



London Borough of Hammersmith & Fulham

Adult Social Care Annual Customer Feedback Report

1 April 2013 - 31 March 2014

Table of contents

Introduction	3
The Customer Feedback Team	3
The complaints process	3
Summary of activity and demand	4
Compliments	4
Detailed complaints activity for 2013/14	5
Nature of issue	6
Complaints activity by team	6
Outcomes	7
Local Government Ombudsman activity	7
Independent investigations	8
Members enquiries	8
Corporate complaints	8
Financial recompense	8
Complaints activity by demographics	9
General feedback	10
Learning from complaints	10
Priorities for next year	12
Appendix 1 – breakdown of complaints issues by team	16

Introduction

This report provides information about statutory complaints made between 1 April 2013 and 31 March 2014 under the Local Authority Social Services and NHS Complaints regulations, 2009.

The report highlights how various services within Adult Social Care (ASC) Services have performed in line with key principles outlined in the complaints regulations. Learning and service improvements that have been made as a result of responding to complaints are also discussed, as are plans for further service developments.

The Customer Feedback Team (CF Team) is responsible for recording, managing and analysing all statutory complaints and feedback in ASC as well as comments and compliments for the London Borough of Hammersmith and Fulham.

The Customer Feedback Team

All statutory complaints, compliments and any feedback are managed within the CF Team. The team works closely with the executive support staff and the Corporate Complaints Teams for the Local Authority in order to ensure that any crossover complaints and all LGO investigations are handled appropriately. The CF Team mostly works with the operational teams to ensure, where possible, responses provided to complaints are delivered on time, are factual and answer the complainants concerns or provide an explanation around service delivery. The CF Team consists of 3 full time members of staff.

The Complaints Process

The Department of Health defines a complaint as, “an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a Local Authority’s adult social care provision which requires a response”. The Local Authority uses this definition.

Anyone can make a complaint where they receive a service from Adult Services or where they are affected, or likely to be affected, by the Department's actions. This includes a service provided by an external provider acting on behalf of the Local Authority. In such a case service users can either complain directly to the provider or to the CF Team.

Staff are encouraged to attempt to resolve problems at the first point of contact in line with good practice highlighted by the Local Government Ombudsman, but are equally advised to direct service users towards the CF Team to access the procedure where an instant resolution is not possible or appropriate, or where the service user remains dissatisfied.

In accordance with procedures for handling complaints that came into effect on 1st April 2009, once a complaint is logged by the CF Team, they will acknowledge the complaint in writing within 3 working days. A plan of how the complaint will be dealt with will be agreed with the complainant including the time-scales for providing a response. The CF Team conducts a risk assessment for each complaint to determine how it should be handled. Complaints are graded into four categories: low risk, moderate risk, high risk and extreme risk. Complaints that fall between low and moderate risk are dealt with by the service manager concerned and the resolution method is usually through meeting with the complainant and a paper review or an internal investigation followed by a written response. Those that are deemed to be high or extreme risk are usually investigated by independent investigating officers who submit their findings to the local authority followed by a letter together with the report to the complainant from the Adjudicating Officer, usually a Director.

Other such complaints may also need to be passed on to the Safeguarding Leads as appropriate and the complaints process may be suspended, if necessary, in order to allow the safeguarding process to be completed.

The Local Authority will always seek to resolve the complaint as soon as possible, and in the absence of a prescribed timescale it uses an internal timescale of 10 working days, in consultation with the complainant. However, if delays are expected the complainant is consulted and informed respectively. All responses, whether or not the timescale has been agreed with the complainant, must be made within 6 months of receiving the complaint. However, in exceptional circumstances, an investigation may take longer and this will be discussed with the complainant.

In cases of cross-organisational complaints, one organisation will act as the lead and a co-ordinated response will be provided so that the complainant receives one consolidated response to their complaints.

