

## NORTH LANARKSHIRE COUNCIL

AGENDA ITEM No. .... 6 .....

## REPORT

TO: Social Work Committee	Subject:
FROM: Jim Dickie Director of Social Work	<b>COMPLAINTS: STATUS REPORT PERIOD 1 APRIL 1997 - 31 MARCH 1998.</b>
DATE OF COMMITTEE: 2nd June 1998	
REF: DOD/LK	

**1 INTRODUCTION**

- 1.1 This report sets out to inform Committee regarding the Department's performance in receiving, investigating and addressing formal complaints during the period 1 April 1997 to 31 March 1998.

**2 BACKGROUND**

- 2.1 The Social Work Department operates its Complaints Procedure in line with the requirements of Scottish Office Circular SWSG 5/96. The Complaints Procedure aims, wherever possible, to address complaints close to source.
- 2.2 Material outlining the Complaints Procedure is held and publicised at all public service points.
- 2.3 The Complaints Procedure is one of the means through which the Department is informed about the extent to which quality and service objectives are achieved. Information about complaints will be used by operational and development staff in the evaluation of Social Work services.

**3 HANDLING OF COMPLAINTS REGARDING SOCIAL WORK SERVICES**

- 3.1 All complaints regarding Social Work services are primarily directed to senior managers for logging, investigation and response.
- 3.2 The six Area Managers are responsible for complaints regarding Social Work services within each Team's geographical area. Exceptions to this are complaints regarding hospital and offender services which are dealt by the respective Principal Officers (Community Care) and (Criminal Justice).

#### **4 HANDLING COMPLAINTS REGARDING SERVICES PROVIDED ON BEHALF OF THE SOCIAL WORK DEPARTMENT**

- 4.1 For the purposes of the Complaints Procedure, services provided by third parties on behalf of the Local Authority remain the responsibility of the Local Authority. It is usual for the investigation of complaints against third party providers to, in the first instance, be delegated to them for investigation and resolution with the option being available for the complainer to invoke the Local Authority procedure.
- 4.2 Complaints received by the Department regarding Nursing Care establishments are passed to Lanarkshire Health Board, as the registering authority, for investigation.
- 4.3 Complaints regarding registered residential or day services brought to the attention of the Department are investigated by Officers from the Registration and Inspection Unit and dealt with under registration procedures.

#### **5 TIMESCALES**

- 5.1 Timescales for dealing with complaints are set out by the Scottish Office as follows:
- a. formal complaints should be acknowledged within 5 days;
  - b. a response in writing to complaints should be issued to the complainer within 28 days after receipt of the complaint; and
  - c. if within 28 days of receiving a response in writing the complainer informs the Local Authority that they remain dissatisfied, they can refer the matter to a Complaints Review Committee (CRC) forthwith.
- 5.2 An additional local measure available to any complainer prior to moving to a CRC, is to request, within 14 days of receiving a written response from the Department, that the Director of Social Work reviews the complaint and its findings.

#### **6 APPENDICES**

- 6.1 The tables and charts attached as Appendix one relate to numbers, locations and timescales in which complaints were addressed, and outcomes and categories of care group relevant to the complaint. Appendix two highlights complaints received by the Department regarding private and voluntary sector providers. Both appendices set out to draw comparison between the nature of complaints rather than describe the seriousness of these.
- 6.2 The Department does not directly seek to elicit whether or not the matter is concluded to the complainer's satisfaction, although through evaluation of complaints material an attempt is made to identify whether or not the substance of the complaint is upheld or not.

- 6.3 The Complaints Procedure sets out to inform complainers of the options open in the event of dissatisfaction. In the period 1996/1997 only one complainer sought referral to a CRC. Of complaints raised during the 1997/1998 period no complaints have yet been brought to the CRC.
- 6.4 In the period 1997/1998 a total of 95 formal complaints have been raised about the Department's own services, in contrast to 128 the previous year.
- 6.5 The number of complaints received regarding nursing homes registered with Health Boards has escalated from 12 in period 1996/97 to 22 in 1997/98. In contrast, for the same periods complaints about registered residential establishments have reduced from 14 to 7.

