

Putting the People of Staffordshire first

Staffordshire
County Council

COMPLAINTS TEAM STATUTORY ANNUAL REPORT 2020-21 ADULT SOCIAL CARE

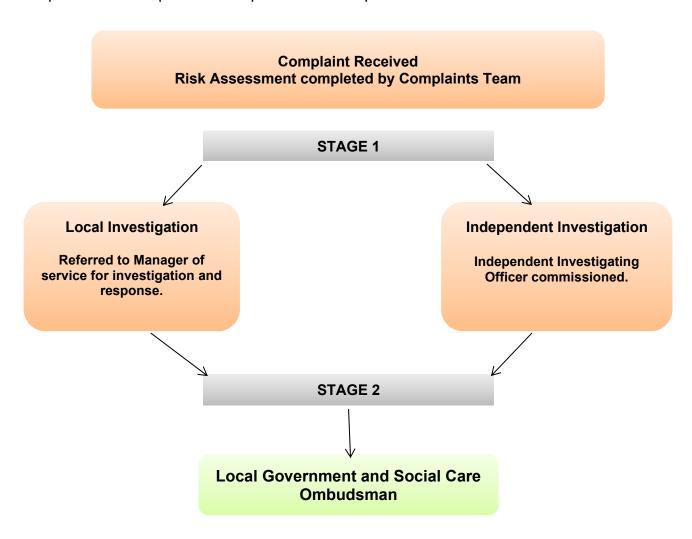
Introduction

This report provides information about complaints made during the twelve months between the 1 April 2020 and the 31 March 2021 under the complaints and representations procedures established under the NHS and Community Care Act 1990 and the Local Authority Act 1970.

From April 2012 Adult Social Care, Older People's front line services were transferred over to Midland Partnership NHS Foundation Trust (formally Staffordshire and Stoke-on-Trent NHS Partnership Trust). From April 2017 the Trust co-ordinates all statutory complaints which relate to Adult Social Care services provided by the Trust.

The Statutory Complaints Procedure

The Council has a statutory obligation to operate a complaints procedure concerning statutory provision for adults. This is in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. These regulations set expectations for the handling of complaints by Councils, NHS bodies, Primary Care providers and independent sector providers responsible for the provision of NHS and Social Care.



Criteria for Accessing the Statutory Complaints Procedure

Who can Complain?

The NHS and Community Care Act 1990 and the Local Authority Act 1970 places the following restrictions on who can access this procedure:

- Complaints under these procedures must be made by or on behalf of an eligible person and must be in respect of that person
- An eligible person is anyone for whom the Council has a power or duty to provide, or secure the provision of a service, and this need or possible need has come to the attention of the Council
- Complaints can be made on behalf of an eligible person where the eligible person lacks capacity to make the complaint themselves (In accordance with the Mental Capacity Act 2008 or has given explicit and verified consent for the Complainant to act on their behalf

Time Limit:

Section 12 of the statutory regulations advise that the complaint must be made no later than 12 months after the date in which the matter which is the subject of the complaint came to the notice of the complainant, unless the complainant has good reason for not making the complaint within this time limit.

Overview

Careful consideration is given to the operation of the Complaints Procedure to ensure an appropriate and proportionate response is provided. Communication, coordination and information sharing are critical and ensure that safeguarding measures are applied where necessary. In addition, liaison with the Council's Care Commissioning and Midland Partnership Foundation NHS Trust ensures a coordinated response to concerns about commissioned services. Similarly, dialogue with the office of the Local Government and Social Care Ombudsman ensures that the Local Authority is able to take steps to resolve complaints locally where possible.

'Lessons Learnt' from complaint investigations remain a key feature for the service and are always fed back to services and performance groups for action within the Council and Partnership Trust.

Key Numbers



145
Statutory Stage 1
Complaints



Local Government and Social Care Complaints



Statutory Independent Investigations



146
Complaints
handled informally

TOP 5 areas of complaint

Financial Assessment /
Contribution - 22
Poor Communication – 18
Case Management – 16
Charges not discussed –
14

Delay in receiving - 11

The total amount of monies paid to complainants as an outcome of an

Ombudsman

investigation is £700 in recognition for the time and trouble in raising the complaint and any distress caused

Comparison with Preceding Year

In comparison with the previous years, we have seen a reduction in Stage 1 complaints recorded for this financial year, however there has been an increase in complaints which been resolved informally with support from the Complaints Team.

The Complaints Team takes into account that for this reporting year some clients may have chosen / or not been able to receive some services as a consequence of the Covid-19 pandemic and the subsequent lock-down restrictions. Such as home care, direct payments for support and respite services.

The Complaints Team has continued to be operational during this time, however the availability of staff within the service areas has impacted on the response timescales due to staff resource being targeted towards providing essential services and supporting communities.

