COMPLAINTS, COMPLIMENTS AND FOIs REPORT – ADULTS

Annual Report
1 April 2014 - 31 March 2015

1. Headline Facts for the year:
   - 93 complaints were received during the year. 8 complaints were dealt with outside the designated 15 day timescale, 80 were within the timescale (note – 5 complaints received during the reporting period were ongoing).
   - 57 comments were received.
   - 669 compliments were received.
   - 97 FOIs in total were logged concerning Adult Social Care.

2. Introduction

   This report provides a summary and analysis of the complaints, comments and compliments considered under the complaints representations procedures. It also summarises the requests to Adults services under the Freedom of Information Act and Access to Records (Data Protection Act).

   This report relates to representations and requests dealt with during the 2014/2015 financial year (1 April 2014 to 31 March 2015).

3. Complaints – Learning Points

   Local authorities value the learning provided by complaints. Complaints are unsolicited and welcome feedback and provide a valuable insight into the customer journey and information which enables Authorities to learn and improve. Councils are working to increase the profile of Learning from complaints so the Learning is captured and a culture of improvement is embedded. Eg:

   - Salford Council use a “Learning from Complaints” template which managers complete when they have investigated a complaint. Actions identified from the complaint are identified with a target date for completion.
   - Salford include learning points from complaints in the Council’s Service Plan to ensure they are not lost. Salford Children’s Services were recently inspected by Ofsted and questioned about their Learning from complaints, an indicator of the increasing profile of complaints.
   - Manchester City Council record learning from complaints in an Action Plan, in which areas for improvement are listed and the way in which the learning will be implemented, eg, Staff 1:1, Team Briefing, A change of Policy/Procedure, A change of system. Based on this model Cheshire East Council will implement an Action Plan, based on the areas of learning identified in the Complaint Investigation Record completed by managers when they have investigated complaints. The Action Plan will be considered by Senior
managers to identify a suitable lead to implement the required learning and the timescale for completion. The Action Plan template is attached.

The following is a summary of the key learning points from the areas for which most complaints were received in the reporting period. Most complaints related to Communication, Charging and Direct Payments. Although many complaints relate to financial issues such as charging or funding, poor communication is often a factor in these, e.g., a care manager may provide the service user with information about charging for respite care. Although the information has been provided, it may not have been fully understood.

Communication
19 Complaints were received concerning Communication. A number of complaints included:

- Difficulty in getting through to the Client Finance team because of issues with the Telephony system. There was a lack of clarity about which number to ring and there was no queueing facility on the Client Finance phone line. The system has now been replaced so further complaints will hopefully be avoided.
- A lack of communication with the service user and their family, particularly when there have been delays in finding a suitable placement for the service user. It is helpful if care managers provide regularly updates to families to explain the reasons for the delay.
- Inadequate information about Reablement and Respite services. There is often a lack of clarity about Reablement – its purpose and how long it is available for. There is also confusion about the financial implications of respite services. At the time they are arranged the charges for this are explained but appear not to be fully understood in some cases.
- Poor information and communication about available support when a service user has been self-funding but becomes eligible for local authority support. In some cases there has been a lack of clarity about available support and processes. In response to the introduction of the Care Act the Authority is reviewing policies and procedures in this area to ensure information about the Authority’s responsibilities is set out more clearly.

Charging
18 complaints were received concerning Charging. Issues included:

- Invoices continuing to be generated and received by the service user although their care package had ended. Care managers need to ensure care plans are closed on Paris and Controcc when care ceases.
- Financial assessments not being completed and returned by service users, resulting in them being invoiced for the full cost of care and administration costs. Care managers need to explain the importance of completing the assessment.
- Unexplained invoices being received following the death of the service user. On the death of a service user the Client Finance team recall any invoices so they can be despatched to the executor of the estate. On occasions there have been delays sending out final invoices and they have been sent without an explanatory letter.

**Direct Payments**

10 complaints concerned direct payments. A number of complaints included:

- Direct payments being used inappropriately, resulting in demands for reimbursement following the audit process. This has been exacerbated by delays in the audit process, resulting in the misuse of direct payments not being identified at an early stage. Work has been done to reduce the backlog of audits and to improve information about the correct use of direct payments.
- Direct payments not being renewed on time, resulting in payments not being received. This is due to direct payments expiring before cases have been taken off the waiting list, resulting in insufficient time to complete reviews. Care managers need to monitor waiting lists to check when direct payments are due to expire. It is hoped that the new IT system will assist with this.