#### **Appendix one**

- 6.6 Figure 1: sets out the level of complaint relevant to each Area Team and its services. Complaints about Hospital and Criminal Justice services are included.
- 6.7 Figures 2,3 and 4: set out the Department's performance within Teams and services in responding to timescales set out in Section 5 (above), for complaints to be acknowledged within 5 days and, where possible, concluded within 28 days.
- 6.8 Figure 5: sets out the percentage of the total complaints received by the Department which, after investigation, were considered to be upheld or partially upheld. This indicates that over 48% of complaints raised were not upheld. Figure 6: breaks down complaint outcomes on an Area Team and service basis.
- 6.9 Figure 7: illustrates the prominent care group services where complaints have been upheld.
- 6.10 Figure 8: sets out the most prominent primary reasons behind complaints raised.
- 6.11 **Appendix two:** sets out complaints received regarding registered residential establishments. It also covers nursing homes subject to registration by the Health Board.

#### **7 MANAGEMENT ACTION**

- 7.1 Senior managers with operational and service development responsibilities are required to review the Annual Complaints Return relevant to their area of authority and assess any implications for the quality of services.

## 8 CONCLUSIONS

- 8.1 In its second year of operation the Department, through its complaints procedure, has received 95 complaints (of which 87 have been concluded) from service users or others acting on their behalf.
- 8.2 A commitment has been demonstrated to ensure complaints are acknowledged and addressed within the timescales set and to the satisfaction of the complainers. There remains scope for improvement in meeting targets for acknowledgment of complaints received. Conclusion of complaints within 28 days is more usually due to the complexity of the complaints investigation than to drift.
- 8.3 Complaints often have more than one facet and frequently some elements of the complaint are upheld and others rejected. The attempt to evaluate outcomes of complaints in simple terms is therefore difficult. Within a context where 60% of all complaints received were either not upheld or only partially upheld complainers have not been inclined to make referral to the CRC. This is perhaps the firmest indicator that where complaints arise these have been addressed satisfactorily.
- 8.4 This Department's continuing commitment has to be directed, whenever possible, and at all levels, to reducing the need for formal complaint by achieving good standards of practice and service and to ensuring, where dissatisfaction arises that relevant public information is available to enable service users or their representatives to make their concern known. The overall downturn in complaints received is an indicator of progress in this area but does not provide grounds for complacency.

## 9 RECOMMENDATIONS

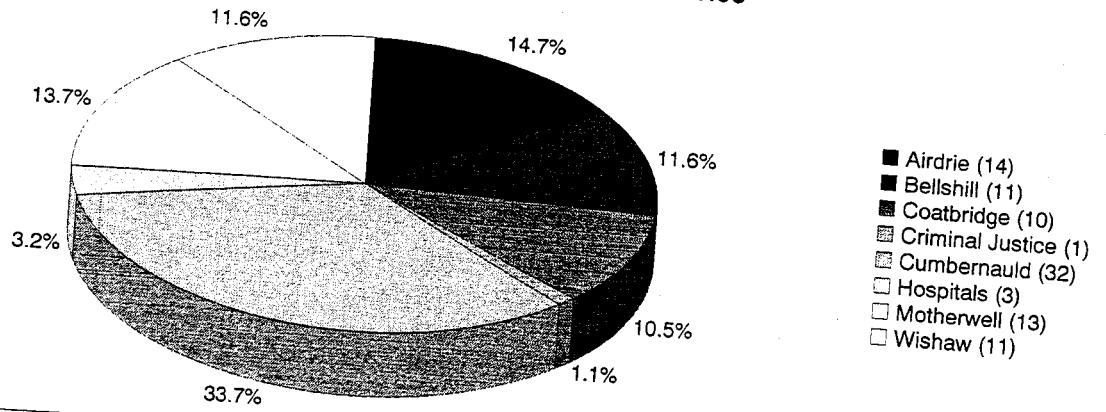
- 9.1 Committee is asked:
1. To note the content of this report and the appendices attached; and
  2. Approved the proposed management action.