The Local Authority has one opportunity to provide a formal response to the complainant and this response must set out their right to approach the Local Government Ombudsman should they remain dissatisfied.

Summary of activity and demand

The total number of people that received a service from the London Borough of Hammersmith and Fulham during the year was 4,203. The table below highlights key ASC activity;

Table 1 – Breakdown in ASC activity

Category	Numbers in 2013/14
New referrals	3,389
New assessments	1,135
Reviews	1,729
Service users	4,275

When looking at the total numbers of residents receiving support from the department, approximately 2% of these customers or someone acting on their behalf raised a complaint about a service that they received.

Compliments

Customers and their representatives are encouraged to tell the Local Authority if they are happy with their care or would like to highlight a good service. People can complete the compliments, comments and complaints form as well as contact the relevant social care team or the CF Team to express their praise. This number is consistent with that of last year, however the CF Team will continue to remind staff and managers to make sure that all compliments are passed to the CF Team so that good practice can be recorded and reported across the department.

Table 2 – Compliments over last three periods

Year	No of compliments
2010/11	20
2011/12	22
2012/13	18
2013/14	18

Some examples of the compliments received this year are;

“Very good and kind Social Worker. Looked after me very well, I would be lost without him..Thank you!”.

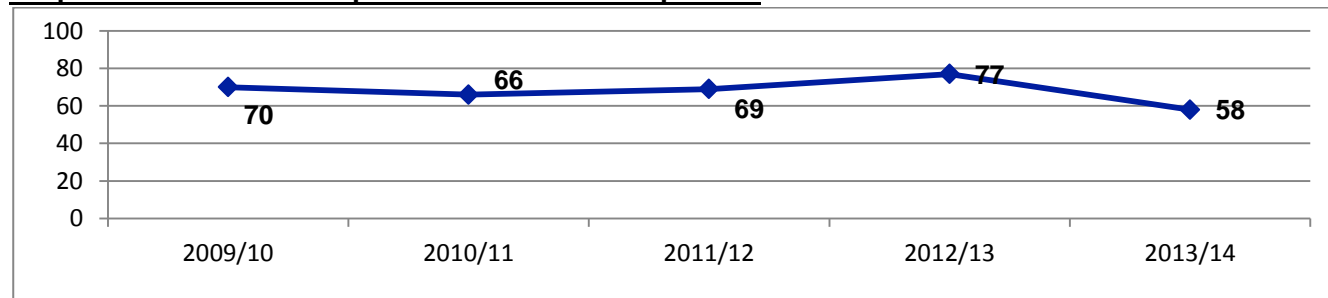
“I appreciate the pleasant and helpful staff that attended to my mother-in-law. Thank you so much! You made her feel so much better and helped immediately”.

“I have been looked after by your re-ablement team recently and want to say a great thank you to all for being so wonderful. The staff were so helpful, kind and caring and they will be greatly missed. I highly recommend them for their service to other people in need”.

Detailed complaints activity for 2013/14

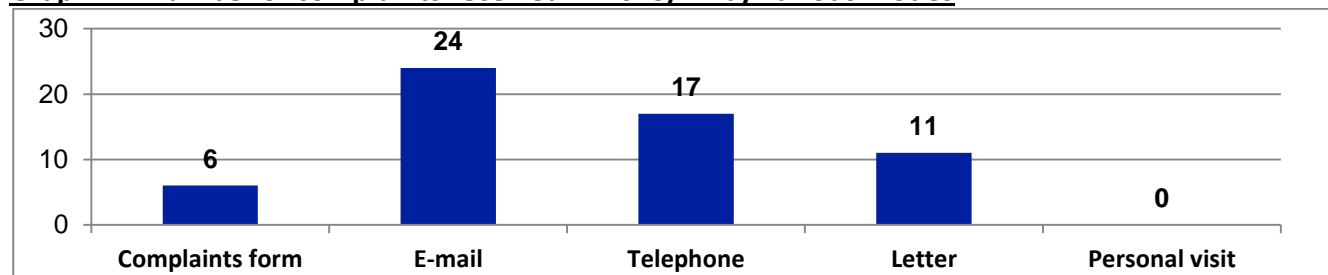
While we appreciate positive feedback and comments we also understand that sometimes customers are unhappy with the support they have been provided and we encourage any customer or family member who has concerns to contact us. The CF Team recorded 58 formal complaints in 2013/14. This number shows a 25% decrease on the previous year.

