

Report To: CCSLT/CFMT

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Title: Customer Feedback Annual Report 2015/2016

1. Introduction

Each year, Social Services' Departments are required to produce an annual report which provides an overview of customer feedback alongside a review of the effectiveness of the complaints process.

The current complaints procedure was launched by Welsh Government on 1st August 2014. The figures presented in this report show our performance during the financial year 2015/16 within the complaints procedure.

The Social Services Customer Connections Team is responsible for dealing with customer feedback i.e. complaints, waiver applications and praise across both Community Support Services (CSS) and Children and family Services (CFS).

This annual report is divided into sections. Each section will provide an overview as follows:

- Section 2 – summary of activity and core standards
- Section 3 – complaints
- Section 4 – waiver
- Section 5 – praise activity
- Section 6 – Concerns
- Section 7 – Complaint resolved within 24 hours
- Section 8 – Lessons Learned and action taken
- Section 9 – Evaluation of procedure
- Section 10 – Extensions due to exceptional circumstances

The data provided in the annual report will cover three years; this will provide some context in terms of activity and trends.

2. Summary of activity and core standards

Chart 1 summarises the activity over the last three years for complaints, waiver applications and praise. Praise has decreased significantly this year, while the number of complaints and waiver applications have also decreased from last year.

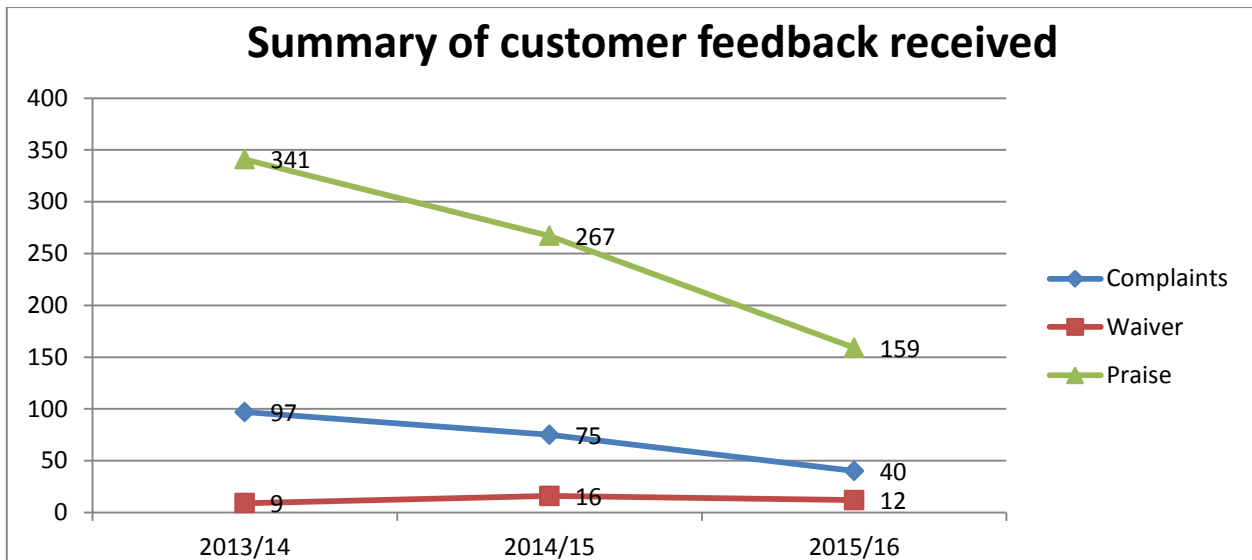


Chart 1: Summary of customer feedback received over three years

All complaints and praise are recorded against one of the Department’s seven core standards listed in table 1.

