

**DIRECTORATE OF ADULT COMMUNITY &
HOUSING SERVICES**

COMPLAINTS, COMMENTS & COMPLIMENTS

**ADULT SOCIAL CARE SERVICES
ANNUAL REPORT**

April 1st 2007 – 31st March 2008

Policy Performance & Resources Unit



Produced by the Quality & Complaints Team June 2008

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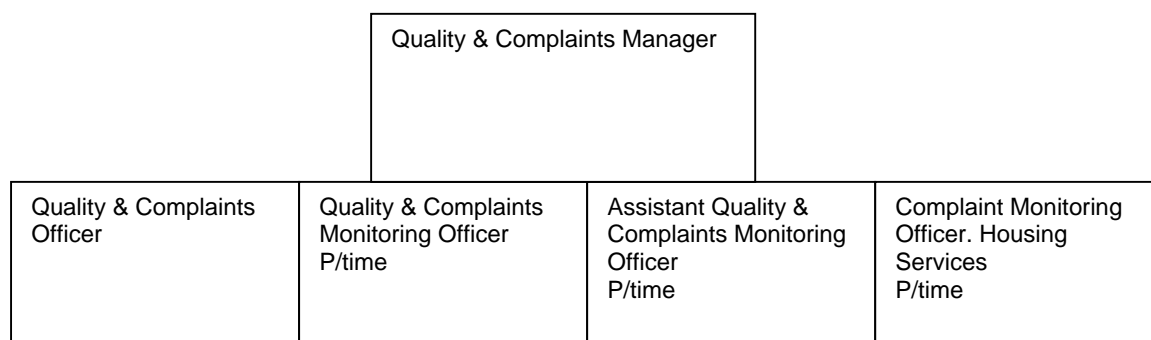
SECTION 1

1.1 INTRODUCTION

- 1.1.1 This Report provides information relating to the Adult Social Care Complaints, Comments and Compliments Procedure, during the period 1st April 2007 to 31st March 2008.
- 1.1.2 The Social Care procedure for Adult's complaints, are determined by legislation, predominantly involving the:-
- Local Authorities Social Services Complaints (England) Regulations, 2006
 - NHS & Community Care Act 1990
 - Health & Social Care Act 2000
 - Local Government Act 2000
- 1.1.3 Every Local Authority with a responsibility for Social Care Services is required to have in post a Complaint Manager, part of whose role it is to provide an Annual Report into the workings of the complaints and representations procedures. This requirement is contained in the Local Authorities Social Care Services Complaints (England) Regulations 2006.
- 1.1.4 All service users and people who request a service are provided with information on how to complain, or to comment on services or make a compliment. Complaint information is displayed in all public reception areas. It is also given out at different stages by staff to service users. Approx 10,000 complaint & compliment leaflets were provided to service users or their relatives during 2007/08.

1.2 THE QUALITY AND COMPLAINTS TEAM

- 1.2.1 The Quality & Complaints Team is part of the Policy Performance & Resources Unit, within the Directorate of Adult Community and Housing Services. The following structure chart shows the Quality & Complaints Team. We are responsible for the day to operation and management of all Social Care complaints for Adult and Children services and in addition we manage Housing Services complaints for the Directorate.



1.2.2 Our key objective in the management of all complaints is to achieve appropriate and effective resolutions within the shortest possible timescales. Every effort is made to ensure that each complaint is dealt with close to the point of service delivery. We are committed to a positive and proactive approach to complaint handling. We view complaints as a mechanism for ensuring that we continually improve the quality of our services.

- Enabling the Directorate to learn from complaints, comments and compliments, and to change, review or maintain services accordingly.
- Ensuring that complaints and comments are properly recorded and acted upon, and that where necessary things that have gone wrong are put right promptly.
- Ensuring that staff and service users understand their rights, and responsibilities within the complaint process.

SECTION 2

2.1 THE COMPLAINT PROCEDURES

2.1.1 The complaints procedure for Adult Social Care Services has 3 stages,

- Stage One. Problem solving - Local resolution.
- Stage Two. Formal Complaint investigation.
- Stage Three. Independently chaired Review Panel

2.1.2 Stage One:- The majority of all complaints are 'registered' at Stage 1. The statutory timescale for concluding an adult complaint at stage 1 is 20 working days, however, the Directorate makes every attempt to resolve the complaint within ten working days. Stage 1 offers the Directorate the opportunity of considering the complaint and responding to it informally with a view to early resolution. Most commonly this involves either apologising for any mistakes made and correcting any resulting disadvantage (upholding the complaint) or finding that the work that was undertaken was correct (not upholding the complaint). It is important that the response is informative, accurate, fair and as helpful as it can be.

2.1.3 Stage Two:- Complaints which are not resolved at Stage 1 can proceed to Stage 2 – Formal Complaint Investigation. Adult services complaints allows 25 working days at stage 2 for the investigation of the complaint by a complaint investigator and the response by the Assistant Director. This timescale for investigation can be extended to a maximum of 65 days with the knowledge and approval of the complainant. The role of the investigating person is to look into the complaint matters with thoroughness, fairness and objectivity.

- 2.1.4 Stage Three:- If the complainant remains dissatisfied after the Stage 2 process, then [S]he can request that matters move to Stage 3. This process requires the Complaints Manager to establish a Stage 3 Review Panel to hear the complaints. The Review Panel involves one Elected Council Member, and two Independent People, one of whom must chair the panel. Also in attendance will be the Complainant, the Complaint Investigator, a Senior Manager from the Directorate, the Complaints Manager and other officers who support the complaints process.
- 2.1.5 Essentially the Review Panel considers the management of the complaint and the responses made at stages 1 and 2. The Review Panel after listening to the issues related to the complaints is required to provide a written response, together with any recommendations to the Director of Adult Community & Housing Services and copied to the complainant in relation to what the Panel considers should be the outcome.
- 2.1.6 The Director then provides a final written response to the complainant within 15 days following the Review Panel.
- 2.1.7 If the complainant remains dissatisfied following the stage 3 response [S]he can, within twelve months of the panel hearing, approach the Local Government Ombudsman seeking further enquiries or investigation to be carried out into the complaints by that office. If the Ombudsman determines that the complaint has not been looked into fairly and correctly by the Directorate, or that the service user has suffered an injustice in the services [S]he has received, then the Ombudsman will reach a finding of Maladministration. Dudley has maintained an excellent record again this year; in that there have been NO findings of maladministration regarding Adult Social Care complaints for 2007/08.

2.2 CORPORATE COMPLAINTS:-

- 2.2.1 We also have a duty to comply with general complaints against the Council which do not fall within the boundaries of the Statutory Social Care Complaints process. These complaints are called corporate complaints and are dealt with under the Council's own Corporate Customer Feedback Procedure.