**4. Complaints Statistics**

i. **Outcome of Complaints:**

Note: 93 complaints were received in the year, this is 14 down from the previous year.
ii. Complaint Response Timescales (for complaints received this year):

- Answered within 15 working days: 80
- Answered outside 15 working days: 8
- Ongoing: 5

iii. Complaints by Category of Complaint

- Other: 1
- Safeguarding: 8
- Direct payments: 10
- Care package (respite): 2
- Member of staff: 9
- Funding/eligibility: 6
- External residential care: 1
- External domiciliary care: 2
- Delays: 6
- Charging: 18
- Care Practice: 3
- Care Plan: 4
- Advice and Information: 2
- Aids/Adaptations: 2
- Communication: 19
iv. Complaints by Type of Person

<table>
<thead>
<tr>
<th>Type of Person</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Son/daughter</td>
<td>38</td>
</tr>
<tr>
<td>Service user</td>
<td>15</td>
</tr>
<tr>
<td>Brother/sister</td>
<td>13</td>
</tr>
<tr>
<td>Parent</td>
<td>11</td>
</tr>
<tr>
<td>Advocate</td>
<td>8</td>
</tr>
<tr>
<td>Solicitor</td>
<td>9</td>
</tr>
<tr>
<td>Other Family member</td>
<td>6</td>
</tr>
<tr>
<td>Other Agency</td>
<td>2</td>
</tr>
<tr>
<td>Husband/wife/partner</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: 669 compliments were received in total for the year this compares to 657 in the previous year.

4. Complaints/Compliments by Team

i. Compliments by Team

<table>
<thead>
<tr>
<th>Team</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care4CE</td>
<td>566</td>
</tr>
<tr>
<td>Client Finance</td>
<td>1</td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td>40</td>
</tr>
<tr>
<td>SMARTs</td>
<td>52</td>
</tr>
<tr>
<td>Hospital Teams</td>
<td>4</td>
</tr>
<tr>
<td>Strategic Commissioning</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: 669 compliments were received in total for the year this compares to 657 in the previous year.
ii. Complaints by Team:

- Respite Service: 3
- SLN: 2
- Respite Service: 3
- MH Reablement: 1
- CMHT Macc: 3
- CMHT Crewe: 2
- Intermediate Care: 1
- Hospital Team Leighton: 6
- Client Finance: 4
- Occupational Therapy: 2
- Hospital Team Macc: 2
- Congleton SMART: 14
- Wilmslow/Knutsford SMART: 12
- Macclesfield SMART: 10
- Crewe SMART: 6

Total Recd | Partially upheld | Not upheld | Upheld | Not pursued | Declined | Ongoing
---|---|---|---|---|---|---
Crewe SMART | 10 | 2 | 3 | 3 | 3 | 2
Macclesfield SMART | 6 | 1 | 3 | 2 | 2
Wilmslow/Knutsford SMART | 12 | 4 | 5 | 2 | 1
Congleton SMART | 14 | 2 | 7 | 2 | 1
Hospital Team Macc | 4 | 2 | 2 | 2
Occupational Therapy | 2 | 2
Client Finance | 24 | 2 | 3 | 14 | 1 | 1
Hospital Team Leighton | 6 | 1 | 3 | 1 | 1
Intermediate Care | 1 | 1
CMHT Crewe | 2 | 1
CMHT Macc | 3 | 2
MH Reablement | 1 | 1
Respite Service | 3 | 1 | 1 | 1
SLN | 2 | 2
Respite Service | 3 | 1 | 1 | 1

iii. Outcomes by Team:

iv. Comments

57 comments were received for this period. Some of these are concerns which the service user wanted to be recorded but did not wish to pursue as a formal complaint. A number related to anonymous safeguarding allegations which were followed up but could not be dealt with under the Complaints procedure.
5. Freedom of Information Requests

i. Response timescales

Note: 97 FOI requests were received in this year, this is 17 down from the previous year. 80% of FOI responses were completed on time in this reporting period, compared to 93% in the previous year. This was due to draft responses being received by the FOI coordinator very shortly before the due date, allowing insufficient time for them to be approved.

ii. Access to Record Requests

34 requests were received and logged as DP requests. In addition 178 retrospective Continuing Healthcare claims were received from Health during this period.
6. Comparative Data from 2012 -2015

i. The number of Complaints and FOI Requests received

![Bar chart showing the number of complaints and FOI requests received from 2012-13 to 2014-15.]

ii. Percentage of Complaints responded to within timescale

![Bar chart showing the percentage of complaints responded to within timescale from 2012-13 to 2014-15.]

iii. Percentage of FOI Requests responded to within timescale

![Bar chart showing the percentage of FOI requests responded to within timescale from 2012-13 to 2014-15.]