Standard	This means that:
Courtesy & Respect	You can expect to be treated with courtesy and respect. For example, you should be given the name of the person you are talking to, and you should be called by your title unless you ask us not to.
Confidentiality & Privacy	Information about you will be treated as confidential. For example, staff will only discuss your needs with people who need to know, if you do make a complaint only the staff directly involved will know the details.
Information	You should expect to receive leaflets which explain the services you are receiving, or might receive. For example, “Your Voice” and “Moving into a Care Home - A guide for people in Denbighshire”.
Communication	You should expect full communication with staff in the Social Services Department. For example, speaking to the person responsible for your case.
Involvement & Participation	You should expect to be fully involved in discussing the services you are receiving. If you have a carer, he/she will be asked their views and offered a separate assessment.
Staff	Staff assessing needs will produce an identity card, have a relevant qualification and/or experience, and have regular support and training
Response Times	These are times in which responses should be made. For example, services should start at the time agreed, you should receive a copy of the Care Plan.

Table 1: Social Services Core Standards

The majority of both complaints and praise fall into the 'involvement and participation' and 'staff' core standards and in reality very few complaints or praise are received about 'response times'. This would suggest that these are the important standards to service users and carers.

3. Complaints

Overall, the number of complaints received during 2015-16 has decreased by 47%. Chart 2 illustrates the number of complaints received by each service:

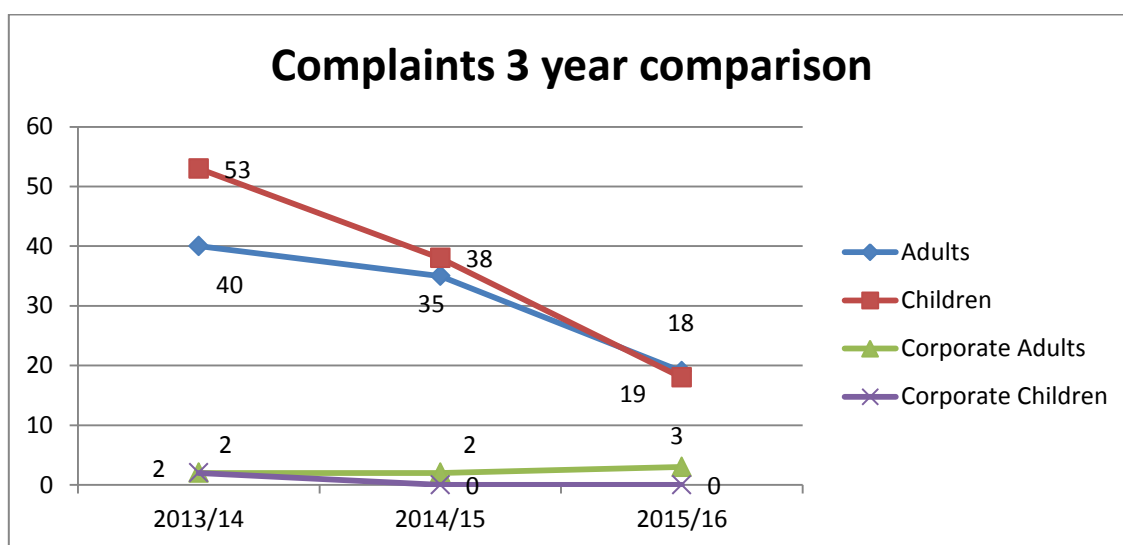


Chart 2: Complaints – 3 year comparison

Corporate complaints are complaints raised about Social Services which fall outside of the statutory guidance, but were dealt with as a complaint.

The number of corporate complaints has remained low in the last 3 years. The number of complaints made against both CSS and CFS has decreased again this year after a peak in 2012/13. This is in some part due to more effective complaint handling at an early stage as those dealt with within 24 hours are discounted and not included in these figures.

3.1 What were the complaints about?

The reason for making complaints (measured against the core standard – see table 1) for each year is illustrated in chart 3.

