

**Statutory Complaints Report  
Adult Social Care  
London Borough of Richmond  
upon Thames  
2018 - 2019**

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## 1. Introduction

- 1.1 The production of a complaints report is a statutory complaints requirement for adult social care to provide an overview of the complaints received and handled through the Local Authority's statutory complaints procedure.
- 1.2 The Local Authority has a duty to ensure that any individual (or appropriate person acting on their behalf) who wishes to make a complaint about the actions, decisions or apparent failings of a local authority's social care provision have access to the Adults statutory complaints procedure.

## 2. Legislation

- 2.1 The Local Authority is legally required to have in place, a complaints procedure, in accordance with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 for the management of social care complaints.
- 2.2 The Regulations cover Adults social care and Health services and/or any of its commissioned services and/or independent services.

## 3. Overview of the Statutory Adults Complaints Procedure

- 3.1 The complaints procedure is a single stage process for both Health and Social Care which operate to the same response timescales. Complaints should be recorded and monitored by the complaints team. All complaints should be assessed for risk by the complaints team liaising with the relevant social care team. Complaints that are deemed very high risk will be referred to the appropriate investigation route such as invoking safeguarding procedures.
- 3.2 The complainant can expect a response within 25 – 65 working days and by 6 months. The complaint can be progressed to the Local Government and Social Care Ombudsman following the final response from the Local Authority or at any time.
- 3.3 A complaint is defined as *“an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social services provision that requires a response.”*
- 3.4 Complaints can be made by the service user receiving a direct service from Adults social care or by a person on their behalf such as an advocate or family member where the service user has provided their written consent.
- 3.5 Where a service is provided by a contractor on behalf of the Council, a complaint can either be made directly to the provider service or to the complaints team.

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- 3.6 Service users who fund their own care for services that are regulated by the Care Quality Commission do not fall under this procedure.
- 3.7 Complaints will be considered if they are made within 12 months of the incident although the Council can apply their discretion to waive this time limit in some instances.

#### 4. Adult social care complaints received

- 4.1 The services addressed 56 complaints (which includes 12 provider related complaints). This is 10 less than the previous year (66 complaints).

**Table 1: Number of complaints received since 2014.**

Richmond adult social care	2014/15	2015/16	2016/17	2017/18	2018/19
	84	37*	109	66	56

#### 5. Complaints by service team

- 5.1 Table 2 details the breakdown of complaints received within the teams during the reporting year. Some complaints involved more than one service area.

**Table 2: Complaints by team**

Service	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Provider/QA team	6	2	2	2	12
RRRT	2	-	3	2	7
<b>Teddington &amp; Twickenham Locality</b>					
Mental Health	4	1	3	2	10
Hospital Team	2	1	-	1	4
Reviews Team	1	-	-	-	1
Financial Assessment Team	1	1	-	1	3
Access Team	4	-	-	1	5
Richmond & Barnes Locality	-	1	-	-	1
In House Day Services	-	4	1	5	10
Client Affairs Team	-	1	1	-	2
Commissioning Team	-	-	2	-	2
Safeguarding Team	-	-	-	1	1
<b>Total complaints *</b>	<b>20</b>	<b>11</b>	<b>12</b>	<b>16</b>	<b>59</b>

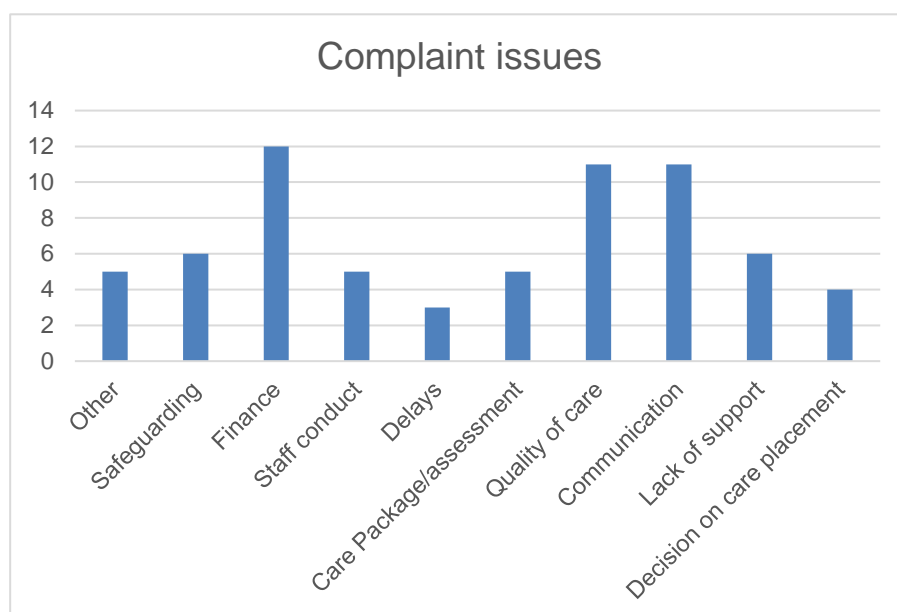
\*complaints can cover more than one service team

