

Midlothian Council
Social Work Complaints
Performance Analysis
2017/18



Foreword

As with all Councils in Scotland, Midlothian Council has a new Social Work Complaints Handling Procedure (SWCHP) in place that reflects a robust commitment to valuing feedback from customers.

A year on since its implementation, it is pleasing to present the council's first Annual Social Work Complaints Performance Report. The report provides information on complaints about all social work services delivered either directly by Midlothian Council, or indeed through the Health and Social Care Partnership (HSCP). Midlothian Council also takes responsibility for commissioned services that deliver social care or other services on the council's behalf. While commissioned services are separate from the council and HSCPs, they are subject to control by the council and their services must meet the required standard. Accordingly, there are mechanisms in place to identify and act on complaints handling performance issues with these providers.

Midlothian Council is committed to providing high quality services to communities, but recognises that occasionally things can go wrong. The SWCHP means that staff can directly engage with customers and get the valuable feedback needed to drive service plans. A robust complaints procedure also helps to improve key outcomes that includes: being responsive to the population of Midlothian; and showing transparency, equity and fairness in the distribution of resources.

The data presented has been received between 1 April 2017 and 31 March 2018 and this report is in addition to the way complaints are regularly reported to Heads of Service, the Corporate Management Team and Elected Members.

The report provides the opportunity to share performance with a key focus on continuous improvement as a direct result of the social work related complaints received. The performance indicators that are reported on are standardised across all Scottish Councils, and some case studies are shared that demonstrate the learning and improvement that has taken place.

Going forward, focus will be on achieving a high level of positive outcomes for complainants at the frontline Resolution Stage 1, where the decisions to uphold complaints have successfully helped us to resolve matters early, learn from any mistakes and to enhance our Social Work services and operations.

The council would like to thank the residents of Midlothian for their encouraging support. Please continue this support by providing your feedback on any aspect of Midlothian Council's Social Work services, all of which have contributed to the production of this Social Work Annual Complaints Performance Report.

Alison White

Chief Social Work Officer
Midlothian Council

Background

The Public Services Reform (Social Work Complaints Procedure) (Scotland) Order 2016 (the Order) brought social work complaint handling into line with other local authority (LA) complaints handling, by bringing it under the remit of the Public Services Reform (Scotland) Act 2010 (the Act). Under the Act, the SPSO has the authority to lead the development of model complaints handling procedures (CHPs) across the public sector. The Act took forward the recommendations of the Sinclair Report, which sought to improve how complaints are handled through the development of simplified, standardised CHPs.

Health and Social Care Partnership and Integrated Joint Board complaints are managed using the Scottish Public Services Ombudsman's Model Complaint Handling Process (CHP) from 1st April 2017 and 1st of July 2017 respectively. The introduction of the social work model CHP requires a change to the reporting period for complaints from every 6 months to a quarterly cycle. Compliance is monitored by Audit Scotland in conjunction with the SPSO and is in line with the principles of the Best Value Shared Risk Assessment (SRA) arrangements.

The implementation of the SW Model CHP was timed to coincide with the implementation of the new NHS Model CHP, bringing both social work services and NHS services into line with the existing local authority (LA) Model CHP.

The emphasis of the new SWCHP is on ensuring that customers have easy access to an efficient, customer focused complaints service which responds to their concerns quickly and as close

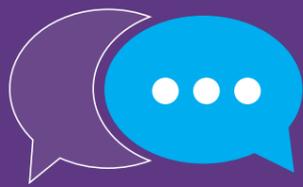
to the point of service as possible. The extension of the approach to social work services will also help local authorities and health and social care partnerships in providing coordinated responses to complaints that cover more than one service. In particular, the aim is to implement a consistent process for organisations to follow which makes it simpler to complain, ensures staff and customer confidence in complaints handling.

An important aspect of all model CHPs is the requirement to learn from complaints. The new social work CHP requires organisations to assess and report their complaints handling performance against the SPSO performance indicators. This will help to facilitate continuous improvement through the benchmarking of performance within and across sectors. Importantly, it will help organisations to use the outcome of complaints to improve service delivery.