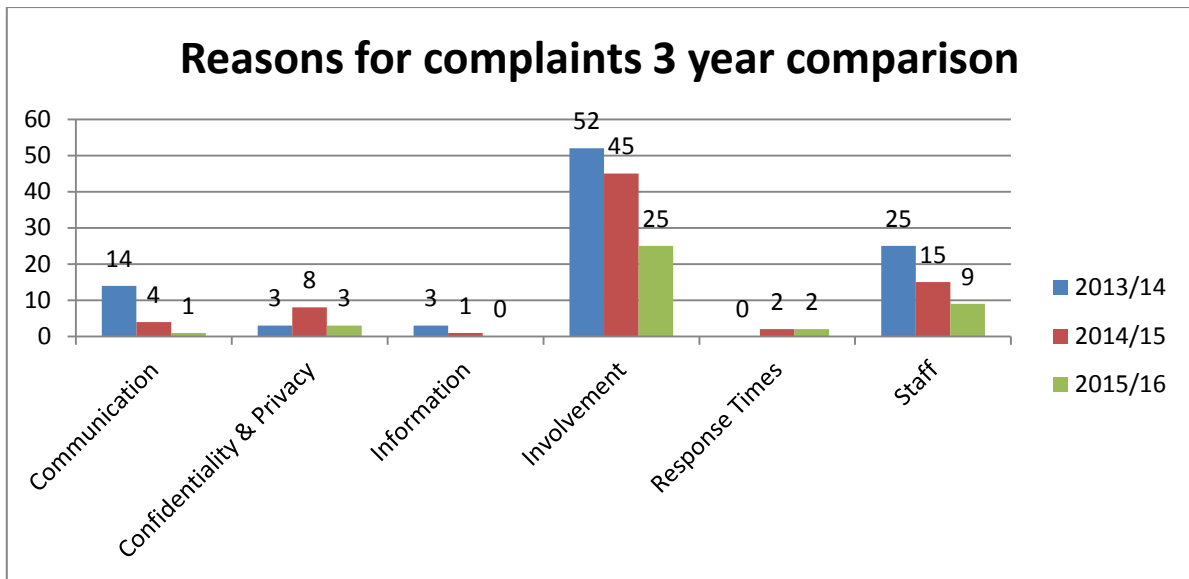


Chart 3: Reason for making complaints – 3 year comparison

Involvement, staff and communication continue to be the 3 main areas of complaint; this is consistent with previous years.

When looking at the nature of complaints by service, chart 4 shows that CSS and CFS are receiving complaints in the same areas, involvement being the majority. This could be in some part due to the efficiencies undertaken this year and the period of austerity the services are going through. There were also some confidentiality breaches this year in children and family services that were avoidable.

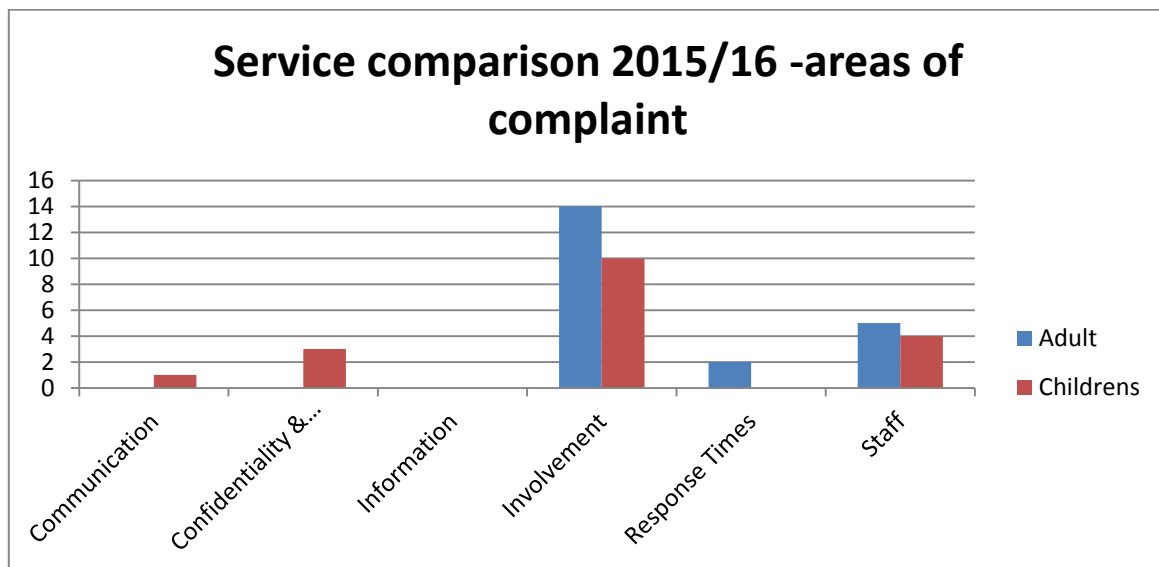


Chart 4: Reason for making complaints by service 2014/15

3.2 Acknowledgment of complaints

All complaints were acknowledged within the statutory timescale of 2 working days, unless the complaint was resolved prior to acknowledgement.