Graph 1 – Number of complaints received over 5 periods



It is difficult to account for the reduction in complaints; however the CF Team has actively worked with providers, community organisations and care management teams to encourage customers to talk to us about any aspect of their care and support, and will continue to promote the service we provide.

Graph 2 – Number of complaints received in 2013/14 by various modes

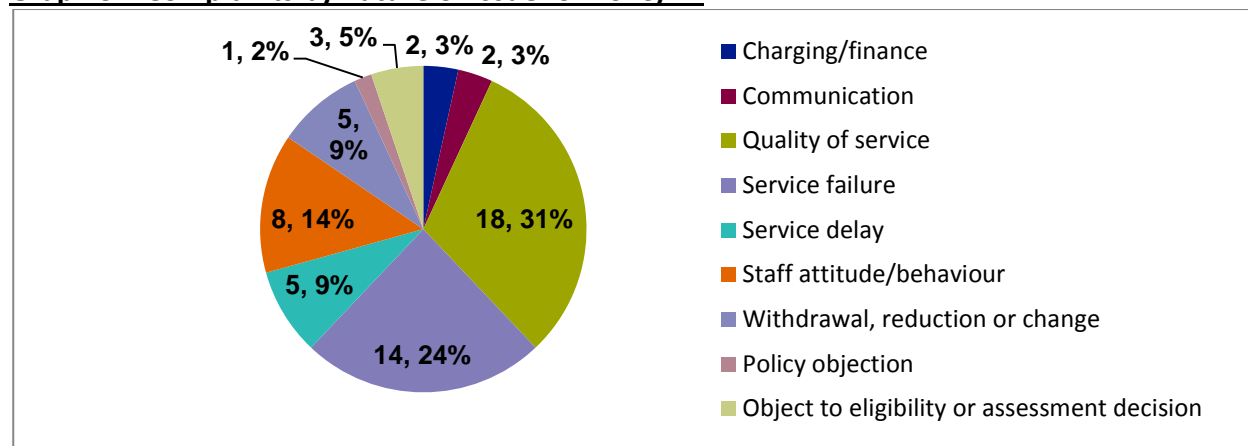


The largest percentage of complaints has been received from people who wrote to the team by email. Of these, people that raise more complex issues are contacted by phone by a CF Officer for further clarification and/or offered a personal visit to discuss their concerns in detail. 10% of the complaints were received by way of complaints forms, this number is increasing, especially since the new complaints forms have been in circulation. They are very useful leaflets which contain important information about the process and contact details. Telephone complaints are on a rise, as the team continue to advertise the freephone number to improve access to the service.

Nature of issue

Graph 3 shows a breakdown of the complaint received by nature of issue. If you would like to see a detailed breakdown by team of this information, please see Appendix 1. As will be seen the majority of the complaints have been about the quality of the service followed by service failure. Improvement in these areas is discussed in the learning from complaints chapter on page 10.

Graph 3 – Complaints by nature of issue for 2013/14



Complaints activity by team

The table below shows a detailed look in the complaints activity by all the teams within the ASC. 26% of complaints received were against external homecare providers. While this is high it is important to remember that 44% of total number of service users receive a homecare service and out of those 1% raised a complaint with the Local Authority. LBHF and the agencies work in partnership to handle these complaints and ensure that corrective action is taken to ensure complete resolution of the complaint, improvement in service and prevention of recurrence of the issue.