SCC Adult Soc			
	2020/21		
Local Investigation	176	187	145
Independent Investigation	1		
Local Government Ombudsman	23		

Staffordshire County Council Adult Social Care Services

Stage 1 - Local Investigation - Breakdown

The complaints procedure aims to resolve complaints at a local level within 20 days. This is not a statutory time limit but a goal for effective complaints management. According to the complexity and needs for an effective investigation, this timescale can be extended by agreement with the complainant.

The current guidance suggests that the majority of complaints should be resolved locally, and frontline managers are encouraged to meet with complainants and attempt to address complaints in a swift and effective manner.

145 complaints were recorded under Stage 1 – Local Investigation during 2020-21

Service	District (if applicable)	Number
Adult Learning Disability Team		
	South Staffordshire	17
	North Staffordshire	5
	Young Adults Team	6
	TOTAL	<u>28</u>
Adult Social Care First Contact		<u>27</u>
Brokerage Service		<u>7</u>
Commissioning Service - All Age Disability & Mental Health		2

 Older People & Physical Disabilities Carers Hub Care Provider – Home Care agency Care Provider – Residential / Nursing 	<u>TOTAL</u>	9 1 8 2 22
Community Mental Health Team (NORTH)		1
Contact Centre		2
Financial Services; - Debt Recovery - Direct Payments Team - Non-Residential - Residential - Welfare Benefits & Fairer Charging		2 1 9 5 38
	<u>TOTAL</u>	<u>55</u>
Fixed Equipment Team		1
Adult Safeguarding		2
Total		<u>145</u>

It is important to note that some complaints concern more than one service area and therefore require a joint response. However, each service area is recorded separately in the table above in order to capture all areas of complaint.

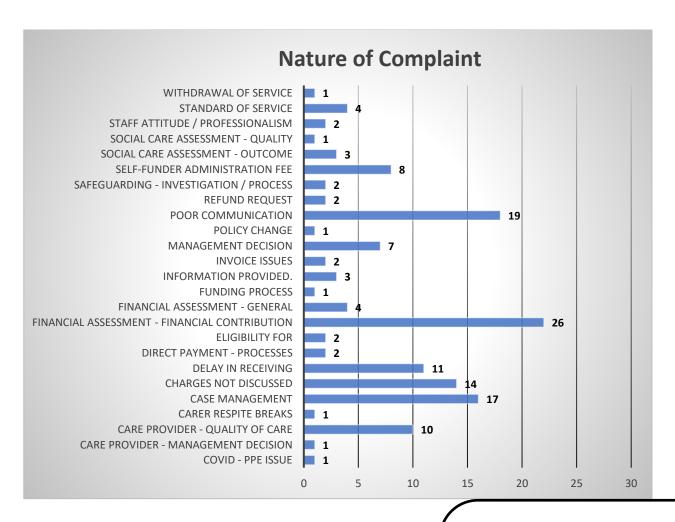
39 % of the Stage 1 Complaints received were in respect of the Fairer Charging Service (including residential / non-residential). This was mainly concerning the outcome of a financial assessment and the client contribution figure. This figure is consistent with previous years and continues to be an area of concern for the client and / or their representation.

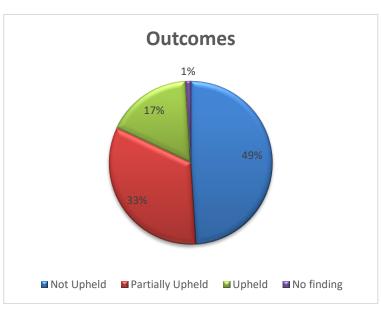
There has been a **33%** reduction in formal complaints received during 2020 / 2021. This is due to the significantly reduced numbers of complaints for the Brokerage Service this financial year.

Last financial year, the Brokerage Service investigated **24** Stage 1 Complaints. This financial year has seen the figure vastly reduced to **7** Stage 1 complaints. This is due to more concerns being resolved outside of the complaints process this financial year.

Stage 1 – Local Investigation Adults Social Care (Council) – Overview of Nature of complaint and Outcomes

The charts below provides an overview of the nature of complaints received during 2020-21 and the outcome of the complaints investigated.





18% of complaints received were regarding the outcome of a financial assessment.
10% of complaints were regarding charges for services and not being advised by Council staff that a service is chargeable.