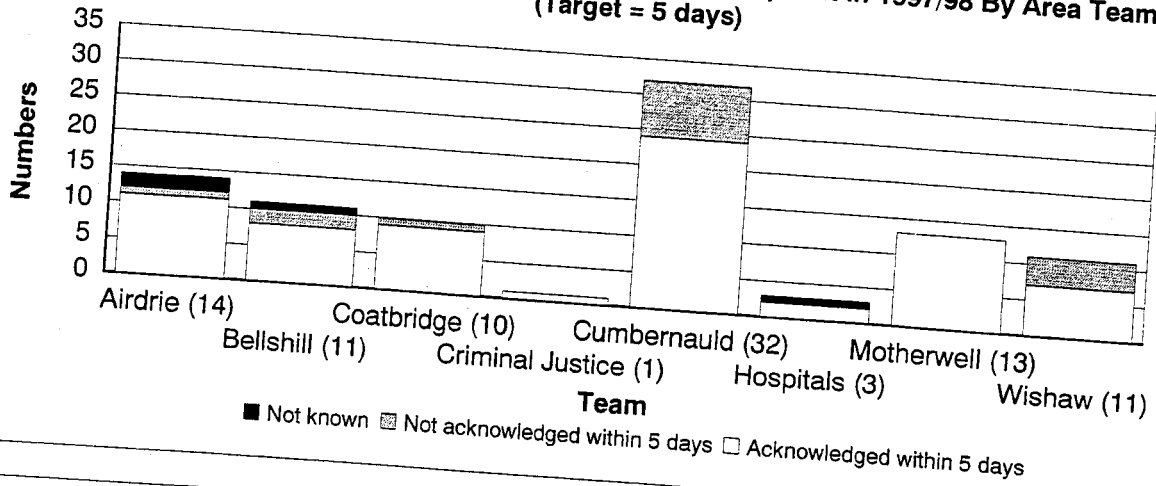
**Jim Dickie**  
**Director of Social Work**  
**May 1998**

*For further information on this report please contact, Dennis O'Donnell Principal Officer (Registration and Inspection)*  
*(TEL: 01698 332058)*

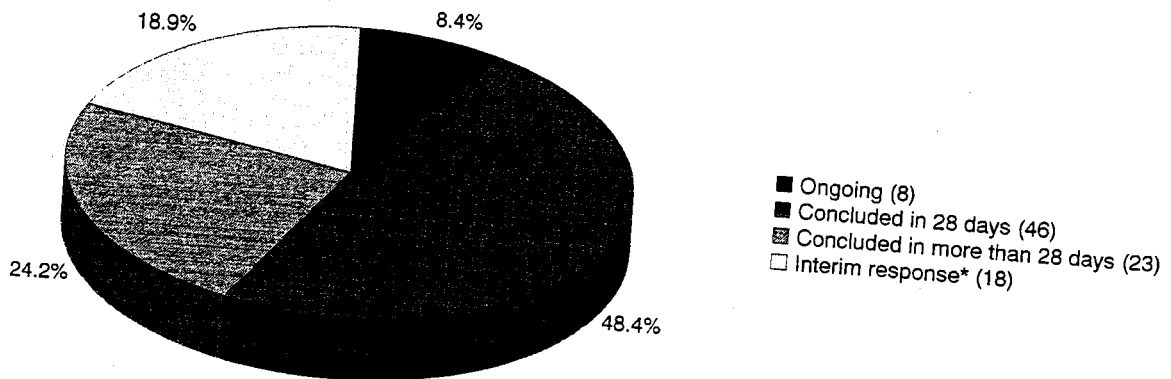
**Fig. 1: Complaint Returns in 1997/98 by Area Team/Service**



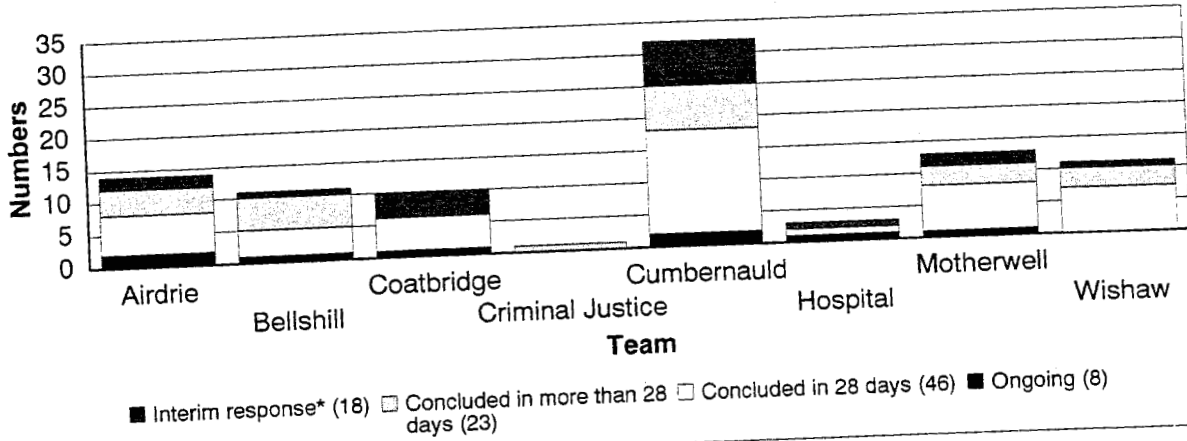
**Fig. 2: Time Taken to Acknowledge Receipt of Complaint in 1997/98 By Area Team (Target = 5 days)**



