Agenda Item 12



Report to Policy Committee

Author/Lead Officer of Report:

Andrew Drummond, Service Manager - Safeguarding

Report of:	Strategic Director Adult Wellbeing and Care					
Report to:	Adult Health and Care Policy Committee					
Date of Decision:	31st January 2024					
Subject:	Adult Social Care Complaints A Learning from Feedback Annua		•	t and		
Has an Equality Impact Assessment (EIA) been undertaken? Yes X No						
If YES, what EIA reference number has it been given? 2533						
Has appropriate consultation taken	place?	Yes	Х	No		
Has a Climate Impact Assessment (CIA) been undertaken? Yes X No						
Does the report contain confidential or exempt information? Yes No X				Χ		
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below: - "The (report/appendix) is not for publication because it contains exempt information under Paragraph (insert relevant paragraph number) of Schedule 12A of the Local Government Act 1972 (as amended)."						
Purpose of Report:						
This report provides the Adult Social Care Complaints Annual Report 2022 – 2023 for endorsement by Committee and an update regard learning from our feedback from individuals and carers.						
Learning from complaints and from individuals and carers experiences enables the						

continuous improvement of our services.

Recommendations:

It is recommended that the Adult Health and Social Care Policy Committee:

- 1. Endorses the Sheffield Adult Social Care Complaints Annual Report 2022 2023 attached at Appendix 1.
- 2. Notes the Analysis of Complaints by Care Quality Commission Quality Statement attached at Appendix 2.
- 3. Endorses the Learning from Feedback Annual Report attached at Appendix 3.
- 4. Notes that engagement will be undertaken during 2024 with individuals and unpaid carers to continue to build our approach to learning from feedback and using this to inform service improvements and strategic developments.
- 5. Agrees that the Strategic Director Adult Care and Wellbeing providing six monthly updates on our learning from feedback and subsequent service improvements as an assurance to Committee that Adult Care and Wellbeing are continually learning from feedback.

Background Papers:

- Appendix 1 Sheffield Adult Social Care Complaints Annual Report 2022 2023.
- Appendix 2 Analysis of Complaints by CQC Quality Statement
- Appendix 3 Learning from Feedback Annual Report
- Appendix 4 EIA

Le	Lead Officer to complete: -				
respect o on the St Checklist incorpora	I have consulted the relevant departments in respect of any relevant implications indicated	Finance: Laura Foster			
	on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed /	Legal: Patrick Chisholm			
	EIA completed, where required.	Equalities & Consultation: Ed Sexton			
		Climate: Dawn Bassinder			
	Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.				
2	SLB member who approved submission:	Alexis Chappell			
3	Committee Chair consulted:	Councillor Angela Argenzio			
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.				
	Lead Officer Name: Andrew Drummond	Job Title: Service Manager – Safeguarding			
	Date: 8 th January 2024				

1. PROPOSAL

- 1.1 Learning from feedback from individuals and carers is an essential element of our continuous learning and improvement approach and core to delivering on our Strategy Living the Life You Want to Live.
- 1.2 In line with our strategic and operational priorities and the priorities set out in the Council Delivery Plan our focus has been on learning from Complaints, Compliments and Feedback and building a sustainable way of strategically coordinating and embedding learning from feedback across all Adult Care service provision.
- 1.3 Aligned to our Care Governance and Quality Matters Framework, the priority and focus for 2024 is to coordinate and embed learning from all feedback and use this to inform strategic and service developments in a systematic basis. To do this, the service has invested in dedicated Assurance and Performance Leadership which enables this approach to be undertaken.
- 1.4 The Committee report today to that end both provides an Annual Complaints Report, a thematic report which coordinates our learning from feedback and a direction of travel in relation to continuing to use feedback to make service improvements.

1.5 Annual Complaints Report 2022 - 2023

- 1.5.1 The provision of an annual Adult Health and Social Care complaints report is a requirement of the complaints procedures established through the NHS and Local Authority Social Services Complaints (England) Regulations 2009.
- 1.5.2 An annual report is provided setting out an analysis of complaints, learning and priority activity for the following year. The Annual Report for 2022 2023 is attached at Appendix 1 for endorsement by Committee.
- 1.5.3 As an additional focus for scrutiny, an analysis of Complaints in the period 2022 2023 against each Care Quality Commission Quality Statement has also been completed and is attached at Appendix 2. Although not required by CQC, this will now form an annual exercise as part of the annual complaints reporting to enable ongoing learning and self-assessment in relation to the Quality Statements.
- 1.5.4 The Annual Report and Analysis by Quality Statements highlights that the majority of our complaints relate to how we work with people and in particular relating to our financial assessments and assessment of Needs.

Our learning more broadly can be highlighted into four main themes: -

 Assessing Needs - Complaints about assessing needs relate more often to decisions and outcomes than the assessment process or poor communication by staff. Customers are at times unaware of what they are eligible for, see action notes in appendix 2 for our improvement actions.