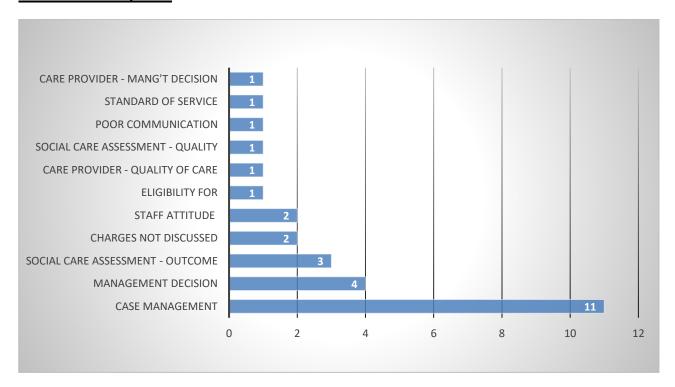
Stage 1 – Local Investigation Adult Social Care (Council) – Breakdown by service

The charts below show the nature of complaint and outcome for services areas within Staffordshire County Council during 2020/21.

Adult Learning Disability Team

The number of complaints received for Adult Learning Disability Team's this reporting year is consistent in comparison with the previous year. 27 complaints were registered last financial year compared to **28** this year. The service carried out 248 assessments of new people and 1,382 reviews of people who are already receiving care 2020 / 21

Nature of Complaint



39% of complaints were regarding

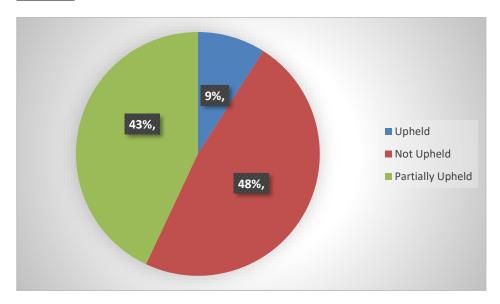
Case Management

from staff. This includes the management of an individual person's case by the allocated worker. 14% of complaints were regarding Social Care Assessments – this includes the quality of an assessment and / or the outcome which has resulted in a reduction in services.

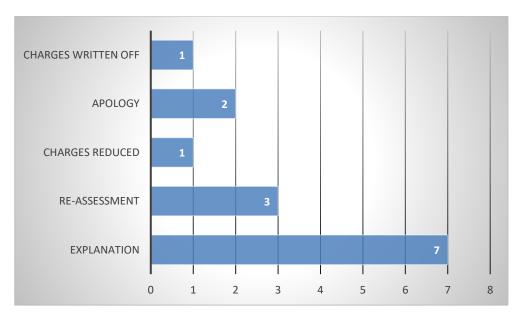
Outcome of Complaint

The data below show the outcome of the complaints investigated for the Adult Learning Disability Teams during 2020/21.

Finding



Recommendation / Learning Action



Organisational Learning and Recommendations

- Apology provided where complaints were Upheld.
- Explanation of events provided to complainant.
- For two separate complaints a full re-assessment and review of placement was recommended.
- For two separate complaints it was agreed that family can use the direct payment to pay a relative to support with care due the restrictions due to Covid.
- For two separate complaints an invoice was reduced.

Adults and Children's Financial Services (ACFS)

The detail below includes the following services;

- Welfare Benefits and Fairer Charging Services;
- Residential and Non-Residential Finance Team;
- Debt Recovery;
- Direct Payments.

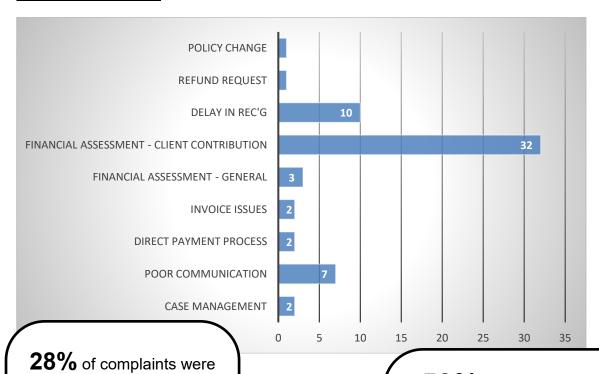
ACFS completed 5633 financial assessments this financial year annually. This has been broken down as below;

• Non-Residential full assessments:	2194
Non-Residential re-assessment:	1448
 Non-Residential Self Funders: 	443

Residential full assessments: 166
 Residential re-assessments: 760
 Residential interim assessments: 622

The number of complaints received for ACFS this reporting year has reduced by **31%** in comparison to last financial year. **83** complaints were registered last financial year compared to **57** this year

Nature of Complaint



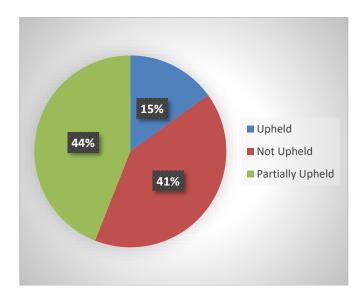
regarding poor
communication
and delay in
receiving a service.
This also includes length
of time for contact to be
made with the citizen.

