

Standards Committee

21 August 2009



Complaints, Compliments, Comments and Suggestions Performance Report – Quarter 1 (1 April to 30 June 2009)

Report of Jeff Riddell, Head of Policy, Planning & Performance, Neighbourhood Services

Purpose of the Report

- 1 To provide members of Standards Committee the Quarterly report on Corporate Complaints, Compliments, Comments and Suggestions.

Background

- 2 A new procedure for dealing with Corporate Complaints, Compliments, Comments and Suggestions from 1st April 2009 has been adopted and quarterly reports were to be produced thereafter.
- 3 This paper is the first of those quarterly reports and will inform Standards Committee of performance results from 1 April 2009 to 30 June 2009. These results may not be comparable with previous years due to the changes to the new Council's structure and services delivered.
- 4 Corporate Complaints, Compliments, Comments and Suggestions are currently monitored and controlled by the Corporate Complaints Team within Customer Services in the Neighbourhood Services Directorate. They deal with Corporate Complaints across the Council, including non-statutory complaints for Adults, Wellbeing & Health and Children's & Young Peoples Services.
- 5 As members of Standards Committee may be aware, the target for dealing with Stage 1 complaints is ten working days from mid-May 2009 when CMT requested the target was changed from twenty working days. The target for sending an acknowledgement to the complainant was changed from 5 working days to 2 working days at the same time.

Summary Analysis and Overview – Performance Quarter 1

- 6 During 1 April – 30 June 2009, a total of 386 Corporate Complaints were handled by the Corporate Complaints Team; 9 for Adults, Wellbeing & Health, 3 for the Assistant Chief Executive's Office, 12 for Children's & Young Peoples Service, 96 for Corporate Resources, 222 for Neighbourhood Services, and 44 for Regeneration & Economic Development.
- 7 The greatest number of complaints made were about a failure in service delivery (222), whilst the Quality of Service (56) and Administration (52) were

the next largest types of complaint. Council Policy (23) and Staff Attitude (18) were the next largest types and these may be symptomatic of the nature of the transition to the new unitary Council and recent high-profile media coverage of specific decisions (e.g. locations of Academy schools). However, it is far too early for any trends to be highlighted and for any conclusions to be drawn. Only after a full year, when data will be comparable, will a fuller picture start to emerge.

- 8 The percentages for acknowledging and responding to complaints are slightly lower than were originally hoped for but, given the large number of changes in roles and personnel, it is believed that this situation will improve as the rest of the structure is implemented throughout 2009.
- 9 At the end of June there were 20 complaints with investigations ongoing and the Corporate Complaints Team were receiving an average of 4-5 new complaints a day at that time.
- 10 The following table shows the total number of contacts received by the Corporate Complaints Team and what type of contact they were:

Total number of contacts received in Quarter 1	561
Corporate Complaints – Stage 1	352
Corporate Complaints – Stage 2	34
Total Corporate Complaints	386
Compliments	59
Comments	72
Suggestions	44

More detailed analysis is provided in the attached Appendix A.

ADULTS, WELLBEING AND HEALTH

- 11 Members have received regular updates concerning the proposed changes to the statutory complaints procedure and this report provides details on complaints and representations in Adults Well-Being and Health for the quarter ending 30 June 2009 under the new complaints arrangements in adult social care.
- 12 *'Listening, Improving, Responding' Implementation of the Reforms to the Statutory Complaints Procedure*
Despite the delays by the Department of Health in publishing the Regulations and Guidance for the new complaints procedure, the local procedures, policy and guidance toolkit were produced for the 1 April 2009.
- 13 Complaints Officers/Managers from North Eastern NHS Trusts and Local Authorities are currently developing a protocol for co-operating on complaints where the issues span both health and social care. This will elaborate the statutory Duty to Co-operate as introduced in the new

procedure. The draft protocol will require approval and signature from each organisation.

- 14 The early signs, as the new way of working beds in, are extremely positive. The acknowledgement timescale of 3 days has been met in 94% of cases. Complainants have found it reassuring to discuss their concerns with the Complaints Officer at an early stage and participate in the development of their unique Complaints Resolution Plan (CRP).
- 15 Responsible Officers have found the CRPs very helpful in presenting concerns and desired outcomes in a clear and concise manner, which has undoubtedly assisted in the satisfactory resolution of the complaint.

Adult Social Care Statutory Complaints and Representations

- 16 During the 1st Quarter reporting period for 2009-10, 17 complaints were received, this compares with 16 Stage One complaints in the period of January to March 2009.
- 17 At the year end of 2008/09 there was once again a decrease in the total number of complaints received in adult social care than in previous years (see Table 1 below). The decrease reflects the more personalised and immediate approach to complaints resolution which results in fewer concerns being formalised into complaints.