Table 3 – Complaints activity by team for 2013/14

Teams	Complaints received	Outcome				Ongoing
		Upheld	Not upheld	Partially upheld	w/drawn	
Community social work service	9	0	5	3	1	-
Community & hospital assessment svc	9	3	2	4	-	-
Client Affairs	-	-	-	-	-	-
Learning Disabilities Service	3	-	1	1	-	1
Mental Health Service	-	-	-	-	-	-
Re-ablement Service	3	-	-	3	-	-
Occupational Therapy	6	-	4	2	-	-
Homecare	15	3	4	8	0	0
Provider services	3	1	2	-	-	-
Finance	1	1	-	-	-	-
Commissioning (CN and transport)	9	2	7	-	-	-
TOTAL	58	10	25	21	1	1

The other teams with high number of complaints are the two main Assessment and Social Work Teams. Both teams received 16% of the complaints equally. These figures are consistent with last years. These two teams see the most number of service users, therefore this should be considered when looking at the percentage distribution. Commissioning has seen a rise in complaints this year, as 16% complaints have been attributed to this service area. These mainly include complaints about the change of service providers or overall service offer.

Outcomes

There are three main categories for classifying the outcome of a complaint;

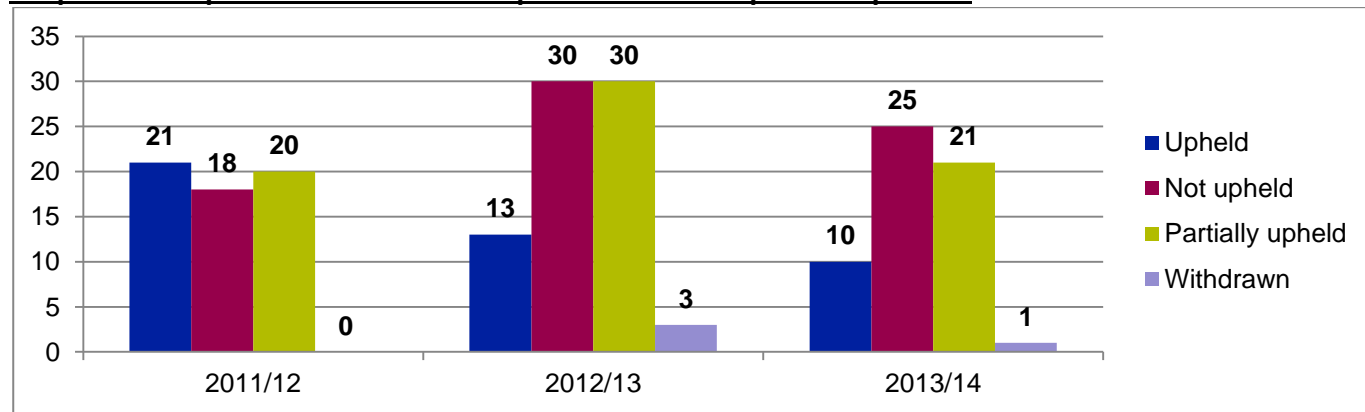
“Upheld” – This is where the Local Authority have accepted responsibility for the matter arising. We would follow this up with a detailed letter of apology and clarification with reasons and remedies for the matter. It would also include actions to ensure such a complaint does not recur.

“Partially Upheld” – The LA accepts some responsibility for part of the complaint. A response outlining the part that is upheld is sent, stating reasons and proposed corrective measures.

“Not Upheld” – This normally means that the complaint was investigated but no fault was found. We would explain carefully and thoroughly our reasons for our conclusion.

Graph 4 shows the outcome of all complaints that were made to ASC, and comparisons with previous two years. The number of complaints that are fully upheld has stayed the same as a percentage compared to last year. In 2013/14 only 17% complaints were fully upheld and 36% were partially upheld. Majority of the complaints that were upheld this year were about the quality of service. The teams ensure that whatever the outcome of a complaint may be, they learn from the complaint to ensure that the problem does not recur with other service users.