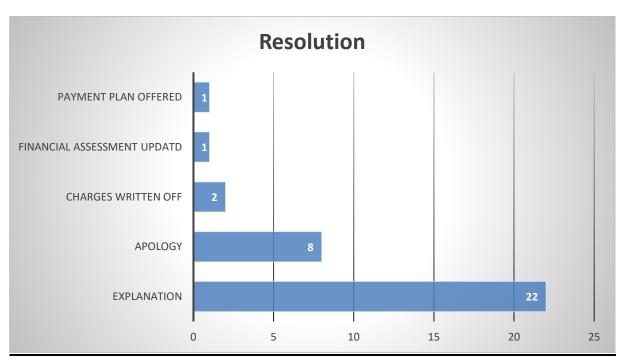
53% of complaints were regarding the assessed weekly client Contribution. This was due to the weekly charge increasing following an assessment / reassessment in line with the Care

Act.

Outcome of Complaint

Finding





Resolutions and Organisation Learning:

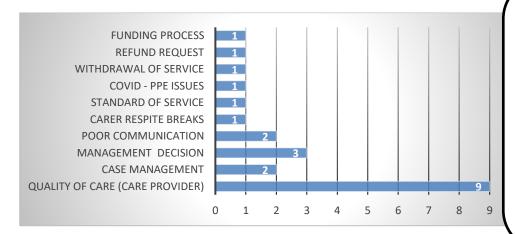
- Apology provided where complaints were Upheld
- Explanation of events provided to complainant.
- Explanation of financial assessment process and DRE that is included.
- · Explanation of invoice and charges.
- Explanation of charges for respite care.
- 2 complaints resulted in charges being written off
- DRE appeal offered.

Care Commissioning

The detail below includes the following services;

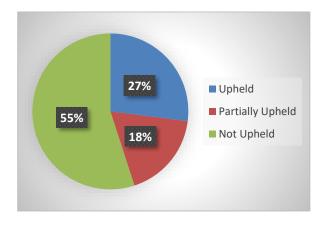
- Older People and Physical Disability and Sensory Impairment
- All Age Disability & Adult Mental Health (AD&AMH)
- Care Providers e.g. Home Care Agency and Residential Homes
- Supported Living / Extra Care
- Carers Hub

Nature of complaint



45% of complaints
received for Care
Commissioning were
regarding the service
provided by a
Care Provider. The
Council becomes involved
with the complaint if the
complainant is unhappy
with responses previously
received by management.

Outcome



20% of complaint's received by the Commissioning Service were in respect of decisions in relation to the services a client receives following a social care assessment

Resolutions and Organisation Learning

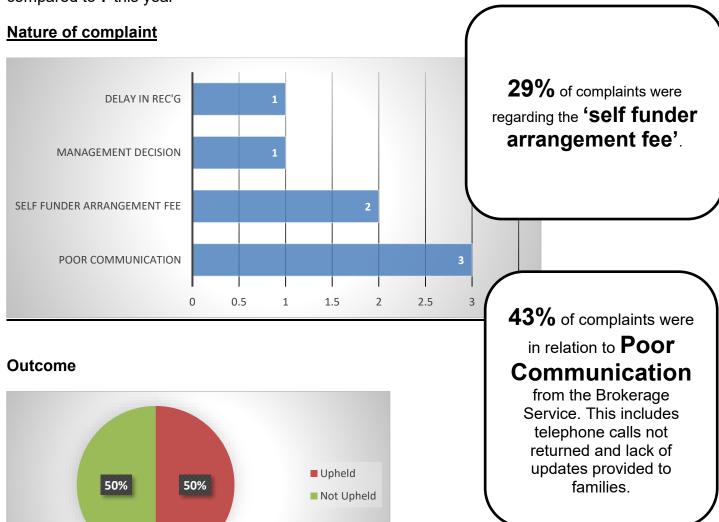
- Council agreed to set the personal budget at the placement that was identified as meeting the needs of the citizen.
- The Council has referred the Care Home to Infection Prevention and Control Colleagues who
 will review practice and guidance with the Care Home in more depth to ensure continual
 adherence to guidance. In addition, these concerns have been shared with the Staffordshire
 County Council's Quality Assurance Team for further review.
- Direct payments arranged to enable citizen can remain with provider of choice
- Apology / Explanation provided following contact with the home care agency in respect of the complaint raised.

Brokerage Service

The Brokerage Service are responsible for sourcing a provider for home care and residential establishments for service users following a social care assessment when a service has been identified. It is important to note that some complaints investigated by Brokerage also required input from MPFT in order to provide a full answer to the complaint raised. This is because MPFT undertake the social care assessment.

