the level of complaints going forward;
4. Evidence of things that are working well which may not have been in the past.

The outcomes from the work undertaken with the Standards Committee Working Group have been:

- Resolution of concerns to the customer's satisfaction being made at the earliest stage, these are now recorded and monitored.
- A complaint action (resolution) plan template in use for each complaint - each case was considered on its own merits depending on the complexity, severity and scope of investigation.
- Development of the revised Adult Social Care complaints policy and operating procedure.
- Consideration of complaints record keeping on the social care record.
- A greater focus on improving reporting, particularly around Lessons Learned from Complaints to develop service delivery.

The Ombudsman is clear that complaint volumes alone do not tell us enough about the social care landscape, the quality of services, or people's experience of them. Rising numbers of complaints may be a positive by-product of people feeling able to speak up and raise concerns because councils and care providers demonstrate to them a willingness to listen and learn from feedback. Equally, the increase may be indicative of poorer quality care and experiences.

Decisions issues by the Ombudsman can be viewed on the Ombudsman's website: <https://www.lgo.org.uk/decisions>

Reimbursement and payment		
Reference	Amount	Why we paid it
17019902	£3,126.81	£2,826.81 outstanding payment £300 for time and trouble payment
17006668	£14,370.71	£14,170.71 reimbursement £200 for distress
18001410	£1,000.00	£500 to Mrs X for failing to arrange the care for her son between September 2016 and March 2017 £500 to Mr X for failing to address the shortfall in weekday hours in the January 2017 care and support plan
18001046	£600.00	£500 for distress £100 for time and trouble
18007718	£400.00	For the trouble Ms X has put in to pursuing her complaint
16004681	£2,838.52	£1,000 for time and trouble

		£1,838.52 to correct the error it made when making the back payment for care costs in February 2015.
18007635	£7,000	£6,000 to parents of the individual and an offer to pay Direct Payment for their son. £1,000 to the individual for the loss of opportunity to access the community and take part in social activities.
17007723	£500.00	£250 for uncertainty and distress £250 for the impact of fault in the complaint handling process
Total	£29,836.04	

Payment was awarded by the Ombudsmen in regards to eight cases where the finding was 'Upheld – Maladministration and Injustice', totalling £29,836.04.

Reason for awarded payment

	Amount
Outstanding Payment / Reimbursement to correct an error	£18,836.04
Time and Trouble	£1,800.00
Uncertainty and Distress	£950.00
Service failure	£8,000.00
Impact of fault	£250.00
Total	£29,836.04

This is in comparison to payment being awarded for one case during 2017/18 totalling £2,500 for significant and avoidable distress, risk of harm, lost opportunities and time and trouble.

Our Findings of LGSCO Upheld Complaints

Reference	Service Area and our Finding	Action We Took	Outcome	Recommendations
June 2018 17019902	Charging No complaint investigation	N/A	Upheld: maladministration and injustice	Within two weeks: <ul style="list-style-type: none"> • make the outstanding payment for Company A (£2,826.81); • provide the schedule of invoices; and • apologise to Mrs X and pays £300 for the trouble
July 2018 17006668	Charging Not Upheld	N/A	Upheld: maladministration	<ul style="list-style-type: none"> • Reimbursement for the additional payments totalling

			and injustice	<p>over £14,000</p> <ul style="list-style-type: none"> • Reimburse the interest charged on the gross overpayment • Pay the interest on the total overpayment. • Pay the complainant £200 • Review procedures to ensure that you confirm the agreed charges for care with care homes, residents and their representatives
September 2018 17004204	Adult Care and Support - Mid Partially Upheld	<p>Learning points:</p> <ul style="list-style-type: none"> • Clear communication with families to ensure that the risks of misunderstandings are reduced. • To ensure that if non-family members are invited to meetings then this is appropriate and in consensus with all involved. • That e-mails are written compassionately to ensure that recipients do not feel that they have been communicated with in a 'curt' manner. 	Upheld: maladministration and injustice	<p>Within a month:</p> <ul style="list-style-type: none"> • sends a letter of apology to Ms K about the distress she will have experienced, due to the way it handled the move; • Shares final decision with all staff involved in residential care moves and Best Interests Decisions.
September 2018 18001410	Care and Support – East Not Upheld	N/A	Upheld: maladministration and injustice	The LGSCO reported that: "When a council commissions another organisation to provide services on its behalf it remains responsible for those services and for the actions of the organisation providing them. So, although I found fault with the actions of the care provider in overcharging, I have made recommendations to the Council."
November 2018 18002853	Direct Payments Not Upheld	N/A	Upheld: maladministration, no injustice	Failure to arrange regular annual reviews of Miss Y's Direct Payment account however as this did not cause injustice to Miss Y they have not given any recommended actions. They