3.3 Stage 1 complaints

3.3.1 Outcomes

Chart 5 illustrates the outcome of complaints. Over the last three years, the outcomes of complaints have varied. This year has seen the number of upheld and partially upheld complaints increase to 56% of complaints. This is because the new (2014) complaints procedure allows us to deal with lower level complaints quickly and outside of the complaints procedure. The discussion element is an area we have improved this year preventing time spent on not upheld complaints; some senior practitioners/practice leaders have embraced this concept.

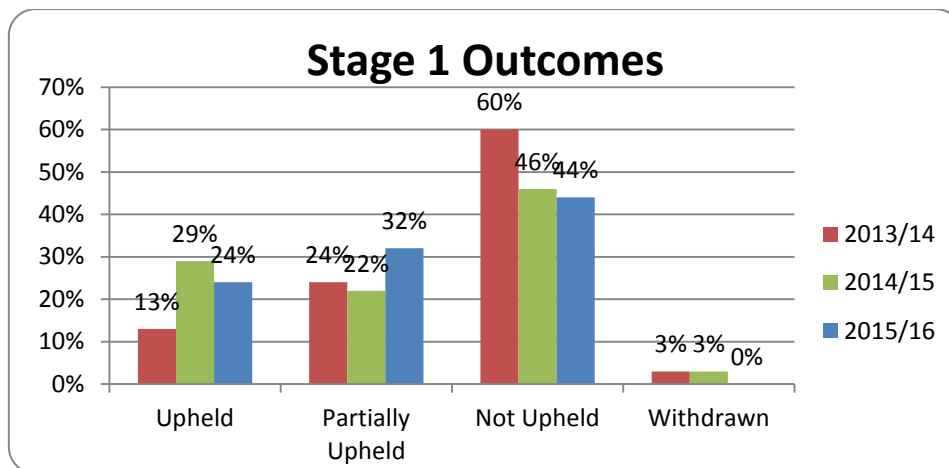


Chart 5 Outcome of stage 1 complaints

3.3.2 Timescales

We have seen performance in dealing with complaints within timescale improve over the last year to 97%; with CSS achieving 100% within timescale and CFS only having 1 complaint beyond timescale. This year we have managed to achieve above the 95% within timescale corporate target (chart 6).

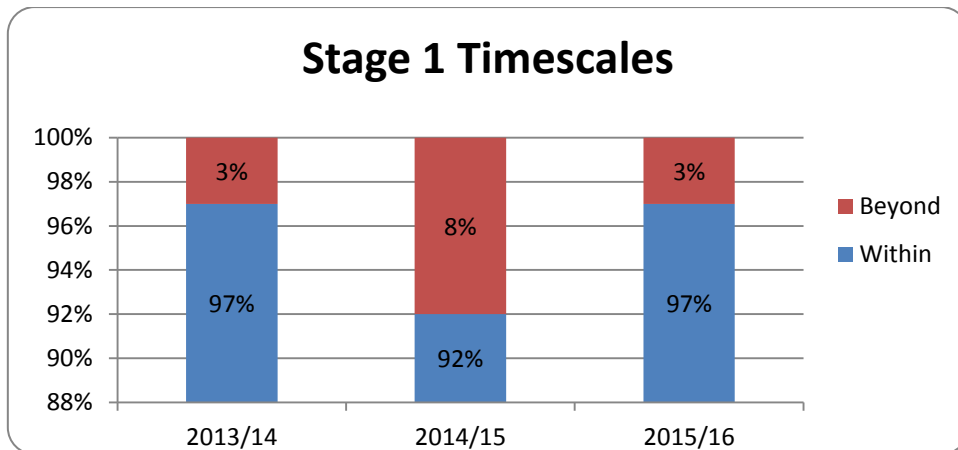


Chart 6 Stage 1 complaints – adherence to timescales

3.4 Stage 2 complaints

Chart 7 shows a breakdown of stage 2 complaints by service for the last three years. This year we have seen a further decrease in stage 2 complaints. This could be due to the managers responsible spending more time to discuss and agree resolutions at stage 1.