During 2020-21, the Brokerage Service actioned / sourced 9,110 care packages and placement requests

The number of complaints received for Brokerage this reporting year has significantly reduced by **71%** in comparison to last financial year. 24 complaints were registered last financial year compared to **7** this year



Resolutions and Organisation Learning

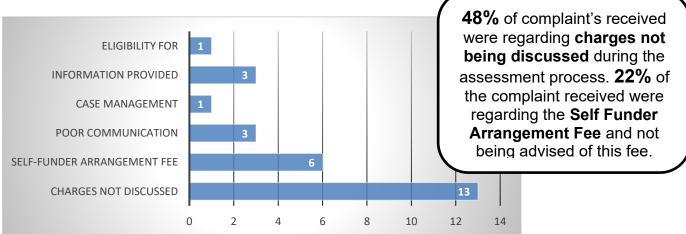
- Explanation of events provided, and processes followed by Brokerage.
- 1 complaint resulted in charges being reduced as an outcome of the complaint and the £400 Self Funder arrangement fee written off.

Adult Social Care First Contact Team

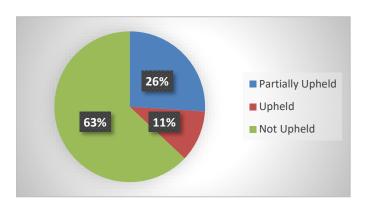
The service is point of contact for citizens who wish to request social care assistance and initial assessments are undertaken in order to establish whether a referral is made to MPFT or sign-posting to other services. During this financial year the service undertook 9130 assessments.

The service received **27** complaints which were investigated under Stage 1 of the complaints process. There has been a **37%** increase in complaints received for the First Contact Team in comparison to last financial year.

Nature of complaint



Outcome



22% of complaint's are regarding PoorCommunication from the service. This includes the quality of information provided

Resolutions and Organisation Learning

- Explanation of events provided.
- Apology provided to those complaints upheld and partially upheld.
- The £400 Arrangement Fee written off for 5 complaints.
- Explanation provided in respect of whether charging was discussed with the service user.
- Start date for the client contribution of a home care package amended and invoice amended.

Stage 1 - Independent Investigation Adults Social Care

Independent investigation is initiated in circumstances where a complaint is complex and / or a level of seriousness is identified. This is often in circumstances of multi-agency involvement. The independent investigation is conducted by a commissioned external Investigating Officer.

A report of investigation is produced that details conclusions reached and recommends action to both resolve the complaint and make improvements for the organisation. The relevant Senior Officer adjudicates the report and provides the Council's formal response to the complainant.

The timescale under this part of the procedure is 25 days, although there is facility to agree with the complainant an extension up to 65 days. (Again, this is not a statutory requirement but an operational goal that may be subject to negotiation)

There have been 1 complaint independently investigated during 2020/21.

This complaint was in relation to the assessments carried out, the provision (and lack of provision) of full and accurate information relating to these assessments, the delays and failure to reply to the complainants correspondence, and the failure to take reasonable steps to reach a Deferred Payment Agreement (DPA) to support his brother in funding his care.

This complaint was predominately in relation to services carried out by members of staff from the Midlands Partnership NHS Foundation Trust (MPFT) which has been commissioned by Staffordshire County Council (SCC) to provide adult social care services integrated with NHS community-based health services in Staffordshire. However, the complaints were directed to Staffordshire County Council as the public body with statutory responsibility for adult social care provision.

Recommendations;

It is recommended that a Senior Officer be asked to carry out a review, working
with colleagues at the First Contact Centre, the Finance Team and the Area
Teams, to assess the efficiency of the existing systems to see whether the
process from application for support through to an assessment can be carried
out in a timelier manner.

Arrangements are now in place to prevent these types of delays accruing and the Council closely track the exceptional cases that take longer. Financial Services also have processes in place to send out financial assessments within 24 hours following receipt of a referral.

 Customer Feedback and Complaints Manager carry out a review to satisfy herself that the systems in place to record receipt of correspondence from MPs and complainants and ensure these are acted upon are effective.

Review has taken place. There has been a couple of new appointments within the Complaints Team to support with representations receive by the team.

• It is recommended that the systems for processing assessments be reviewed to include a check to confirm that the completed assessment has been sent to the client for signature/comment and records the date this was sent.

Practitioner's to be reminded of the importance of this. The Council can then verify whether this is happening during quality audits.

Stage 2 - Local Government and Social Care Ombudsman Complaints (to include Staffordshire County Council and Midlands Partnership NHS Foundation Trust - MPFT)

The Local Government and Social Care Ombudsman (LGSCO) is empowered to investigate where it appears that a Council's own investigations have not resolved the complaint. Whilst anyone can approach the Ombudsman at any time, the Complainant is usually required to first take up their complaint with the relevant Council to allow a local response. However, if the Complainant remains dissatisfied following local or independent investigation by the Council they then have the right to pursue the matter with the Local Government and Social Care Ombudsman.