				find no fault with the way we conducted the Direct Payment review, or that we asked Ms X to repay unspent funds.
December 2018 18001046	Care Solutions Upheld Service user was missed off of a list used by brokerage and therefore individual request did not go to bid.	A review was requested with the Care Solutions Service to ensure there have been no other people missed off the list as the individual was. The list has been cross referred to ensure no-one has been missed.	Upheld: maladministration and injustice	Within 1 month: <ul style="list-style-type: none"> • Pay £500 to recognise the distress actions have caused • Pay £100 to recognise the time and trouble incurred when making the complaint • Investigate why the 18-64 Team did not carry out an annual review of care and support plan, and takes any action necessary to ensure this does not happen again. • The Feedback Team sends a copy of the final decision to the Team and ensure it is read by all managers who deal with domiciliary care.
January 2019 18007718	Charging Technical Informal Resolution	N/A as no formal complaint process undertaken	Upheld: maladministration and injustice	Within four weeks apologises to Ms X, waive the top up charge and pay her £400 for the trouble she has been put to in pursuing her complaint Within eight weeks identify the action it needs to take to ensure it improves its working practices and complies with The Care & Support Statutory Guidance (CSSG)
January 2019 16004681	Adult Care and Support – East Not Upheld	N/A as not upheld	Upheld: maladministration and injustice	<ul style="list-style-type: none"> • Pay Mr C £1,000. This is to recognise the time and trouble • Pay Mr C £1,838.52 to correct the error made when making the back payment • Review its processes in relation to record keeping
January 2019 18007635	Adult Care and Support – Mid Upheld	Actions have been taken to try and resolve the issue of a lack of care package for the SU.	Upheld: maladministration and injustice	Within four weeks: <ul style="list-style-type: none"> Write to apologise for its failings; • Pay them £6,000 and offer to pay the personal budget as a direct payment if that is what they still want • Pay Mr C £1,000 for the loss of opportunity to access the community and take part in social activities • Update Mr C's care and support plan to reflect the true cost of his care

				<p>Within eight weeks</p> <ul style="list-style-type: none"> • Review its procedures to remove barriers to people receiving direct payments based on the cost of their care • Consider what action to take to ensure it does not take so long to resolve problems with inadequate personal budgets and provides better advice to people on what they can do with direct payments
February 2019 17007723	N/A	N/A	Upheld: maladministration and injustice	<p>The two actions that apply to Adult Social Care are;</p> <ul style="list-style-type: none"> • Within 4 weeks of the final decision, pay Mr X £250 to acknowledge the impact of fault in the complaint handling process. • Within 8 weeks of the final decision, explain what steps we will take to ensure others do not experience similar significant delays during the complaint handling process.
March 2019 18006985	Charging: Upheld	The Charging Team completed a full Financial Assessment for the Service User.	Upheld: maladministration, no injustice	None

There are four cases to note where our complaint investigation did not uphold the complaint, where the Ombudsman did uphold the complaint.