5.2 Teams regularly receive feedback from service users and/or carers. Most issues tend to be resolved directly and quickly outside the complaint process.

## 6. Complaints by Issue

- 6.1 The complaints issues raised most frequently related to care charges, queries with invoices, the financial assessment and direct payments. Also, communication and the quality of care provision. This is detailed in Chart 1.
- 6.2 These complaints focused on the quality of information and advice received regarding care provision and financial decisions. Care issues, particularly in respect of domiciliary care is a continuing trend for complaints and the direct interface of care staff with service users.
- 6.3 Examples of complaints received included: complainant unhappy with outstanding fees regarding the service user’s care placement; as no longer eligible for CCG funding; delay in the funding decision to increase service user’s care package; family unhappy that they had not received a copy of the annual assessment which had been reviewed; unhappy with the lack of information from staff regarding care costs; issues with the quality of care received and lack of support/provision for a service user with mental health concerns.
- 6.4 Complaints analysis is regularly reviewed at senior management level and an ongoing focus for service improvement.

**Chart 1: Complaint issues**



'Other' category related to complaints regarding personal belongings being damaged when they were placed in storage by social care, complaints with Health involvement, OT decision to end reablement care, not being provided with information when they have LPA and support when a self-funder.

## 7. Response Times

- 7.1 The Council's timescale for responding to adult social care complaints is 25 working days. The complaint regulations do not provide a statutory timescale for completing responses, although the complaint should be completed in its entirety within 6 months.
- 7.2 Unlike the other complaint procedures within the Council, the adult social care complaints procedure does not have stages for escalation. It is a single stage procedure and therefore some complaints can and often will take longer than 25 working days to complete, particularly when a complainant seeks a further review of the complaint.
- 7.3 Complainants are kept informed of the progress of their complaint if the investigation is going to take longer to complete.

**Table 3 Richmond Response times 2018/19**

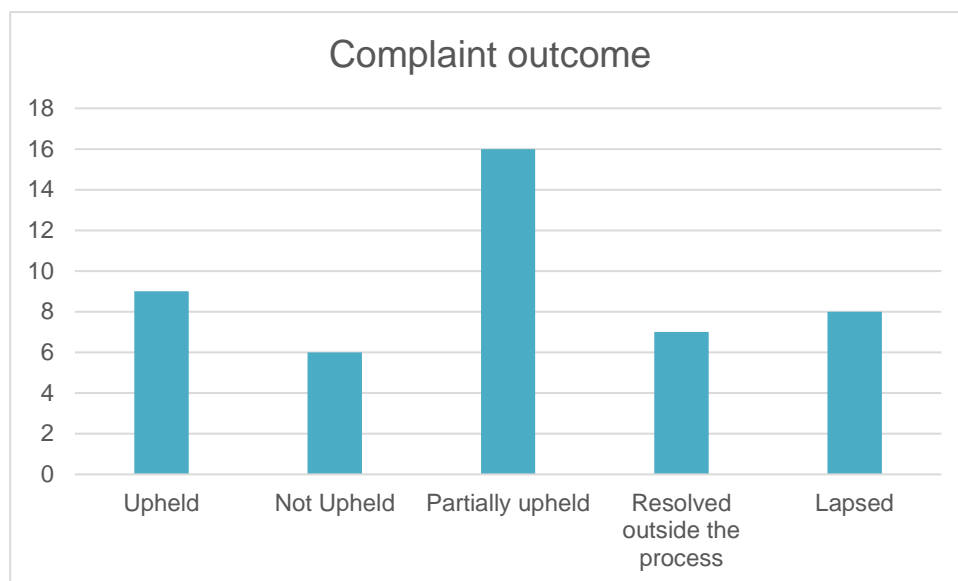
Response time	Number of complaints
20-25 days	18
over 25 days	13
<b>Total closed</b>	<b>33</b>

**Table 4 Richmond Complaint response times by year**

	2014/15	2015/16	2016/17	2017/18	2018/19
<b>Within 25 days</b>	47.20%	53.20%	75.90%	77%*	58%

## 8. Complaint Outcomes

- 8.1 The majority of the complaints investigated during 2018/19 were partially upheld.
- 8.2 This is detailed in Chart 2 and demonstrates that whilst complaints are carefully considered and investigated, some identified a need for improvement although the majority were not upheld
- 8.3 For this year, the upheld findings were in respect of acknowledging delays caused in providing services and ineffective communication. Staffing and work pressures in some teams were at times, a contributory factor.