The Local Authority has received **23** complaints which have been referred to the LGSCO, **18** complaints were fully investigated by the LGSCO and **3** were referred back to the local authority for investigation. **2** complaints were closed after enquiries were made with the Council and it was concluded that the Council was not at fault.

Compared to last financial year, the numbers of complaint considered by the Ombudsman have reduced from **23** to **18** investigations.

Summary of Local Government and Social Care Ombudsman Complaints

Out of the 23 complaints which were received by the LGSCO, the Council has received **6** outcomes where the complaint was **Upheld and maladministration and injustice** was found. A total of £700 'time, trouble and distress caused' payments was awarded to complainants following referral to the Ombudsman.

The Council is currently awaiting the outcome of **11** complaints. Of the **11**, **5** are awaiting allocation to an investigating officer, **3** complaints are currently awaiting a Draft Decision and **4** remain under investigation at the time of writing this report.

Further details of the investigations can be found in the table below;

Staffordshire County Council Services			
Service Nature	Outcome	Recommendation	
Adult Learning Disability Team (South) LGSCO previously dealt wit a complaint from Mrs X and found fault by the Council. That complaint resulted in a permanent residential placement for her son. However, that placement had now broken down and her son has now returned to live with her. Mrs X is again complaining about the lack of support from the Council.	h Premature complaint	Council to investigate via Stage 1 of the Complaints Process.	

Adult Learning Disability (North)	The Council has failed to deal properly with the charges for his daughter's care during the COVID-19 pandemic and has failed to take a sufficiently flexible approach to meeting his daughter's needs during the pandemic.	Upheld – Maladministration and Injustice	The Council to reconsider its decision not to allow the direct payments to fund support from within the family while they were shielding Miss Y; The Council writes to Mr X apologising for its failings and pays him £250 for the time and trouble it has put him to in pursuing the complaint.
Care Provider – Home Care Agency	Complaint about home care agency and alleged neglect of two occasions. Concerns raised about the time that the carers arrived for the care visits in comparison to the times that they recorded in the log book. This resulted in client paying for care which was not provided.	Awaiting allocation to investigator	Awaiting allocation to investigator.
Care Provider – Home Care Agency- Bees Care Ltd	The complaint is regarding the care provided by Bess Care (home care agency) to which Ms X used her Direct Payments to fund the care.	Awaiting Draft Decision	Awaiting Draft Decision
Care Provider – Residential Care – Oldbury Grange	Complaint about lack of action regarding a complaint made by Mr Y in March 2020 about the care his Father received in a care home funded by SCC. The Council had referred the complaint back to the care home, who had not responded to a complaint made directly to the home in November 2019.	Decision not to investigate	Decision not to investigate
Care Provider – Residential Care – The Firs	Safeguarding issues regarding a relatives care and failure to release any medical records and other documentation that has been requested several times over the last 7 months we require to proceed with a legal case.	Awaiting allocation to an investigating officer	Awaiting allocation to an investigating officer
Commissioning Service – Older People & Physical Disabilities	I wrote to the complaints dept expressing dissatisfaction with the provision of respite care for my father over the past few years. No response to complaint received.	Premature complaint	Council to investigate via Stage 1 of the Complaints Process and provide a response.
Commissioning – Lifeways	Complaint about staff member at Lifeways during visit to a relative.	Decision not to investigate	Decision not to investigate

Financial Servcies – Residential	The Council had: Failed to properly set up a deferred payment arrangement Did not provide her with sufficient information to understand her options in relation to the deferred payment arrangement. Significantly delayed sending the final invoice so Mrs X could settle the debt. Used the wrong address and failed to send correspondence.	Under investigation	Under Investigation
Financial Services – Welfare Benefits & Fairer Charging Team and; Midlands Partnership NHS Foundation Trust	Dr X complains about Staffordshire County Council (the Council) and Midlands Partnership NHS Foundation Trust (the Trust). In particular she complains about Council and the Trust's failure to consider referral for Continuing Healthcare (CHC) funding for her father, after he was discharged from hospital in May 2019. Dr X also complains about the time it took for the Council and the Trust to respond to her complaint. This has added to her frustration.	Awaiting Draft Decision	Awaiting Draft Decision
Financial Services – Welfare Benefits & Fairer Charging Team and; Midlands Partnership NHS Foundation Trust	Complaint about outcome of financial assessment and the lack of communication regarding the process / procedure. Miss X can not afford the assessed charge.	Awaiting allocation to investigating officer	Awaiting allocation to investigating officer
Financial Services – Welfare Benefits & Fairer Charging Team	Dispute outcome of financial assessment.	Premature complaint	Council to investigate via Stage 1 of the Complaints Process and provide a response.
Financial Services – Welfare Benefits & Fairer Charging Team	Mrs X states that the Council has failed to consider her son's property related expenses when assessing the contribution he should make towards his care costs.	Upheld – Maladministration and injustice	The Council has agreed to review its policy to recognise that it has discretion to consider PRE in exceptional circumstances where the disabled person is not liable for rent or mortgage. The policy should provide some examples of what might constitute exceptional circumstances.