SECTION 3

3.1 OVERVIEW - SUMMARY OF COMPLAINTS AND COMPLIMENT ACTIVITY 2007/08

- 3.1.1 The Directorate of Adult Community and Housing Service provided a 'social care' service to **12,669** adult service users during this year.
- 3.1.2 The total number of adult complaints received for adult Social Care Services 2007/08 is **224** this compares to **139** complaints for 2006/07. Please refer to **6.1** of this report for a detailed explanation of the increase in complaints received.
- 3.1.3 **[99%]** of all complaints were resolved satisfactorily, at the earliest stage. A considerable amount of work goes into resolving complaints and we can report a very satisfactory position in that only **4** out of the 224 complaints registered during this year, needed to proceed to the formal complaint investigation stage, this is compared to **1** formal complaint investigation for 2006/07, **3** for 05/06 and **7** for 2004/05. Please refer to 6.7
- 3.1.4 There were **No** Stage 3 Complaint Review Panels requested or held during this year.
- 3.1.5 The regulations allow up to 20 days to respond and conclude the complaint matters, however in 2007/08 **142 [60%]** of all complaints were dealt with within the sought after 10 working days with a further **25** concluded within the statutory timetable of 20 working days. Therefore 80% of all complaints were concluded within the timescale. Refer to 6.7 in this report for full details.
- 3.1.6 The Directorate for Adult Community and Housing Services provides a wide range of help and advice to a large number of people in the Borough of Dudley and receives many compliments. There were **236** social care Compliments received for 2007–2008 compared to **232** for 2006-2007. Please refer to 5.1 for details.
- 3.1.7 **Local Government Ombudsman:-** There have been **No** findings of Maladministration by the Ombudsman concerning Adult Social Care Services complaint matters for 2007/08, as in all previous years this maintains a highly satisfactory position for the Directorate.

SECTION 4

4.1 EXAMPLES OF DEVELOPMENTS AND ACHIEVEMENTS IN COMPLAINT HANDLING:- 2007/08

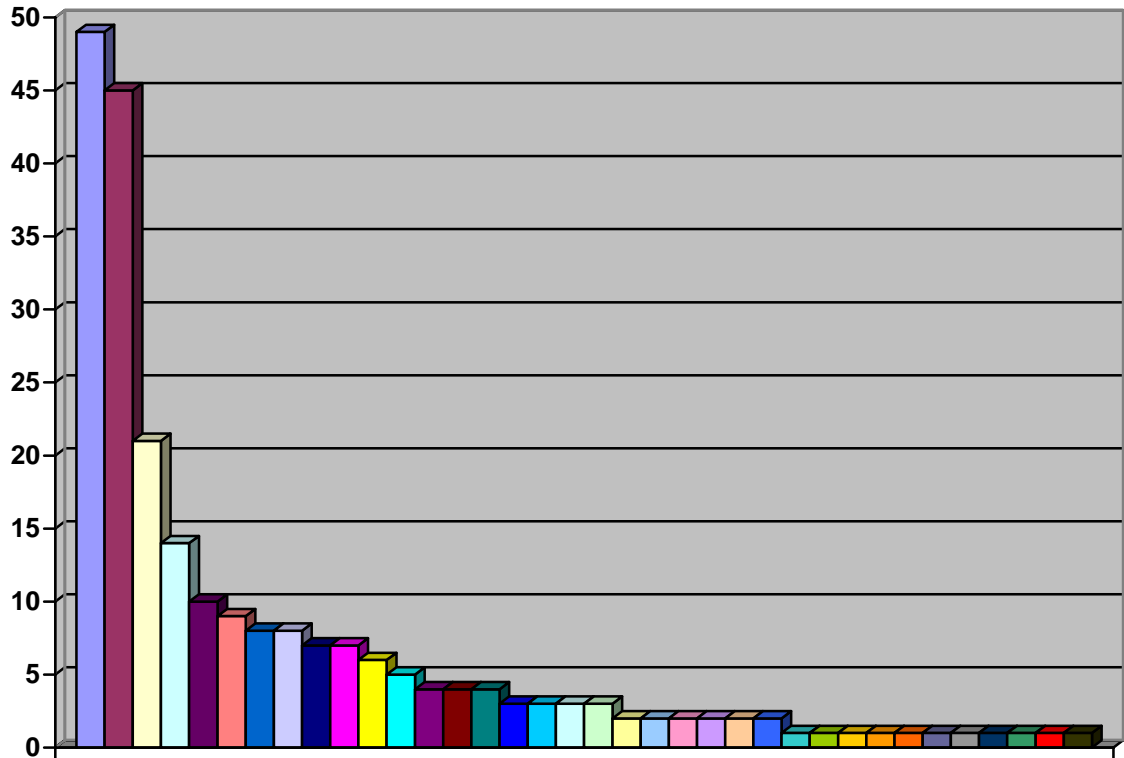
- 4.1.2 Despite an increase in complaint numbers **80%** of all complaints were concluded within the statutory timescale.
- 4.1.3 Significant efforts were made to seek early resolution to each complaint and managers and their staff take great credit for the fact that **220 [99%]** of all complaints were resolved by an effective and considered response to the complaint and thus preventing the need for unnecessary recourse to formal investigations.
- 4.1.4 During 2007/08 the Local Government Ombudsman advised complaint services nationwide of the expectations the Ombudsman has concerning the way in which Councils handle complaints made by the public. The Ombudsman raised particular concern that Councils must have good processes in place to deal with complaints relating to external agencies who deliver services on behalf of Councils. The Quality & Complaints Team has, together with commissioning colleagues sought to address this issue. We have for example put in place new information and requirements in contracts with providers detailing the need to notify the Directorate of any complaint received and advising providers of the need to respond to the complaint, including advising the complainant that they can pursue matters further with the Quality & Complaints Team if they remain dissatisfied with the response received.
- 4.1.5 A highly important area of work for the complaints service this year has involved complaints which needed to progress down a vulnerable adult route. Crucial to this area of work is a clear process of communication between the services involved, including agencies such as the Commission for Social Care and Inspection. The complaints service together with commissioning services and the vulnerable adult co-ordinator have sought to develop close links to ensure clear processes are in place to respond to this important area of work.
- 4.1.6 The Directorate has again this year maintained its position of **no** findings of Maladministration by the Local Government Ombudsman
- 4.1.7 Training for managers, social workers and other relevant groups was maintained during 2007/08. Formal training was provided to upward of 40 Managers and Seniors, with informal/overview training arranged and provided to approximately 60 staff. These figures do not include overview training provided during visits to teams and various service areas across Dudley this year.

Training courses included:-

- A half day course to inform front line staff of their responsibilities when a complaint is made.
- Training managers and other senior team members in responding to complaints at Stage 1 of the procedures
- A course for Managers and Senior Managers who may be required to undertake a Stage 2 complaint investigation.
- Training for 'front line' staff, newly appointed staff in how to respond to complaints.
- Overview training to Teams/Establishments. Brief training events to explain the complaint process.

4.1.8 Continued development of the working relationship between colleagues in the Primary Care Trust responsible for managing complaints. This has enabled Social Care services and Health Services to provide a co-ordinated, joint response to complaints where they refer to both agencies.