Graph 4 – Complaint outcomes in comparison with two previous periods



If complainants remain dissatisfied with our response, they are advised to contact the CF Team, to seek clarification and discuss their dissatisfaction, to see if further clarification can resolve the matter. However, if they continue to remain dissatisfied with the efforts of the Local Authority they are advised of their right to progress their concerns to the Local Government Ombudsman.

Local Government Ombudsman activity

Table 4 shows the number and type of correspondence the London Borough of Hammersmith and Fulham received from the Local Government Ombudsman (LGO) in relation to the Adult Social Care services it provides.

Table 4 – LGO investigations and outcome for 2013/14

Type	No of complaints	Outcome		
		Upheld /Partial upheld	Not upheld	Still active
Premature complaints	0	n/a	n/a	n/a
Complaints investigated by the LGO	5	0	4	1
TOTAL	5	0	4	1

There haven't been any premature complaints however, the LGO has referred 5 complaints to the Local Authority for investigation.

The 5 complaints that were investigated by the LGO pertained to Commissioned Services, Provider Services, Community and Social Work Team, Community and Hospital Social Work Team and Occupational Therapy Service respectively.

The outcome of one of these complaints is still being awaited, whereas the others have been closed. None of these complaints were upheld. One investigation recommended some changes to service delivery and recommended a 'time and trouble' compensation payment for £250. These have been delivered.

The number of complaints investigated by the LGO in 2013/14 has increased by 3 complaints compared to last year. The trend pattern is difficult to evaluate as the number of cases are very low and the LGO exercises its discretion, as to whether or not a complaint they receive will be subject to a full investigation. All complainants are referred to the LGO at the end of the Local Authority's complaints process so they are aware of their option to escalate the complaint if unhappy with the outcome.

Independent Investigations

One case has been escalated to an independent investigation. This case pertains to the Learning Disability Service and a residential provider. This investigation is being carried out by an Independent Investigator and is still ongoing, with adjudication expected by early July.

Members Enquiries

All member enquiries are managed and recorded by respective support staff. In 2013/14 the number of member enquiries for the London Borough of Hammersmith and Fulham was 52. The CF Team continuously liaise with the Executive Support staff to ensure that if a Member enquiry raises concerns about an ongoing or new complaint the correct process can be applied and all parties are informed.

Corporate Complaints

The Borough recorded one case in Adult Social Care issues under the corporate complaints procedures. This is one of the cases that was then referred to the Local Government Ombudsman and is currently under investigation.

Financial Recompense

A compensation payment of £350 was made to a service user in recognition for their time and trouble as a result of delay in service provision by the Local Authority.

Complaints activity by demographics

This is a new section to the report as the CF Team is now capturing data on demographics. As such there is no comparison available this year, but in future this will help us make sure that all sectors of the community have access to the complaints process and that under represented communities can be targeted. The table below shows the number of complaints received by LBHF against different demographic categories.

Table 5 – Complaints by age, gender, ethnicity and disability

Categories	LBHF
AGE	
18-50	15 (26%)
51-65	10 (17%)
Over 65	33 (57%)
TOTAL	58 (100%)
GENDER	
Male	18 (31%)
Female	40 (69%)
TOTAL	58 (100%)
ETHNICITY	
White – British	34 (57%)
White – Irish	1 (2%)
White - Other	4 (7%)
Black or Black British – Caribbean	11 (19%)
Black or Black British – African	1 (2%)
Black or Black British – Other	1 (2%)
Asian or Asian British – Indian	4 (7%)
Asian or Asian British – Pakistani	1 (2%)
Other	1 (2%)
TOTAL	58 (100%)
DISABILITY	
Physical disability, frailty & sensory impairment	38 (66%)
Learning Disability	6 (10%)
Mental health	1 (2%)
Other vulnerability	7 (12%)
Substance use	0
Not recorded	6 (10%)
TOTAL	58 (100%)

In LBHF, the age of majority of the service users, 67% is 65 or over. The number of complaints made by or on behalf of services users from this age group is recorded at 57%, which is in line with the customer population. Further analysis shows that only 1% of total service users over the age of 65 (or someone on their behalf) have complained to the LA about a social care service they receive.