Our Findings of Not Upheld Complaints where the LGSCO Upheld the Complaint

Reference	Service Area and our Finding	Action We Took	Outcome	Recommendations
July 2018 17006668	Charging Not Upheld	N/A	Upheld: maladministration and injustice	<ul style="list-style-type: none"> • Reimbursement for the additional payments totalling over £14,000 • Reimburse the interest charged on the gross overpayment • Pay the interest on the total overpayment. • Pay the complainant £200 • Review procedures to

				ensure that you confirm the agreed charges for care with care homes, residents and their representatives
September 2018 18001410	Care and Support – East Not Upheld	N/A	Upheld: maladministration and injustice	The LGSCO reported that: “When a council commissions another organisation to provide services on its behalf it remains responsible for those services and for the actions of the organisation providing them. So, although I found fault with the actions of the care provider in overcharging, I have made recommendations to the Council.”
November 2018 18002853	Direct Payments Not Upheld	N/A	Upheld: maladministration, no injustice	Failure to arrange regular annual reviews of Miss Y’s Direct Payment account however as this did not cause injustice to Miss Y they have not given any recommended actions. They find no fault with the way we conducted the Direct Payment review, or that we asked Ms X to repay unspent funds.
January 2019 16004681	Adult Care and Support – East Not Upheld	N/A as not upheld	Upheld: maladministration and injustice	<ul style="list-style-type: none"> • Pay Mr C £1,000. This is to recognise the time and trouble • Pay Mr C £1,838.52 to correct the error made when making the back payment • Review its processes in relation to record keeping

The Ombudsman identified in their Annual Review of Adult Social Care Complaints for 2017-18 that sharing the learning from complaints is an important focus and demonstrated how their remedies seek to improve services for others and prevent the same fault reoccurring. They encouraged all councils to consider the systems they have in place to ensure learning from complaints is shared locally. Since 2010, the number of complaints and enquiries received by the Ombudsman about adult social care continues to grow. The Ombudsman will always seek to make recommendations that prevent the same thing from happening to others. Rather than focus solely on complaint volumes, they choose to focus on the outcomes of complaints investigated, and the value an investigation by them can add through the recommendations they make to remedy fault.

The Ombudsman makes recommendations to things right for the individual and improved services to others.

- Preventing injustice for many e.g. staff training, procedure change
- Remedying injustice for individuals e.g. apology, financial redress, provision of service

Learning from Complaints

Lessons Learned from Complaint Investigations			
Reference and Service Area	You Said	What we did to remedy the injustice for the individual	What we did to prevent injustice for many
101004039926 Adult Care and Support Mid	Delays in responding to additional information provided in relation to a financial assessment. Behaviour of the assessment officer.	The Carer's Assessment will be brought forward for review in January 2019 a year after the initial referral unless needs change and a request for reassessment is made earlier. Following the completion of the financial assessment any funding attributed to the Local Authority will be back paid to the date of the very first assessment. All staff to be reminded via their management structure that draft assessments can be issued if requested. The notes that taken by the Social Worker will be retrieved and either shredded or scanned into record depending on their relevance.	Adult Social Care's protocol re staff holding information at home (working at home or off sick) to be discussed as an agenda item at one of the regular the Service Manager/Head of Service Meeting. All Adult Care & Support staff will be reminded via their management structure of the importance of making appointments before visiting and making sure that people are made of aware of who is visiting. For Adult Care to consider its protocol where an employee's family member is referred to a locality team that they are part of. Adult Social Care complaint website information will be updated from the 1st October 2018 so that it is clear to the public what they can expect. Contact will be made with all Service Managers across the Adult Care Directorate requiring them to ensure that the Customer Service Promise is discussed at local team meetings and understood by frontline staff.
101004148579 Adult Care and Support Mid	No explanation has been given as to the cause of a seven month delay before a care package could be agreed Had the financial	Reimbursement for the period	Improved communication between internal departments to aid in identifying potential delays, ensuring that any known delays are discussed at regular team meetings to collectively solve problems