SECTION 5 COMPLIMENTS:- 2007/08



Occupational Therapy (49)	New Swinford Hall (45)
Pathways Team (21)	Sheltered Housing (14)
Tiled House Lane (10)	Sedgley District Office (9)
H'Owen/S'bridge START Team (8)	FALLS Team (8)
Vision Support Services (7)	Halesowen District Office (7)
Stourbridge District Office (6)	Community Equipment Stores (5)
Queens Cross Day Centre (4)	Brierley Hill District Office (4)
Community Care S'Bridge Mainstream (4)	Netherton District Office (3)
Brierley Hill START Team (3)	Hearing Impaired/Deafblind (3)
Community Care H'Owen Mainstream (3)	Community Care Sedgley Mainstream (2)
Community Care Dudley Mainstream (2)	Hospital Social Work Team (2)
Community Care Brierley Hill Mainstream (2)	Halesowen CTLD (2)
Sedgley/Dudley START Team (2)	Brett Young Day Centre (1)
Disabled Living Centre (1)	Rowan Lodge Day Centre (1)
Amblecore House (1)	Moving Handling Team (1)
Dudley CTLD (1)	Roseville Day Centre (1)
CMHT Older People (1)	Sedgley CTLD (1)
Policy, Performance and Quality (1)	Prestwood Community Care (1)

5.1 COMPLIMENTS DATA 2007/08

5.1.2 Many of the compliments received comment on the kind and caring attitude of staff, as well as the positive difference that the service has made. It should be recognised that many of the compliments we receive are from local people who may have had to contend with difficult and sometimes traumatic events. For people to express gratitude for the services provided to them during difficult times is clearly most welcome and must be viewed as a powerful message that just as we must learn from complaints we can also learn from compliments.

5.1.3 There were **236** registered social care compliments for 2007/08 compared to **232** for 2006/07. Each compliment is welcomed and goes some way to evidencing the high standard of services provided to local people and the quality in the delivery of those services by Social Care staff throughout Dudley.

5.2 EXAMPLES OF COMPLIMENTS RECEIVED DURING 2007/08

- On behalf of my family and in recognition of my mothers' stay at New Swinford Hall. I would like to extend my sincere thanks and compliments to the management and staff of this first rate facility. Having to make a decision about the care of one's ill family member is never easy, but with quality of care and the compassionate approach with which we were treated at New Swinford, the experience was made much less difficult. Regardless of when we visited, we could tell my mother was being treated very well, conscientiously and with kindness.
- Just a little word to express my thanks for getting all the bits and pieces to help me. The immediate benefit was the rails and a lot of fear that I had at the top of the stairs has been eliminated. Getting to top of the step is better too, but the best thing is descending into the water like a queen and rising again of course. God Bless you.
- TW has been very caring, helpful and sympathetic; she has given me lots of information about talking books and large print books from the library. The visual aids she has recommended have made life more enjoyable and it is a pleasure to have her visit me.
- I would like to thank you for the opportunity of attending this lip reading class. I attend the class with my sister whose hearing is worse than mine. I personally have learnt a great deal on the course, about myself and how I automatically cope with things/situations, and about others and how they feel and cope with their hearing loss.

- I wish to thank you and your staff for making my stay with you a very happy one. I found the room very clean, nice crisp linen and my laundry was done, almost as good as I do it myself. The other department I have to comment on is the kitchen, and the food that comes out of it I enjoyed very much, but I have to be careful what I say as you might lose your staff to Anthony Worrall Thompson. Thanks for making my stay a very pleasant one.
- I would like to thank you for the excellent home care package you are providing and for the equipment you have supplied. All of your staff have been professional, helpful and polite, and I cannot speak highly enough of the actual Home Carers, they are so kind and considerate. Your staff are a credit to you.
- Pleased to say, at the time of writing, my 'Type Talk and Flashing Lights' are both working together and in good form. With grateful thanks to HP for his patience and perseverance with my equipment which had its problems and delays. I certainly appreciate H's kind consideration with my deafness and old age.
- The help I have received in advice and information from the Visual Support Team, she has been so friendly and professional and having made all the difference to me moving into the area, all departments have been pleasant and helpful.
- I wish to place on record my thanks for the service and equipment I have received. About three weeks ago I requested help for my husband – the possibility of a raised toilet seat and help getting in and out of a shower. This morning I received a phone call from MH asking if it would be convenient for her to call at one o'clock. She arrived on the dot and talked over my husband's health problems with him and his immediate needs. She then fitted a toilet fixture with arm rests which was not only a great help, but my husband said was most comfortable! Also a bath seat and is going to look into a safety handle and some extension to the existing stair rail. She was most caring attentive and efficient. Her visit wasted not a minute and it has made life for us both much better and safer.
- We have just enjoyed our first 12 months at Roseville Day Centre. We have enjoyed little trips out and coffee mornings, also entertainment now and then and of course a lovely dinner meal. Most of the year you have had arrangements made for us to enjoy. Also your carers have been wonderful and very caring. I feel it is in order to give thanks from my husband and myself.

SECTION 6

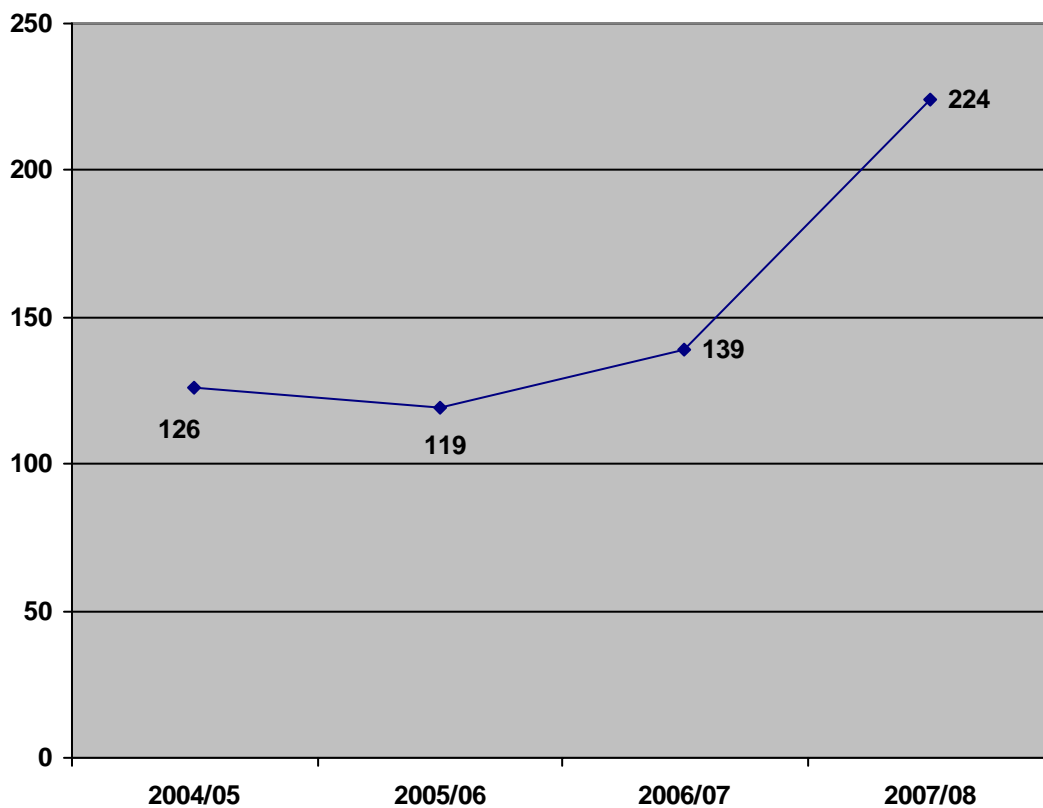
6.1 COMPLAINT DATA 2007/08

6.1.1 The annual report for the previous year 2006/07 put forward a projection that there would be an increase in the numbers of complaints received for 2007/08, and indeed that has been the case.

