

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK COMMITTEE – 15 March 2004

REPORT ON: SOCIAL WORK COMPLAINTS PROCEDURE

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 218 - 2004

1 PURPOSE OF REPORT

- 1.1 The report informs members about the operation and effectiveness of the statutory Social Work Department Complaints Procedure during the calendar year 2003.

2 RECOMMENDATIONS

It is recommended that the Social Work Committee:

- 2.1 note and approve the content of this report
- 2.2 instruct the Director of Social Work to inform the Scottish Executive Social Work Services Inspectorate of the content of this report
- 2.3 instruct the Director of Social Work to make the contents of this report publicly available.

3 FINANCIAL IMPLICATIONS

- 3.1 There are no financial implications arising from this report.

4 LOCAL AGENDA 21 IMPLICATIONS

- 4.1 Enabling the general public to raise issues and make complaints regarding social work services is consistent with the principles and values expressed in the Agenda 21 programme.

5 EQUAL OPPORTUNITIES IMPLICATIONS

- 5.1 Access to the Complaints Procedure is open to all care groups, their carers and their representatives.

6 MAIN TEXT

6.1 Background

Local authorities are required to consider any complaints made regarding the discharge of their social work function. This requirement is detailed in Section 5A Social Work (Scotland) Act 1968 as amended by Section 52 of the National Health Service and Community Care Act 1990. The revised guidance issued by the Scottish Office in 1996 (SWG5/1996) encourages councils to publish information about the complaints they receive and how they respond to them. This arrangement helps Councils to assess the quality and effectiveness of their social work services.

Dundee City Council Social Work Department complaints procedure enables service users to have their complaints considered at both an informal and formal level. Both routes will ensure that a complaint made by a member of the public will be listened to, addressed and action taken to resolve any difficulties. Research has shown that complainants prefer to have complaints resolved quickly and as close to the point of delivery as possible. The inclusion of informal routes to complaint resolution allow this to happen.

For those complainants wishing to approach complaints in a more formal manner, the procedure is in line with guidance set out by the Scottish Executive. Complainants not satisfied with the response made after an initial investigation are offered an opportunity to discuss their complaint in person with the Director of Social Work.

The Council has always endeavoured to ensure that complaints are managed as independently as possible. To assist with this process the Head of Registration and Inspection, whose role was at arms length to the Social Work Department, had responsibility to oversee the implementation of the complaints procedure. On the 31st of March 2002, the function of registration and inspection was moved to the Scottish Commission for The Regulation of Care (Care Commission). The requirement to operate and manage a complaints procedure remains with the local authority.

In November 2003 the function of monitoring the use of the complaints procedure and ensuring its effective application became the responsibility of the Customer Care Officer. As part of this officer's remit he will collate information from complaints received for the purpose of quality control and continuous improvement. The information taken from complaints, both formal and informal will be recorded on a new database. The Customer Care Officer is structurally independent from operational functions and is based in the Department's Strategy and Performance Service.

This report provides information regarding complaints investigated during the calendar year 2003. Further comments are made regarding the application of the complaints procedure within the Social Work Department.

6.2 Formal Complaints Received

From 1 January to 31 December 2003 a total of 18 formal complaints were received. This number of complaints represents a small increase compared to the previous recorded year when 16 complaints were received.

There are a number of ways a complaint can be made. During the year 68% of complainants raised their concerns in writing, a further 16% of complaints were received by telephone. The remaining 16% were made in person to staff or via office visits.

6.3 Complaints

The complaint procedure sets a target of 5 calendar days for acknowledgement of a complaint. This was achieved for 95% of complaints. This is an improvement over last year when 92% of complaints were acknowledged within 5 calendar days.

When a complaint is received and acknowledged, a senior member of staff nominates an investigation officer. The complainant should expect a written account of the investigation findings to be issued within 28 days. During the calendar year 2003, it is recorded that 22% of the completed investigations failed to issue a response in writing within the agreed timescales. There appear to be a number of reasons for this happening. It may be that the complexity of some complaints means that the current requirement to provide written findings in 28 days is unrealistic. The Customer Care Officer is addressing this issue and a target for improved performance has been set.

6.4 Category of Service

Complainants' dissatisfactions range across a number of service areas within the Social Work Department. The greatest volume of statutory interventions delivered by the Social Work Department are located within Children's Services and the majority of complaints received concerned this operational section. This has been a consistent trend over time. Table 1 shows that there is a downward trend in the overall level of complaints received.

Table 1 **Number of Complaints Received by Service**

SECTION	1999-00	2000-01	2001-02	2003*
Children	16	15	11	11
Adults	11	7	3	4
Criminal Justice	0	0	1	1
Other	6	0	1	2
TOTAL	33	22	16	18

* The reporting period has now been changed to calendar years to coincide with the development of a new database.

