

City of Wolverhampton Council

# Adult Social Care, Community Services and Public Health

Annual report on  
the complaints and  
representations procedures  
2014 / 2015



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CITY OF  
WOLVERHAMPTON  
COUNCIL

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## 1.0 Introduction

- 1.1 The People Directorate arranges and supports provision of a wide variety of services to support people to remain living independently in their own homes with increasing levels of choice and control over the support they receive; and when this is no longer possible, supports residential or nursing care. The department also has lead responsibility for safeguarding adults at risk of harm by others.
- 1.2 As of 31<sup>st</sup> March 2015 there were 6,055 adults of working age and older people who are in receipt of an Adult Social Care service. Wolverhampton City Council always aim to provide high quality services that meet those needs and circumstances of individuals and their families. However, given the personal and complex nature of our services, sometimes things do go wrong.
- 1.3 Public health is about improving and protecting the health of groups of people, rather than about treating individual patients. It is about helping people to stay healthy and avoid becoming ill. The Public Health team at Wolverhampton City Council commissions services across a range of policy areas, including:
  - Sexual health
  - Health checks
  - Drugs and alcohol
  - Smoking cessation
  - Weight management

Many initiatives have taken place throughout the year, one of which has included a Losing Weight Campaign which attracted the support of three councillors who have publically tackled their own weight issues by joining the programme in support for Wolverhampton's fight against obesity, and an Obesity Summit where representatives from local businesses, public and private sector organisations, health and social care, voluntary and community organisations and faith groups took part, analysing the problem and working together to develop solutions which can be implemented on a local or city-wide basis.

- 1.4 Wolverhampton's policy and procedure for responding to adult social care complaints follows the regulations which introduced a single complaints system for all health and Local Authority adult social care services in England on the 1 April 2009. Public Health complaints are dealt with in accordance with The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012.
- 1.5 The Regulations only laid down the general legal framework within which the arrangements for complaints delivery have to operate and do not prescribe the processes through which outcomes are to be delivered. However both processes consider the advice given in the Department of Health's 'Listening, Improving, Responding' practical customer care guide of which key features of the procedure include:

- The focus on a single formal response for the complaint being the only opportunity for the Council's complaint investigation to 'get it right'.
- A readily identifiable person responsible for the complaints-handling function in each organisation.
- A 12 month limitation to make a complaint.

1.6 Both the Wolverhampton Adult Health and Social Care Complaints procedure and Public Health procedure are based upon the following principles of good complaints handling, which have been drawn up by the Health Service Ombudsman and endorsed by the Local Government Ombudsman:

- Getting it right and being customer focused;
- Being open and accountable;
- Acting fairly and proportionately;
- Putting things right; and
- Seeking continuous improvement.

It is part of the statutory regulations that the Local Authority produces and publishes an annual report on complaints and compliments made by service users, carers and members of the public about social care and public health services directly provided or commissioned by the authority.

1.7 The complaints process is a mechanism to identify problems and resolve issues. If things go wrong or fall below expectation, we try to sort things out quickly and fairly. We also want to learn from our mistakes or concerns that arise and will make changes to improve services.

1.8 Analysis of information about the feedback received during 2014-15 gives Adult Social Care and Public Health an opportunity to reflect on both the quality of the services it provides to the people who use our service and consider how well it listens and responds to their needs. The numbers of complaints and compliments received provides a rich and valuable insight about the quality of our services.

1.9 Complaints and all types of feedback (including compliments) are seen as important to improve the quality and responsiveness of services. The Directorate wants service users to feel able to complain or comment based on a clear understanding of the quality of service they should expect. The complaints processes provide a mechanism to identify problems and resolve issues. If things go wrong or fall below expectation, we try to sort things out quickly and fairly. We also want to learn from our mistakes or concerns that arise and will make changes to improve services.

1.10 Equally, staff should feel free to apologise, resolve issues quickly at a local level, restore relationships and pass on lessons so that systems are improved. Where complaints cannot be resolved informally, complainants are dealt with through the formal complaints procedures, that are independent, simple, and aim to be transparent and swift, leading to appropriate redress and action on professional conduct or system failures.

- 1.11 It is part of the statutory regulations that the Local Authority produces and publishes an annual report on complaints and compliments made by service users, carers and members of the public about social care services directly provided or commissioned by the department.
- 1.12 This Annual Report on the Complaints and Compliments received by the People Services Directorate provides information on the types of complaints and compliments that have been received and managed within the Directorate between 1 April 2014 and 31 March 2015.
- 1.13 This report provides a mechanism to keep people informed about the operation of Wolverhampton's Adult Health and Social Care complaints procedure and the Public Health Complaints Procedure, and in addition, provides feedback on complaints concerning Leisure, and Community services that also come under the responsibility of the People Directorate.
- 1.14 Analysis of information about the complaints received during 2014 -15 gives the directorate an opportunity to reflect on both the quality of the services it provides to the people who use our service and consider how well it listens and responds to their needs.
- 1.15 The People Directorate has received an encouraging number of compliments. This is an indication that the widespread distribution of the complaints and compliments leaflets ensures that the public have a high awareness that comments on services are welcomed.
- 1.16 The report is divided into two parts. Part A encompasses complaints that come under the Adult Social Care and Public Health Regulated Procedures and part B covers complaints relating to those Community Services which are subject to the corporate complaints procedure and timescales.

#### The Monitoring of Community Complaints and Representations

- 1.17 The Customer Relations and Complaints Manager receives complaints and compliments for services that come under the People Directorate and ensures that they are dealt with in accordance with the relevant procedures and legislation.
- 1.18 Informal complaints made directly to operational staff or their managers and resolved immediately do not fall within the scope of the Complaints Procedure. However, so that information about responses to services can be collated for analysis; Service Managers record these and provide information to the Customer Relations and Complaints Manager on a monthly basis.
- 1.19 The work of the Customer Relations and Complaints Manager continues to focus on mediation; which involves adopting a person centred approach to clarify with the complainant the nature of the complaint and what they hope to see achieved before an investigation begins.
- 1.20 The Customer Relations and Complaints Manager has reinforced the benefits of effective complaints handling by maintaining contact with staff across all adult social care services; to raise awareness of the complaints procedure

and individuals roles in resolving complaints promptly where they arise in order to achieve an early resolution of problems.

## **2.0 Executive Summary**

2.1 Overview of Activity - The Council has continued to work hard over the past year to put customer care at the forefront of its activity. It has maintained a proactive approach to managing and responding to complaints in a timely manner, and above all has kept customers involved in the process.

(a) Volume:-

- The key message from the 2014/2015 monitoring of Adult Social Care and Public Health complaints is that there has been an increase in the number of complaints received, from 99 in 2013/2014 to 107 in 2014/2015. (See page 9).
- As at 31 March 2015 there were 3728 service users receiving care services funded by the City Council (including Direct Payments) and based on this number, the total number of complaints received represents 2.84 % of customers expressing dissatisfaction with the service they received. (See page 9).
- Pleasingly, the number of formal and informal compliments received during the year continues to outweigh the number of complaints made. In all, 202 compliments were received across adult social care services from service users or their families who wished to express their satisfaction with the service they had received. (See pages 19 and 20).
- A further 187 positive comments were received from the Welfare Rights Team by means of a customer satisfaction card, compared to 262 the previous year. (See page 19).
- There has been an increase in the number of formal complaints received by the Quality Assurance Unit from customers whose care service is provided by a private provider commissioned by Social services. (See page 17).
- Services that come under the umbrella of Community Services (Sports and Leisure, Parks and Green Spaces and the Library Services received 23 formal complaints which were all responded to within the 21 day Corporate complaints procedure timescale. (See page 21).