The increase was predicted due to factors such as:-

- The reduced role of the Commission for Social Care and Inspection [CSCI] in complaint handling,
- Increased details in contracts requesting providers to advise the Directorate of complaints.
- Revised Complaint procedure:- the Department of Health published new Social Care complaint regulations & guidance in September 2006. The new legislation and guidance widened the scope of the procedures in terms of who can complain and the matters which can be complained about.
- A continued plan to raise awareness of the complaint process with the public, managers and staff.

6.1.2 The number of complaints received during this year is **224** compared to **139** for the previous year [2006/07]



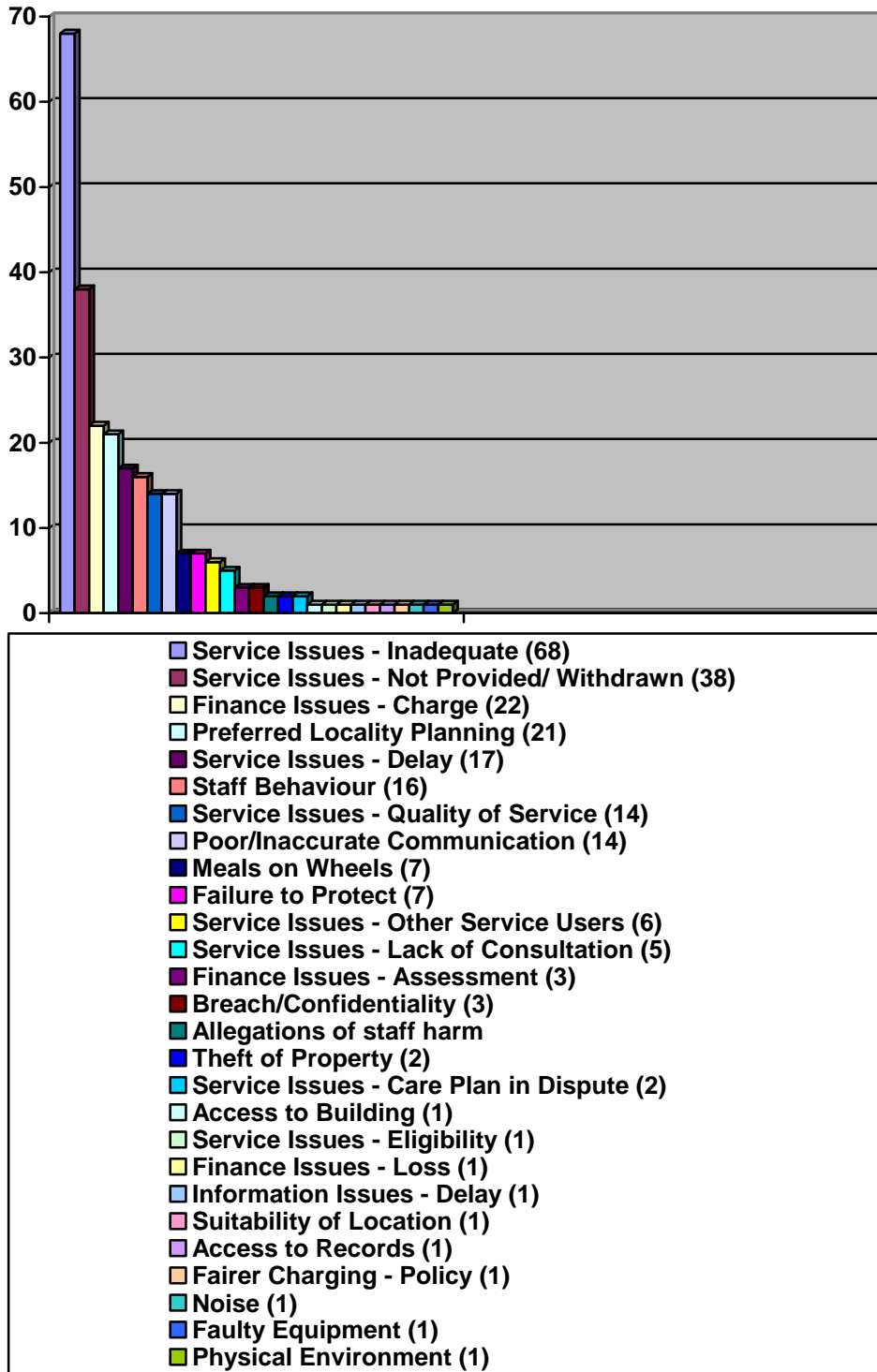
6.1.3 The Directorate of Adult Community and Housing provided a Social Care service to 12,669 Adults during 2007/08. From that figure we see that 224 people raised complaints. This statistic in no way diminishes the importance of each complaint or the impact incidents of poor practice or inadequate services had on each of the people who complained. We also recognise that it is not easy or straightforward for people to complain, particularly people who feel vulnerable, or fearful about complaining. We will be seeking to continually raise awareness of the complaint process and improve access to it.

6.1.4 New to this year, and a further reason for the increase in complaint figures concerns services which received several complaints on a single issue subject. For example:-

- 10% of the total complaints this year arose from a single issue of poor quality food at an establishment. The food was provided by an external provider, however the Directorate continues to take responsibility for the services provided in its establishments and it was correct to deal with those complaints. As a result of the complaint the provider was changed and the quality of food improved.
- In addition the Directorate received a number of complaints which are unlikely to be repeated, such as those referring to 'Pulse'. This service sought to carry out a Health and Safety review of its services to adults with a learning disability and as a result temporarily reduced some of its services. This led to a number of complaints being received and responded to, complaints which are unlikely to be repeated.
- New arrangements for Home Care Services provided by external agencies were proposed. 21 service users voiced concern about the proposed changes and in all cases a solution was found which satisfactorily resolved the situation for the service users and or their relatives.

6.2 COMPLAINT ISSUES.

6.2.1 There is a broad range of issues complained about; however the highest and most consistent area of complaint throughout the year remains 'inadequate service'.



6.2.2 Examples of inadequate service include:-

- A complaint from a relative unhappy with the choice of service offered, holding the view that the service user needed mental health assistance.
- A relative unhappy with the care package being offered, feeling it was inadequate to meet the challenging behaviour of the service user.
- A complaint relating a reduction in service

6.2.3 Complaints relating to 'Preferred Locality Planning' are complaints relating to proposed changes to agencies delivering home care services. In all cases a decision was made to freeze the proposed change until further discussion could take place with the service user and or relative and in cases where it was felt there could be a negative impact the decision was made to maintain the existing service.

