

Luton Borough Council

**Housing & Community Living
Department**

Complaints and Representations

Annual Report

1st April 2011 to 31st March 2012

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1. Introduction

This report provides details of the complaints and compliments received by Luton Borough Council Housing & Community Living Department (HCL) for the period April 2011 – March 2012.

- The principles of the two Complaints Procedures adhered to within HCL; The Adult Social Care Complaints procedure and the Councils Corporate Complaints Procedure.
- The Role of the Complaints and Representations Manager and how this is helping to shape increased joint working with health colleagues.
- The number of representations, complaints and compliments received in the period 1st April 2011 to 31st March 2012 and a summary of the issues raised.
- 'Lessons learned' - areas for future development to strengthen accessibility to the complaints procedure by service users, the way in which complaints and representations are monitored and the implementation of recommended outcomes.

2. The Adult Social Care & Corporate Complaints Procedure

The Department of Health requires that Adult Social Care Services have a complaints procedure and emphasises the involvement of service users in all decision making, related directly to their welfare. With effect from April 2009, new regulations and guidance on the joint social care and health complaints procedure came into force. (The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009). Luton Borough Council Executive has formally adopted the regulations and operates a complaints procedure to meet the statutory requirements.

- Housing (incl. Community Development) and Resources and Performance services provided by HCL are covered by the corporate complaints procedure.
- The Cultural Service Trust operates their own complaints policies which is managed and monitored by the HCL Complaints and Representations Manager.
- The principles of the procedures are combined, although the timescales differ between them.
- Luton Borough Council welcomes complaints as an important part of improving our service and ensuring quality. Complaints are used in a positive

manner to support the development and maintenance of high quality, service-user focused services.

Compliments are recorded for both procedures and are acknowledged personally by the Corporate Director. A 'smile file' is maintained which evidences the standards of quality and acknowledgements of the quality of services and individuals by members of the public.

3. The Role of the Complaints and Representations Manager

The Complaints and Representations Manager (C&RM) ensures compliance with both procedures and is accountable for the quality and timeliness of both processes and ensures that any risks are highlighted and mitigated.

The C&RM also:

- Raises the profile of the benefits of receiving complaints within the Department as a service improvement tool.
- Ensures complaints are properly recorded and that the right individual at the appropriate level is tasked to investigate and resolve the complaint
- Lessons are learned and best practice is disseminated throughout the Department with practice and policy changes made as a result of this learning.
- Undertakes staff training to ensure that staff are aware of the requirements of both procedures and that a consistent approach is adopted across the department.

The C&RM attends quarterly meetings of the Eastern Regional Complaints Managers Group where information is shared and best practice disseminated. The C&RM is also the Chair of the County Complaints Group and lead person on the Regional Complaint Managers Group.

The introduction of the new ASC Complaints Regulations from April 2009, has provided us with an ideal opportunity to look at a fresh, efficient and common approach to handling complaints across the NHS and social care and for us to review the systems we currently administer so we can respond flexibly to complaints, concerns and compliments and feed the lessons learnt into a continuous improvement framework.

A working group chaired by the C&RM and attended by staff from the, PCT, Luton and Dunstable hospital, and South Essex Partnership Trust has recently been formed to implement and help shape the new process around joint working as required by the new ASC regulations. An action plan has been agreed by the Health and Wellbeing Board which the group are implementing.

The C&RM also undertakes and prepares monitoring information:

- Quarterly reports are provided to the Senior Management Team (SMT) detailing the number and nature of complaints received
- Monthly reports are available at service DMT's
- The HCL divisional Performance Boards chaired by the Corporate Director of Housing & Community Living receive updates on the complaints, compliments & lessons learned
- Accountability meetings for Heads of Service chaired by the Chief Executive to discuss and monitor quarterly complaints reports

In addition, recommendations emerging from investigations into complaints, as well as recurring themes arising from complaints, are regularly reviewed. This enables the Department to identify trends in complaints and remedy any shortcomings in the service quickly and effectively. The annual report is available to the public on line and in hard copy.

From April 2009/10 the joint protocol with our health partners has been updated to reflect the new ASC complaints regulations. The C&RM is responsible with health for ensuring the Complainant's experience of the complaints process is streamlined and as accessible and efficient as possible.