(b) Timeliness:-

- 78% of the adult social care and public health formal complaints received during the year were dealt with and responded to within 20 working days compared to 84% the previous year. However 54 % of these were responded to within 10 working days compared to 36%

the previous year. (See page 12)

- The average timescale to respond to complaints was 12 days.

(c) Outcomes:-

- There is a decrease in the number of cases which were upheld. For this year there have been 15 cases upheld and this equates to 17% of the overall complaints received compared to 24% for the previous year. (See page 12)
- There has been an increase in the volume of complaints received in relation to Quality of Service, where complaints in relation to this category represents 31% of the total complaints received, compared to 22% the previous year. (See page 11)
- There has been a significant decrease in the number of complaints concerning conduct and attitude. This represented 3.78% of the total number of complaints received compared to 25% in the previous year. (See page 11).
- Over the period April 2014 to March 2015 there were 5 complainants who remained dissatisfied at the end of the Stage 1 local resolution process and were advised of their right to have their complaint considered by the Local Government Ombudsman. (See page 16).

## **PART A**

### **3.0 The Adult Health and Social Care Formal (Local Resolution) Complaints Process and Procedure and The Public Health Complaints, Compliments and Comments Procedure**

3.1 There are two stages to the processes for dealing with formal complaints:-

- **Stage 1 – Local Resolution**
- **Stage 2 – Local Government Ombudsman**

#### **Stage 1 – Local Resolution**

3.2 When complaints are received by the Complaints Section, they are acknowledged and the Customer Relations and Complaints Manager makes sure with the complainant there is a clear understanding of what has gone wrong and what the person making the complaint would like to see happen to put things right. Then it is passed to the relevant manager to investigate the concerns and see what action can be taken to resolve the problem.



- 3.3 The focus of the complaints handling process; through which outcomes are delivered is to:-
- Make complaints person focused;
  - Treat all complaints according to their individual nature;
  - Focus on swift local resolution by looking closely at the complainants desired outcomes;
  - Have a coherent way of handling and learning from complaints that span across social care and health.
- 3.4 To performance manage the complaints resolution process; a 10 day departmental target timescale was agreed. This can be extended whenever necessary, with the agreement of the Customer Relations and Complaints Manager, to ensure the focus remains on resolving the complaint.
- 3.5 If the final response from the Council has not served to resolve a complaint to the satisfaction of the complainant, then he or she is entitled to take their complaint to the Local Government Ombudsman to review the way their complaint has been handled by the Council.

## **Stage 2 – Local Government Ombudsman**

- 3.6 The Local Government Ombudsman advice team provides a single point of contact for all enquiries. The Ombudsman does not normally consider a complaint unless a council has first had an opportunity to deal with the complaint itself.
- 3.7 Those people who fund their own care, or arrange their own personal adult social care directly with a private care agency using funding provided by the Council, now have the option to contact the Ombudsman themselves.

## **4.0 Statistical Analysis of Complaints**

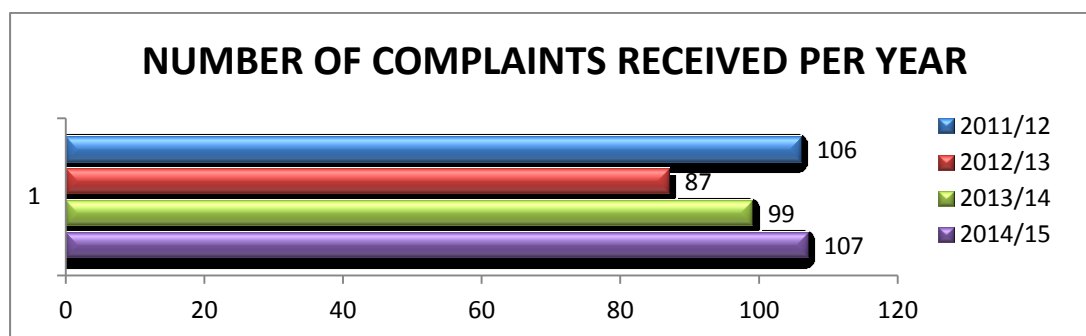
### Number of Stage 1 Complaints and Mediations Received

- 4.1 As at 31 March 2015 there were 3728 service users receiving care services funded by the City Council (including Direct Payments) and the total number of complaints received represents 2.87% of customers expressing dissatisfaction with the service they received.

This represents an increase in the number of service users expressing dissatisfaction during 2014/2015; as compared to 2013/14 when this figure was 2.61%.

- 4.2 The majority of complaints are dealt with at Stage 1; by Team Managers, Heads/ Deputy Heads of Service, and by the Customer Relations and Complaints Manager to the satisfaction of the person making the complaint.

**Figure 1: Complaints received by Adult Health and Social Care and Public Health Services**



4.3 As can be seen in Figure 1: Complaints Received; 2014/15 saw an increase in the number of complaints received, 107 compared to 99 the previous year. This however is consistent with the volume of complaints received in 2011/12 where 106 were received.

Last year's report specifically related to Adult Social Care and this report is a combined report. It is therefore noted that out of the 107 complaints received, two related to Public Health Services/Functions.

4.4 The mechanism for calculating the volume of complaints received has changed this year to include cases which have been screened out deemed outside of jurisdiction.

Out of the 107 complaints received, 11 could not be dealt with as complaints as they necessitated being transferred to be investigated under the safeguarding vulnerable adults' procedure due to the nature of concerns raised.

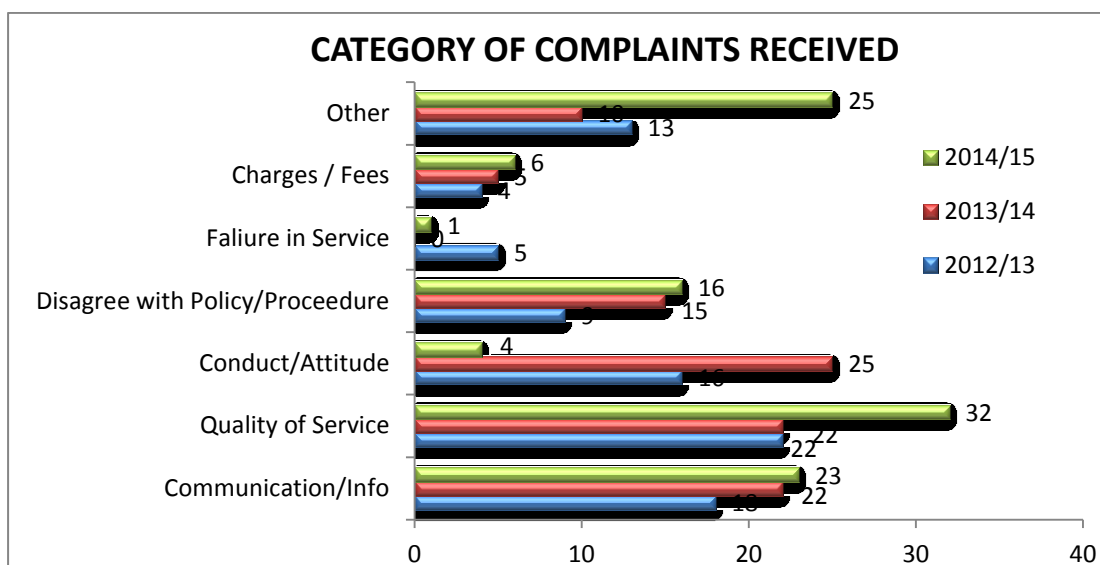
This actually indicates that the volume of complaints directly relating to adult social care or public health functions has experienced a reduction in volume this year. (96 cases compared to 99 for the previous year).

4.5 The complaints team received a further 42 complaints that, after initial enquiries, were found to fall outside the jurisdiction of the community directorate and these were redirected appropriately or were able to be resolved without going through the formal procedures.