**Fig. 3: The Processing time for Complaint Returns in 1997/98 (Target = Conclude in 28 days)**

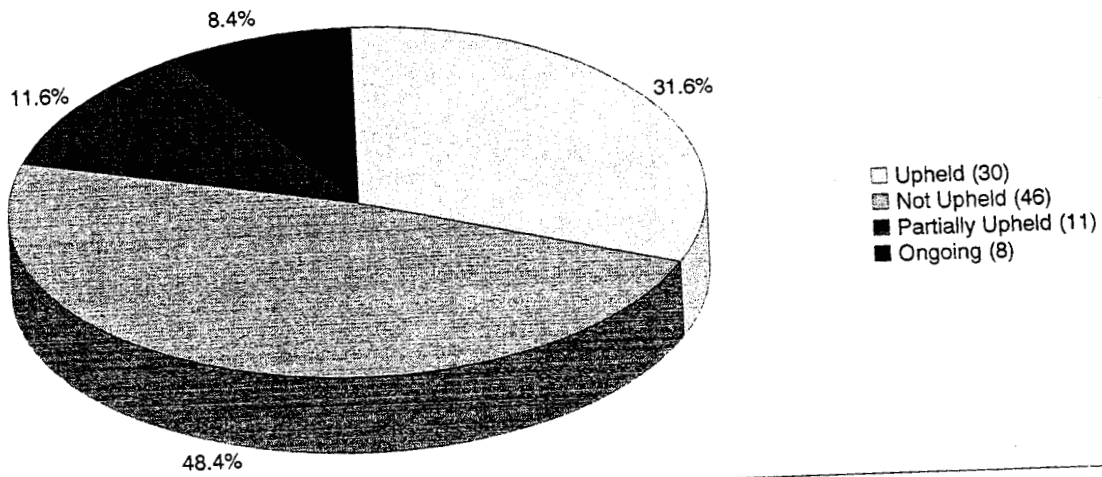


**Fig. 4: Breakdown of the Processing Time for Complaint Returns in 1997/98**  
(Target = 28 days)

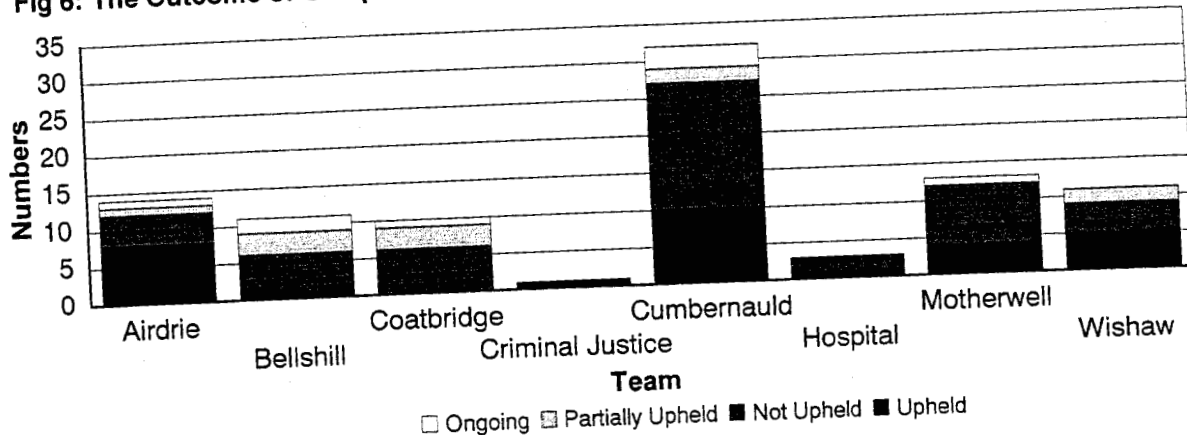


\*: Interim response issued where complaints could not be concluded in 28 days.