			The Council has also agreed to reconsider Mrs X's request for PRE for her son.
Financial Services – Welfare Benefits & Fairer Charging Team	Miss X complains that the Council did not correctly consider her brother's expenses and disregards when it calculated the contributions he must make towards the costs of his care. For this reason, she says he is having to make a contribution towards his care costs when he should not have to causing him financial hardship.	Not Upheld – No Maladministration	No recommendations
Financial Services – Welfare Benefits & Fairer Charging Team	Mr X, who complains on behalf of his wife, Mrs X, says the Council is at fault because it took too long to complete her financial assessment and made errors when it did so. He also says the Council's view that Mrs X deprived herself of capital to avoid paying care costs is wrong.	Upheld – Maladministration and injustice	The Council has agreed to reconsider its decision on deprivation of Mrs X's capital addressing the issue of whether avoiding care costs was a significant factor in the timing and disposal of the capital. It should consider any information that Mr X provides to it in support of his argument that it was not deprivation including the details of any advice he received from the OPG and his solicitor. The Counci should also pay Mr X £200 in recognition of the time and trouble he has been put to in clarifying matters relating to the Council paying Mrs X's care fees for longer than necessary.
Financial Services – Welfare Benefits & Fairer Charging Team	Mrs X complains that the Council took three months to complete a financial assessment of her father's care costs and, had they known about the high charge from the outset, her father would not have agreed to the care package. She also complains the Council did not take into account her mother's income in the financial assessment.	Upheld – Maladministration and injustice	The Council has agreed to reduce the invoice by £100 Agree an affordable repayment plan with the client.
Financial Services – Welfare Benefits & Fairer Charging Team	Complaint about the date from which Mrs X's capital fell under the £23500 theshold, thus impacting on the Council financially contributing to her care.	Awaiting allocation to an investigating officer	Awaiting allocation to an investigating officer

	Failure to inform Mr X about the Appeals process – it important that where people feel an incorrect decision may have been made in relation to their care and support they have an effective means to have the decision reviewed.		
Financial Services – Welfare Benefits & Fairer Charging Team	The Council is at fault in how it assessed Mrs X's contributions towards her care costs. Of particular concern is the Council's failure to carry out annual reviews of Mrs X financial assessments (including prior to Mrs X's care needs increasing) and its view that Mrs X intentionally deprived the Council of assets to avoid paying care costs	Awaiting Final Statement	Awaiting Final Statement
Financial Services – Welfare Benefits & Fairer Charging Team	Mr and Mrs X complain about the way the Council has calculated the financial contribution that their son has to make towards the costs of his care package. They say the Council has not properly assessed the affordability of the package and has not properly considered the disability related expenditure. Mr X also complains about a telephone call with a Council officer as he says the officer was rude and put the phone down on him.	Awaiting Draft Decision	Awaiting Draft Decision
Midland Partnership NHS Foundation Trust	Mr B, complains the Council carried out a reassessment that reduced his direct payments. Mr B says the reduction in support will affect his health. Mr B also complains the Council has accessed his medical records without his consent and it has not arranged a home visit so he can show the financial assessor receipts from his Disability Related Expenses (DRE).	Upheld – Maladministration and injustice	The Council should reach a decision about the Direct Payments either based on the March 2020 assessment, or carry out a fresh assessment if there is any indication of a change in need; The Council should tell Mr B of his assessed financial contribution. The Council should confirm to Mr B in writing that he will not have to repay any arrears/overpayment amassed relating to the extra 8 hours that were put into place during his complaint. (Mr B will be expected to contribute financially

			towards the four hours/five and a quarter hours direct payments he was assessed as needing.)
Midland Partnership NHS Foundation Trust	Ms X complains that the Council failed to support her as a carer since she moved home in 2018, including failing to provide respite care. She also complains there was no response to her formal complaint about this and about poor communication by social care staff.	Upheld – Maladministration and injustice	Apologise and pay Mrs X £150 for the delay in responding to her complaint for the poor quality carers' assessment by the carers' hub and for and poor communication by staff. Review the Trust's complaint handling processes (including those services delivered by PALS) to ensure all those who complain about social care services receive a prompt response to their complaints. Ensure all carers with eligible needs receive a carers support plan. •Start doing carers' assessments itself (The Council has decided to stop using the carers hub to do assessments from 6 April). There is already a system in place to check all assessments
Midland Partnership NHS Foundation Trust	Complaint is against NHS Midlands Partnership and their failure to adhere to the statutory guidance of the Care Act 2014 and the Mental Capacity Act 2005. Namely: a) NHS Midlands Partnership failed to correctly assess my mother's dementia needs. These risks include the prevention of falls, viral infection from visitors, but also the potential risk of abuse from family members. b) NHS Midlands Partnership failed to take into account my mother's life-long wishes of remaining in her own home with as little intrusion as possible. c) NHS Midlands Partnership ignored my request for a second assessment taking into account my mother's condition d) NHS Midlands Partnership did not refer my mother's case to a multi-agency safeguarding hub.	Awaiting Allocation to an investigating officer	Awaiting allocation to an investigating officer.