#### Categories of Complaints Received

4.6 Figure 2 below details the nature of complaints received; including where information is available, those received about services commissioned by the department from independent agencies.

**Figure 2: Category of Complaints Received**



4.7 Due to the small numbers of complaints received, certain categories have been grouped together as 'Other'. The categories contained within the 'Other' figure are: Breach of Confidentiality, Delay in Service, Health and Safety, Damage/Loss, Neglect, Refusal of Service, Request for Service, Concern, Access, changes in Policy, Cleanliness, and Discrimination. A full detailed list of the category of complaints is shown at **Appendix 2**.

4.8 Previous years' analysis of complaints activity indicated that conduct/attitude was the top category followed equally by communication/information and quality of service. This year however has seen complaints relating to conduct/attitude dramatically fall from 25 cases the previous year to four cases in 2014/15. The overarching category this year is quality of service.

4.9 Complaints received in relation to residential care homes or care provided in service users homes are shared with the Quality Assurance and Compliance team for monitoring purposes.

Disagreement with Policy/Criteria

4.10 Many of the complaints in this category disagreed with a policy or criteria relating to a review or an assessment which has taken place. Where possible, the assessment was reconsidered, following disagreement however some complainants still remained unhappy and had recourse to the formal complaints procedure.

4.11 Conduct and Attitude

This year has seen a dramatic decrease in the number of cases relating to conduct/attitude, where 4 were received compared to last year's figure of 25.

Complaints relating to the conduct/attitude of staff represented 4% of all complaints received compared to last year's figure of 25%.

- 4.12 Many complainants described feeling dismissed by staff; or experienced a shortfall in compassion; and a common thread in most complaints was the tone and manner of a staff member towards the complainant.
- 4.13 Out of the four cases which were in relation to conduct/attitude, three were upheld and the fourth was transferred to be dealt with within disciplinary procedures.
- 4.14 It is critical that learning from complaints of this nature is embedded in staff supervision and feedback mechanisms.
- 4.15 The Complaints Manager has a pivotal role in working with Managers to decide when Social Workers and/or Team Managers cross the line from directness or rudeness, and briefs Senior Managers on a case by case basis, particularly if trends or patterns become apparent, in order that issues may be taken up in supervision when necessary.

#### Quality of Service

- 4.16 This year has seen a considerable increase in the volume of complaints which are categorised as Quality of Service (32 cases compared to last year's figure of 22). This equates to 30% of the total complaints received compared to 22% for the previous year.
- 4.17 Nine of the complaints relating to quality of service were in respect of independent external providers. One of the complaints was referred to the health authority as the nature of the complaint came under their jurisdiction.

#### Communication/Information

- 4.18 The second highest single category was lack of communication/information, where 23 complaints (or 21 %) were received, spread across the majority of service areas. This included service users experiencing no response to requests for information, poor communication between agencies and respective communication with clients and families.

Complainants have said that they want to be kept informed, to meet staff face to face when there are problems and to receive outcomes in writing.

- 4.19 Complainants have said that they want to be kept informed, to meet staff face to face when there are problems and to receive outcomes in writing.

#### Breach in Confidentiality

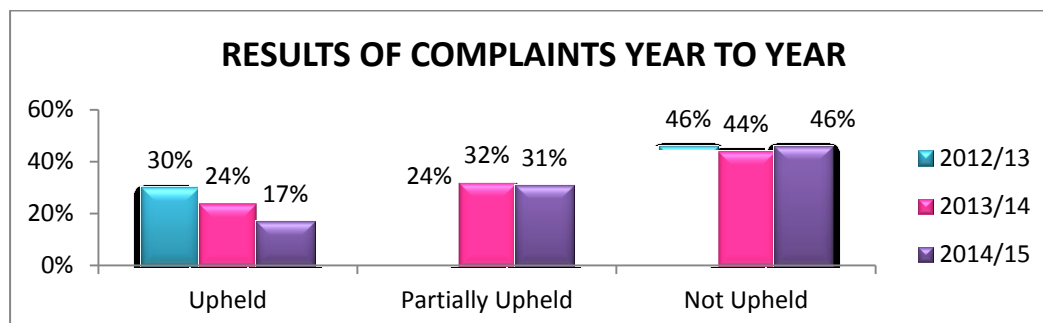
- 4.20 This year has seen a one case relating to breach in confidentiality and this is consistent with the previous year where one was also received.

#### Complaint Outcomes

- 4.21 As can be seen in Figure 3, below; the volume of complaints upheld in 2014/15 is lower than in 2013/14 (representing 15 cases); whilst the number partially upheld has decreased slightly and those not upheld has increased.

Overall 48% of complaints investigated identified areas where improvements to social work practice and/or service provision could be improved.

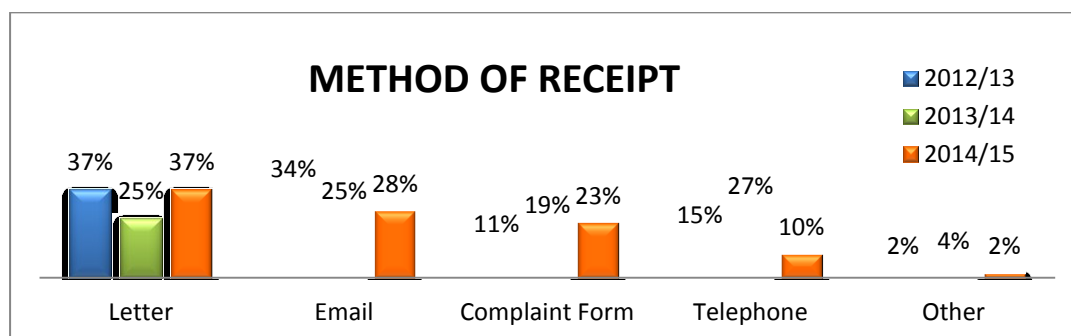
**Figure 3: Outcomes of Complaints (3 years comparisons)**



Method of Receipt

- 4.22 Previous years have shown that the preferred method of making a complaint was been by firstly by letter and secondly by email.
- 4.23 This year there has been a considerable decrease in the volume of complaints made by telephone, with the volume representing 10% of all overall complaints received compared to last year’s figure of 27%.

**Figure 4: Method utilised to make complaint**



Complaint by Service Area

- 4.24 Figure 5: Volume of Complaints versus Service provides an overview of the number of complaints received by service areas; whilst **Appendix 1** details the number of complaints received per team.
- 4.25 In 2014/15 the team receiving the most complaints (15) was from external providers.

This is an indication that more people are dissatisfied with the provision of external services and then contact the local authority to seek a possible resolution on their behalf.

The most significant increases in the number of complaints received are as follows:

- Merry Hill House – 6 complaints, where 1 had been received the previous year
- Disability Team where 11 complaints were received compared to 7 in 2013/14.
- Corner House – 7 complaints versus 4 received in the previous year;

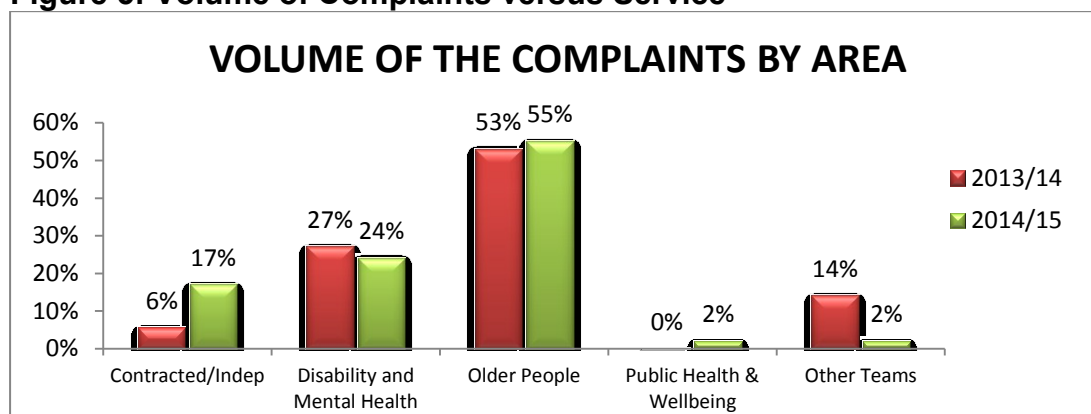
4.26 The teams experiencing the most significant reduction in the number of complaints received were:

- Commissioning Team - from 6 complaints in 2013/14 to 2 in 2014/15; equivalent to an 66% decrease
- Intake Team – from 3 complaints in 2013/14 to 1 in 2014/15; equivalent to a 66% decrease

4.27 In general complaints concerned the outcome of people’s assessments; decisions about their eligibility for services; and the manner in which their financial assessments are handled.