To enable effective monitoring of Quality and Equality, An annual complaints survey is completed which tests satisfaction levels with the process. All questionnaires have an equality monitoring form attached so assessment can be made on the diversity of people using the processes. Low numbers of specific groups may be the result of access problems which can be targeted for specific action and increased awareness.

4. How to make a complaint

The Department provides general advice and guidance in its leaflet 'Compliment, Comment, Complaint?'. We have developed an easy read leaflet for our clients with learning disabilities. We also provide an online form which can be completed and emailed. Information can also be provided in a range of languages, Braille, large print or on audiotape. The Housing & Community Living Department also provides access to a language line facility for all its clients whose first language is not English and who wish to contact the Department.

Service users may also submit the comments, compliments or complaints by email, using the Luton Borough Council Feedback email address Feedback@luton.gov.uk

Complaints may also be made in writing, by telephone, or by personal visit to any of our offices. Our contact details are widely publicised by the use of leaflets and on our web site.

All complaints information is available on the internet. Service users can complain in a variety of ways eg, face to face, over the telephone, email, or write to us. Complaints literature can be made available in a variety of forms, easy read (Mac atone), large print, different languages on request. We also have interpreters for those people whose first language is not English.

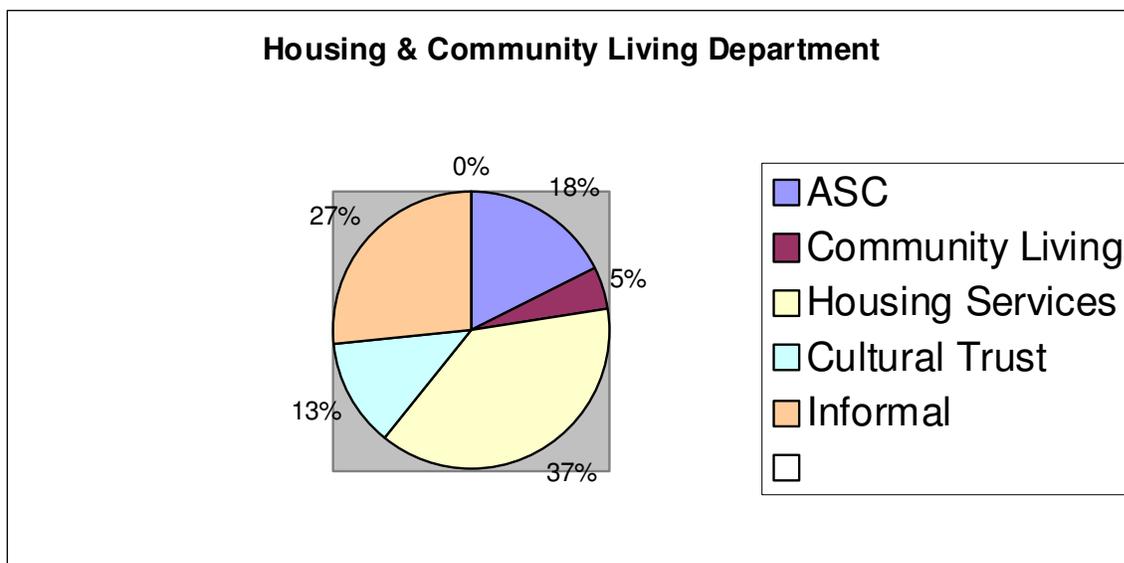
All complainants have recourse to the Local Government Ombudsman who provides an external service to consider complaints about local authority services.

Complainants may also, at any time, raise their concerns with the Care Quality Commission. (www.cqc.org.uk).

Full details of the procedures (Corporate and Adult Social Care) are available on the LBC website.