	assessment not been cancelled, with no explanation, the individual should have been in receipt of a care package when the total value of assets would have fallen below the threshold of £23,500		
101004089875 Provider Services – Charging and Assessment Team	Inaccurate information provided about a Deferred Payment Agreement and the viability of one. A lack of support from the Council. Non receipt of a letter. A letter of instruction was insufficient.	In the formal response letter we have apologised for the Service User feeling that they received minimal support. In the formal response letter we have apologised for not confirming a new date for the appeal after a decision letter did not reach the family in time. In the formal response letter we have apologised for being told that a DPA could not be offered, an explanation of this was given as to why this was the case.	Discussed the importance of care being taken in regard to correspondence issued from the Charging Assessment Team with the relevant Team Managers. Requested that the Team is aware that when they have to reissue correspondence that has not been received that any relevant deadline is reviewed at that time to ensure they are still allowing the full period especially in regard to reconsiderations and appeals.
101004188287 Provider Services - Direct Payments Adult Care and Support - Hospitals	The complaint relates to the bill received from a Care Agency. Individual had been charged a figure much higher than the assessed contribution amount.	Package of care has been commissioned through an Agency. Payment made to the previous Agency. Invoice sent to the family to request the client contribution be paid to Adult Social Care.	There is work ongoing with the Direct Payments team and Hospital team to ensure that the error made in explaining about the hourly rate is not repeated.
101004146682 Adult Care and Support Mid	Discharge from hospital was delayed.	In the formal response letter we have apologised for the Service User not believing the	Team Managers to be reminded of the importance of responding to requests for information and updates from Service Users and carers, and to allocate requests for

		communications were adequate.	carers' assessments or reviews promptly.
101004102928 Adult Care and Support Mid	Failed to assess individuals care and support needs within a reasonable timeframe.	In the formal response letter we have identified that we hoped the letter would reassure that it was not the intention to cause upset.	Explored a range of potential solutions that will minimise the impact of sickness in small teams on our ability to assess.
101004116146 Adult Care and Support East	No care needs review has been carried out despite numerous requests.	In the formal response letter we have apologised for the delay. We have also apologised for any distress caused. Current review of needs at the time of the complaint – the care and support plan will be discussed and agreed with the family. Implemented further protocols to manage case allocation more effectively to prevent any unnecessary delay and worry this may cause.	As part of the Team process an electronic record has been introduced for case allocation, which identifies cases based on priority and provides a reminder to allocate within set timescales. A commitment from Team Manager and Principal Social Worker to hold weekly allocation meetings to discuss cases and the priority of allocating cases.
101004230067 Commissioning	Delay in a package of care.	Secure a package of care to support individual –There is currently a temporary package in place with an agency.	Commissioning proactively addressing those communities which have been identified as being hard to source packages of care.
101004149998 Provider Services – Charging and Assessment Team	Complainant advised the Charging Team that individual's finances were sorted and they wanted to settle the account, complaint about the delay in getting this done.	The financial assessment was prioritised by the Assessment Officer concerned.	The monthly supervision sessions that Assessment Officers have with their Team Leaders will focus on any cases that have been open for more than 6 weeks and have not moved forward during that time.
101004262277 Adult Care and	Lack of responsiveness in providing a needs	The Team Manager to be reminded in supervision and a	Work is ongoing with the local teams to ensure we are able to respond to referrals in a timely way.

Support Mid	assessment for a Service User.	record to be made.	The Kemeneth project has recently commenced within the Truro Assessment Team and it has been designed to better utilise the time available to support the public.
101004216971 Provider Services – Direct Payments	Direct Payments - assessed amount is different to final bill due to the hourly rate being different. No one explained this part of the agreement to them and the explanation isn't written anywhere for them to understand.		Staff reminded that all available options must be discussed and explored with individuals to ensure that their needs are met in the most appropriate way. Ensure at the end of a Direct Payment advice meeting individuals understand the use of a Direct Payment
101004234489 Care and Support, Practice Quality Assurance and Safeguarding	Officer not turning up to meetings arranged and giving no notice.		Staff have been reminded to contact individual providers directly if they need to cancel a meeting.
101004076305 Provider Services – Charging and Assessment Team	Seven months delay between asking their query and raising complaint. Query about with whether a property could be disregarded from financial assessment.		Staff reminded of existence of check list to ensure required information is provided to manager to put the request to the service manager. Ensure all emails received are acknowledged and advise next steps. To be addressed as a training issue with team by means of a team brief.
101004222167 Adult Care and Support Mid	No advocate being given when legally entitled to one, not allowing the family to advocate on the individual's behalf, eroding the individual's support network.	The offer remains open to discuss further some of the complex issues raised by the family in order to better understand which areas of concern would be appropriate for the council to respond to.	The issues raised regarding availability of service provision are well known to the commissioning team who actively engage with the provider market to encourage a more diverse range of support options across Cornwall.
101004212286 Care and Support West	Level of service received in relation to current re-assessment and support plan review, as well as the length of time	Consulted Senior Managers about the joint funding process. Reviewed with the Management team and then discussed at	To ensure that representatives at Continuing Health Care (CHC) meetings are appropriate. To ensure that a funding agreement is sought as an interim measure whereby processes appear to be