The table below provides a summary of the full chart shown at Appendix 1.

**Figure 5: Volume of Complaints versus Service**



Timescales for Investigation of Complaints

4.28 Whilst timescales for responding to complaints are not statutorily prescribed, good practice dictates that they must be as short as reasonably possible to allow for effective consideration. Departmental guidelines require managers to respond to complaints within 10 working days, wherever possible.

4.29 Timeliness of complaints management by investigating officers is monitored; to ensure departmental procedures and timescales are met. To support this process Service Directors and Service Heads receive a weekly progress report which informs them of any overdue responses. This process enables senior managers to ensure that delays are kept to a minimum.

4.30 In 2014/15; there was an 50% increase (see figure 6) in the number of

complaints being responded to in 10 working days, and this could have a bearing on the fact that the volume of complaints resolved between 11 to 20 days has decreased from 48% in 2013/14 to 24% in 2014/15.

- 4.31 The average timescale to respond to a complaint was 13 days.
- 4.32 Whilst some delays in managing a complaint are unavoidable, due to complexity and/or the need to interview front line staff; any process can only be fully effective if sufficient priority is given to dealing with complaints.

The time taken by managers to investigate the circumstances of some of these complaints can exacerbate the situation and can lead to lack of timeliness of response becoming a secondary complaint in its own right.

**Figure 6: Timeliness of response to complaints**

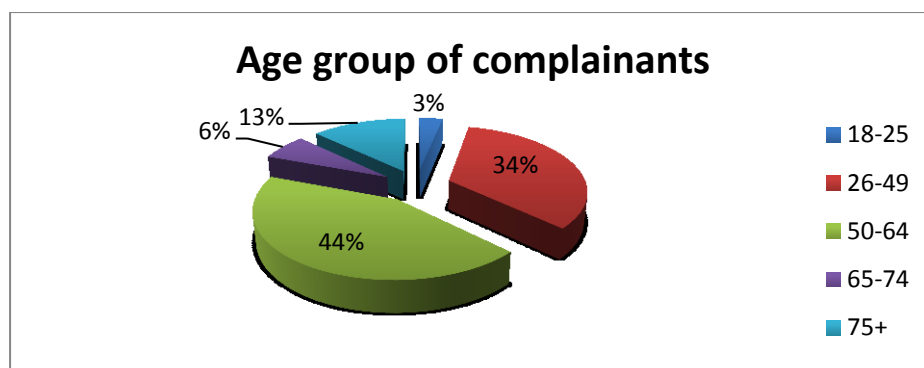


- 4.33 In order to ensure a timely response to investigations, a formal escalation plan has been introduced to ensure that non-compliance to the complaint procedure timescales results in intervention from senior managers and assistant directors (where appropriate).

Equality Monitoring of Complaints

- 4.34 Of the 106 complaints received, only 55% of complainants gave details of their ethnicity. From those identifiable, it was also noted that twenty five were from males and thirty five were from female service users.
- 4.35 There has been a decrease in the number of complainants who have chosen not to state their ethnicity; 47 compared to 56 in the previous year. This decrease has been largely due to changes made to the complaints online recording facility to ensure ethnicity data is captured at the point of making a complaint.
- 4.36 Whilst Wolverhampton had 35% of its population, as at 2011, who identified themselves as Black, Asian and Minority Ethnic (BAME) the percentage of complaints which were received from this group represented 34% of the total number of complainants received compared to 29% the previous year.
- 4.37 In terms of disability from 106 cases received 37 (35%) identified themselves as having a disability. This compares to 21% of Wolverhampton’s population whose day to day activities are limited somewhat due to illness or disability.

**Figure 7: Age group of complainants (%)**



- 4.38 The complaints received were representative throughout a wide range of ages however 42% chose not to declare their age group. From those whose age was identifiable, the largest groups to complain were the 50-64 and the 26-49 age groups where each group's complaints represented 44% and 34% retrospectively.

#### Stage 2 – Local Government Ombudsman

- 4.39 In the event that the complainant is dissatisfied with the outcome of their complaint at Stage 1; they are entitled to progress the complaint to the Local Government Ombudsman. During 2014/15 five complaints progressed to the Local Government Ombudsman.

Case 1 – Completed full investigation – regarding the failure to hold an urgent unscheduled review of the needs of the service user it had agreed to conduct following a complaint made by a relative. This caused uncertainty for the family who felt more could have been done prior to the death. **LGO Final Decision** – The Council failed to undertake the review it promised. Fault was found however there was no fault with the safeguarding investigation undertaken. An apology was given and this was considered a suitable remedy.

Case 2 – **Completed Full Investigation** - Regarding quality of care for spouse, failure to carry out safeguarding investigation and failure of care package in place. **LGO Final Decision:** There was no fault in the way the Council carried out a safeguarding investigation. There was also no fault in the way the Council dealt with the complainant's husband's discharge from a care home.

Case 3 – **On-going Investigation. No decision yet** – This was in relation to a family who believe that the council failed to provide sufficient information regarding charges following the placement of their mother outside of the boundaries of Wolverhampton. They complained that the council or the Clinical Commissioning Group should have paid the fees prior to funding being agreed.

Case 4 – **Completed Full investigation** was undertaken regarding a decision not to fund an adult placement, and refusal to change the social worker. The



complainant detailed that the complaints procedure was not suitable as it should be a three stage process which he was familiar with elsewhere. **LGO Final Decision** - There is no fault with the Council's decisions, and the Council's complaints procedure complies with current regulations.

Case 5 – On-going investigation. Draft Decision - Regarding a safeguarding investigation including the unsuitability of original placement. This never went through the formal complaints procedure. **LGO Draft Decision** – The Council responded to the concerns. There is no evidence that it failed to investigate the safeguarding referral properly as far as it could once the care home had closed. No fault found.

The increase in cases in this area of activity can be attributed to changes made to the complaints management process which provides further clarity and signposting for dissatisfied customers. Information provided to complainants is now more detailed and the process more transparent.

#### Joint Health and Social Care Complaints

- 4.40 The Complaints' Regulations places a duty on local authorities and health bodies to co-operate in respect of complaints about cross boundary services; in order that a single co-ordinated response can be given to the complainant, where complaints span health and social care organisations. A joint working protocol is in place between Wolverhampton City Council (WCC) and the Royal Wolverhampton NHS Trust and complaints that span services are handled in accordance with that protocol. A local protocol is also in place between the local authority Safeguarding Adults service and the Royal Wolverhampton NHS Trust which identifies when a service user is at risk of harm, and this triggers an alert being made under the Wolverhampton Safeguarding Adult Boards safeguarding procedures.
- 4.41 During 2014/15; 1 complaints were received that required a coordinated response from Social Services and The Royal Wolverhampton Hospital Trust or the Black Country Partnership Foundation Trust.