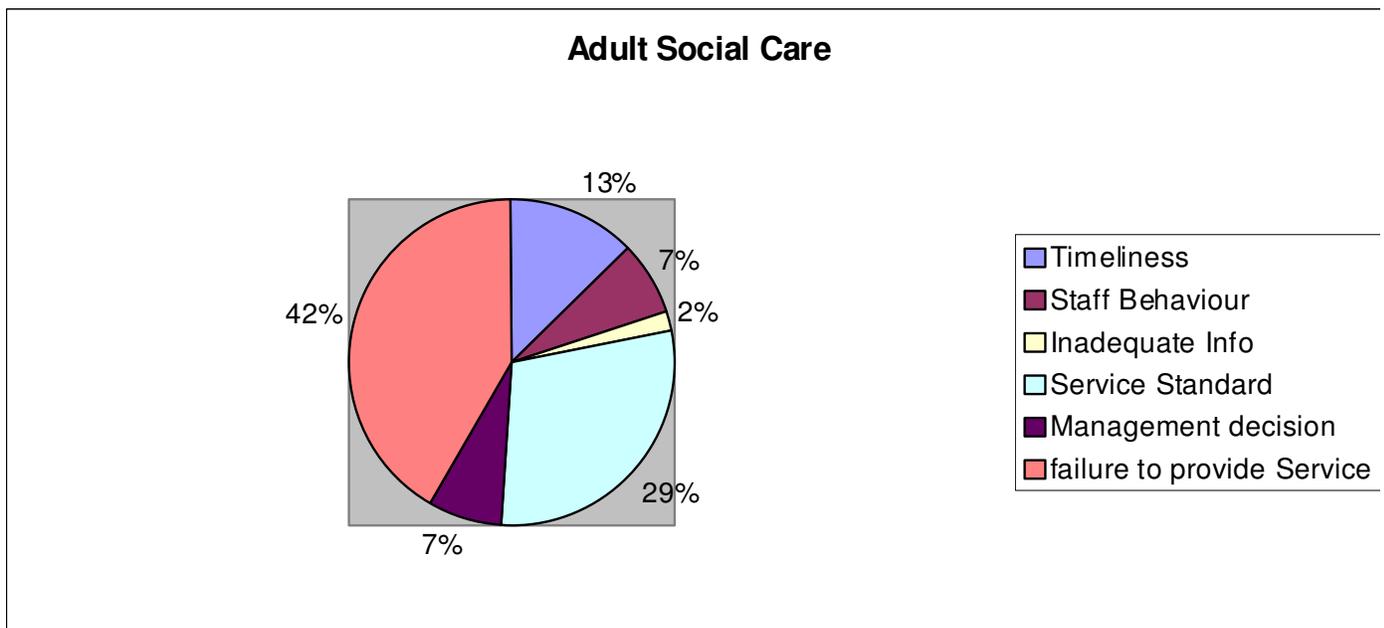
5. Complaints made – Key Statistics

Between 1st April 2011 and 31 March 2012, 228 formal complaints were recorded. Of these, 55 complaints concerned Adult Social Care Services, 15 were about Community Living, 118 were regarding Housing Services, 40 were regarding the Cultural Trust. There was a slight increase overall in complaints from 211 in 2010/2011. This year we had 83 informal complaints. This brings the **total to 311**. These numbers may still be regarded as particularly low in comparison to the number of service users. It may however, reflect the emphasis placed on the early resolution of dissatisfaction before the service user considers it necessary to submit a formal complaint. This may also be partly due to the Adult Social Care new regulations emphasis on resolving verbal complaints within 24 hours (which do not have to be recorded).