6.2.4 Complaints relating to Service Issues refer to:

- Withdrawal of Services
- The Quality of Meals on wheels

6.2.5 Examples of complaints relating to Finance:-

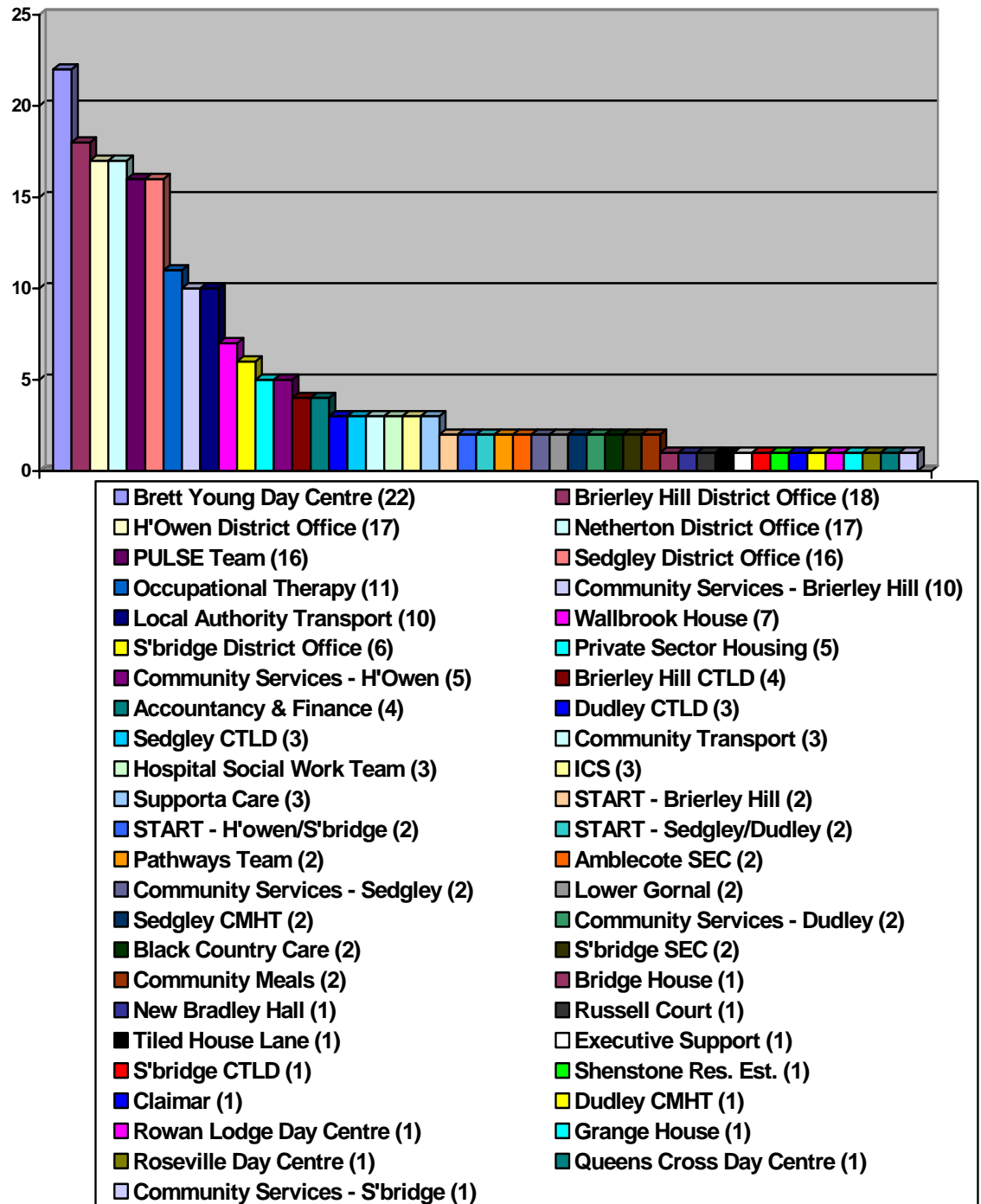
- Complaints regarding an increase in charges for Home Care
- A complaint regarding advice relating to funding of residential care.
- Refusal to pay for a service due to dissatisfaction with the quality of service provided.

6.2.6 Other areas of complaints include:-

- **Service Dispute:-** A relative unhappy that her parent was being discharged home.
- **Delay:-** Complaint relating to delay in reaching a decision on a funding matter.
- **Poor Communication:-** Failure to return calls, and lack of communication regarding a requested assessment
- **Staff Conduct:-** Alleged attitude of a care worker whilst in a service users home. And, unhelpful approach and attitude of a member of staff.

6.3 SOCIAL CARE COMPLAINTS RECEIVED ACCORDING TO SERVICE AREA

6.3.1 The chart below shows the service areas involved in the **224** complaints received this year. The complaints cover 47 separate services.

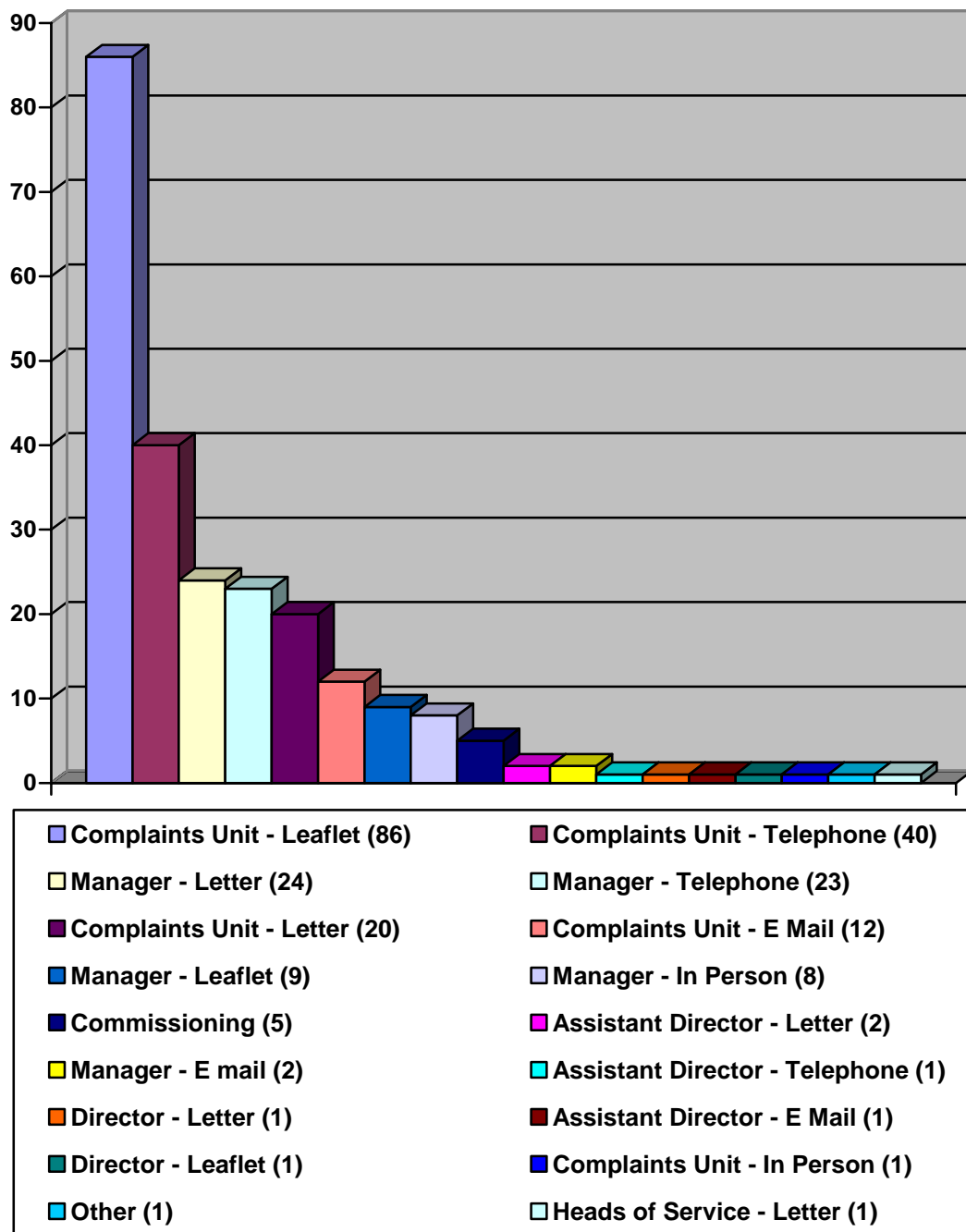


6.3.2 Brett Young Day Centre received the most complaints with **22** for the year, this number of complaints could be seen as a negative but this is not necessarily the case. Indeed the Manager of the service takes a pro-active stance in enabling service users to put forward complaints

where the service falls below their expectations. The complaints referred to involve the quality of food. This matter was satisfactorily resolved and involved changing the provider of the food to the Day Centre.