What is a complaint?

Midlothian Council defines a complaint as:

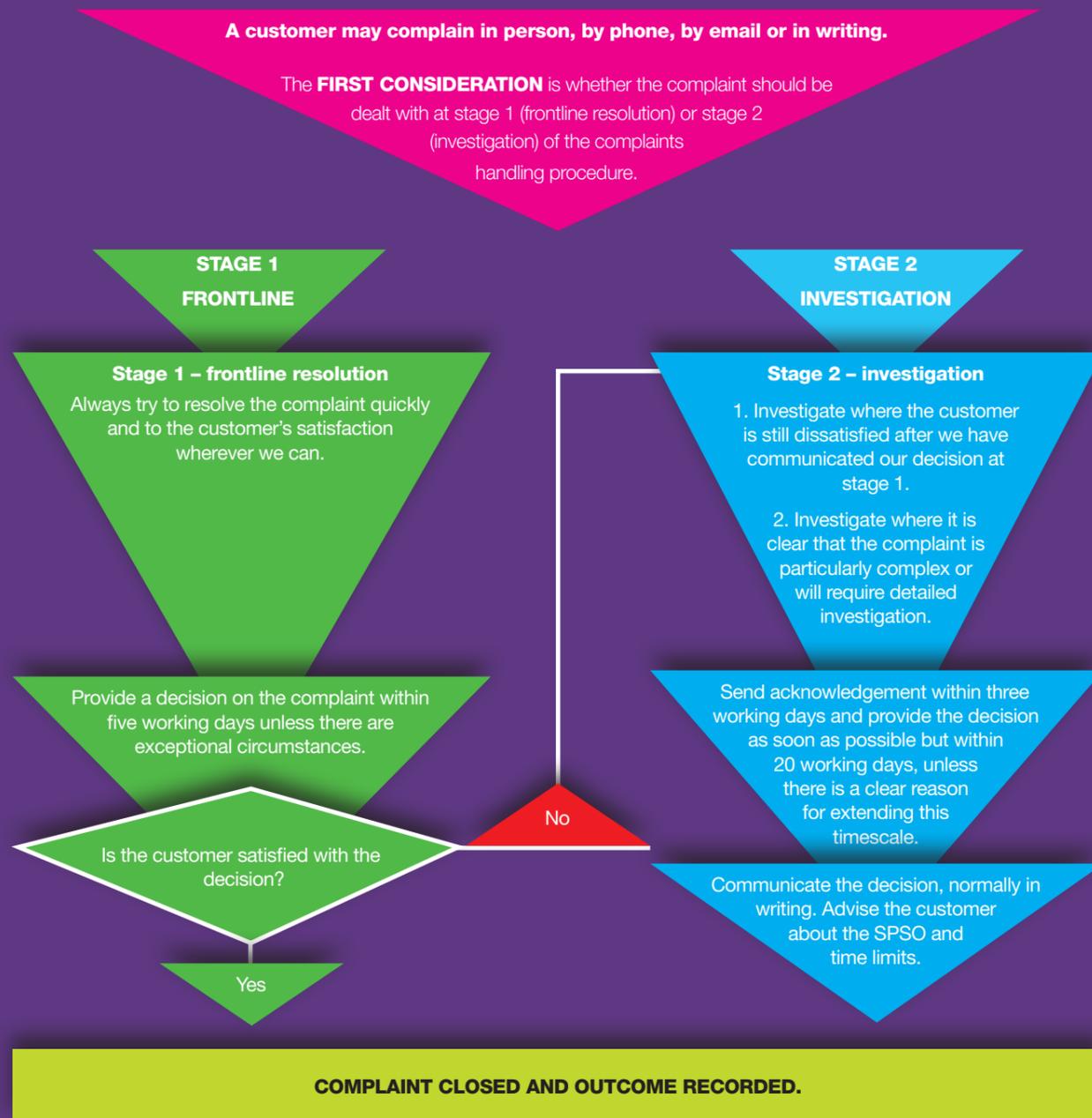
“An expression of dissatisfaction about our action or lack of action, or about the standard of service provided by us or on our behalf”.