#### Complaints about Independent Care Agencies or commissioned services

- 4.42 The Care Quality Commission's (CQC) regulatory framework places a requirement on all registered health and social care provider organisations to have in place, simple and clear arrangements for handling complaints and to be able to demonstrate at reviews, the extent to which the service has improved as a result of complaints. The CQC also has responsibility for overseeing the interests of people detained under the Mental Health Act. It combines the work of the Healthcare Commission, the Commission for Social Care Inspection and the Mental Health Act Commission.
- 4.43 The National Health Service and Community Care Act 1990 enabled Councils to purchase services from independent third sector providers. The purchased services include residential and nursing home care for adults, domiciliary care and day care for adults. Complaints about social care services funded by the local authority, but provided by a private provider are covered by the Health

and Social Care Complaints Regulations 2009.

- 4.44 In order to ensure that these services are of a high quality and that good standards of service are maintained, they are monitored for compliance by the Council's Contracts Officer, through service specifications and the monitoring of contracts.
- 4.45 Complaints and representations are valuable forms of feedback about the services we provide or commission and they are used to influence service commissioning decisions and to shape discussions with service providers.

Where the Local Authority is responsible for the original needs assessment that led to a placement with a purchased service, the complainant has recourse to the Council's statutory complaints procedure where they have exhausted the provider's complaints process.

- 4.46 A total of 16 service users complained about services purchased by the Authority in 2013/14; as compared to 6 complaints received in the previous year.
- 4.47 This represents an increase on the previous year of customers contacting the Council directly rather than approaching their service provider in the first instance. Many of these cases have been because the complainant was not happy with the response they received from the provider in the first instance.

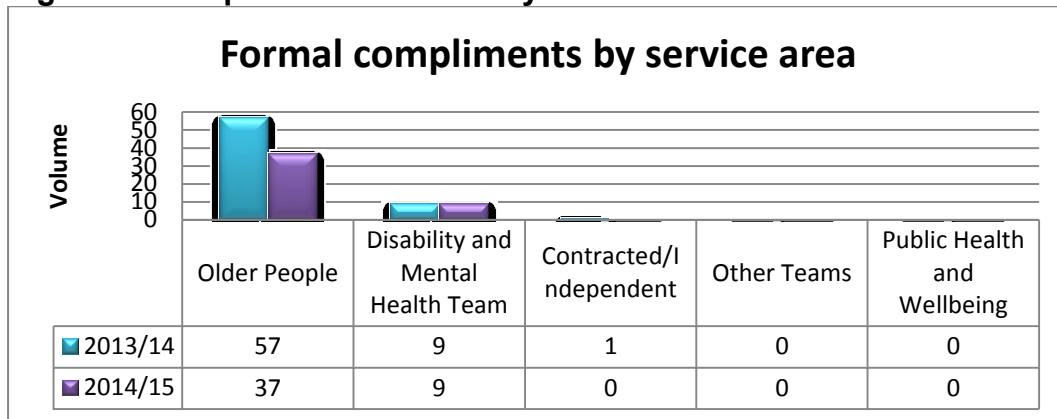
## **5.0 Compliments**

### Number of Compliments Received by Service Area

- 5.1 The Directorate receives many compliments from people who wish to record their appreciation of the efforts made by staff in dealing with them or their relatives. It is important that people have a means of letting the Council know when they have had a positive experience.
- 5.2 When a compliment is received, it is acknowledged and recorded for monitoring purposes before being passed to the member of staff and manager of the service being complimented.

Where services receive compliments directly from service users these are recorded by the service and sent to the Safeguarding and Quality Assurance Service. Learning from compliments influences the way in which the services are provided and delivered.

**Figure 8: Compliments received by service area**



5.3 The majority of compliments received were to acknowledge the help and support service users have received from staff. The Welfare Rights team use a customer satisfaction card for capturing customer feedback on their service and 187 responses were received by this means which all gave positive feedback.

Merry Hill House provides respite accommodation for persons who require nursing or personal care. One relative detailed her experiences:

*“I cannot praise the staff enough. They all acted in a caring and professional manner and were very supportive to us all. They are providing a service Wolverhampton City Council should be proud of and recognise”.*

The relative of another service user who attended Blakenhall Community Resource Centre detailed:

*“I would just like to express my thanks to all the staff at Blakenhall Resource Centre who looked after my husband so well during his three month stay there. They became very fond of him and coped professionally with his overall care in often difficult circumstances due to his Alzheimer’s disease”.*

5.4 Despite difficult times with government funding cuts and budget savings plans, the Local Authority do realise the need to keep it’s customer’s fully informed and at the forefront of their consideration.

In recognition of this, a series of structured sharing events were undertaken during the year to provide information to service users who employ Personal Assistants. These were arranged to provide a better level of understanding in relation to funding cuts and the implications to individuals.

A development director for one of the charities who attended a session wrote to detail:

*“The employee led a small panel of service providers and Council staff. She dealt calmly with an array of difficult questions from a mixed audience. Myself and my colleagues were equally impressed with the way she skilfully maintained control without undermining the efforts of those present to express their anxieties”.*

- 5.5 Compliments are an important way of providing the Council with information about the way services are being experienced by vulnerable adults and this area of work needs further development to understand how customer satisfaction can be meaningfully measured across adults social care services.

#### Equality Monitoring of Compliments

- 5.6 The importance of dialogue with the City's minority ethnic communities about the Department's services is recognised. The activity is intended to encourage compliments as well as complaints about the Department's services. This is in order to ensure that services continue to develop in ways that are sensitive to the needs and aspirations of these groups.
- 5.7 From the 46 formal compliments received 72% were from those who identified themselves as White British, 24% of their ethnic origin was unknown, 2% identified as West Indian, and a further 2% identified themselves as Indian/Asian.

#### Monthly Monitoring of Informal Compliments and Complaints

- 5.8 Wherever possible the authority, likes to offer service users and their representatives the opportunity to make a comment, complaint or compliment informally to front line staff. These are recorded and notified to the Customer Relations and Complaints Manager on a monthly basis.

Service users and their families take time to verbally make a compliment or in writing. Many show their gratitude by the donation of small gifts which are shared amongst service users. During 2014/15 a total of 156 informal compliments were received compared to 246 in the previous year.

- 5.9 Front line staff received 12 informal complaints which were resolved immediately; which in some cases resulted in a re-assessment of service user needs.

## **PART B**

### **6.0 Community Services**

- 6.1 We all need places for relaxation and escape, for exercise and recreation, and our parks and green spaces, libraries and leisure services provide this. They also help to build a sense of community. Green spaces near our homes give us valuable places to get to know our neighbours.

Councils face unprecedented budget cuts, and the future of non-statutory services are at risk. There has been a need to review the services provided which are not statutory and where possible make savings, whilst maintaining a level of service and accessibility for all.

It is not surprising therefore that sometimes however things go wrong and people become dissatisfied with the service they have received or the service that will no longer be provided.

## 6.2 Complaints Procedure

### a) Stage 1 – Local Resolution

The complaint is received and logged and sent to the appropriate manager to be investigated. The complaint is then tracked until the complaints process is completed. The timescale that applies for a response to be sent to the complainant is within 21 days.

### b) Stage 2 – Unresolved complaints

Where the complainant is not satisfied with the response they receive from the local investigation, the complaint will be passed for further consideration to the Council's Corporate Complaints Co-ordinator who will review how the complaint was handled and whether the final response was justified and whether there are grounds for an appeal. If the Council has not resolved the complaint to their satisfaction, the complainant can contact the Local Government Ombudsman.

## Monitoring of Community Services Complaints

6.3 Complaints about the People Services in the Directorate in 2014/15 are dealt with under separate arrangements which are not prescriptive, but follow Local Government Ombudsman advice and guidance about good administrative practice.