Comparative Trends by Reporting Year

Table 1

Reporting Year	2002-3	2003-4	2004-5	2005-6	2006-7	2007-8	2008-9
Complaints	213	185	190	136	125	88	77

- 18 During the Quarter, 17 complaints were received. Of the 17 complaints 16 (94%) were acknowledged within 3 working days. One complaint was acknowledged within 5 working days. A verbal acknowledgment was given immediately, however this was not formally followed up in writing within the required timescales. This did not result in any delay in the handling of the complaint.
- 19 The Complaints Resolution Plan is developed in cooperation with the complainant. It requires discussion and agreement between the complainant and the Complaints Officer. Complainants are given the choice of collaborating on the Plan, which details the issues, the desired outcome and timescales for completion. Where they decline the Complaints Officer in conjunction with the Responsible Officer will determine timescales. Of the 17 complaints, CRPs were completed in 12 cases. In the remaining 5 cases the reasons why no CRP was completed are as follows:-
 - One complaint was received in the locality and a meeting convened immediately leading to a satisfactory outcome for the complainant.

- Two complaints were declined. In one case the issues had been heard previously in a Stage Two investigation. In the second the complainant was deemed not to be acting in the interests of an individual who lacked the capacity to give consent.
 - One complaint was linked to a corporate complaint (see A3 above).
 - One complainant declined to engage in discussions or a meeting.
- 20 In the 12 cases where a CRP was agreed, 100% were concluded within the timescale agreed with the complainant. The timescales ranged from 5 working days to 20 working days, depending on the complexity of the complaint and the parties involved. The other complaint concluded in the quarter was without a CRP but was resolved within 2 working days.
- 21 The two cases that are ongoing at the end of the quarter are those without a CRP – one linked to a corporate complaint and the other were the individual declined to engage.
- 22 Of the 13 concluded cases, apologies and full explanations were provided in each case. Details of the outcomes are in the attached Appendix B.
- 23 Poor Service was the highest category of complaint amounting to 47% with poor communication being the predominant issue in 6 of the cases. The only discernible pattern was in the complaints from mental health service users who had been incorrectly sent invoices for payment for their Community Floating Support Service. This problem arose from some initial set up issues with Oracle, which once identified was quickly rectified.
- 24 17% of the complaints were categorised as Staff Conduct. Two involved failures in communication and the recording of discussions. In one case the criticism of the SWA was unfounded but apologies were given as there had clearly been distress experienced by the complainant. In the second case a staff member has been reminded in supervision of the importance of checking people's understanding of discussions and making a record of these on case notes. In the third case comments were made about an advocate's behaviour in a letter to a carer. Whilst the offending correspondence has been destroyed the complainant has requested a meeting with the Responsible Officer and this will take place at the end of July.

Learning Outcomes

25. In this quarter the complaints that have been completed have been relatively straightforward; actions have been taken in individual cases for the resolution of the complaints. There have been a number of complaints relating to finance, linked to the cost of care, although there is no clear trend across these issues that would impact on the whole of the Service. Staff have been reminded in all cases the standards to be followed.

Compliments

26. 109 compliments were received during the Quarter, 79 about County Durham Care and Support, 28 about Adult Care – Older People Social Work Teams, 1 about Adult Care Integrated Learning Disability/Mental Health Team and 1 about Strategic Finance compared with 76 in the previous Quarter. The ratio of compliments to complaints is 6:1.
27. Clients and carers consistently praised the levels of support and care that enabled rehabilitation and a return to independent living. Staff were praised for their kindness, sensitivity and patience as residential or domiciliary carers. The Sensory Support Team received a number of compliments which particularly focused on the high quality of communication and the valuable information provided.

CHILDREN AND YOUNG PEOPLE’S SERVICES (CYPS)

Overview

- 28 49 new complaints were received for action by CYPS in quarter 1 of 2009/10. 35 complaints were resolved informally, leaving 14 to be investigated as formal Stage 1 complaints. 7 of these were statutory complaints, of which 6 related to Children in Need. Comparison with previous quarters is shown below:

	Q1 2009/10	Q4 2008/09	Q3 2008/09	Q2 2008/09	Q1 2008/09
Total new complaints	49	40	37	32	29
Total compliments	79	120	86	84	20
Comments	25	N/A*	N/A*	N/A*	N/A*

* 2008/09 quarterly figures not available; 100 comments were received in total across the year

- 29 This shows a year on year increase in the numbers of both complaints and compliments, due in part to the improved co-ordination of reporting and recording of representations across the service.
- 30 A further 8 complaints were recorded on CRM for CYPS, which were either not for CYPS, or were not actionable under the Corporate Complaints Procedure (i.e. they were the subjects of consultation or appeal processes).
- 31 The exact distribution of new formal complaints received is illustrated below:

Children and Young People's Services Complaints

<i>Type</i>	<i>Service</i>	<i>No</i>
Statutory	Children in Need	6

Statutory	Disabled Children	1
Non Statutory	Access and Inclusion	4*
Non Statutory	Extended Services	2
Non Statutory	Achievement Services	1
	Total	14

* 3 complaints were dealt with by Integrated Transport Unit in Environment Services, but were co-ordinated by CYPS due to possible child safety issues.