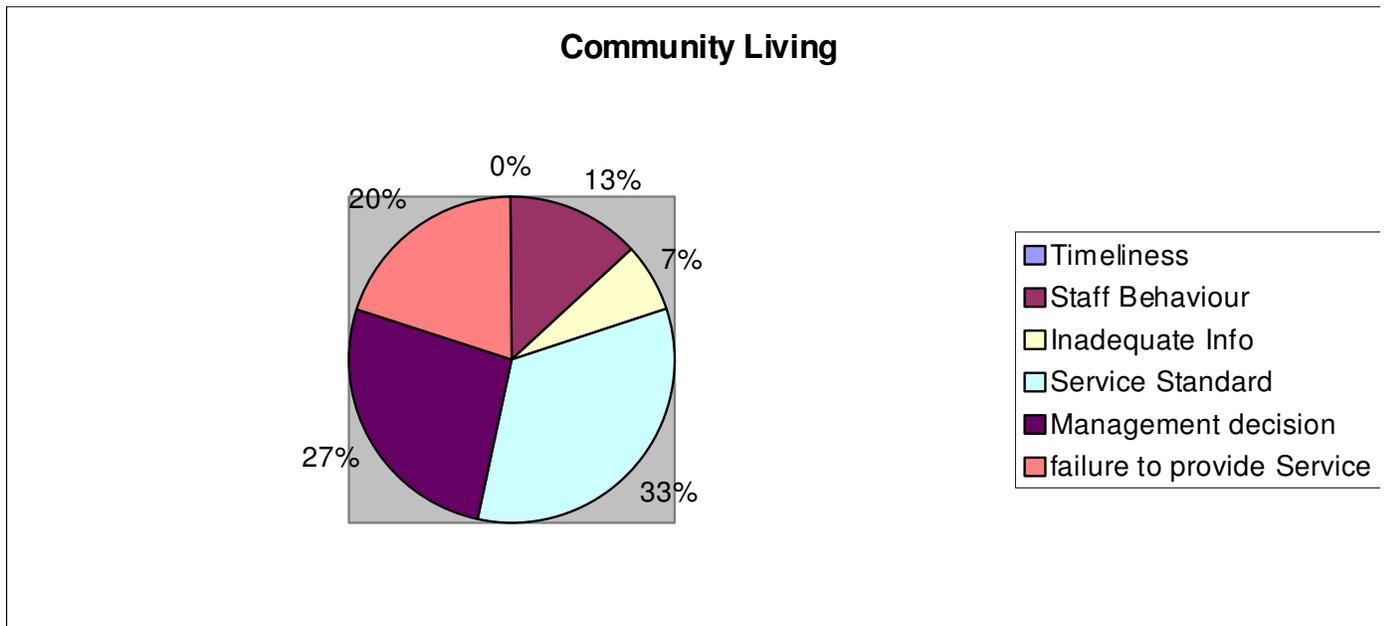
Adult Social Care

There were a total of 55 complaints for Adult Social Care. There is a slight increase from 48 complaints received last year. Complaints concerning the **failure to provide a service** were most prevalent within adult social care services, accounting for 42% of the complaints made. Complaints relating to the **standards of care provided** to a request for service were 29% and 13% were regarding **Timeliness Standard**. 7% were regarding **staff behaviour/attitude** and 2% regarding **inadequate information**.