The majority of the service users in this Borough are female (60%) and again this is consistent with the percentage of complaints recorded for female service users at 69%.

The majority of the service users in the Local Authority describe their ethnicity as White British. The percentage of this group is 49% and the complaints received are consistent with this as 57% of total complaints received are from people who describe themselves as White British.

77% of service users in the Borough are recorded to have a physical disability, frailty and/or sensory impairment. In comparison to this 66% of the 58 customers that have had a complaint logged about their care fall under the same category. Statistics also show that only 1% of service users with a physical disability have made a complaint. This could suggest that more support is required for clients in this group to access the complaints process.

Our statistics show that 8% of our service users have a learning disability. In terms of complaints only 10% of the 81 complaints fall under this category.

We hope to draw more conclusive trends and analysis over time so that we can improve our understanding of the needs of our customers and promote our service appropriately. We also want to work with voluntary organisations and community groups to ensure all service users understand and have access to the CF Team.

General Feedback

The Correspondence Policy was issued to all staff in November 2012, and since then the role of the CF Team extends to recording compliments, general enquiries, correspondence sent to the Leadership Team with regards to care and services offered by the Local Authority. The Team has handled 21 general enquiries in 2013/14.

Learning from complaints

Complaints are an effective and essential tool for any business to identify and then learn from problems that are presented by users. They help an organisation improve the way they work and deliver services.

This chapter will demonstrate learning and service improvement, including changes to services that have been implemented. 'Learning from complaints' is an increasingly important part of the ethos within adult social care and managers responding to complaints/representations are encouraged to identify any shortcomings within the service and to inform the service user of any actions which will be taken to prevent a recurrence of the event which led to the complaint. The role of the CF Team is to ensure that Service Managers transform learning from complaints into service improvements. Below are some examples of lessons that have been learnt and some service improvements that have been made as a result.

- Following a data breach allegation, changes were made to how MAPPA meetings are communicated. Refresher training is available on Data Protection and a risk assessment tool for when to share information developed.
- Another complaint has led to the strengthening of communication and liaison between the Community and Hospital Assessment service and the Re-ablement services. Regular liaison meetings are on-going.

- Another recommended action is to develop new LBHF recording policy that includes clear recording of case decisions on the ASC computer system and is fully implemented.
- After a complaint about a subject access request, guidance was re-issued to all staff to assist them with such requests. In particular to ensure that a complete set of records is provided.
- The Re-ablement service has also increased focus on communication and good customer care with service users.
- A complaint about a day centre has led to a recommendation to urgently undertake a review of the CCTV right of access and management policy and procedures to ensure that all officers are aware of a service user's rights under the Data Protection Act. This review must include a revision of the CCTV data retention and disposal policy.
- Training has been arranged for staff by the contractor to equip staff with the ability to extract relevant data and retain it for as long as an investigation requires.
- The Day Centre team has been advised that all complaints need to be first registered with the CF Team to ensure appropriate advice on handling of the case under the most suitable process.
- A complaint about the quality of care at a residential home has seen rigorous monitoring by the contracts Monitoring Team and the home. Some of the positive actions are;
 1. Appointed a full time dedicated activities coordinator to offer stimulating activities.
 2. Ensures suitable input from family members on ordering meals and variety of menu. The home has improved support with initiating meals.
 3. Weekly meetings between the home and the complainant to discuss any concerns, restore trust and ensure good communication.
- An independent investigation into an LBHF complaint about a service user's placement by the LA assessment service and their time at the residential home concluded during the first quarter, where most complaints were upheld. It has identified some very clear recommendations for the service. The service is committed to these and improvements in communication and information sharing between team the LD care and assessment team and provider services, record keeping practice within both service areas, communication with key stakeholders and assessment and care planning arrangements are all ongoing. Some specific examples of what has already been achieved is as follows;
 - The home has introduced a quarterly monitoring system which records inputs and outcomes relating to safeguarding, health and safety, risk assessment and management, dignity and compassion, mental capacity, choice, and staff supervision.
 - All managers have been provided with refresher training on how to conduct effective supervision sessions and managing poor performance of staff under suitable processes.