6.4 The Council's corporate complaints procedure applies to complaints made about community services (Sports and Leisure, Parks and Green Spaces and Library service) and the timescale for a response to be sent to the complainant is within 21 days.

6.5 The council and its partners are committed to promoting and providing access to a wide range of leisure facilities, events and activities across the borough.

6.6 Methods of obtaining customer feedback is more generally used in these services to enable managers to have an insight as to how these services are viewed by customers, and how to improve service delivery.

## **7.0 Statistical Analysis of Complaints**

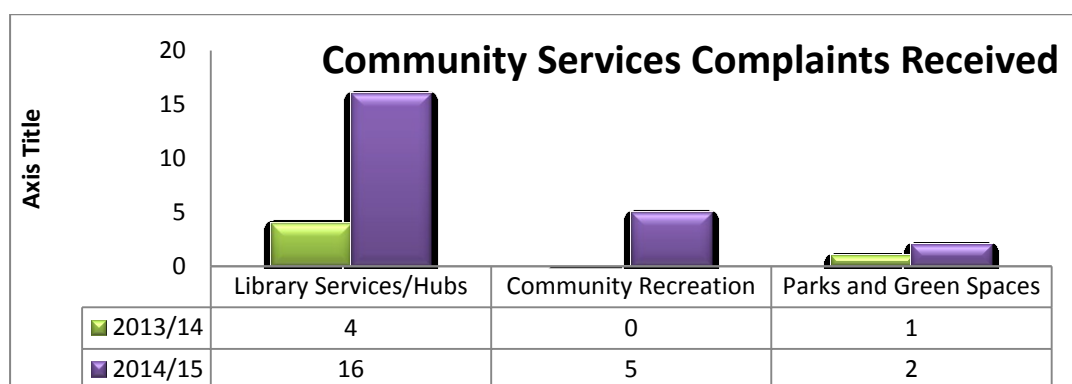
### Number of Stage 1 Complaints and Mediations Received

7.1 The majority of complaints for the Community Services (Sports and Leisure, Parks and Green Spaces and Library service) were dealt with at the point of contact with services, with very few needing to come through the Customer Relations and Complaints Manager as a formal complaint.

- 7.2 Wolverhampton currently has 7 main parks across the City (one of which includes a Farm) and two nature reserves.
- 7.3 All of the parks and green spaces and leisure services attract a high level of footfall, and considering such high volumes of service users, it is pleasing to see that the volume of complaints for the community services is relatively low in comparison.

Complaints received by Service Area

- 7.4 During the year 23 complaints were received and recorded for Community services, compared to 13 the previous year. It has to be noted however that due to operational changes of structures within Wolverhampton City Council, the management of complaints for the leisure centres has now moved to the corporate complaints team and as such has had an impact on the statistical information shown in this report.



- 7.5 The main problems faced by libraries over the last 12 months has been responding to customer concerns regarding reduced opening hours and the challenge of keeping all service points open as a result of reduced levels of staffing. In order to alleviate this pressure a number of actions have been put into place.

These include an increase in the number of volunteers and a re-designation of staff hours in order to create agency hours that will be used to cover staff leave and sickness absences.

- 7.6 Over the last 12 months Libraries have been heavily involved in the provision of Information and advice requirements set out in the Care Act 2014. Libraries have been providing information for many years so it is a natural fit for them to play a vital role in facilitating access, understanding, co-ordinating and making effective use of other information and advice sources (statutory, voluntary and private sector).

An Information and Advice Strategy and Action Plan has been written which firmly cements libraries commitment and involvement in this.

- 7.7 Within the city of Wolverhampton, across all of library services, 591,713 people have attended a library at some point during the year. From this volume of visitors, 30,111 have borrowed one book or more.

7.8 The number of complaints received for libraries/hubs (16 cases) is insignificant when compared to the number of service users accessing the facilities.

Category of Complaints Received, Complaint Outcomes and Timescales

7.9 Last year saw significant changes for libraries which resulted in an increase in complaints from service users. These included:

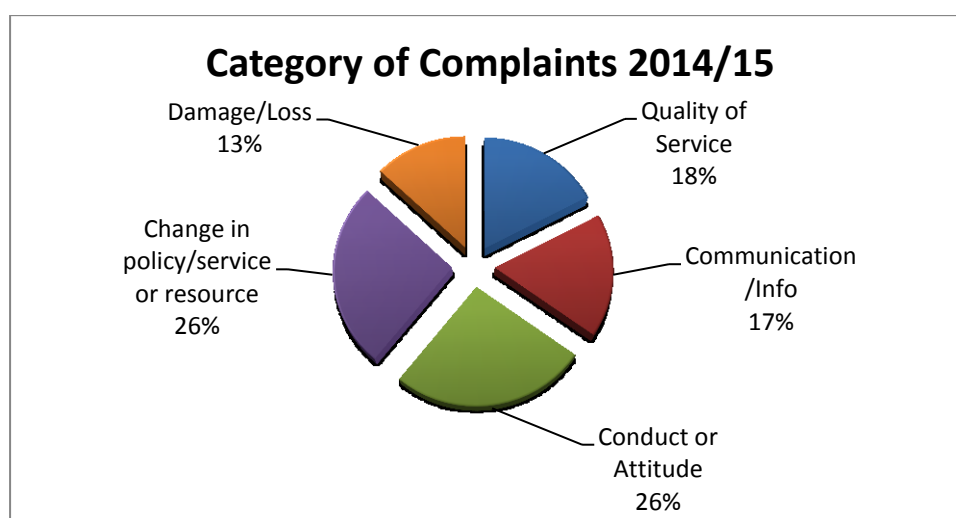
- Several complaints about changes to opening hours (some library opening hours were reduced to 15 per week).
- Disagreement with closure of libraries for the creation of community hubs.
- Conduct and attitude of staff
- Quality of service or reduced Facilities

7.10 Sixteen complaints were received for the library services. Six of these were specifically about the opening times or closures of the libraries (Change in policy/service/resource), four in relation to quality of service, 3 relating to conduct//attitude, 2 communication/information and one about damage/loss.

7.11 Eight of these complaints were upheld, three partially upheld, 3 not upheld, 1 subject to disciplinary procedures and one withdrawn. Those cases which were upheld related to changes in policy/service/resource.

7.12 Complaints in respect of Community Recreation (5) related to Conduct (2), Communication (2), and Damage/Loss (1). All of these were substantiated.

7.13 Parks and green spaces received 2 complaints this year and one related to Conduct/Attitude which was upheld and the other was outside of the jurisdiction of the local authority.



7.14 Of the 23 complaints received 20 were made by females and 3 were from males. There is insufficient ethnic monitoring information provided by the

complainants to enable a meaningful analysis to be undertaken.

- 7.15 All of these complaints were dealt with within the 21 day required timescale. Unfortunately it has not been possible to provide any meaningful analysis of ethnic origin of complainants as many of the complaints were received from service users by email.

#### Stage 2 – Corporate Complaints Review

- 7.16 There were four cases which went through the Stage 2 corporate complaints procedure for review by the corporate complaints manager in this reporting period.
- 7.17 These related to complaints which did not fall under the adult or public health statutory procedures but did however fall under the jurisdiction of service areas in the People Directorate.
- 7.18 One of these was upheld and it related to a customer receiving a carelink invoice for her mother who is now deceased.

### **8.0 Compliments (Informal and Formal)**

- 8.1 No details are available concerning the volume of compliments (both formal and informal) or informal complaints. This is due to changes in the jurisdiction or management of complaints. The responsibility now sits outside of the people directorate.