	that this matter has been ongoing.	<p>staff meetings how we ensure appropriate representatives attend meetings and what needs to happen to ensure the any alternative worker is fully briefed and is able to make meaningful contributions.</p> <p>Response letter included an apology from the Head of Service for the worker not being able to fully engage with the meeting.</p>	delaying care and support arrangements.
101004235584 Care and Support East	Concerns about the Occupational Therapy Team.	<p>Ensure that seating needs continue to be addressed.</p> <p>Follow up with the Wheelchair service referral.</p> <p>Investigate the actions taken by the Occupational Therapy staff.</p>	<p>Team managers to be aware of the delays caused by annual leave and sick leave and where possible address these and ensure good communication with Families.</p> <p>Be aware of delays caused by admission to hospital and care becoming disjointed between health and social care.</p> <p>Continue to ensure good communication with families and Service Users.</p>
101004172843 Care and Support Mid	Money owed to a Care Home that they have to pay and the family didn't feel the individual should have been placed in a home at all and should have been allowed to return to their own property.	Advised complainant that they should send a letter with details of expenses, bank statement etc. and ask that consideration be given to waiving the client contribution.	<p>Advice to be sought on how to proceed when a client who has capacity about finances but not regarding care needs refuses to pay a client contribution prior to care being provided.</p> <p>Guidance to be issued to staff.</p>
101004146420 Adult Care and Support West	The quality of care provided by a care agency.	<p>The point regarding Direct Payment rates, taken to a monthly departmental management meeting to discuss.</p> <p>Contact with the manager of the</p>	<p>We are progressing learning via an agenda item in locality team meetings.</p> <p>We have learned that we can take steps to improve our communication and in particular from first point of contact to delivery of support.</p>

		<p>Access /Contact Centre with regards to advice provided about the timeframe given with regard to respite support</p> <p>To ensure case note recording is accurate.</p> <p>With regard to respite provision availability in Cornwall, We will be raising this with Commissioners who are responsible for such provision.</p>	<p>We have also learned that the gap in respite service and support plans should reflect respite to enable time to future plan respite and holidays.</p>
<p>101004200064</p> <p>Adult Care and Support West</p>	<p>Failure to set up a package of care following the Service User's return home.</p>	<p>Letter response included an apology and a promise that the Team are working to ensure they can return home as soon as possible.</p>	<p>Raised the issue of progress monitoring of cases that need to go to Director Level with senior managers.</p> <p>Fed back to the Team Managers that staff should not give over optimistic time scales to people and that they should be as honest as they can.</p> <p>Subject of keeping people informed on the progress of their case will be raised in the West Locality Manager's Meeting for Managers to discuss with staff in their team meetings</p> <p>We need to keep a track on the progress of high cost care package requests.</p> <p>Agreement about how often a person will be contacted about the progress on their case should be made at the outset of our intervention.</p> <p>Contact should be made even if there is no progress to report.</p>
<p>101004219816</p> <p>Adult Care and Support Mid</p>	<p>Complainant is requesting payment for work as a carer for [Service User] which they have yet to receive, and complains that they have not heard back from Team Manager.</p>	<p>Reimbursement for the missing payment has been made.</p>	<p>An update has been sent to all Social Care staff via Service Directors to ensure clarity of processes relating to the completion of a timely Carer's assessment.</p> <p>Team Managers reminded of the importance of responding to requests for information and updates from Service Users and Carers and to allocate requests for</p>