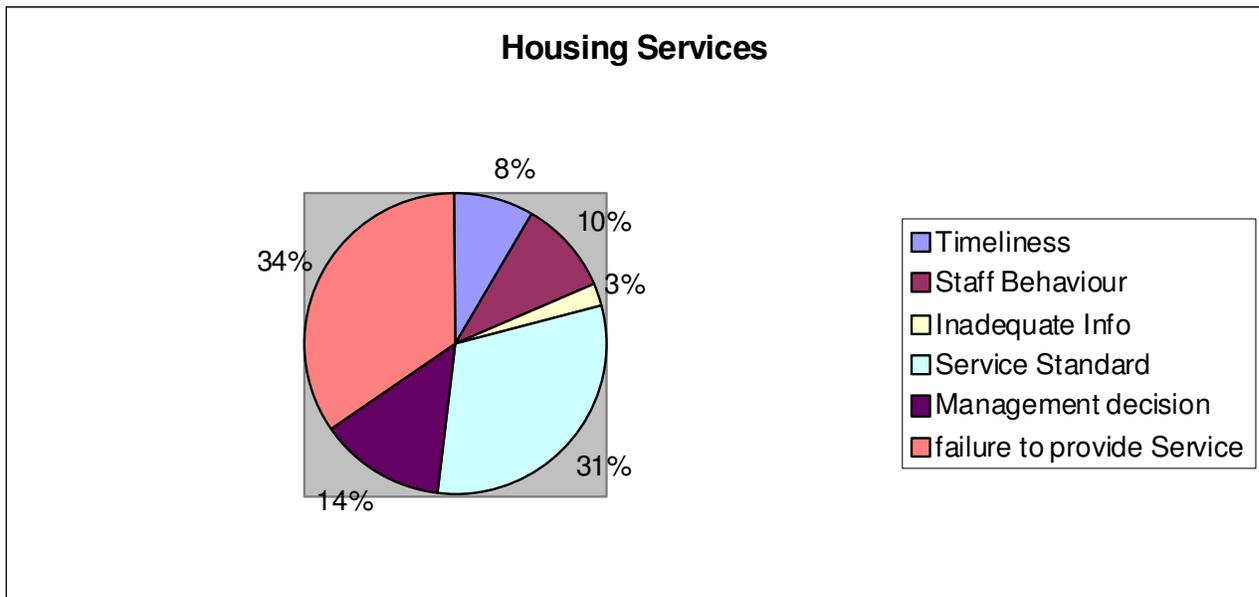
Community Living

A total of 15 complaints were regarding Community Living. The reason for low number of complaints in this area is because complaints regarding commissioned services have several strands and are already accounted for in the Adult Social Care figures. 33% were regarding **standard of service provided**, 27% regarding **management decisions**, 20% regarding **failure to provide a Service**, 13% regarding **Staff behaviour**, 7% regarding **inadequate information** and 0% regarding **timeliness standard**



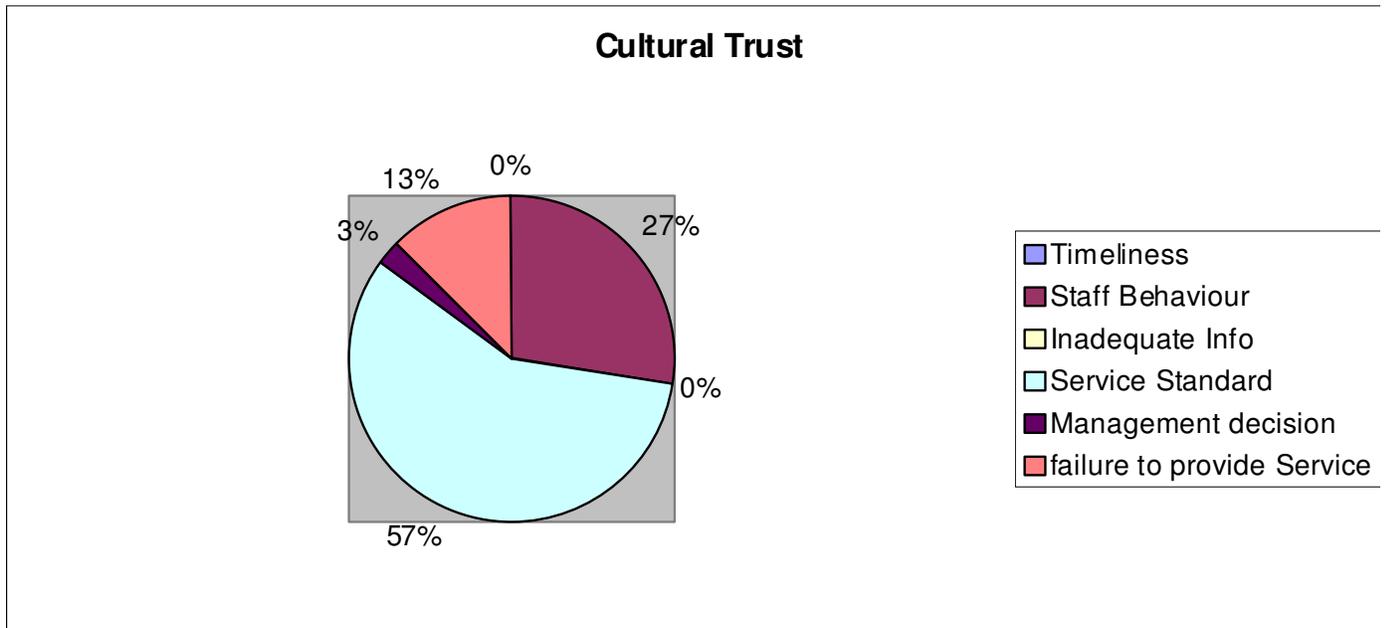
Housing Services

There were a total of 118 complaints received for Housing Services. The reason for the low number of complaints in this areas is because there are appeals processes for Homeless decision and housing register. A housing review was also undertaken for the allocations policy which has reduced the number of people on the waiting list dramatically. There is also an appeals process for disabled facilities grants. It is after these processes have been exhausted that a complaint is formally processed. 34% of complaints were regarding **failure to provide a service**, 31% were regarding the **standard of service provided**, 14% were about **management decision**. 10% regarding **staff behaviour**, 8% were regarding **timeliness standard** and 3% regarding **inadequate information**.