- 6.3.3 Complaints regarding externally commissioned establishments refer to people who reside in private or independent establishments where funding is in full or partly provided by Dudley MBC. Or, where private, external home care services provide a service to Dudley MBC residents on behalf of the Directorate. As some social care services are increasingly provided by external agencies on behalf of the Directorate we maintain a responsibility for ensuring that the service user receives a quality service; where this falls short the service user continues to have the right to complain using this complaint process. 2007/08 saw an increase in complaints regarding externally provided services and the Directorate will continue to monitor this situation to ensure that service users are able to feedback on the service provided to them.

6.4 HOW COMPLAINTS ARE RECEIVED



6.4.1 The total figure represents 238 complaints received, however this figure includes matters which needed to be dealt with under the Vulnerable Adults procedure.

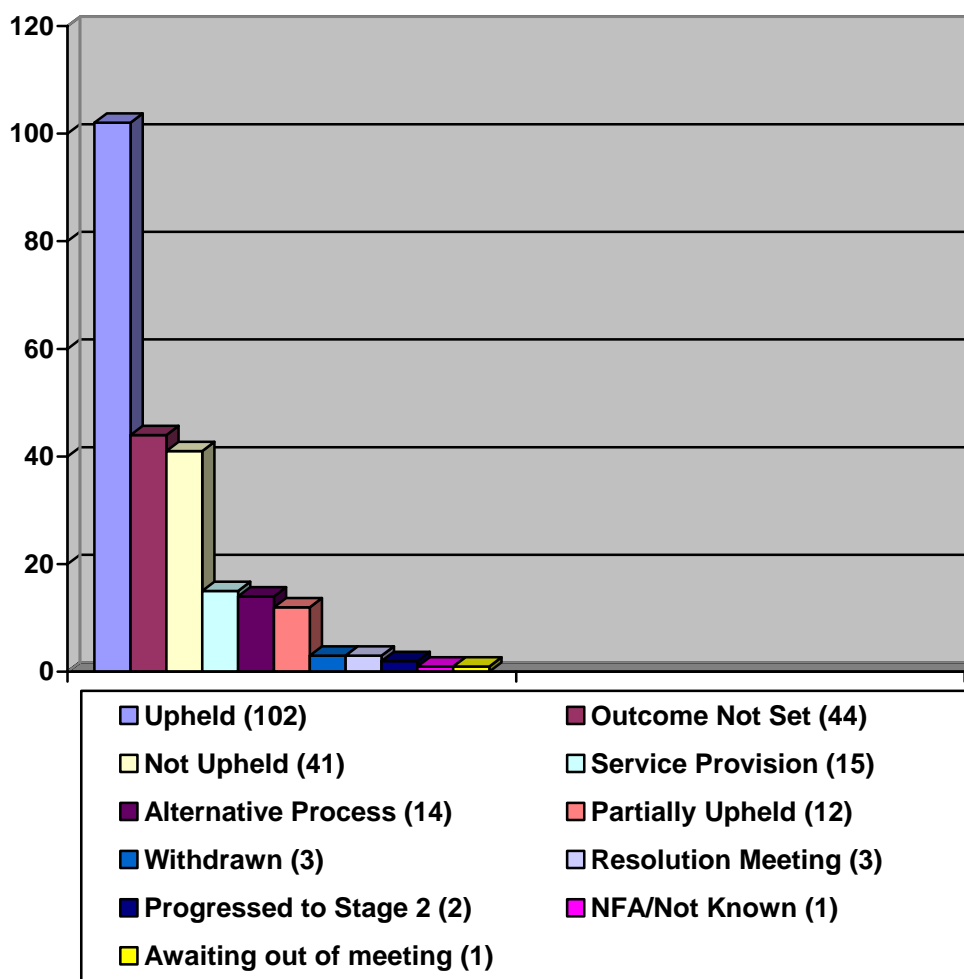
6.4.2 As in previous years a complaint leaflet remains the most used method of sending in a complaint with **86** being received. In 2007/08 we distributed approximately 10,000 complaint leaflets directly to Adult and Children service users or to reception areas across Dudley Council.

- 6.4.3 We have seen an increase in the use of email complaints this year and it is anticipated this is likely to increase in the coming years.
- 6.4.4 All complaints, however received, are acknowledged, before a Manager is allocated to carry out the response to the complaint matters.

6.5 OUTCOMES IN TERMS OF FINDINGS

6.5.1 The focus in dealing with all complaints is seeking a timely and satisfactory resolution, where lessons are learned and where outcomes from complaints can inform service improvements .

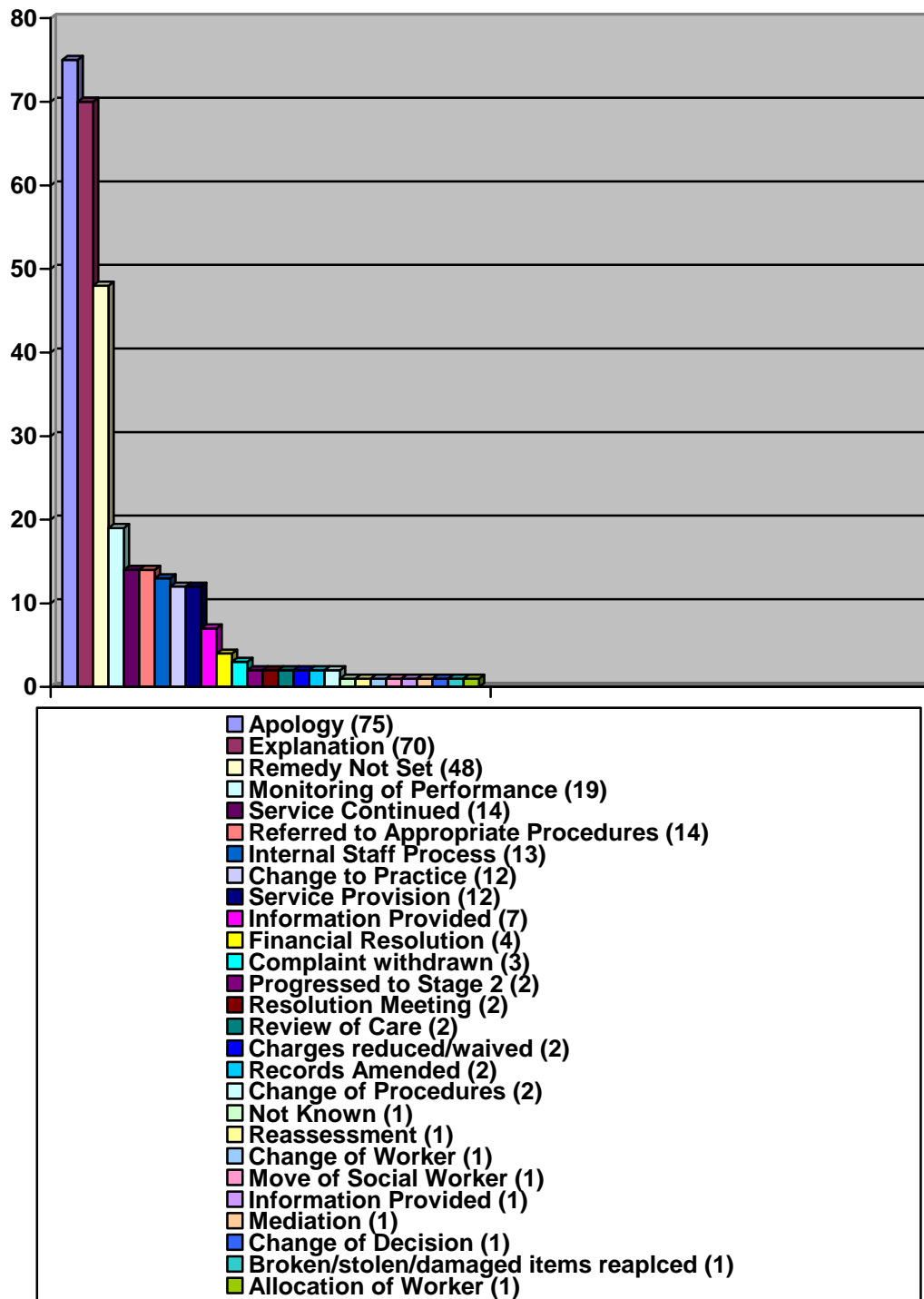
6.5.2 The vast majority of all complaints are resolved at stage 1 – problem solving stage and it is not always possible to determine a ‘finding’ in all complaints. This is particularly so where matters are resolved face to face through discussion and mediation. However, where it is reasonable and possible to reach a finding this can assist in our learning.