			Carers' assessments or reviews promptly.
101004199573 Adult Care and Support Mid	Concerns surrounding continuity of care when moved, delays, staff behaviour, cutting a care package, confusions around documentation.	We will ensure that staff make it clear what is daily support and what is included in an emergency plan and we will ensure this is highlighted in team meetings and individual supervisions where relevant.	We will ensure that the Benefit Assessment Team is reminded of the level of information needed in order to consider an additional bedroom requirement for a carer.
101004317332 Adult Care and Support - Hospitals	Despite stipulating at a Best Interest Meeting that [Service User] should have medically trained carers who would be able to liaise with doctors if required, Carers that arrived to support were not medically trained. Contact was made with a relative of the Service User, 'the family made a decision not to inform the relative about the Service User's deteriorating health.	A note to be put on the client record to ensure that no contact is made with [Relative]. To ensure a list of contact details is clearly displayed on the client record.	Reminder to all Social Care staff working in hospital teams, of the need to maintain clear written records of meetings and discussions. Reminder to all the Social Care staff working in hospital teams of the need to confirm consent for information to be shared with family members. To ensure a list of contact details is clearly displayed on each client record.
101004332849 Commissioning Provider responded to this complaint.	Individual is not happy about the organisation of the care.	Care provider has reviewed the rotas with the coordinator and has impressed upon them the importance of calling to advise if there is ever likely to be a delayed call.	We have requested that responses from Providers to Service Users come to the Adult Social Care Feedback Team before they are sent to individuals so that we are able to have oversight of responses.
101004345835 Adult Care and Support Mid	Social Care withdrawn without adequate notice and without being given the opportunity to appeal against the withdrawal of care.	Letter including apology for being unable to source a package of care.	Whilst the STEPS service will always be bound by the need to protect the health and safety of staff and to work within its finite resources, decisions made about ending STEPS support in circumstances such as this must also pay due consideration to the emotional wellbeing of the customer and every effort must be

	<p>Adult Social Care provided the STEPS team, a provider of temporary care, when individual required long-term care in their home.</p> <p>STEPS withdrew care without adequate notice and without any further provision.</p>		<p>made to allow adequate time for alternative provision to be sourced.</p>
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Lessons Learned from LGSCO Complaint Investigations

Reference	You Said	What we did to remedy the injustice for the individual	What we did to prevent injustice for many
17019902	Solicitor complained the Council failed to make an agreed payment to their client, relating to Company A, or provide information which will enable them to resolve a dispute over outstanding payments relating to Company B.	<p>Paid the outstanding payment.</p> <p>Provided the schedule of invoices</p> <p>Apologised for the trouble it has put her to.</p>	N/A
17006668	Overcharge relating to Care Home fees.	<p>Reimbursed the additional payments</p> <p>Reimbursed the interest the Council charged on the gross overpayment</p> <p>Paid the complainant interest on the total overpayment.</p>	Reviewed procedures to ensure that we confirm the agreed charges for care with care homes, residents and their representatives.
17004204	Complaint from relative of a resident the Council had to move from a care home. It is about conversations about the move and about the way the Council carried out a move to a new care home.	Sent a letter of apology about the distress experienced, due to the way it handled the move	Shared the final decision with all staff involved in residential care moves and Best interests decisions.
18001410	Complaint relates to a needs assessment.	<p>Apologised to Mrs X and Mr Y for its failings;</p> <p>Paid Mrs X £500 for the failure to arrange care for her son at weekends between September 2016 and March 2017</p> <p>Paid Mr Y £500 for the failure to address</p>	Considered what action we need to take to ensure we meets eligible care needs, such as by addressing deficiencies in the local market.