Cultural Trust

A total of 40 complaints were received in Cultural Services. **57%** were regarding **service standard**, **27%** regarding **staff behaviour/attitude**, **13%** regarding **failure to provide a service**, **3%** regarding **management decision**, **0%** were regarding **Inadequate Information**, and **0%** regarding **timeliness standard**.



Local Resolution

A total of 83 informal complaints were received in Housing and Community Living. These were all resolved informally without the need to be investigated as formal complaints. As a result these were not formally recorded but they were closely monitored by the Complaints Manager to achieve early resolution.

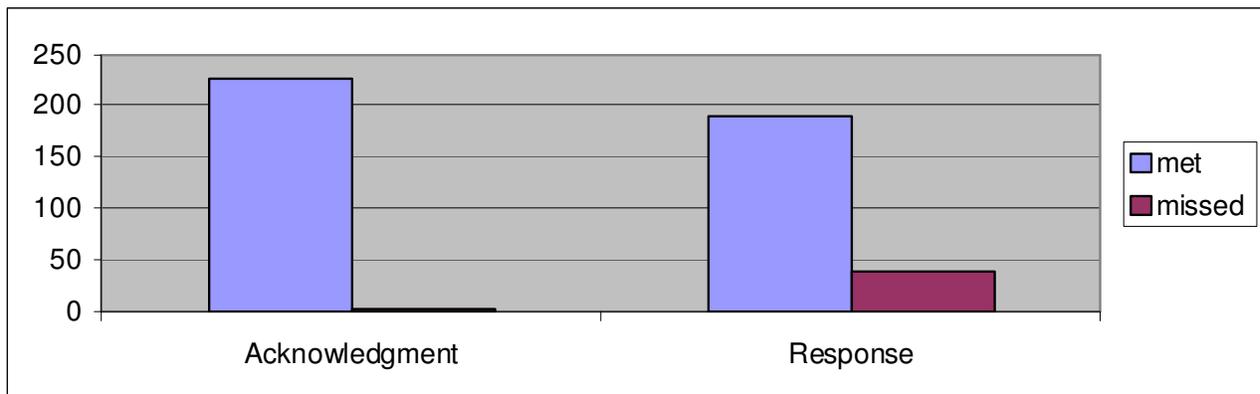
Lessons Learned

The following table summarises some of the complaints made during the year and illustrates how lessons have been learnt and improvements to the service made.

Dept.	Complaint	Improvements
Adult Social Care & Health	Several complaints received regarding delays in assessments process for CHC for care packages.	A process map to be developed and training to be provided to all social work teams and health colleagues to ensure better understanding of roles, responsibilities and timescales.
Adult Social Care	Several complaints received regarding delays in the assessment process of self funders. Lack of information available for self funders when they drop below the threshold.	Work is being carried out with social care and finance staff to look at the process and how we can engage clients at an earlier stage. Awareness also to be raised with our providers.
Adult Social Care	Several complaints received regarding the quality of care received in care homes.	Quality team working with providers through audits and assessments. And ensuring improvement plans are developed and monitored for progress.
Adult Social Care	Complaint to the finance department in relation to a large invoice received for respite provision dating back well into the last financial year. Wanted reassurance the situation would not arise again in the future.	New protocol in place which now means that providers will contact finance directly with information regards respite provision used. - providers and finance agreed a timeframe for information to be forwarded, what information is required and format.
Housing	Workmen entered a let property without knocking on door.	Process of changing to use key safes on relet properties to reduce the amount of keys cut has been implemented.
Housing	Applied for home security grant. Delays in providing the service. Alarm not working and front door was broken.	Greater communication with the householder by the contractor. Agreed with contractors that they are to send a letter on receipt of referral to the householder supplying contact info and acknowledgement of referral. Implemented a more robust reporting function between LBC and the contractor. More guidance provided to our adhoc service providers who need to start re-referring back to the us when they can not deal with a service request. This is especially relevant to this case.

Performance Assessment

During 2011/2012 a total of 225 (99%) complaints were acknowledged in time and only 3 (1%) missed the target for response. This is a slight improvement from last year. 190 (83%) full responses were done within the timescales and 38 (17%) complaints were recorded as out of time responses. This percentage is the same as last year. Further work is being done so that response rates can be improved.