- <u>Provision of Support</u> Just under 10% of complaints related to lack of support/ response from services or lack of timely assessment.
- Delivery of Care 15% of complaints related to poor care by providers or safeguarding complaints against providers. Whilst this is a significant proportion, it is also worth noting that care provider staff are likely to spend by far the greatest amount of time in contact with our customers.
- <u>Safe Pathways and Transitions</u> Of complaints relating to safe pathways and transitions, the largest number related to poor experience on discharge from hospital. In several cases these were joint complaints and related to hospital action at the time of discharge.
- 1.5.5 To deliver a sustainable approach to learning from complaints an improvement programme was established which was supported through implementation of a dedicated practice development officer with a focus on complaints, a partnership approach with Councils Complaints Team and oversight by Operations Directors. This embedded a service level ownership and leadership of complaint resolution.
- 1.5.6 In addition to this, the Council has introduced a standard Complaints Management System, which includes a standard approach to capturing compliments, compliments and learning from complaints. It also enables a clear focus on timeliness and quality of response and has enabled improvements in recording and consistency in approach.
- 1.5.7 An improvement during 2023 was to embed learning from complaints at all levels and action against such learning assured. The lessons learnt field is now mandatory in the Councils Management System which ensures that service leaders have ownership and knowledge of complaints, supported by complaints team at service level, along with the necessary improvements required.
- 1.5.8 In addition, it was recognised the volume of complaints related to our financial assessments, care provision and adaptations. Due to this, additional infrastructure has been business planned within our Care Governance and Commissioning Service to build capacity. A focused improvement programme regards Occupational Therapy and Adaptations has been reported to November 2023 Committee.
- 1.5.9 The effectiveness our focus on complaints is seen through the reduction in referral of complaints to the Local Government and Social Care Ombudsman (LGSCO) which demonstrates the work input into listening to what complainants are saying and being effective in explaining and clearly communicating the position of resolution and outcomes.
- 1.5.10 Building on the learning and infrastructure put in place, the priorities for 2024 are to embed: -
 - ✓ A standard approach to recording and promoting compliments throughout the service.

- ✓ Recording of data on numbers of compliments and complaints received, including those upheld, within the quarterly Adult Care and Wellbeing performance dashboard presented to Committee.
- ✓ Directorate Complaints Improvement Plan in which six monthly updates are provided to Committee as part of our assurance regards learning from feedback.

1.6 Learning from Feedback

- 1.6.1 Appendix 3 sets out an analysis of learning from individuals feedback using learning from I Statements, Complaints, Citizens Involvement Project, including Learning Disability and Autism Partnership Boards, Festival of Involvement Analysis Report, Ethnicity Analysis Report, Sheffield Voices Project commissioned through Disability Sheffield, Compliments / Complaints including Complaints Annual Report 2022 2023c, Commissioning Strategies and Plans engagement.
- 1.6.2 As we have developed our governance function within adult care, a priority has been to strategically coordinate our learning and feedback from individuals and carers to enable an understanding of our strengths, challenges and risks to inform delivering improvements based on what people have said. This aligns to priority 5 of our Strategy Delivery Citizen Leadership and Personalisation.
- 1.6.3 Investment has been made in our practice development and performance improvement teams to sustainably support this approach so that six monthly reports can be provided to our Directorate Leadership Team and Committee which coordinate learning from feedback from individuals so that it remains current.
- 1.6.4 In summary, the analysis of data from 2022 2023 highlighted that the following strengths and areas for improvement: -

RAG	Theme	
Strength	Relationship building with front line staff is one of	
	our biggest strengths	
Strength	Positive areas of activity are making a real	
	difference to people's lives. (Both in-house and	
	commissioned services)	
Area for	People have not found it easy to get the information	
Improvement	and advice they need	
Area for	People do not yet feel a strong sense of	
Improvement	independence or quality of life	
Area for	People felt afraid to speak up about poor practice	
Improvement		
Area for	Listening to Seldom Heard Communities	
Improvement		
Area for	Transport and Access Arrangements	
Improvement		

In response to this learning, aligned to our Strategy Delivery Plan and Performance Update discussed at Committee in September 2023 and December

2023, the learning has informed a number of actions for improvement over the last year which includes: -

- ✓ Development of <u>Sheffield Directory</u>
- ✓ Reducing our waits to build accessibility for people to raise concerns.
- ✓ Building into the Healthwatch contract an additional mechanism for people to raise safeguarding concerns.
- ✓ Implementing our operating model and with that moving towards specialised service delivery.
- ✓ Developing all Age Autism Strategy and a Learning Disability Strategy along with a restructure to the boards to enable greater engagement and listening to those seldom heard.