**Chart 2 Complaint outcomes**

## 9. Provider complaints

- 9.1 The Quality Assurance Team manages and reports on contracted provider complaints for social care, which includes residential and domiciliary care services. This does not include complaints by 'self-funders' who are able to complain directly to the care provider and/or Local Government Ombudsman.
- 9.2 For this reporting year, 12 external provider complaints were received and recorded by the complaints team and all related to domiciliary care. Complaints can be made directly to the care provider as well as to the Complaints team or Quality Assurance team.
- 9.3 The issues related to 2 care providers and were mainly regarding late or missed visits and the quality of care provided.
- 9.4 Providers have in place their own complaints procedures and will usually investigate the issues directly, monitored by the Quality Assurance team.

## 10. Ombudsman Cases

- 10.1 A complainant reserves the right to refer their complaint to the Local Government and Social Care Ombudsman at any time. Generally, the Ombudsman will seek to ensure that the Local Authority has been provided with the opportunity to first respond to the complaint in accordance with the Council's own statutory complaints process.
- 10.2 During 2018/19, one complaint was investigated by the Ombudsman.

10.3 The complaint related to financial charges and the information/ advice provided was alleged that the full cost would be funded by the service.

Final decision – The service correctly assessed the care and finances although there was some fault in the service failing to keep records of what was verbally agreed with the complainant when planning the care.

## 11. Learning from complaints

11.1 Complaints learning is a key component of service improvement and quality assurance for the department. Complaints provide invaluable information which can be used to identify issues in services, help staff learning and also identify any risks and so improve services for the future, based on people's own experiences. Some of the learning identified is detailed as follows:

- Regarding a residential provider, additional mobile phone ordered for the night staff use only, to avoid incidents where families and other professionals are unable to reach the scheme for urgencies. The Housing Manager of the relevant home and scheme now carry out spot checks on the Tunstall handset to ascertain how long it takes the staff to respond to calls and take management action where necessary
- Social work practitioners are to prepare and share reports promptly after an assessment or review, to avoid families becoming distressed or inconvenienced by the unnecessary delay
- Regarding securing extra days at the relevant Day Centre, for requests for services by those who are not residents of Richmond, consideration will be given for more prompt decision making in future, to ensure minimal time delay from receiving the request to providing the outcome.
- Teams to be more mindful when a financial assessment form is not required, to avoid the additional and unnecessary burden that this places on those seeking support.
- All one off/temporary requests for additional days at Day Centres are now decided by the Head of In-House service provision or Assistant Director, in their absence. All requests for permanent days will be marked as urgent for the panel's decision and reply sent to the requestor within two weeks.
- Changes have been made to improve communications services recently by reviewing the telephone systems when team members are not available or engaged. Phone calls will be automatically be diverted to an available team member when the original number contacted is engaged or unavailable to avoid calls going unanswered or without a call back.
- As a result of the above Ombudsman complaint, staff were reminded of the importance of keeping accurate records and confirming verbal information as discussed with families, in writing.



## 12. Compliments

12.1 Positive feedback regarding staff or service delivery is another way in which the department can learn how well things are going. Staff are reminded to report compliments they receive and recognise the value of sharing this feedback.

### ***What people said:***

*“She was very pleased and impressed with N’s input and she said that the report that N sent was excellent. Mrs E said that N’s input has made a great difference to her mother’s wellbeing and care.”* **Richmond & Barnes Locality Team.**

*“The part you have played in helping D take these steps has been crucially important and must surely encourage him to take further steps forward in the future. I cannot thank you enough for the way you have fulfilled your task with respect to my (relative)”* **Mental Health Team**

*I cannot thank you enough for your help and your commitment to make yourself available, inform and reassure when all looked so bleak. Your calm and kindness will never be forgotten. With all my grateful best wishes to you and your team“.* **Richmond & Barnes Locality team**