## **PART C**

### **9.0 Adult Health and Social Care, Public Health and Community Services Developments of Policies and Procedures**

#### Staff Training in Managing Complaints

- 9.1 The Health and Care Professions Council (HCPC) codes of practice require the directorate ensure that its staff are properly trained and supported to meet their professional obligations; these include a duty to promote service user rights. It would be good practice to ensure that this includes keeping service users fully informed of the complaints procedure and to assist service users with access.
- 9.2 Advice and support was available to Managers and staff with regards to complaints during the period of this report. This was done via one to one work with managers on specific complaints through to general presentations to whole teams on Wolverhampton City Council's Community compliments, comments and complaints procedures.
- 9.3 Ensuring the availability of experienced managers to investigate complaints thoroughly at Stage 1 will negates the need for the escalation to stage 2 of the complaints procedure where the complainants go to the Local Government



Ombudsman.

- 9.4 Regular training is provided and is available to all staff in adult social care and community services and this will continue to be provided, in particular through regular attendance at manager's meetings, individual training sessions and mediating with managers and complainants.

#### Networking and Sharing Policy and Practice

- 9.5 It is important to continue to network, share practice and contribute to Regional policy and practice.
- 9.6 On a quarterly basis, the Customer Relations and Complaints Manager attends the West Midlands Complaint Managers Forum which is attended by other complaints managers of social care services. Representation of this group is also made at the regional and national levels.
- 9.7 In addition to this The Customer Relations and Complaints Manager also attends, on a regular basis, the West Midlands Complaint Officers Forum which in addition to social care complaints managers includes complaint managers from the NHS.
- 9.8 Both networks aim to raise standards for complaints management across the region to promote consistency of best practice and to provide a source of mutual support.

### **10.0 Learning from Complaints**

- 10.1 The statutory procedure requires that the annual report should demonstrate learning and service improvement, including changes to services that have been implemented.
- 10.2 'Learning from complaints' is an increasingly important part of the authority's philosophy and managers responding to complaints/representations are encouraged to identify any shortcomings within the service.
- 10.3 In a service striving for excellence, there is no room for complacency and where there is an open culture of reflective learning; complaints can at best be used in the design, delivery and improvement of services, as well as highlighting concerns for the safety and welfare of adults, young people and families.
- 10.4 Effective complaints procedures can help the whole authority improve the delivery of services by highlighting where change is needed.
- 10.5 The Complaints Team ensures that lessons learned from complaints are highlighted and fed back to improve service delivery. Lessons learnt from complaints are considered by the Community Directorate Management Team in quarterly monitoring reports. For example complaints investigations have highlighted the need to review policy guidance.

- 10.6 An action sheet is completed by managers following the resolution of a complaint to capture the learning outcomes. These action sheets are analysed in order to compile a learning log which can be shared across the organisation. There are a variety of ways this learning is embedded into service improvement, these may include:
- Through individual staff One to One supervision sessions;
  - Employee Performance Review Scheme (EPRS);
  - Cascading lessons through team meetings;
  - Issuing of written instructions;
  - Introduction or review of operational procedures;
  - Feedback to Commissioners of services.
- 10.7 Most informal complaints receiving during the year were resolved by an apology or a clear explanation of what had happened and did not require any new or revised procedures or instructions to be developed. They were in the main, addressed through the staff supervision process and by reminding staff of existing procedures, standards and good practice, particularly in respect of the importance of effective communication.
- 10.8 The complaints investigation and review process did, however, result in a number of proposed improvements.

#### Adult Social Care and Public Health Learning

- 10.9 Recovery House which provides a short term accommodation based service for people experiencing a mental health crisis, as an alternative to a hospital admission.

A complaint was received from a service user who had been undertaking some volunteering work to which duties had been changed and had not been communicated well. The complainant felt that the quality of service received from staff members was poor. Whilst the complaint was very detailed and contained many aspects of dissatisfaction, several key points of learning were highlighted.

- Service user consultation and involvement to be paramount when considering making changes to services and provision.
  - If the service plans continue to offer volunteering opportunities to service users then there is a need to develop a policy to ensure clarity of role and purpose.
  - Staff supervision to include a reflective practice element to promote critical self-analysis and give an opportunity to discuss challenging situations and relationships.
  - Staff group to be reminded in a team meeting of the importance of respectful and professional communication at all times.
- 10.10 Another complaint related to an outstanding final notice being sent addressed to a deceased person.

Following this complaint, the team have improved the way it sends out final invoices for deceased customers by ensuring that a personalised letter is attached to any unpaid invoices and sent to the next of kin.

- 10.11 Several complaints throughout the year have resulted in targeted training and supervision to employees about standards of service and customer care.

The Local Authority now ensures that all employees undertake Customer Care Training as mandatory.

#### Community Services Learning

- 10.12 Due to the minimal volume of complaints included in this report, there is no significant learning from complaints which is relevant to this reporting period.

### **11.0 Achievements/Looking Ahead**

- 11.1 Work had been undertaken to consider how the organisation can further explore the learning from complaints and also how complaint handling can be incorporated into a performance management quality assurance framework.
- 11.2 As part of this phased integration into the performance management quality assurance framework, this year has seen the introduction of a comprehensive escalation plan to ensure timeliness of complaint handling and implementation plan to capture learning.
- 11.3 Work is currently underway to review the complaints procedure to ensure it accurately reflects the recent changes to the Care Act which became effective from 1<sup>st</sup> April 2015, and the complaints leaflet for Adult Social Care is currently being re-designed.
- 11.4 In addition to this, work is currently underway to design and implement a comprehensive guide for consideration when commissioning services and the monitoring of services from the council's quality assurance and monitoring teams. This is particularly important as the volume of complaints for external providers has increased considerably.
- 11.5 Adult Social Care is currently undergoing a restructure which is effective from 1 July 2015. It is recognised that there is a need to ensure that newly appointed staff need to be proficient in the investigating and handling of complaints, and current staff are continually assessed to ensure that they maintain the skills required to also undertake investigations.

Bearing this in mind, the Customer Relations and Complaints Manager is currently working with fellow colleagues in the design of a electronic learning module which will be made mandatory for those staff appointed to undertake such investigations.

It is however recognised that a person centered approach to support and guidance is still required and this will continue, along with periodic formal training when required.

- 11.6 The Customer Relations and Complaints Team have relocated from the people directorate to join a centralised complaints team based within the corporate directorate. It is anticipated that this will not only provide a continuity of service but a greater level of front line customer service satisfaction.