Our priorities for 2024 to 2025 based on our learning are set out to: -

1.6.6

- ✓ Continue to implement our new target operating model and improvement actions set out in our Strategy Delivery Plan.
- ✓ Build learning from feedback from individuals into core discussions with leaders and services, so that as with complaints a systematic approach to learning from individuals is embedded at service level and strategically.
- ✓ A community engagement approach in partnership with voluntary sector to enable engagement with diverse communities across Sheffield, building on our equalities, diversity, inclusion, and social justice plan agreed at Committee in 2023

2. HOW DOES THIS DECISION CONTRIBUTE?

- 2.1 Learning from complaints and feedback enables delivery on our strategic outcomes in our <u>vision and strategy</u> and the Council's Delivery Plan by aiming to improve individuals experience of services.
- 2.2 In recognising this we need to ensure we meet the standard required to respond to people in a timely fashion, resolve the issue raised where necessary, taking learning from complaints and feedback, and embedding this learning into future working practices.
- 2.3 The Complaints and Learning from Individuals Annual Reports contributes to delivery upon the Connected and Engaged and Efficient Adult Social Care outcomes as set out in the Adult Social Care Strategy Living the Life You Want to Live. It also contributes to delivery on the CQC Quality Statements.

3. HAS THERE BEEN ANY CONSULTATION?

- 3.1 Public engagement and participation has occurred at the root of this work. In that we have made it clear to Sheffield citizens how they can raise a complaint/compliment with Adult Care and Wellbeing.
- We always strive to respond in the defined timeframes so the public feel when they have engaged with us their opinion has been heard and acknowledged.

4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

4.1 Equality Implications

- 4.1.1 As a Public Authority, we have legal requirements under the Equality Act 2010, collectively referred to as the 'general duties to promote equality'. Section 149(1) contains the Public Sector Equality Duty, under which public authorities must, in the exercise of their functions, have due regard to the need to:
 - eliminate discrimination, harassment, victimisation, and any other conduct that is connected to protected characteristics and prohibited by or under this Act.
 - 2. advance equality of opportunity between those who share a relevant protected characteristic and those who do not.
 - 3. foster good relations between those who share a relevant protected characteristic and those who do not.
- 4.1.2 The reports described in this report is consistent with those requirements. It aims to develop a more efficient and person-centred approach and, as referenced in the Consultation section above, to ensure citizens' voices and experiences help to inform and develop the processes.
- 4.1.3 The nature and purpose of Adult Care means that people sharing the protected characteristics of Age and/or Disability will be directly impacted by the proposals. However, the safeguarding remit means that people sharing certain other protected characteristics (e.g., Sex, Race, Sexual Orientation) may also be particularly affected.
- 4.1.4 The updated Equalities Impact Assessment is at Appendix 4. This will continue to be developed and identifies the need to improve demographic understanding of the people who are (and aren't) complaining) through:
 - Further engagement activity with people who receive care and their carers
 - Further analysis of customer data against Sheffield demographics to inform planning and engagement
 - Work with Customer Services to seek to develop demographic capturing through the Complaints Management System

4.2 Financial and Commercial Implications

4.2.1 There are no direct financial implications arising from this report. Any future activity will be assessed for its financial implications and reported and recorded as part of the approval process.

4.3 <u>Legal Implications</u>

- 4.3.1 The core purpose of adult health and social care support is to help people to achieve the outcomes that matter to them in their life. The Care Act 2014 sets the Council's statutory power to direct the provision that:
 - promotes wellbeing
 - prevents the need for care and support
 - protects adults from abuse and neglect (safeguarding)
 - promotes health and care integration
 - provides information and advice
 - promotes diversity and quality.
- 4.3.2 Beyond the Act itself the obligations on Local Authorities are further set out in the Care Act statutory guidance issued by the government. By virtue of section 78 of the Act, Local Authorities must act within that guidance.
- 4.3.3 The Care Act Statutory Guidance at paraph 4.52 requires Local Authorities to:
 - "... have in place published strategies that include plans that show how their legislative duties, corporate plans, analysis of local needs and requirements (integrated with the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy), thorough engagement with people, carers and families, market and supply analysis, market structuring and interventions, resource allocations and procurement and contract management activities translate (now and in future) into appropriate high quality services that deliver identified outcomes for the people in their area and address any identified gaps".
- 4.3.4 With specific regard to complaints handling, the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Services Complaints (England) (Amendment) Regulations 2009 require Local Authorities to provide an annual report on Adult Social Care Complaints. This Annual report supports the Authority in meeting its statutory obligations in relation to those provisions and to its safeguarding obligations.

4.4 Climate Implications

- 4.4.1 There are no direct climate implications associated with approving this report. Climate implications and improvement actions will be considered along with the proposed Climate Statement at Committee today along with learning from feedback from individuals.
- 4.4.2 We are committed to working with partners aligned with our Net Zero 2030 ambition and where specific procurement/commissioning exercises take place we will aim to consider providers approach and performance in terms of managing the climate impacts of the services they provide. This would be done via more detailed CIAs for specific procurements.

4.5 Other Implications

4.5.1 There are no specific other implications for this report.

5. ALTERNATIVE OPTIONS CONSIDERED

5.1 The alternative option is that Committee do not endorse the Annual Report and Learning from Feedback. However, this would not provide the opportunity for assurance and scrutiny.

6. REASONS FOR RECOMMENDATIONS

- 6.1 An endorsed Complaints Annual Report and endorsed Learning from Feedback gives the Public and Members assurance that Adult Care and Wellbeing is delivering upon its commitment to learn from complaints and learn from feedback.
- 6.2 Asking for six monthly updates provides greater accountability and transparency regards our delivery upon service improvements identified.