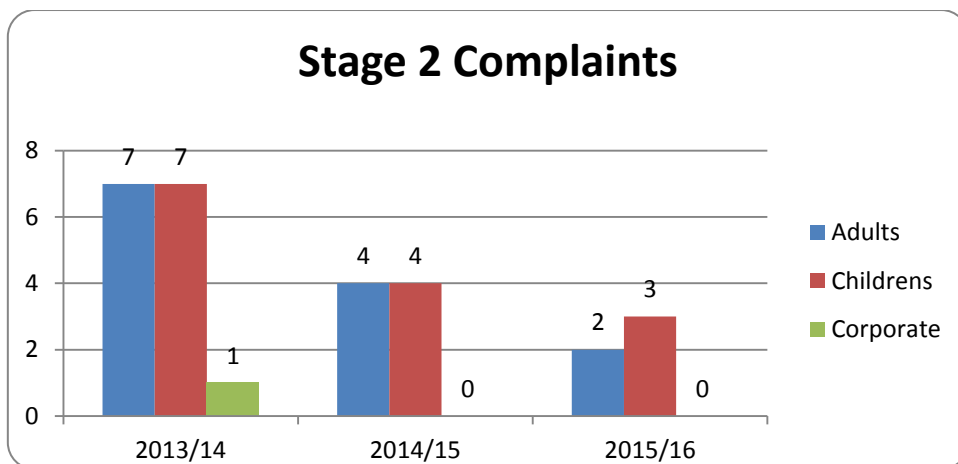


Chart 7 Complaints progressed to stage 2

3.4.1 Outcomes

Chart 8 details stage 2 complaints by outcome. 83% of the stage 2 complaints have been upheld or partially upheld. This perhaps suggests that complaints requiring a more complex resolution are going to stage 2, which is in keeping with how the complaints procedure is designed to work.

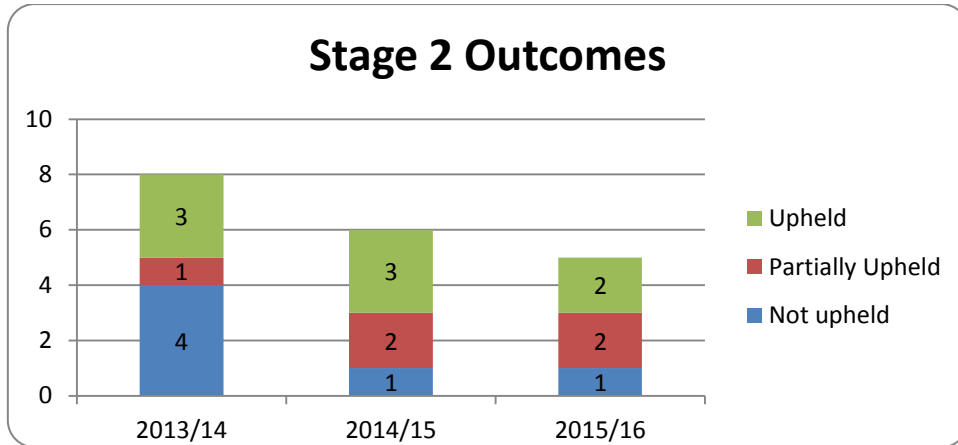


Chart 8 Stage 2 complaints by outcome

3.4.2 Timescales

This year, 100% of stage 2 complaints that have been completed, were dealt with within agreed timescale. Two stage 2 investigations were extended due to circumstances beyond our control (see section 10 for more details)