		the shortfall in his weekday hours in the January 2017 care and support plan	
18001046	Service user complained the Council took approximately 20 months to complete a care assessment and that they were without a care package for over a year. They also complain that the care package offered did not meet their needs, the Council failed to return their calls, and it did not handle the complaint properly. In addition, they complain that when the Council eventually arranged the package, it sent a carer to their home when they had asked it not to and this individual had not been informed of the various medical conditions. They say the Council has failed to meet its duty of care towards them and has breached their human rights.	<p>Paid £500 to recognise the distress.</p> <p>Paid £100 to recognise the time and trouble.</p> <p>.</p>	<p>Investigated why the 18-64 Team did not carry out an annual review of SU's care and support plan, and takes any action necessary to ensure this does not happen again.</p> <p>The Complaints Team sent a copy of the final decision to the Adult Social Care Team and ensure it is read by all managers who deal with domiciliary care</p>
18007718	Complaint that the Council failed to deal properly with the charges for her late relative's care home placement. The Council failed to provide clear information about charges until after and failed to enter a top up agreement with Ms X. This resulted in	Apologised to Ms X, waive the top up charge and pay £400 for the trouble.	Identified the action it needs to take to ensure it improves its working practices and complies with The Care & Support Statutory Guidance (CSSG).

	confusion and the care home overcharging.		
16004681	There was fault in the way the Council calculated Mr C's personal budget and in the way the Council calculated backdated payments. There was also fault in the way the Council dealt with Mr C's complaints. There is evidence the Council promised an investigation and management review of Mr C's complaints would take place, but it did not carry this out and denied having offered this.	<p>Paid Mr C £1,000. This is to recognise the time and trouble.</p> <p>Paid Mr C £1,838.52 to correct the error made when making the back payment.</p>	Reviewed its processes in relation to record keeping.
18007635	Service User has been without a package of care for over a year and Inconsistent advice was provided to the relative of the Service User	<p>Apologised for failings.</p> <p>Paid £6,000 and offered to pay the personal budget as a direct payment if that is what they still want</p> <p>Paid Mr C £1,000 for the loss of opportunity to access the community and take part in social activities.</p> <p>Updated Mr C's care and support plan to reflect the true cost of his care.</p>	<p>Review its procedures to remove barriers to people receiving direct payments based on the cost of their care.</p> <p>Actions are still being carried out by the Head of Business Support and Provider Services and the Service Manager for Charging and Assessment.</p>
17007723	The Council delayed providing responses to Mr X's complaints, and did not keep him updated during the complaint handling process.	Paid Mr X £250 to acknowledge the impact of fault in the complaint handling process.	Explained what steps we will take to ensure others do not experience similar significant delays during the complaint handling process.

Other Feedback

The Adult Social Care Complaints Policy implemented on 1 October 2018 specified consideration for the concerns raised to be responded to within the shortest timescale for the complainant, if the relevant Head of Service considers that the issues can be resolved by the end of the next working day to the person's satisfaction the response will be made in the most appropriate way to respond to the person. This is the end of the process and the concerns are not taken forward as a formal complaint.

Other Feedback responded to since 1st October 2018

Feedback type	Count
Concerns which have been resolved informally to the complainant's satisfaction	68
Feedback passed to other directorates	9
MP correspondence responded to during each month which we contributed to	11
Service requests	16
Signposting	18
Unreasonable Customer Behaviour contact	3
Total	125

Comments

A comment is an issue or view expressed by a customer, such as a suggestion on how we might improve our services or a request for further information or guidance. They provide invaluable feedback as to how customers perceive Council services, policies and actions of staff. Therefore, although these are not as formally dealt with as complaints, it is essential that these comments are fully evaluated and considered so as to ensure we are making any changes required to our provision, especially where common themes are established.

Number of Comments

Year	Number
2015/16	9
2016/17	5
2017/18	8
2018/19	8

Compliments

The final strand of feedback received and just as important, is that of compliments. This allows us to recognise individuals and teams that have provided a great service and to understand and celebrate the things that the Council does well. Managers are reminded regularly about the importance of sharing compliments received with the Feedback Team. The compliments that are recorded highlight important areas of work that are being conducted well. Where good practice or practice that exceeds expectation is so warmly received, it is important to see whether any aspects of that work can be transferred to other areas.

Number of Compliments

Year	Number
2015/16	128
2016/17*	40
2017/18	98
2018/19	151

*The decrease in compliments evidenced in 2016/17 is due to the transfer of the Short Term Reablement and Planning Service (STEPS) outside of the service in October 2015.