- 32 As Standards Committee has expressed a particular interest in being informed about the numbers and details of complaints regarding poor service and staff conduct, some examples of these are given below. 35.7% of complaints related to poor service, 14.3% to staff conduct, and 1 complaint (7.1%) to both poor service and staff conduct.

Example of Stage 1 Corporate complaint

Staff Conduct

- 33 The parents of a visually impaired child complained about a member of staff regarding the way they were spoken to at a meeting about their child, comments made to other professionals present and inferences made regarding the child's condition. Prior to this complaint, the family had benefited from the help and advice of the staff member for a period of 4 years. The parents were given reassurances about the continuing future work with their child, and were informed that the inappropriateness of the comments made during the meeting had been noted and would not be repeated. The parents confirmed that they were satisfied with this response.

Examples of Stage 1 Statutory Complaints

Poor Service

- 34 The mother of two Looked After children complained about the number of Social Workers her children had been allocated, and the number of appointments made late and/or cancelled. A meeting was arranged with the complainant and an apology was given for the gaps in service delivery, which she accepted, as matters had improved
- 35 The mother of a disabled child complained about the length of time it took for a member of staff to begin to process a CRB application for the child's prospective carer. An explanation was given which advised the complainant that the application was processed as quickly as was possible; the initial delay was because further information was required from the complainant.
- 36 The mother of 5 children who are the subjects of Child Protection Plans complained that sufficient arrangements were not made for her to attend meetings about 3 of the children, whose father she was afraid of due to past issues. Following discussion with the complainant, the matter was resolved so that future meetings would take place separately for the mother and the 2 fathers.

Staff Conduct

- 37 A private foster carer complained about the way she had been spoken to by a Social Worker, who had visited the family home to carry out an assessment following an anonymous referral about the child in the complainants' care. Although the complaint was not upheld, as there was no evidence either way, and the Social Worker's manager was of the professional opinion that the SW had carried out the assessment in an appropriate manner; the complainant was offered an apology for the fact that the SW had failed to ascertain with the complainant that she had properly understood what was being said to her in the context of a referral assessment.

Learning Outcomes

- 38 Complaints resolved in Q1 have been relatively straightforward and there have been no issues which would impact on the whole of CYPS. Where actions have been required as a result of individual complaints, these actions taken have been taken in locality offices.

Performance Information

- 39 100% of all *new* formal complaints were acknowledged within the statutory and corporate target timescales of 5 working days; and all were acknowledged within the CYPS target of 2 working days.
- 40 85.7% of statutory and 75% of corporate formal complaints at Stage 1 were resolved within the target timescales (20 working days for statutory, 10 working days for corporate).

Compliments

- 41 There were a total of 79 CYPS compliments which can be evidenced in the form of letters, e-mails, cards and completed survey forms (customer service questionnaires) received in this quarter. The main theme of the compliments received was that service users appreciated being treated with respect, which included good communication such as being kept informed/updated.

Comments

- 42 25 comments were received via completed survey forms received during Q1, relating to statutory services. Comments are noted where service users have not specifically complained about an issue, but their feed back is negative and needs to be brought to the attention of the appropriate service area(s) so improvements can be made. The main theme of these negative comments was that service users felt that they were being treated without sufficient respect, for example by not being kept informed, and feeling that they were not being listened to.

Local Government Ombudsman - Current Activity

- 43 During the quarter the Local Government Ombudsman (LGO) Advice team forwarded 1 premature complaint about a homelessness issue to the authority to deal with under our own procedures.
- 44 The Ombudsman has initiated investigations into 8 matters during the quarter relating to a range of complaints concerning:
- The impact of flooding of local drains and the standard of follow up assistance offered to the complainant
 - Siting of vents in a home following double glazing installation
 - Compulsory purchase of a property
 - Constitution requirements on the operation of officer delegations with regard to planning matters
 - Establishment of a Sure Start nursery in the vicinity of a private nursery facility
 - Sale of land
 - School admission appeal arrangements
 - Parking problems allegedly caused by Council tenants.
- 45 During the quarter 4 matters were concluded by way of local settlements (2 adult social care matters, 1 child care issue and 1 matter of anti social behaviour by Council tenants.)
- 46 The Ombudsman concluded investigations into 6 cases with findings of *no or insufficient evidence of maladministration* - 5 planning application matters and 1 adult care services matter.
- 47 2 cases relating to the granting of planning permission were determined to be *outside the jurisdiction of the Ombudsman* as they had occurred more than 12 months prior to the submission of the complaints. The Ombudsman exercised discretion and discontinued the investigation of 1 complaint relating to anti social behaviour.

Recommendations and Reasons

48. Members of Standards Committee note the report.
49. When the current reporting regime for complaints handling was introduced it was on the understanding that refinements/further development would take place as a continuing process. The views of Members as part of this process are always welcome.

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