Social Work Complaints Handling Procedure

While the SWCHP includes significant information and guidance specific to social work matters, the only procedural difference when compared to the corporate Complaints Handling Procedure (CHP) is that the extension to timescales for stage 1 complaints is different. Figure 1 illustrates a summary flow chart of the complaints procedure. It is the same summary used for the corporate CHP.

Figure 1: Complaints Handling Procedure



Monthly or quarterly:

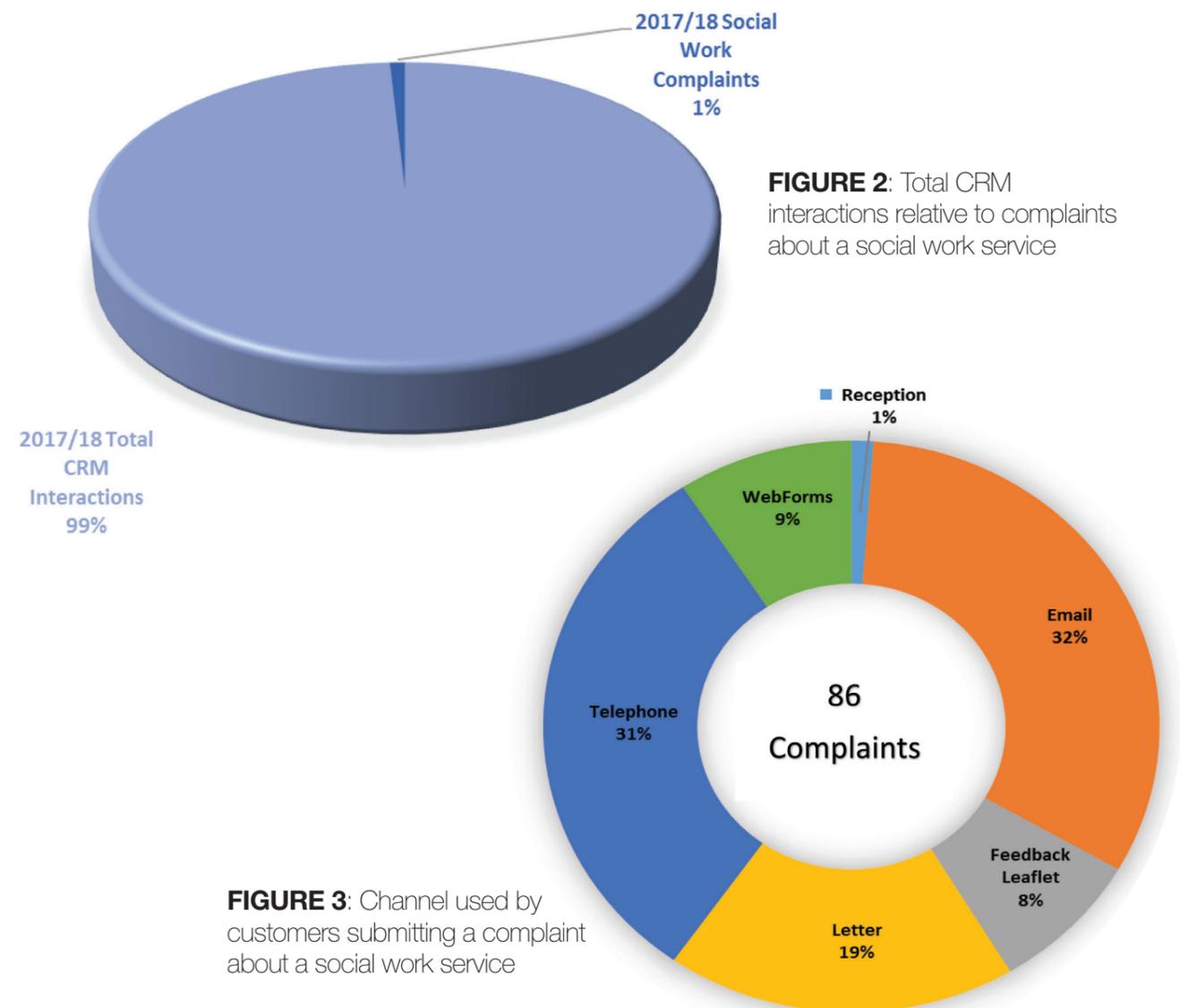
ENSURE ALL complaints are recorded • **REPORT** performance, analyse outcomes
MAKE changes to service delivery where appropriate • **PUBLICISE** complaints performance externally