- The home has implemented a new and more robust referral and assessment gateway. The purpose of this is to improve communication and the sharing of important information between teams and any former providers to inform decision making regarding the suitability of any placement.
- The CF Team has reviewed handling of complex complaints where independent investigations should be considered earlier on. And this will form part of the revised Correspondence Standards.

In addition to the learning identified by specific teams, the CF Team also has some examples where it will be making changes to improve the quality of its work, especially when dealing with homecare complaints, as they constitute the majority of those received.

- Continuing to focus on homecare complaints, to make sure all homecare concerns are captured appropriately. A homecare poster has been devised and circulated to teams, to remind staff to send in all complaints to the CF team so that they can be handled under the correct process.
- The CF Team has been meeting with Service Managers and their Team Leaders in LBHF regularly to focus on learning actions following complex and high profile cases to see what lessons have been learnt, irrespective of the outcome of the complaint.
- The CF Team is also working on improving internal procedures to identify complex/high risk complaints for independent investigations as early as possible to ensure better use of resources. To this end, the team will be surveying other LA's to see what criteria/checklist they follow. The Team has also improved team case discussion practice and will use the risk assessment tool, that is part of the 2009 regulations guidance, more commonly to present recommendations to the Leadership Team where they feel an independent investigation is needed and will be most effective.

Priorities

In 2013/14 the CF Team has continued to be busy handling complaints, compliments and enquiries from services users and/or their representatives. In doing so it has ensured that internal timescales are met and that the quality of the response has consistently improved. This year the team has seen less complaints, however the nature of the concerns being raised have been more complex. The Team have been focussing on ensuring that services make informed changes to deliver improved services for their customers.

The Team will continue to fulfil this role and in addition it has set itself the following priorities for the new financial year;

PROMOTE

- Continue to promote the CF Team across all services as well as Adult Social Care Operational Teams, ensuring that staff are familiar with the procedures and are fully equipped with effective complaints handling skills.
- Helping stakeholders and partners understand the complaints process including what a complaint is, consent issues, timescales and what to expect from a response. Continue

to encourage residents to report positive feedback and record and respond to compliments from service users and/or their representatives.

- Updating the correspondence standards document and launching it as a Feedback guidance document. This document will have detailed guidance for staff on complaints, Members Enquiries, compliments, Local Government Ombudsman investigations and general feedback.
- Developing a separate Complaints leaflet and form for customers with a Learning Disability. The team will be designing a form that will have easy and readable language as well as suitable pictures explaining the complaints process step by step. This will be carried out in consultation with the relevant service areas. It is hoped that this will increase awareness amongst this group and will allow service users to access the complaints process more independently.
- Developing an appeals process as part of the Care Act implementation in line with any government guidance for the year 2016/17. The CF Team will be working with partners in the London Complaints Managers Group and participating in workshops with the Department of Health to develop a workable scheme.
- Working with colleagues on the new arrangements for Advocacy under the Care Act for implementation April 2015. This will widen the role of Advocates to make representations for Service Users.

