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**Report to: Scrutiny Committee**

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**Date of Meeting: 2<sup>nd</sup> March 2017**

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**Subject: Social Services Complaints Review Committee**

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**Report by: Assistant Head of Service, Social Services**

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### **1.0 Purpose**

- 1.1. To provide the Scrutiny Committee with a summary of a Stage 3 Complaint against the department of Social Services – Adult Care.
- 1.2. To provide an up-date on actions taken for improvement in response to the findings of this complaint investigation.

### **2.0 Recommendations**

- 2.1. To note the actions taken for improvement in response to a Stage 3 Complaint against Social Services – Adult Care as upheld by the Complaints Review Committee on 8th November 2016 (see appendix 1&2)
- 2.2. To note the Improvement Plan which notes 3 specific actions in relation to briefing operational managers in order to achieve:
  - higher standards of practice
  - higher levels of quality assurance and
  - improved supervision and management of staff.

### **3.0 Considerations**

- 3.1. A Stage 3 Complaint was received on 22<sup>nd</sup> September 2016, relating to the assessment and support provided to the parents of the complainant, and specifically with regards to the length of time required to progress the assessed adaptation required at their property to meet their needs.
- 3.2. Following a meeting with the complainant, the Stage 2 Investigation Officer, focussed on areas identified as requiring further clarification.
  - The first area of focus was with regard to the lack of care and support provided to the service user and family carers.

- The second area related to a request that Clackmannanshire Council be held accountable for social service practice
- The third aspect investigated related to the provision of equipment to support the service user.
- A final area of concern considered at the Stage 2 investigation was that of the distress and frustration to the complainant and their family, caused by the delays and failures in provision of adaptations, equipment and appropriate support.

#### **4.0 Improvement Plan**

- 4.1. While the complaint was dealt with appropriately in terms of process it highlighted a number of operational and issues that require changes in practice in order that the same issues are not repeated.
- 4.2. The immediate response was for the Assistant Head of Service, Adult Care, to issue the attached memo “Lessons Learned” (Appendix 1) to Adult Care Service Managers and Team Managers for immediate consideration on 2<sup>nd</sup> December 2016. The focus of the memo covered a range of issues from:
  - Timescales for Occupational Therapy equipment delivered to service users to be demonstrated within reasonable timescale (24 hours) so it can be used safely.
  - Management of staff absence and the re-allocation of work and how that is communicated to service users and family.
  - Early intervention from Team Managers and Service Managers to complex cases in order to provide active support to Care Managers by meeting service users and /or carers in person in order to resolve the issue at an early stage and reduce the risk of a complaint.
  - Developing a positive culture of engagement with service users/carers on a face to face basis both when scenarios are going well but even more importantly when relationships between the service and the client/carers are poor.
- 4.3. These key themes will form the basis of a meeting held on 18<sup>th</sup> January, with the relevant staff involved in this specific case which will be lead by the Service Manager, Operations/Adult Care and the Complaint Officer for Social Services.
- 4.4. It has also been agreed that the Head of Service, Adult care, will also use the key themes to brief all Service Managers, Team Managers and Assistant Team Managers, on 17<sup>th</sup> February across the totality of Social Services given the relevance to all 3 components of the Service, Adult Care, Child Care and Criminal Justice services. The Head of Social Services has initiated “Learning Review” sessions which will be held across all services. These reviews will be used to create a “Learning Culture”, and the learning from complaints; Initial Case Reviews, Significant Case Reviews, good practice (both locally

and nationally) will be disseminated to staff and will provide the opportunity for staff reflection on the key factors and ultimately improve practice.

- 4.5. The Assistant Head of Service, Adult Care, will personally lead a number of sessions with Service Managers, Team Managers and Assistant Team Managers with Adult Care services as detailed in appendix 2 in order to reaffirm core duties and responsibilities within the service over the remaining three months of the financial year 2016/17.

## 5.0 Sustainability Implications

- 5.1. None

## 6.0 Resource Implications

### 6.1. Financial Details

- 6.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate. Yes

- 6.3. Finance has been consulted and have agreed the financial implications as set out in the report. Not applicable

### 6.4. Staffing

## 7.0 Exempt Reports

- 7.1. Is this report exempt? Yes  (please detail the reasons for exemption below) No

## 7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

- (1) **Our Priorities** (Please double click on the check box )

- The area has a positive image and attracts people and businesses
- Our communities are more cohesive and inclusive
- People are better skilled, trained and ready for learning and employment
- Our communities are safer
- Vulnerable people and families are supported
- Substance misuse and its effects are reduced
- Health is improving and health inequalities are reducing
- The environment is protected and enhanced for all
- The Council is effective, efficient and recognised for excellence