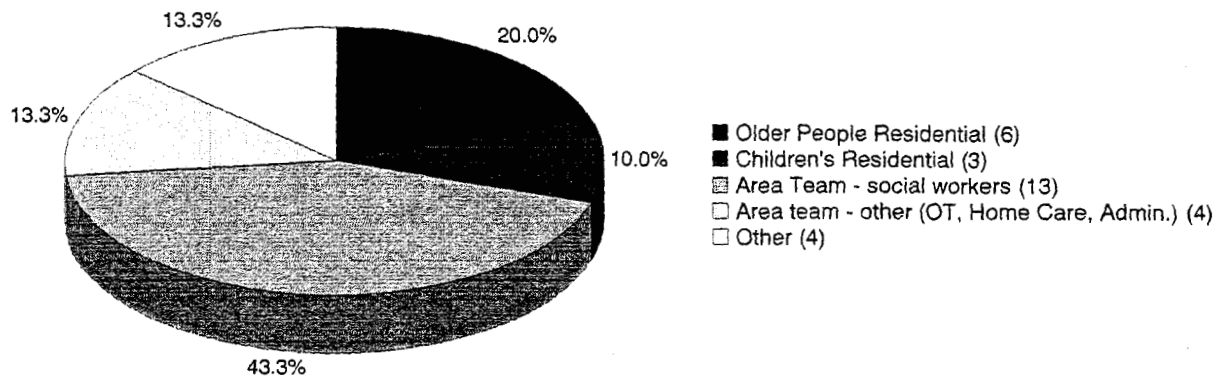
**Fig. 5: The Outcome of Complaints in 1997/98**



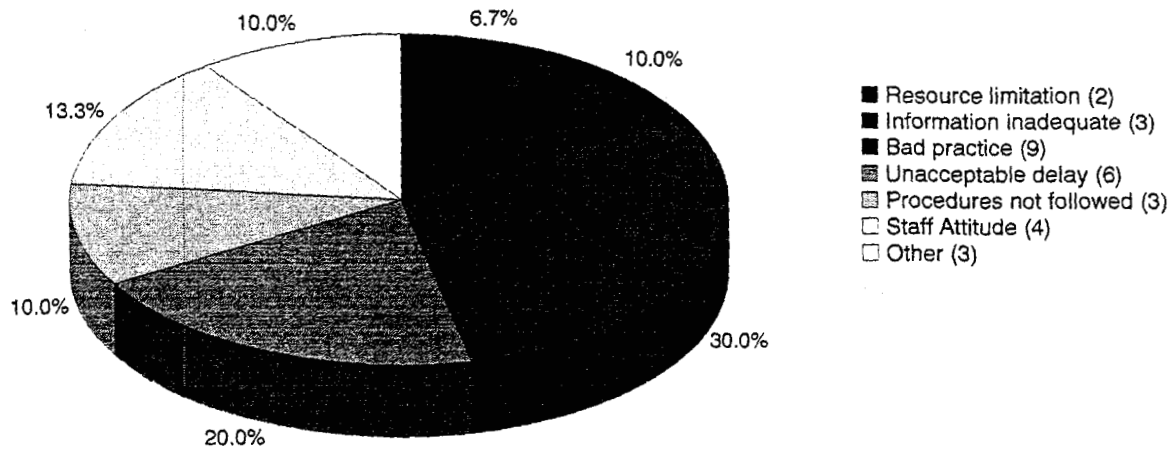
**Fig 6: The Outcome of Complaints in 1997/98 by Team/Service**



**Fig. 7: The Care Group and Location of Complaints Upheld**



**Fig. 8: The Primary Reason for Complaint (Upheld Complaints Only)**



Complaints Evaluation 1st April 1997 - 31st March 1998

Table 1: Registered Residential Establishments

	1996/97	1997/98	Difference	% Change
Total number of complaints logged	14	7	-7	-50%
Elderly Care	9	4	-5	-55%
Adult Care	5	3	-2	-40%

Table 2: Nursing Homes Registered with Lanarkshire or Other Health Boards

	1996/97	1997/98	Difference	% Change
Total number of complaints logged	12	22	+10	+83%