6.5.3 It can be seen that the finding of “Upheld” figured highest in the outcome categories. This indicates a degree of fairness and objectivity in the enquiries carried out into the complaint matters. Along with a recognition that mistakes are made and need to be rectified.

6.5.4 Service users have the right to raise several areas of complaint at one time; this can result in several different findings. Where further corrective action is needed an agreed action list will be drawn up seeking to resolve the complaint and to prevent a re-occurrence of the issues raised. The actions are monitored to ensure they are carried out.

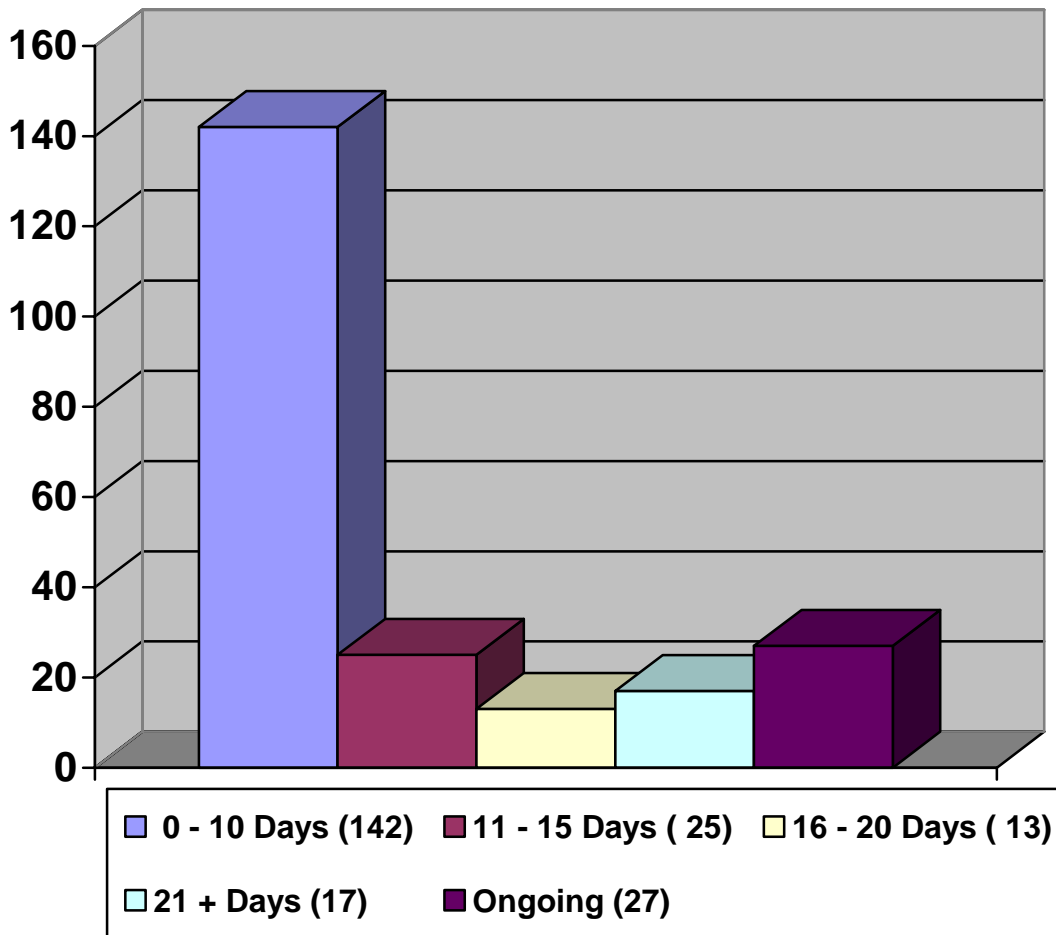
6.6 HOW ARE COMPLAINTS RESOLVED



6.6.1 312 remedies were recorded. A number of complainants receive several outcomes for example an explanation together with an apology and where required new service provision. An apology is always provided when a complaint is upheld. An explanation is always given when a complaint is not upheld and when it has been referred to an

alternative procedure. Often the explanation will be detailed and will have required a thorough examination of records and discussions with relevant members of staff

6.7 TIMESCALES



6.7.1 The vast majority of all complaints were registered and resolved at Stage 1 of the complaint procedure, this requires that the complaint is responded to and concluded within 20 working days. However, the Directorate seeks where possible to have complaints resolved within 10 working days and indeed despite the overall increase in complaints this year it is the case that **142 [60%]** of all complaints for the year 2007 – 2008 were resolved within 0 – 10 days. A further **38** fell inside the 20 day timescale, i.e. **180** complaints out of 224 being dealt with inside the timescale.