(2) **Council Policies** (Please detail): Social Services Complaints Procedure

### 8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?

No

### 9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

### 10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

Appendix 1 – Complaints Lessons Learned Memo

Appendix 2 Improvement Plan for Team Managers( Adult Care)

### 11.0 Background Papers

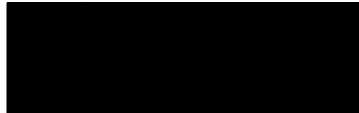
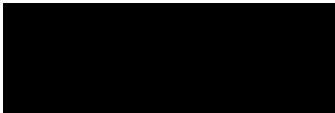
11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes  (please list the documents below) No

#### Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Jim Robb	Assistant Head of Service	01259 225148

#### Approved by

NAME	DESIGNATION	SIGNATURE
Celia Gray	Head of Service	
Nikki Bridle	Depute Chief Executive	

## Services to People

### Memo

To: FAO Adult Care Service  
Managers/Team Managers

From: Jim Robb, Assistant Head  
of Social Services

Extension: 01259 225148

E-Mail: jrobb@clacks.gov.uk

Our Ref:

Your Ref:

Date: 2<sup>nd</sup> December 2016

**Subject: Complaints – Lessons Learned**

Dear All,

Following a recent review into the complaints procedure, I have identified the following points which I would like to be implemented within your teams:

1. All OT equipment delivered to the client needs to be demonstrated within reasonable timescale so it can be used safely. Demonstrated by OT/OTA within 24 hours. If this cannot be done service users/families need to be advised whether it is safe to use the equipment that has been delivered and recorded in case records.
2. In cases of staff absence, when it is confirmed that absence will go beyond 2 weeks, the appropriate Team Manager is required to review the caseload and re-allocate if appropriate. All Adult Protection, Delayed Discharge and priority 1 cases shall be reallocated. If this is not possible the appropriate Service Managers requires to be advised immediately.
3. In circumstances noted in number 2 if there remains work that will not be reallocated then the relevant Team Manager must write to the service user and/or family confirming the situation. The correspondence should confirm which other professionals are involved as an alternative e.g. community nursing/day services but also clarify that the SW duty worker is available at a confirmed telephone number if required.
4. If we have a complex case where we are in dispute with the service user/family, Team Managers and Service Managers as required should arrange to meet with them in person in order to resolve the issue at an early stage and reduce the risk of a complaint.

It is important that the service has a positive culture of engagement with service users/carers on a face to face basis both when scenarios are going well but even more importantly when relationships between the service and the client/carers are poor. Please discuss this at all relevant meetings with staff.

Thanks for your assistance with this matter.

Yours Sincerely



Jim Robb  
Assistant Head of Social Services

## DRAFT CLACKMANNANSHIRE IMPROVEMENT PLAN 2016-17 FOR SOCIAL SERVICES TEAM MANAGERS

Ref	Outcome	Improvement Action	Lead Officer	Update	Key Date	RAG Score	Source
SS1	Higher standards of professional practice and leadership.	This will be achieved by Senior Management re-evaluating standards for professional practice and leadership. Will also require Team Managers to be more focussed on allocation of work, management of waiting lists, management of cases when staff off sick/holiday and management of complaints. This will also be outlined during briefing session for Service Managers/Team Managers and Asst Team Managers across Social Services.	Assistant Head of Service, Adult Care	Briefing session agreed for 17th February and 10 <sup>th</sup> March 2017 with Service Managers, Team Managers and Assistant Team Managers	17 <sup>th</sup> February & 10 <sup>th</sup> March 2017		
SS2	Higher level of quality assurance	Achieved through regular case file audits (2 monthly) as well as individual reviews of assessments and performance.	Assistant Head of Service, Adult Care	Briefing session agreed for 17th February & 10 <sup>th</sup> March 2017 with Service Managers, Team Managers and Assistant Team Managers	17 February <sup>th</sup> & 10 <sup>th</sup> March 2017		

Ref	Outcome	Improvement Action	Lead Officer	Update	Key Date	RAG Score	Source
SS3	More focussed supervision/management of staff.	Team Managers & Assistant Team Manager to have regular staff supervisions, workload management sessions with operational staff.	Assistant Head of Service, Adult Care	Briefing session agreed for 17 <sup>th</sup> February & 10th March 2017 with Service Managers, Team Managers and Assistant Team Managers	17 <sup>th</sup> February & 10th March 2017		