6. Results of Stage 2 and Stage 3 Reviews

There were 35 complaints subject to a Stage 2 formal investigation in HCL. Eleven of these were regarding social care. Twenty four were resolved without recourse to Stage 3.

The reason for the increase in stage 2 complaints is the assessment process in Adult Social Care. All of the social care complaints came into the process at stage 2.

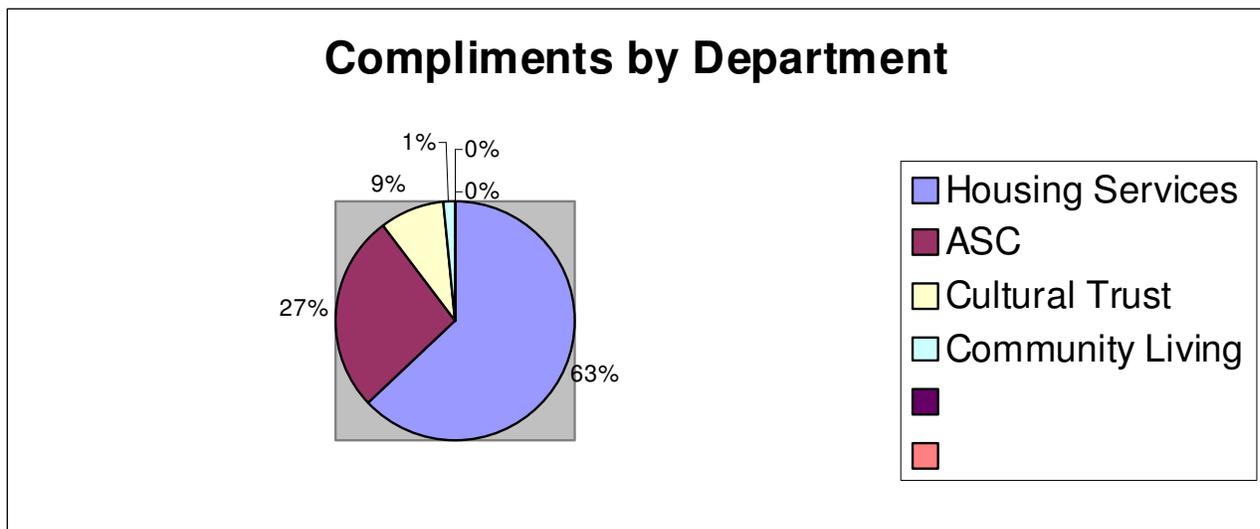
11 stage 3 reviews were undertaken. Eight were regarding Housing Services and 3 regarding Adult Social Care. A total of 6 complaints were recorded as LGO complaints which had followed the Councils Complaints Procedures.

7. Referrals to the Local Government Ombudsman

Six complaints were referred to the Local Government Ombudsman. Two were regarding Adult Social Care, 3 regarding Housing Services and 1 regarding Community Living. To date the LGO has agreed with the Councils findings although we are waiting for the outcome on some cases.

8. Compliments and Service Satisfaction

Service users are actively encouraged to inform the Department of any positive things they may wish to say about the services provided. During the year, a total of 393 compliments were received and personally acknowledged by the Corporate Director of Housing & Community Living. (Attached is an example memo) These compliments received were across the whole of HCL, which reflect the nature of the service, which the department provides to service users.



9. Areas of Development Undertaken in 2011/2012

- Staff group training sessions on complaints were held during 2012 for Adult Social Care. The sessions were a refresher to all staff on the handling of complaints but also to share learning from complaints received during the previous 12 months. This was to avoid similar mistake. These sessions involved staff at all levels who were in contact with the public and service users. The training was designed to enhance the current knowledge of staff and was also aimed at staff, that were new to the Housing & Community Living Department. Training sessions are ongoing to all staff in Housing & Community Living.
- Steps have now been taken to ensure that all correspondence or other expressions of dissatisfaction and compliments are passed immediately to the Complaints Manager in order to record and monitor the progress.
- The service user is kept fully informed of the progress of their complaint.