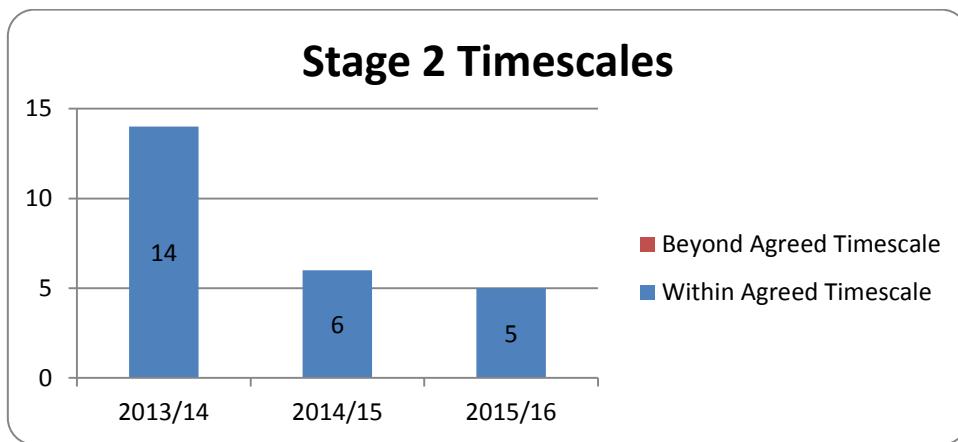


Chart 9 – Stage 2 complaint timescales

3.4.3 Stage 1 and 2 outcomes

Chart 10 below shows the difference in outcomes between the last 3 years. It is apparent that much fewer complaints are going through the procedure and resulting in being not upheld. This suggests that the correct issues are being dealt with through the complaints procedure.

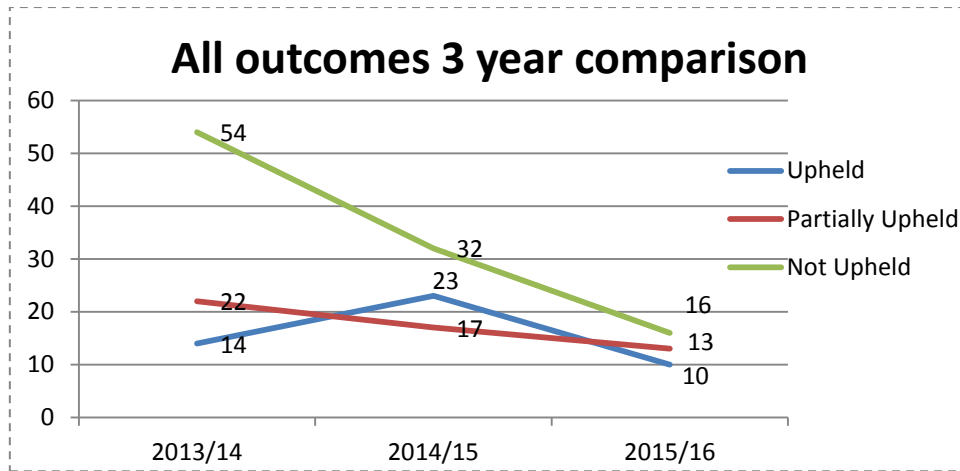


Chart 10 – All outcomes 3 year comparison

3.4.4 All Timescales

As shown in chart 11 below, there has been a reduction in complaints dealt with beyond the statutory timescale. The complaints officer and responsible managers have worked hard to ensure that complaints are dealt with as soon as possible.