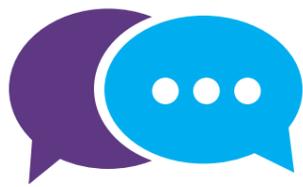
Social Work Complaints Received and Channel Used 2017/18

The number of complaints about social work services that are logged on the Customer Relationship Management (CRM) system are proportionately very little when compared to the overall number of recorded dealings.

With a total of 103,528 interactions on CRM, only 86 related to complaints about a social work service. This equates to just under 1%. The percentage difference relative to the total amount of interactions during 2017/18 is illustrated in Figure 2.

Figure 3 highlights the various channels that customers have used to contact the council with their complaints about Social Work. Email and telephone are the preferred methods with 32% and 31% respectively, followed by letter (19%), webforms (9%), and feedback leaflet (8%). In person at any of our reception points equated to only 1%. The SWCHP is in its inaugural years, and the coming years will bring interesting comparative data that will determine if the work done both corporately and within service areas is shifting in a way that meets the rapidly growing population of Midlothian. Planned development to systems such as Customer Relationship Management (CRM) will support this from an accessibility, recording and reporting viewpoint.





Social Work Related Service Areas

Table 1 illustrates the Social Work service areas and the total number of complaints that have been submitted to each. The data shows that Adults and Social Care have the most with 45 complaints, followed by Children's Services with 33. All the other areas have 1 complaint with the exception of the Community Care Team (3).

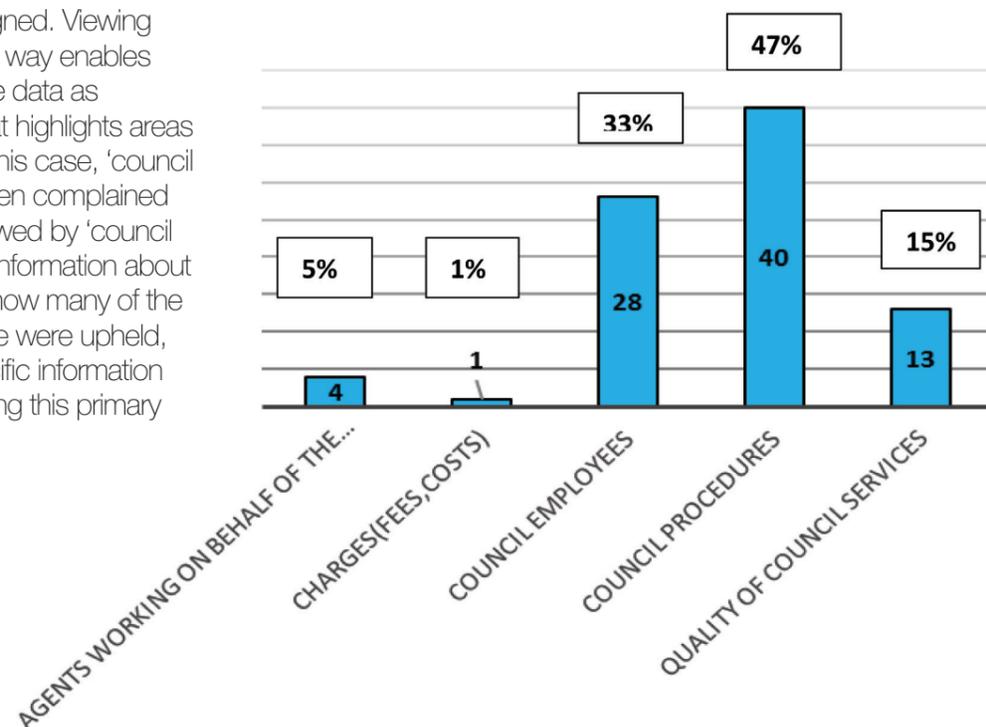
Social Work Service	Complaints
Adult Protection	1
Adults and Social Care	45
Children's Services	33
Community Access Team	1
Community Care Team	3
Criminal Justice	1
Highbank Residential Home	1
Home Care Team	1