6.5 Issues Raised Through Complaints

A single complaint can highlight a number of issues, which require investigation. From the 18 complaints received during the year, 36 issues were raised. The main issues, which attracted complaints, were related to service provision and staff conduct. It is encouraging that complaints relating to service provision have reduced considerably. However it is concerning that issues surrounding the conduct of staff have increased. This is in the face of a hitherto reducing trend since 1999. It should be noted that after investigation only 30% of staff conduct complaints were upheld (3 out of 10).

Table 2 **Issues Raised Through Complaints**

CATEGORY	1999-00	2000-01	2001-02	2003
Disputed Assessment/Decision	1	1	1	16
Breach of Confidentiality	1	3	1	1
Service Provision	65	56	53	5
Staff Conduct	21	12	5	10
Refusal of service	0	0	0	2
Delay in Service Provision	1	0	0	1
Council Policy	4	0	0	1
TOTAL	93	72	60	36

6.6 Outcome of Complaints

The complainant receives a written account of the outcome of the investigation of all complaints. There are a number of possible outcomes, which may arise from a complaint. It may be upheld in whole or in part, not substantiated, or not upheld.

Following investigation of all the issues raised 14% were wholly upheld, 61% were not upheld and a further 25% were not substantiated.

Table 3 Outcome of Complaints

CATEGORY	UPHELD	PART UPHELD	NOT UPHELD	NOT SUBSTANTIATED
Staff Conduct	3		3	4
Service Provision	2		5	1
Disputed Decision			14	3
Breach of Confidentiality				1
TOTAL	5		22	9

When an investigation is complete the complainant is invited to indicate whether they are satisfied or dissatisfied with the investigation and the outcome. Comments returned show that 7 complainants were satisfied with the outcome or the proposed action to be taken. Where the complainant is dissatisfied they are asked to indicate if they wish their complaint to be considered by the Complaints Review Committee (CRC). No such requests were received. In 2 cases complainants requested a review by the Director of Social Work leading to both accepting the outcome of the investigation.

6.7 Action Taken in Response to Complaints

Where a complaint is upheld an apology is made on behalf of the Director of Social Work and an action plan is developed to redress the issue and ensure continuous improvement to services.

Action taken in response to complaints can impact on the delivery of services in a number of ways. For example, communication issues often lie at the heart of a complaint. In an example from children's services, action has been taken to improve communication with the parents and relatives of individuals who use residential and respite services. Specific actions include the development of respite unit users meetings to consult and agree on changes and individual communication with service users to ensure the most up to date information is shared. Improvements have also taken place in care planning to reflect individual needs and highlight risk and the agreed levels of response. Protocols are being developed on the administration of medication and staff trained to carry this out.

The complaints procedure has contributed to the recognition of a need for a more co-ordinated strategic approach to services for children with disabilities and their families.

6.8 Informal Complaints

The main body of this report details the monitoring of the Social Work Department's performance in relation to formal complaints. However informal complaints constitute an important part of a responsive system. The principle of local resolution is central to the procedure and efforts are made to resolve complaints as quickly and as close to point of service delivery as possible.

During the calendar year 2003 there were 32 informal complaints recorded. These complaints should be responded to within 14 days and there was a 63% achievement rate for this performance target. This is a small improvement on last year's performance of 62% but this requires to be further improved. Although complaints received at this stage of the process are classified as 'informal', they are afforded the same level of attention regarding investigation and response. Like formal complaints, informal complaints can be complex and in some instances may take time to investigate.

6.9 Conclusions

The main objective of the Complaint Procedure is to ensure that service users are able to raise concerns regarding their contact with the Social Work Department and be assured that these are taken seriously.

In summary:

- there has been a slight increase in the overall number of complaints received (16 to 18);
- the Social Work Department's response performance has improved, with more complaints acknowledged within timescales;
- there has been a small drop in performance in relation to meeting the standard for complaints response times;
- the number of complainants dissatisfied with the response given has decreased; and
- the introduction of a review by the Director of Social Work has proved to be effective.

The information from complaints and from the complainants themselves is invaluable and is used by the Department to inform continuous improvement in service planning and delivery.

6.10 THE WAY FORWARD

In addition to meeting its statutory obligations by responding to complaints, the Social Work Department regards any views or comments expressed as important and a valuable contribution to service improvement. New ways of enabling easier customer feedback on performance are being developed. These will be monitored by the Customer Care Officer. The improved complaints database will be an important tool for service development and quality assurance.

New Customer Care standards will be developed during the year 2004. These standards will express the Social Work Department's commitment to customers through positive accessibility, respect, effective communication, involvement and partnership working. The philosophy of "listen, learn and improve" will be applied throughout the Department.

Revised public information on the complaints procedure will be produced. This will include details of the role of the Customer Care Officer.

7 CONSULTATION

- 7.1 The Chief Executive, Depute Chief Executive (Support Services) and the Assistant Chief Executive (Community Planning) were consulted in the preparation of this report.

8 BACKGROUND PAPERS

- 8.1 Social Work Department Operational Instruction No. 5.34 Circular SWSG5/1996 – Local Authority Complaints Procedures.

9 SIGNATURE

A G Baird
Director of Social Work

Date

5 March 2004