- A comprehensive corporate database has been introduced to record and monitor complaints at all stages of the process. This is continually updated.
- A 'lessons learned' exercise has been introduced, as explained earlier in the report, and valuable feedback is provided to Heads of Services to make improvements to the services provided.
- The quality of written responses to service users is under ongoing review to ensure that our correspondence is clear and concise. The investigating officer is expected to provide the service user with a full explanation of their findings, detailing why a decision has been reached and a particular outcome decided upon. This aims to provide the service user with the information required to make an informed decision about whether to pursue their complaint to the next stage. Meetings are arranged to discuss any outstanding concerns and conclude complaints to a satisfactory outcome.
- A compliments database has been introduced to record and analyse compliments received by the Department. These figures are reported to the Senior Management Team on a monthly basis within the complaints report. The good work of staff members is acknowledged by the Corporate Director. A memo of thanks is sent to the staff member who received the compliment with a copy to their line manager.
- The Adult Social Care complaints procedure is reviewed and kept in line with the changes from the Department of Health.
- The joint protocol with health partners for dealing with complaints that are cross boundary has been reviewed and signed off.
- **The 2011/12 complaints survey**

Housing and Community Living complaints survey 2012. All residents who put in a formal complaint from 1st April 2011 to the end of March 2012 were sent a postal complaints monitoring survey. A total of 23 surveys were returned, 22 paper surveys and 1 online survey. The responses are detailed below, it is to be noted that the percentages may not add up in some parts because clients have ticked more than one box or left the question blank.

However the results show that complaints were made in a variety of ways, website or email 52%, face to face through member of staff 9%, by phone 26%, by letter 65%, other 8%. Written letters were the preferred communication at 65% and second via the website at 52% and third were by telephone at 26%. As people often phone after they have written, or go to their M.P. and write a letter of complaint this could give some idea as to the double counting by some complainants.

The results have shown that the action plan which was implemented after the 2005 survey is still effective, and continues to show an increase in complaints from the disabled community from 27% in 2005 and 35% in 2012. This is broken down into 22% physical disability, 9% mental health, 0% learning disability, and 8% sensory. The Complaints Manager has worked closely with the Disability Access Forum and the Learning Disability Forum to engage with the hard to reach group.

The number of complaints received from BME communities has gone down this year than in previous year, 2005 (20%) and 12% in 2012. In relation to gender the breakdown is similar to last year at 30% male, and 74% female.

- Complaints surveys are now a rolling programme and analysed on an annual basis.

10. Areas for further development for 2012/2013

- A review of complaints, compliments, MP, Cllr Inquiries across all departments to ensure good practice and efficient process.
- Staff training on the recording system which can be used across all departments of the council.
- A review of the guidance notes for staff, which accompany the complaints procedures, has been undertaken, and further instructions will be issued later this year.
- Closer monitoring of customer satisfaction following the consideration of their complaint. Survey to be sent out at the end of each complaint.
- County Complaints Managers Group to be more focused and work closer together. Looking at sharing learning from complaints, joint complaints leaflets, and annual reports. More work needs to be done around information sharing.
- Further training for all staff is a continuous rolling programme.
- Quality Assurance of letters and complaints is done on 10% of complaints on a monthly basis.
- A Letter and Report writing toolkit has been developed to aid managers.
- Dedicated training and development for staff appointed to investigate complaints.

- Identification and provision of appropriate support for staff appointed to investigate complaints.
- A review of Housing Complaints Process in light of the Localism Bill recommendations.
- Complaints training will be undertaken for Tenants and Cllrs for Housing Appeals Panels and will be provided once the regulations have been signed off.
- Proactive work is being undertaken with Healthwatch Groups around the new Advocacy and PALs changes which are due to come into effect in April 2013.
- Visits to be undertaken to all the Day Centres, Luncheon Clubs, and Forums to raise the profile of complaints.

BOROUGH OF LUTON

INTER-DEPARTMENTAL MEMORANDUM

From: Pam Garraway

To:

Date:

cc:

Subject	References
Compliment regarding the service	Reference:

Summary of compliment

I am delighted to have received correspondence, which compliment you on the service which you have provided to our customers.

I would like to personally acknowledge the compliment and to express my appreciation of the quality of the service you and your team are providing.

As you would no doubt be aware, compliments are often few and far between, despite the excellent work of many staff. So it is with much pleasure that I can extend my thanks when a member of the public acknowledges the good work of staff.

Yours sincerely,

Pam Garraway
Corporate Director of Housing & Community Living (interim)