STAKEHOLDERS

- Strengthening links with corporate sections and other partner agencies. Our aim is to build on existing working relationships with internal and external partners such as health, advocacy agencies and other important partners in the voluntary sector.
- Developing a clear protocol for handling feedback that needs to be handled jointly by a health agency and Adult Social Care.
- The Team will continue to work with and attend events organised by Healthwatch and other community organisations. This gives us a chance to support services users as well as promote our service. It also allows our stakeholders to understand our work so that they can effectively support the service user, in the event of a complaint.
- The Team is working with health partners on the Better Care Fund agenda in particular the patient and user experience and self management workstreams.
- Working with colleagues in Children and Families to understand the upcoming changes with the Children and Families Act 2014. The CF Team will be particularly involved with the Education and Health Care Plan (EHC) and the mediation process that is now a compulsory part of the review process.

QUALITY

- Continuing to ensure that all statutory complaints and feedback from service users is recorded and handled effectively and a good standard of quality is maintained.
- Ensure good quality data continues to be presented to the Management Team, Cabinet Members and staff in the form of internal Quarterly reports to show emerging trends and valuable learning from complaints throughout the year.
- Consider speedy action plans for high profile or particularly complicated complaints to ensure that an independent investigation route is chosen as soon as possible if that is the best possible way forward.
- Widening and increasing the range and expertise of our pool of external investigating officers, to create greater efficiencies and satisfaction for both complainants and members of staff involved in investigations.
- Send out customer satisfaction surveys at the end of the complaints process, to check people's experience and ensure the CF Team can make improvements based on the feedback.

DEMOGRAPHIC CAPTURE

- This year the annual report presents data on complaints by age, gender, ethnicity and disability. Although there is not a lot to comment on for this first year, the data gives us some insight into the type of people that access our service and hopefully in the coming months we can build on this data and try to focus on any hard to reach groups and ways to encourage them to engage with the LA about services they receive.

FOCUS ON HOMECARE

- Continue to work with homecare agencies, The Contracts Team and The Safeguarding Team to monitor issues arising from complaints and ensuring that practice changes are made where appropriate. Also work with these partners to develop suitable internal processes for handling complaints with respect to expected changes to the homecare service in 2015/16.
- Continue to provide the Homecare Board with essential information on complaints activity on a monthly basis so that any trends can be analysed and any problems in service delivery can be picked up and investigated with the agency. This is to ensure that services are being delivered effectively and in line with the provisions set out in the contract and the standards set by the Care Quality Commission.
- In order to focus on the recent dip in homecare complaints which seems to be contrary to comments made by customers in this year's ASC survey, the CF Team are planning an event in the summer of 2014 to talk to residents and service users about their homecare. This event will be jointly led by the CF team and the Contracts Team and the main idea is to find out how people feel about their homecare and what barriers they feel stop them from putting their concerns forward.

- Developing, publishing and publicising a set of local Homecare Service Standards with the help of commissioning and other prominent stakeholders.

LEARNING

- Continue to push forward a learning culture throughout the organisation. We will continue to do this by ensuring learning is followed up by simple action plans with the Service Managers at the time the complaint is closed and this information is appropriately recorded.

Appendix 1 – Breakdown of complaints issues by team

Teams	Complaints categories	Charging/finance	Communication	Quality of service	Service failure	Service delay	Staff attitude/behaviour	Withdrawal, reduction or change in service	Policy objection	Object to eligibility or assessment decision	TOTAL
Community social work service		1	1	2	-	2	1	-	-	2	9
Community and hospital assessment service		-	1	2	3	1	1	-	1	-	9
Client Affairs		-	-	-	-	-	-	-	-	-	-
Learning Disabilities Service		-	-	-	3	-	-	-	-	-	3
Mental Health Service		-	-	-	-	-	-	-	-	-	-
Re-ablement Service		-	-	2	1	-	-	-	-	-	3
Occupational Therapy		-	-	-	-	2	2	1	-	1	6
Homecare		-	-	8	6	-	-	1	-	-	15
Provider Services		-	-	2	-	-	1	-	-	-	3
Finance		-	-	1	-	-	-	-	-	-	1
Commissioning		1	-	1	1	-	3	3	-	-	9
TOTAL		2	2	18	14	5	8	5	1	3	58