6.7.2 The figures relating to 'ongoing' largely involve complaint matters which progressed down a vulnerable adult route, the complaint service keeps

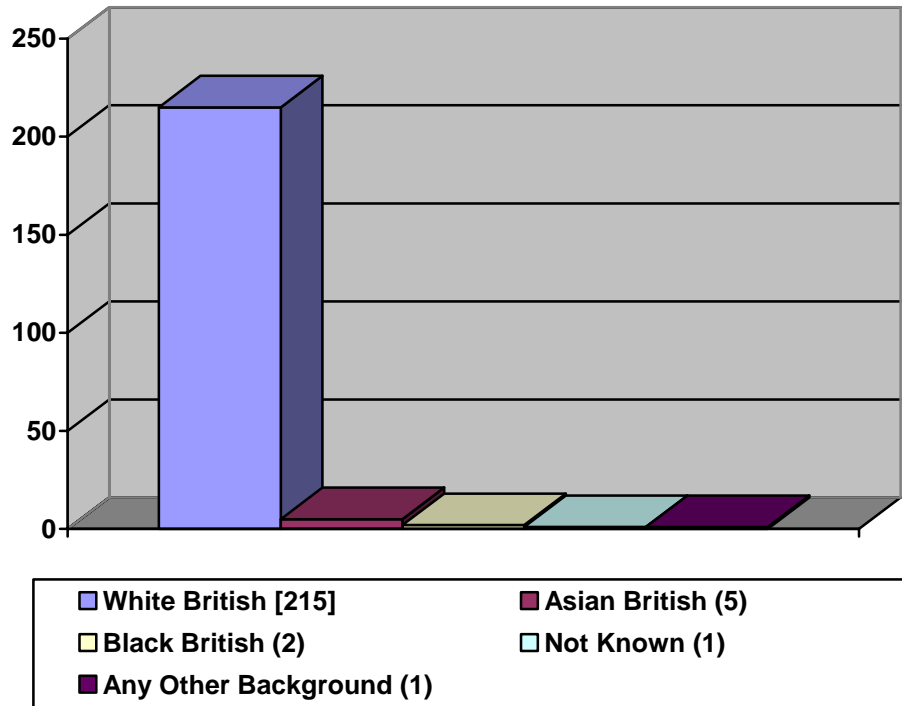
the complaint matters open until the outcome of the vulnerable adult procedures, in order to respond to any outstanding complaint issues.

6.7.3 Reasons for Delays:- The following are not put forward as justification for delay instead they are presented as part and parcel of the difficulties in concluding all complaints in good time:-

- We received 85 more complaints this year than the previous year
- The majority of complaints going over time refer to complaints which needed to be directed down the Vulnerable Adult Procedures or complaints relating to external providers of services– the complaint remained opened until matters were concluded
- Delay whilst establishing facts
- Seeking response from managers
- Seeking outcomes from other agencies tasked with providing the response to the complaint.
- Delay can be acceptable where the complainant is agreeable to taking further time in order to satisfactorily conclude matters without recourse to the formal complaint investigation stage.

6.8 ETHNICITY

6.8.1 Service Users ethnicity is recorded where it is provided and or known. The recorded figures for 2007/08 are as follows:-



6.8.2 As can be seen the vast majority of people who used the complaint process are British/White. The Quality & Complaints Team will continue to try to raise awareness and improve accessibility to the complaint process for all Adults in receipt of a service. There is no complacency regarding this matter, public information regarding complaints will be reviewed, and access to community groups to raise awareness of the complaint process will be increased.

6.9 HOW DO WE ENSURE THAT COMPLAINTS ARE GENUINELY RESOLVED?

- 6.9.1 The Stage 1 response letter invites complainants to seek further assistance from the Quality and Complaints Team, if they are still dissatisfied.
- 6.9.2 In addition, the Quality and Complaints Team is able to undertake a monitoring role with regard to complainant satisfaction. This involves direct communication with the complainant on occasion, to ensure that they are, indeed, satisfied with the response that they have received.

SECTION 7

7.1 AREAS OF DEVELOPMENT FOR THE COMPLAINT & COMPLIMENT PROCESS 2008/09

- 7.1.1 A significant aspect of work for 2008/09 will be maintaining close links and knowledge of the proposed joint Social Care and Health complaint process, proposed by Government to be in place for 2009
- 7.1.2 Continue to publicise and raise awareness of the complaint procedures for adult services users, ensuring that they are widely available to staff and all service users.
- 7.1.3 A new process has been put in place designed to evidence the lessons learned from individual complaints and how they have directly led to service improvements and impacted on the planning of services across the organisation. Reports detailing the progress made will be provided to Senior Managers as this process becomes established
- 7.1.4 Clear guidance to staff about how to respond positively and helpfully to comments made by service users and carers will continue to be provided.
- 7.1.5 Increased monitoring of timescales/response by Managers
- 7.1.6 Further awareness training for front line staff. Training for Managers/ Seniors in responding to stage 1 complaints.
- 7.1.7 Training for Managers and Senior Managers in addressing Stage 2 and Stage 3 complaints.
- 7.1.8 Training for Elected Members
- 7.1.9 To undertake consultation with independent groups and partner agencies about levels of satisfaction with the complaint and compliment service.

- 7.1.10 To develop the process in place relating to complaints about external providers of services such as residential care homes, domiciliary care agencies.
- 7.1.11 Develop and implement a staff survey in order to gather views and reflections from staff concerning their experience of the process.
- 7.1.12 To increase the numbers of compliments sent through to the Quality & Complaints Team and to make increased positive use of those compliments.

SECTION 8

8.1 EXAMPLES OF LEARNING FROM COMPLAINTS:- 2007/08

- Mental Health. As a result of a complaint new written information is now provided to 'nearest relatives' with information which states who is seen as the nearest relative by the agencies involved and stating the right of the nearest relative including consultation, right of appeal against Mental Health Assessments, and which services are involved and why.
- As a result of complaints involving adult protection issues the Quality & Complaints Team, Commissioning Services and Vulnerable Adults Service established a joined up process for receiving, monitoring and responding to complaints which need to follow the Vulnerable adult protection route
- As a result of complaints involving services provided on behalf of the Directorate by external providers the Quality & Complaints Team, and Commissioning Services have reviewed the process for how such complaints must be dealt with. As a result new contracts with external providers hold specific details requiring providers to notify the Directorate of complaints they receive and to provide copies of the response and details of the outcome.
- Complaints relating to discharge arrangements from Hospital led to specific action designed to ensure that staff are fully aware of the safe discharge procedure from nursing back into the community.
- As a result of a complaint regarding communication the service involved determined there was a need to link previous providers of services to new providers to enable greater understanding/knowledge of the service users needs.

- The desire and right for an individual service user to have 'Choice' is demonstrated through complaints received in 2007/08. i.e. A decision to change the provider[s] of home care services was implemented in some areas in 2007/08 and in most cases service users were quite content with the proposal – however in cases where people were unhappy about the proposal and complained about it, the decision was frozen until further consideration of the impact on the individual was carried out, in all cases where the impact could be negative the decision was made to retain their existing service provider.

SECTION 9

9.1 ELECTED MEMBERS VISITS TO SOCIAL CARE ESTABLISHMENTS

- 9.1.1 Each year Elected Members are nominated by their Area Committees to carry out required visits to Dudley MBC Social Care establishments. Members are provided with a schedule of visits covering all social care establishments, together with feedback forms to complete during their visits.
- 9.1.2 Service users, and staff are provided with the opportunity to put forward any thoughts or comments to Members who then clearly take full and proper account of this in their feedback.
- 9.1.3 The feedback forms, once completed are sent to the relevant Assistant Director. This provides the opportunity for Members to put forward immediate and valuable information, observations and comments regarding their visits, together with specific requests for action or a response to any issues arising out of the visit. Any action taken as a result of the feedback from Members is monitored to ensure it takes place. Clearly, this is a valuable and vital tool in our ongoing aim of continually learning and developing our services for all people using services.