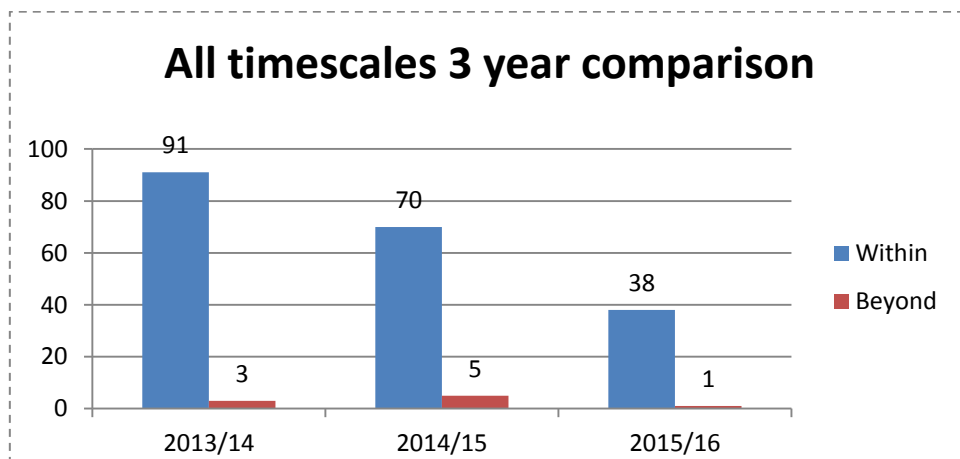


Chart 11 – All timescales 3 year comparison

4. Concerns

Concerns are issues raised that did not meet the criteria for the statutory complaints procedure or valid verbal complaints that were dealt with within 24 hours. These issues were generally resolved informally.

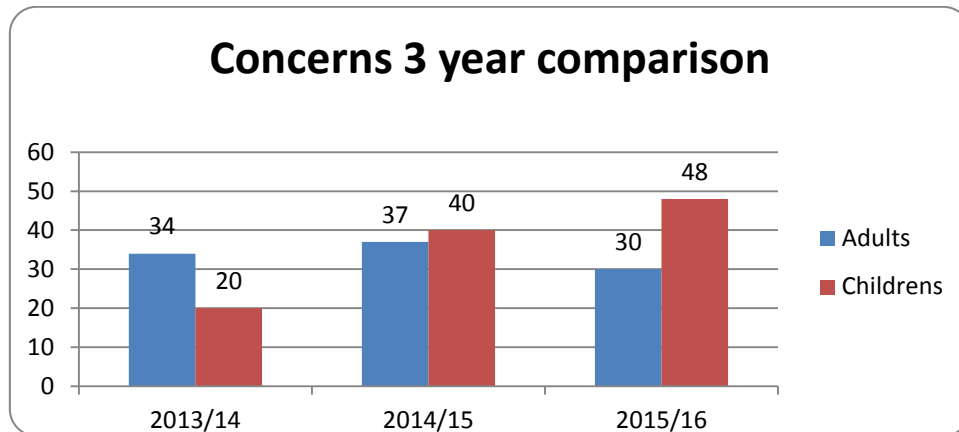


Chart 7 Concerns 2015/16

5. Complaints resolved within 24 Hours

Within the complaint legislation, any verbal complaints that are resolved by the close of the next working day, to the satisfaction of the complainant should not be recorded as a complaint. Such complaints are recorded as concerns.

	2014/15	2015/16
Adults	6	9
Children	6	18

CSS dealt with 9 out of 30 valid complaints within 24 hours = a **reduction in complaints of 30%**.

CFS dealt with 18 out of 36 valid complaints within 24 hours = a **reduction in complaints of 50%**.

6. Waiver applications

The table below shows the number of waiver applications received over the last year has increased after a decline in numbers last year.

Year	Waiver
2012/13	17
2013/14	9
2014/15	16

7. Praise

The table below shows the number of items of praise received over the last three years. Praise has decreased significantly this year.

Year	Praise received
2013/14	341
2014/15	271
2015/16	162

Like complaints, praise is measured against the core standards (see table 1). The number of items of praise received has reduced greatly this year. Chart 12 shows the number of praise received.