### 6. LGO Referrals

The following cases were formally investigated by the LGO:

<table>
<thead>
<tr>
<th>Complaint</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Council employee complained that sensitive information was shared with other Council staff when it was inappropriate to do so, causing distress to the complainant and family.</td>
<td>Final Decision: Upheld. Actions required by the Council: - To apologise to the complainant and to pay £250 to compensate for distress caused. - To ensure staff are reminded about the Confidentiality policy - To review situations where employees are related to service users and each other.</td>
</tr>
<tr>
<td>The service user’s father complained that information about the service user’s disabilities should have been sent by the social care team to the Council Tax team to prevent them instigating bailiff action, which caused distress to the service user.</td>
<td>Final Decision: Not Upheld. The LGO concluded that the Council was not at fault as the team was not made aware of the service user’s council tax issues so could not have been expected to pass the information on.</td>
</tr>
<tr>
<td>A complaint was investigated relating to a service user whose care is managed by a multi-disciplinary team within Cheshire and Wirral Partnership NHS Trust. The complaint concerned the service user’s placement which his mother felt was unsuitable.</td>
<td>Final Decision: Not Upheld. The LGO found no fault in the actions of the Council, the NHS Trust or the care provider.</td>
</tr>
<tr>
<td>The service user complained that she did not understand the position regarding her direct payments contribution, and as a result she owed a significant amount.</td>
<td>Final Decision: Not Upheld. The LGO decided that the Council’s failure to pursue unpaid care contributions had not caused the service user a disadvantage.</td>
</tr>
<tr>
<td>Scenario</td>
<td>Final Decision:</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>The complaint related to direct payments. The service user was assessed as requiring 74 hours care per week. The Council agreed to pay the service user’s mother as his personal assistant for 48 hours because of Working Time Regulations.</td>
<td>Upheld</td>
</tr>
<tr>
<td>The LGO asked the Council to investigate a complaint from the daughter of a service user who was no longer resident in Cheshire East. The complaint related to the daughter’s safeguarding concerns about her mother’s move to another area which the complainant feels were not properly investigated. An investigation report was completed and sent to the LGO.</td>
<td>Not Upheld</td>
</tr>
</tbody>
</table>
| The LGO jointly investigated a complaint with the PHSO made by the daughter of a service user. The complainant maintained that the Council did not take the necessary action following her mother’s discharge from hospital, did not put in an adequate care package, did not properly assess her capacity and did not carry out a follow up visit. | Upheld          | The LGO did not find fault in the way the Council assessed the service user, but recommended the following actions:  
  • The recording of Capacity to be improved via the new Care Management System so that it adequately reflects the decision made and the rationale for the decision.  
  • The Council to discuss with care providers and social workers that care providers should seek advice at an early stage when service users are refusing care interventions and their health and wellbeing is deteriorating as a result. |
| The daughter of the service user complained that a nursing home, acting for the Council, delayed telling the complainant about her mother’s declining health. | Upheld          | Actions Required by the Council:  
  • An apology to be sent to the complainant and a payment of £500 made to reflect the fact she could not see her mother before she |
| The LGO investigated a complaint with the PHSO from a service user who complained that her safeguarding concerns were not properly investigated. She also complained that appropriate support was not put in place after her discharge from hospital in line with the Council’s responsibilities under Section 117. | Final Decision: Upheld  
Action required by the Council:  
- To apologise for delays in the safeguarding investigation.  
- To meet with the service user to discuss her future needs. |
|---|---|
| The LGO investigated a complaint by two services users that the Council had incorrectly calculated their care charges and did not backdated a zero charge. | Final Decision: Upheld  
Action required by the Council:  
- To arrange a meeting with the complainants to discuss their care plans and direct payments.  
- The Council to carry out regular reviews of their care plans. |
| The LGO investigated a complaint from the husband of a service user who is in a care home. The complaint concerned allegations of financial abuse of the service user’s wife. The complainant maintained that the allegations were not properly investigated at an early stage and that there was a delay in carrying out a safeguarding investigation. | Final Decision: Upheld  
Action required by the Council:  
- The Council to apologise for the delay in the safeguarding investigation.  
- The Council to pay £450 to the complainant.  
- The Council to review its procedures for safeguarding investigations. |
| Information was requested relating to a service user who was a resident in a care home in | Final Decision: Not Upheld |
| Cheshire. The LGO investigated the actions of Cheshire Residential Homes Trust who manage the home. | There was no fault found and no action for the Council. |