TABLE 1: Social Work Service Areas and Corresponding Complaints for 2017/18

Complaint Themes

Figure 4 illustrates the amount and percentage of social work related complaints relative to the themes that they have been assigned. Viewing the information in this way enables the service to use the data as tangible evidence that highlights areas for consideration. In this case, 'council procedures' have been complained about the most, followed by 'council employees'. Further information about outcomes, such as how many of the complaints per theme were upheld, and other more specific information will be viewed following this primary data analysis.

FIGURE 4: Number and percentage of complaints relative to overarching themes



Statutory performance indicators

Midlothian Council assesses complaints handling performance to provide assurance in relation to their performance, to facilitate continuous improvement and to assist in benchmarking performance between local authorities.

Indicator 1 Complaints received per thousand population

Indicator 2 Complaints closed at stage 1 and stage 2 as a percentage of all complaints closed

Indicator 3 The number of complaints upheld/partially upheld/not upheld at each stage as a percentage of complaints closed in full at each stage

Indicator 4 Average time in working days for a full response to complaints at each stage

Indicator 5 The number and percentage of complaints at each stage which were closed in full within the set timescales of 5 and 20 working days

Indicator 6 The number and percentage of complaints at each stage where an extension to the 5 or 20 working day timeline has been authorised.

Indicator 7 Customer Satisfaction statement about the complaints service provided.

Indicator 8 A statement outlining changes or improvements to services or procedures as a result of the consideration of complaints.

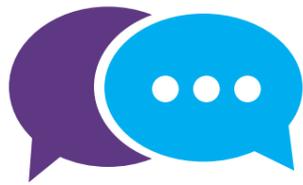
INDICATOR 1 – Complaints Received Per Thousand Population

This indicator records the total number of complaints received at stage 1, or directly at stage 2. The sum is divided by the estimated population size of Midlothian Council. Population size data is a Mid-Year Population Estimate from 2015 obtained from the National Records of Scotland (NRS).

- The population of Midlothian Council is estimated to be 88,610
- Midlothian Council handled 87 Social Work complaints
- This equates to an average of 1 complaint received per 1000 population, or expressed another way, 1 in every 1000 people made a complaint about a social work service

Table 2: Figures for Performance Indicator 1

Complaints received per 1000 population	
Population Total	88,610
Total Number of Social Work Complaints	87
Complaints per 1000 population	1



INDICATOR 2 – Complaints Closed At Stage 1 And Stage 2 As A Percentage Of All Complaints Closed

Table 3: Figures for Performance Indicator 2

Complaints closed		
	No. Complaints	% Total
Closed Complaints Stage 1 (Closed Complaints at 1st Point Contact)	37 (+1)	45.2%
Closed Complaints Stage 2	27	32.1%
Closed Complaints after Escalation	19	22.6%

Closed complaints are those that have been allocated an outcome and a response has been given to the customer. At time of reporting, no further action was required.

Customers who have undergone the complaints procedure at stage 1, but who remain dissatisfied are invited to **escalate** their complaint to a stage 2 investigation.