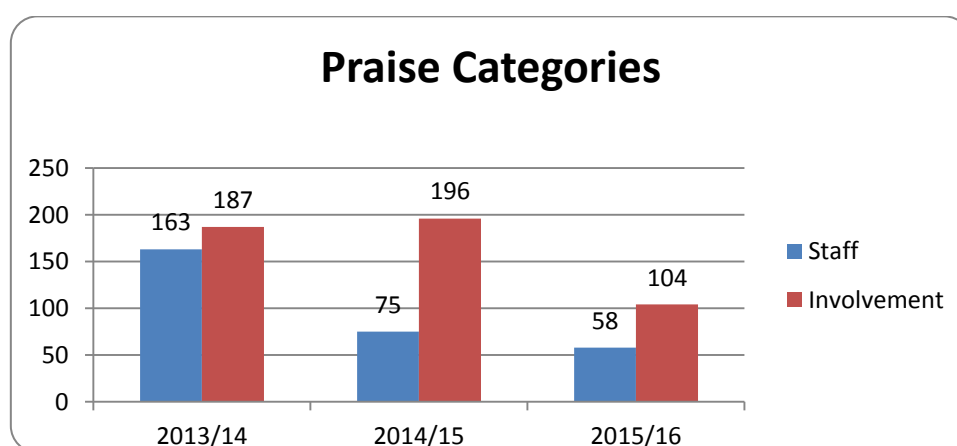


Chart 12 Items of praise received

8. Lessons learned and action taken

When complaints are upheld, partially upheld or potential improvements are identified, action plans are drawn up of the changes need to be made. Action plans are monitored until all the actions have been completed.

8.1 Areas of improvement

For the majority of complaints, the improvements made can be very specific to the service users involved. There are however examples of changes implemented that will improve practice or processes across the service, some examples are:

- Practice leaders/Senior Practitioners have been able to deal with complaints within 24 hours on many occasions; this has resulted in reducing complaints by 41% this year. This good practice in dealing with matters quickly should be shared and endorsed.
- Development of an escalation process to inform senior managers of difficulties in working with other Local Authorities.
- The Community Living Guide for Practitioners has been updated significantly following a complaint regarding the compatibility/matching process for existing and potential new tenants, failures were identified, and the additions to the guidance should help prevent future occurrences.
- Improving practice around checking and recording citizen's legal documents such as power of attorney statements.
- Care and support planning - case recording process, is being completely reviewed. Work ongoing with practitioners, senior managers, PARIS.
- CESI processes have been improved to ensure staff illness does not affect specialist orders, following a complaint regarding a delay.

8.2 Areas of weakness

- **Providing documents / meeting minutes:** An issue that has arisen frequently this year within complaints is parents not being provided with the necessary paperwork prior to meetings and not being sent the minutes of the meetings afterwards. These issues have been upheld.
- **Staff Attitude:** A difficult area in complaints, as due to the nature of the service's involvement, parents are not going to be happy to have their parenting ability questioned. Phone calls and explanations from practice leaders have resolved many of these issues.

- **Eligibility Criteria:** There have been instances of families not accepting decisions made using the eligibility criteria. These have been dealt with by offering a re-assessment in the first instance. In all cases eligibility criteria has been applied correctly initially, however the second assessment can still offer a different outcome or different options to the family. Perhaps this is due to the differing perspective of the practitioners, or the citizen presenting differently.

9. Evaluation of procedure

Feedback received has indicated that staff are very pleased with the discussion element at stage 1 of the procedure; people feel that this has helped to resolve matters more quickly. Our performance has also echoed that the enforced discussion helps to resolve issues more quickly and effectively as opposed to dealing with issues in writing at stage 1.

Feedback has shown that staff involved have found it difficult to deal with unreasonable or obstructive complainants within the procedure. If complainants do not make themselves available for discussions, moving the complaint forward has proved difficult. Staff have also raised concerns that complainants always have the right to a stage 2 investigation. This causes concern in circumstances when a complainant has unrealistic expectations of the service. This results in costing the service money and scarce resources by having to arrange in independent investigation for a complaint, even if further investigation has no chance of resolving the issue.

Overall feedback has shown that staff have improved at dealing with complaints because they have further embraced the new procedure this year; timely discussion allows more scope to deal with minor issues outside of the procedure.

10. Extensions due to exceptional circumstances

There have been 2 extensions required due to exceptional circumstances. In each case the extension has been agreed by the Director of Social Services and the complainant was also kept fully informed and agreed to the extension.

1. Due to personal circumstances surrounding the poor health of his mother, the investigator was unable to complete his investigation within timescale.
2. The investigator was unable to undertake key staff interviews in a timely manner, owing to key staff members having pre-planned annual leave.