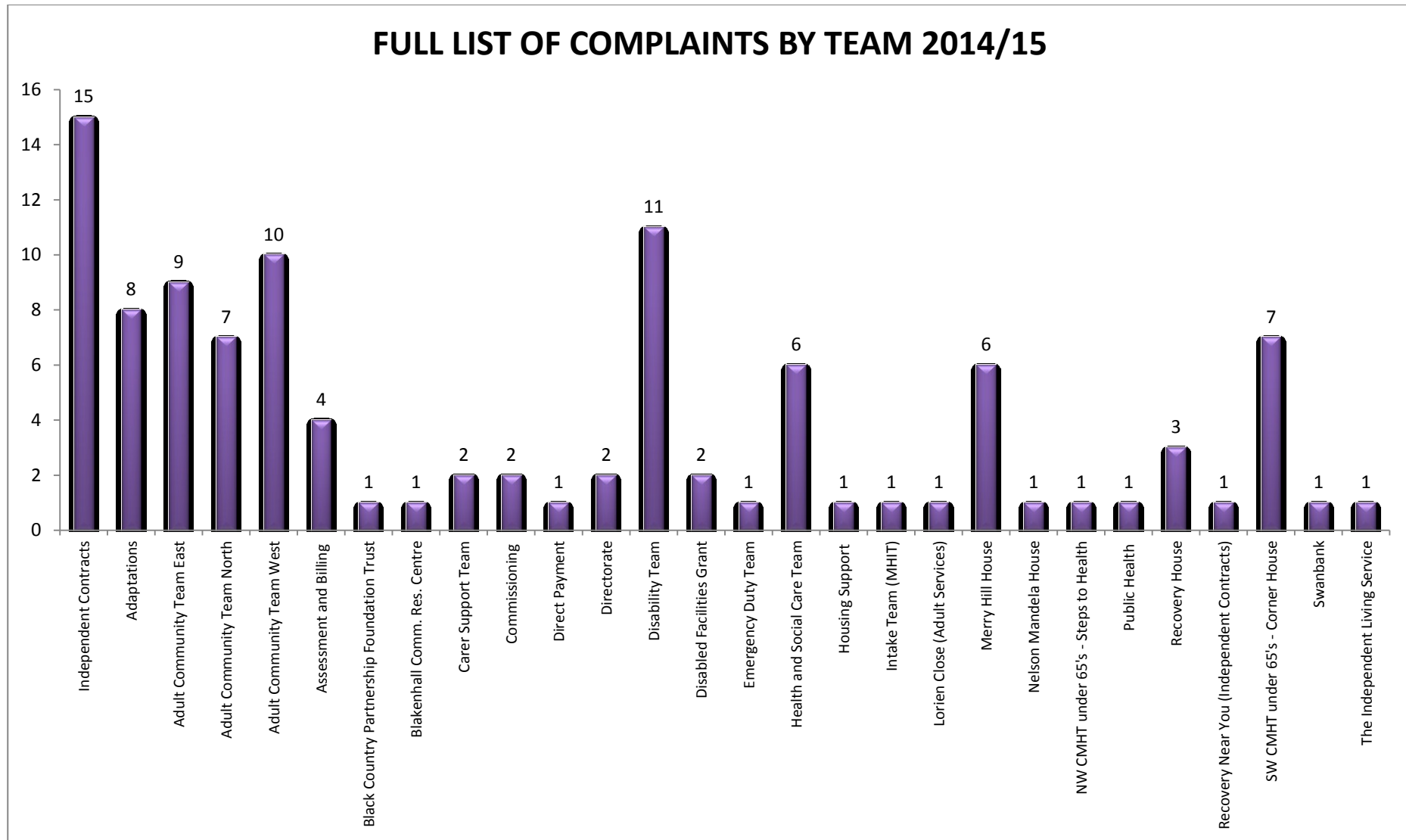
## **12.0 Conclusion**

- 12.1 Whilst it appears from this report that the volume of complaints has increased, there has been some development work undertaken which has resulted in a change in the reporting mechanism for complaints measurement. Previously any complaints which could not be investigated as complaints due to overriding other procedures would be discounted from these reports.

It is therefore noted that from the 107 complaints received 11 cases fall into this category and had to be referred to the Protecting Vulnerable Adults Safeguarding Procedure. The actual volume of complaints which could be investigated for both Adult Social Care and Public Health has been 96.

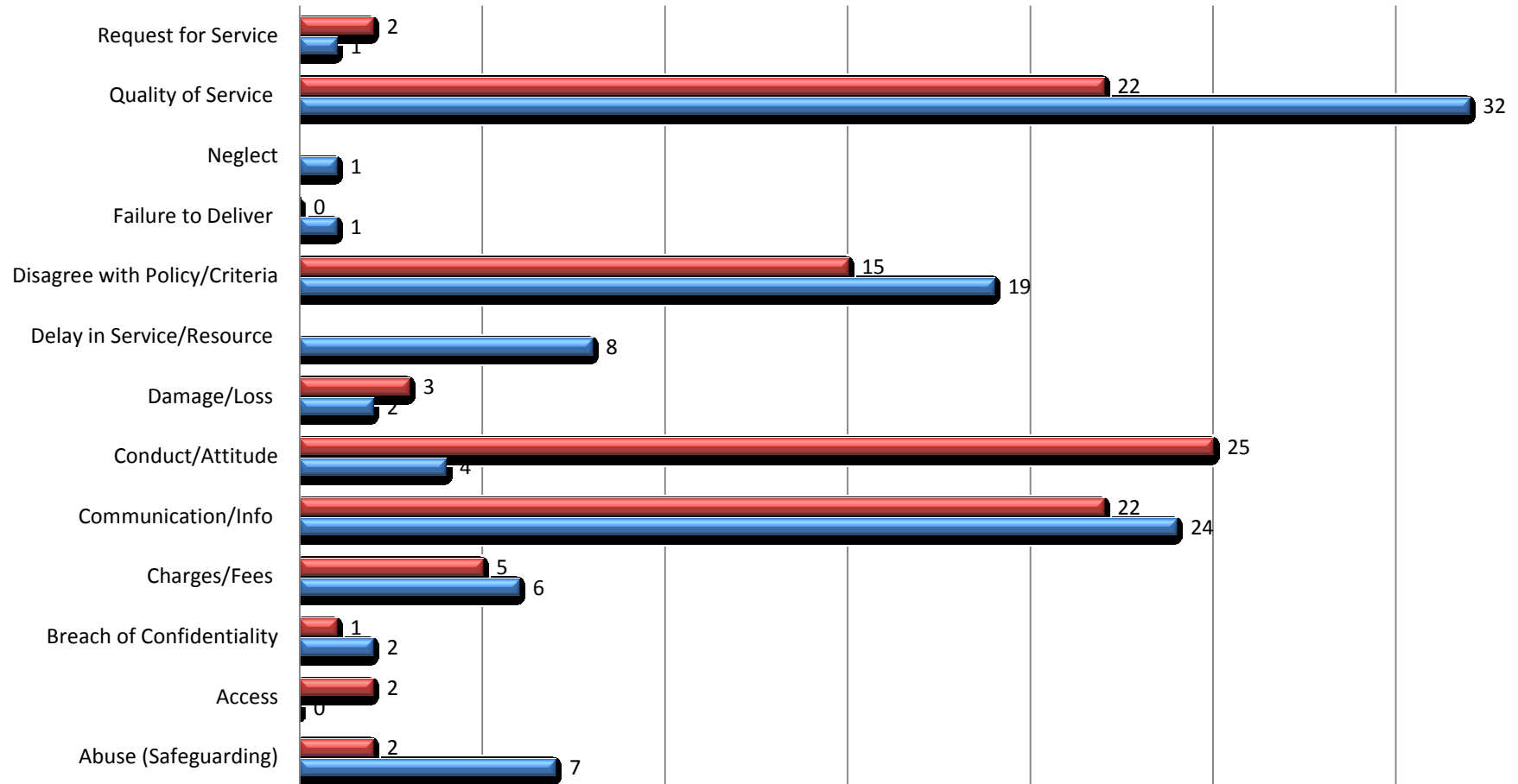
- 12.2 There has been an increase in cases which have escalated to stage 2 however in May 2014 the complaints internal processes were changed to ensure more transparency was evident and to ensure complainants were fully informed of their right of escalation.
- 12.3 The cases which went through to final investigation by the Local Government Ombudsman, in the majority, were favourable in the decision made towards the local authority, thus demonstrating the quality of the service and processes in place.
- 12.4 The Customer Relations and Complaints Manager will continue to work with staff over the coming year to develop the use of complaints as a learning tool for the department to ensure no opportunity is missed to use complaints to improve the services.
- 12.5 Whilst Wolverhampton City Council is in the process of making considerable savings, it is evident that the standard of service which is measured by the volume and complexity of complaints received, has not been adversely affected. If anything, staff have become more reflective to strive to improve services and create greater efficiencies.
- 12.6 Due to the increased pressures experienced across Adult and Community Services, many challenges are evident for Service Managers in juggling competing priorities and ensuring a balance of experience and knowledge. This context makes the Complaints team's work in challenging and supporting good practice in complaints handling and resolution, so much more difficult.

Appendix 1



### Full List of Category of Complaints Received

2013/14 2014/15



# PROTECT

## Contact Information

Contact Information	
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