Mental Health team (North)	Miss X complains that the Council discharged her without notifying her and without an appropriate assessment. She says as a result she lost the opportunity to be considered for supported housing.	Under investigation	Under Investigation

Other Activity

In addition to the recording and administering of Statutory Complaints, the Customer Feedback and Complaint Service have formally acknowledged and monitored an additional **233** enquiries each requiring redirection to other organisations/authorities or action into other procedures.

Dealt with by Complaints Team*	102
Referred to Adult Social Care (MPFT)**	44
Joint Statutory Stage 1 response with other organisation / NHS	5
Referral to another Organisation for action / investigation	6
MP Enquiry (Adult Social Care)	71
Public Enquiry	2
Safeguarding referral initiated	1
Corporate Complaints Procedure	2
Total	233

*Complaints / enquiries which are handled by the Complaints Team consist of liaising with the service team in order to resolve the complainants concerns or the Complaints Team solely investigating the complaint and providing a response to the complainant. Depending on the nature and complexity of the concern raised this can take 24 hours to complete or several weeks of investigative work in order to fully conclude.

19% of complaints received were referred to Adult Social Care (MPFT). Generally, concerns were regarding the information provided by a social worker in respect of charges for services when a care is arranged.

34% of duty matters were resolved with the Financial Services. This often included a telephone call to the complainant to explain an invoices / charges. This also includes the concerns raised regarding the £400 Arrangement Fee for self-funders and the request for this to be written off.

^{**} The Council's Complaints Team refer a complaint to MPFT when the complaint solely concerns the actions of a social worker or social care assessment (Adult Social Care Team's managed by MPFT).

Compliments

During 2020/21 a total of **20** compliments were recorded with the Customer Feedback and Complaints Team which related to Adults Social Care. This figure may not represent all the compliments received as some staff members may have received a compliment directly.

Services provided by Staffordshire County Council	No. Rec'd
Adult Learning Disability Team	8
Brokerage Service	5
Commissioning (PPE supplies)	1
Contact Centre	2
Home Care Agency	1
Debt Recovery Team	3
TOTAL	20

Adult Learning Disability Team
"Steve, we read the report again.
You have captured everything
perfectly and your report writing is
with huge compassion and respect.
I can tell that you have through
everything and it is a difficult
situation to describe. We just
wanted you to know. Please pass
on to your manager and let her
know how appreciative we are to
you and your compassion"

"I would like to place on record my sincere thanks for the recent review that Caroline completed.

As a family Covid 19 has impacted immensely and a review was therefore bought forward. Caroline identified areas of need and concerns and was through in completing the paperwork.

She was always professional and responded quickly to my emails."

Brokerage Team

"My brother and I dealt with Kate in November 2020 whilst we were trying to find a care home for our dad, David We wanted to put on record our thanks to Kate because she was so very helpful and kind during what was a difficult experience for us.

I contacted her a lot during the process and always found her to be very pleasant and cheerful even though I must have been driving her mad with my questions!! Kate is a credit to your team and you are lucky to have her.

"To whom it may concern: Too often people feel the need to criticise the council, yet when excellent service is delivered remain silent. I prefer to applaud when someone helps and 'goes the extra mile'. So I thank Amreen who helped me this afternoon on the telephone to secure my mother's badge renewal. I was able to explain the situation, was not rushed and was guided to give the relevant information. Please convey, officially, my grateful thanks to her. When I said I would be writing to the council she said I had, 'made her

Service Approach for 2020/2021

- Continue greater emphasis on quality of Stage 1 responses to complainants and the importance of discussing the complaint details with the complainant during each investigation.
- To develop processes within the Complaints Team and service areas to ensure complaints are responded to within the agreed timescale.
- To develop processes with the Complaints Team and services areas to ensure recommendations made by the Local Government and Social Care Ombudsman are completed with the agreed timescale.
- To continue to work with Midlands Partnership Foundation NHS Trust in order to administer complaints for adult social care in line with the Section 75 agreement and to ensure lessons are shared and learnt following the outcome of a complaint.
- To continue to develop and enhance reporting processes and requirements with colleagues within Staffordshire County Council in order to provide complaint data regularly to senior management.

Author; Natalie Smith

Complaints Officer

Customer Feedback and Complaints Team

Staffordshire County Council