Compliments by Service Area

Service Area	Number
Adult Care and Support	118
Quality Assurance	1
Non Statutory Adult Social Services	5
Charging	2
Provider Services	15
Brokerage	3
Direct Payments	3
Safeguarding	2
Commissioning	1
Business Support	1
Total	151

Summary

The number of complaints received by the Directorate shows an increase compared to the previous financial year. The level of complaints can fluctuate when assessed monthly or quarterly (fluctuation can be caused by implementing new services or reduction of services).

What works well and what needs to improve in our complaints handling

We have revised our policies and procedures on how we respond to complaints about our Adult Social Care services. This has helped both the people we work with and our staff to be clearer about what should happen when there is a complaint. We have given staff support with how best to handle complaints. We believe that this has helped improve the quality of our responses.

By recording issues as complaint, it ensures that the person raising the complaint gets the additional rights and protections that the regulations allow. However we are now considered each concern received to establish if it can be resolved to the person's satisfaction in a more timely way. The timeliness of our responding to complaints has improved. None of our complaint investigations took anywhere close to the six months which is the expected limit in the regulations.

We have recognised the need to do better at capturing lessons learned and applying those across Adult Social Care in a more systematic way. We are currently making plans on how to do this and making it a priority for 2019/20.

Achievements during 2018/2019

- Developed, gained sign-off and implementation of a revised Adult Social Care complaints policy and operating procedure, the Ombudsman fully supported this move to a one stage complaint investigation. The procedure specifies that the Head of Service will be responsible for ensuring organisational learning takes place irrespective of whether or not the complaint is upheld as the responsibility for ensuring actions are taken to implement the learning from individual complaints sits with the Head of Service;
- A complaint action (resolution) plan template is now in use for each complaint - each case was considered on its own merits depending on the complexity, severity and scope of investigation;
- A revised tracker has been implemented to better track the implementation of Lessons Learned and action taken for reporting and disseminating learning to teams. The complaints tracker is discussed at each Head of Service meeting, and reporting to be cascaded to teams by each Heads of Service;
- Supporting guidance for investigating officers developed and made available;
- A greater focus on improving reporting, particularly around Lessons Learned from Complaints so Service Directors can develop service delivery; the Feedback Manager attends Senior Leadership Team meetings as invited in order to provide the appropriate managers with an overview of ongoing complaints and any issues which may have arisen;
- Improved communication with other public sector complaint teams to review best practice – including attendance at South West Complaints Managers’ meetings;
- Compliments feed into staff newsletter to promote good work taking place across the directorate.

Planned Activity for 2019/2020

- Continuation of the Standards Committee Working Group to look at the level of complaints and how these may be reduced; with the continuous focus on evidencing lessons learned and the actions put in place to prevent reoccurrence of the Ombudsman's upheld complaints, whether there are any trends, and evidence of systems/programs put in place or being implemented in the future to assist with the service and to reduce the level of complaints going forward.
- The continued delivery of training to services in the directorate in handling complaints, and roll out of in-house training to Service and Team Managers;
- Improve our arrangements for monitoring that we put learning from complaints into practice - Preventing injustice for many e.g. staff training, procedure change, and Remedying injustice for individuals e.g. apology, provision of service;
- Continue to develop the procedure for complaints about commissioned service providers and be able to report on these cases; by linking up contract monitoring and complaints against our commissioned providers;
- Review of the revised implemented policy and operational procedure to ensure the desired outcome is being achieved. The implementation and use of the Adult Social Care Procedure will need to be monitored to ensure that it fully addresses concerns and any fault(s) identified and remedied, so that a one stage investigation process does not lead to a higher number of complaints upheld by the Ombudsman;
- Implementation of MP, Members Enquiries and Director's Mail procedure so that all correspondence is received and coordinated by the Feedback Team and allocated to the correct procedure to respond to the subject matter in full and avoid duplication. Member Enquiries can then be reported in the 2019/20 annual report as we will be linking Members Enquiries with complaints.

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Adult Care and Support

9 August 2019

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