- Since it is year one of this report, there is no comparative data, so the current statistics will be an initial benchmark.
- Work that endeavours to increase the percentage of closed stage 1 complaints, currently 45.2%, will be considered since it costs much more to deal with stage 2 complaints compared to stage 1. The SPSO also encourages as early a resolution as possible.
- Although all stage 1 complaints are considered 'early resolution', Midlothian also records the complaints that were closed at the very first point of contact. This enables the council to consider the customer journey, looking at details such as whether these cases are more, or less likely to be escalated to a stage 2 since they more often than not tend to be upheld; and also look into whether those customers tend to be more satisfied than those who have had to wait for an outcome to their complaint for example from a manager or someone within the service. This information will be presented in future reports.

INDICATOR 3 – Complaints Upheld, Partially Upheld and Not Upheld

The Complaint Handling Procedure requires a formal outcome to be recorded against each complaint. The outcomes are categorised as upheld, partially upheld, and not upheld.

Table 4: Figures for Performance Indicator 3

Complaint Outcomes		
	No. Complaints	% Total
Stage 1 Complaints Upheld	5	13.2%
Stage 1 Complaints Not Upheld	11	28.9%
Stage 1 Complaints Partially Upheld	10	26.3%
Stage 2 Complaints Upheld	5	18.5%
Stage 2 Complaints Not Upheld	9	33.3%
Stage 2 Complaints Partially Upheld	10	37%
Escalated Complaints Upheld	3	15.8%
Escalated Complaints Not Upheld	9	47.4%
Escalated Complaints Partially Upheld	6	31.6%

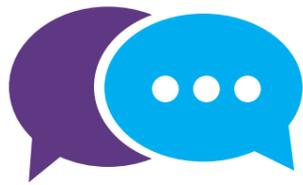
Table 4 illustrates that 5 stage 1 complaints were upheld, which represents 13.2% of all complaints closed at stage 1. Additionally, 11 were not upheld and 10 were partially upheld, representing 28.9% and 26.3% respectively. Of the closed stage 2

complaints, 5 were upheld, 9 were not upheld and 10 were partially upheld. This corresponds to 18.5%, 33.3% and 37%. Lastly, the escalated complaints show that 15.8% (3) were upheld, 47.4% (9) were not upheld, and 31.6% (6) were partially upheld.



Figure 5: Comparisons for Performance Indicator 3

Figure 5 expresses the data in another way, where each of the outcomes are grouped together, rather than the stage of complaint. This enables the viewer to visually compare the outcomes between each of the stages. This enables consistencies, irregularities, or trends to be identified at a glance before doing further analysis work to gain further insight.



INDICATOR 4 – Average Time In Working Days To Respond To Complaints

This indicator takes the sum of the total number of working days for all complaints to be dealt with and closed at stage 1; at stage 2; and escalated complaints. The average time in working days for a full response to be given is then calculated by dividing the sum by the total number of closed complaints for each stage. Prescribed timescales are 5 days for stage 1 and 20 days for both stage 2 and escalated complaints.

Table 5: Figures for Performance Indicator 4

Average Time in Working Days to Respond to Complaints		
	Target (days)	Average (days)
Stage 1 Average Time in Working Days	5	16.3
Stage 2 Average Time in Working Days	20	16.9
Escalated Average Time in Working Days	20	20.7

Table 5 shows that the average time to deal with stage 1 complaints is 16.3 days. This is well out-with the 5 day target. Work is ongoing to ensure that staff become familiar with the handling of the new procedure. The 'stage 1' process is a new concept to Social Work staff and it is clear that work is required that will enhance understanding. More work is needed to establish the reasons behind these stats. It could be that they should

have been logged as stage 2 in the first instance.

The average time to respond to stage 2 and escalated complaints is 16.9 and 20.7 days respectively. Since the target is 20 days, the results for stage 2 complaints is sufficient, but escalated complaints is not so adequate. Work to ensure that this trend does not continue is ongoing.

INDICATOR 5 – Complaints Closed Against Timescales

This indicator reports the number and percentage of complaints at each stage which were closed in full within the predetermined timescales of 5 and 20 working days.

Also included in these statistics are the cases where an extension has been authorised to the timescales. Table 6 illustrates the results as follows:

- 9 complaints (of 38) were closed at stage 1 within 5 working days. This denotes 23.7%.
- 20 complaints (of 27) were closed at stage 2 within 20 working days. This denotes 74.1%
- 10 complaints (of 19) were closed after being escalated. This denotes 52.6%

It can be seen that improvements are required for all stages that will ensure timescales are met. Training around the procedure and system management is required and following this it is anticipated that next year's statistics show improvement when compared to the current year's data.

Table 6: Figures for Performance Indicator 5

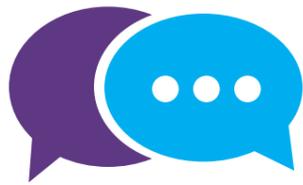
Percentage of Complaints Closed against Timescales		
	Number	Result %
Stage 1 Percentage Closed within Timescales	9	23.7%
Stage 2 Percentage Closed within Timescales	20	74.1%
Escalated Percentage Closed within Timescales	10	52.6%

INDICATOR 6 – Complaints At Each Stage Where An Extension Was Authorised

This indicator looks at the number and percentage of complaints at each stage where authorisation was agreed to extend the 5 or 20 working day timeline.

It does not include complaints that were late but authorisation was not requested and/or logged accordingly.

During the period 2017/18 there were no extensions requested. Correct use of this function might alleviate some of the problems highlighted in indicators 4 and 5 above. Continuing system and procedural training will help to improve these areas and next year's data will substantiate this.



INDICATOR 7 – Satisfaction About The Way Complaints Have Been Handled

Within the Corporate Complaint Handling Procedure (CHP), Midlothian Council has identified the area of satisfaction as one that requires development work. This is due to poor uptake in responding to the questionnaires. The work to review this will also incorporate the Social Work CHP. Within the Local Authority Complaint Handlers Network (LACHN) group, there is a generic questionnaire being developed, and it is anticipated that when the new format is available, Midlothian Council will use this in addition to reviewing the methodology in which they are distributed.

It is expected that this will allow for satisfaction data to be better collated and reported.

Social Work Service Compliments 2017/18

“

We are pleased with the way my grandmother has been moved to the care home of our choice. It was done swiftly and we have found <staff member> to be very helpful, friendly and caring. We wish to thank her and let you know <grandmother> is extremely happy and well cared for, which is a great relief to us all. Kind regards and many thanks. ”

“

Today I had <staff member> out to fix my mattress elevator and add a grab rail to it. He is always very polite. He also very nicely made my bed back up and I'm sure he has flipped my mattress for me to save me from doing it. I didn't ask for this but I'm so grateful as it's saved me a massive job. Please can you thank him for me and make sure he knows you know he is one in a million. He's amazing and deserves to be noticed. ”

“

Would like to thank <staff member> for the way she helps her get through difficult situations... ”

INDICATOR 8

Learning, Changes and Improvements made to Service Areas as a Result of Complaints

Case Study 1

Children's Services

The very sensitive nature of the service, and the challenging discussions that take place between the staff and service users generally occurs during times when there is enormous stress, upset and extreme pressure. A number of complaints that followed these conversations related to the verbally agreed actions that were taken afterwards. It was clear that there had been misunderstandings and/or misinterpretations about processes to follow the conversations, and this happened on more than one occasion i.e. with different cases. It was difficult for the investigator to define whether it was Social Workers not being clear enough in their approach, or indeed if it was due to the service user not processing the information in the usual way due to heightened emotions. It was determined that it was very likely both scenarios.

Improvement Action

In every case, Social Workers are now tasked with providing service users with a written 'Working Agreement', following conversations. This document is a record of the discussion that took place, which highlights the agreed actions. Not only does this provide an auditable record

that includes projected dates, but it also lets service users absorb the information and either ask questions, clarify points, or indeed query anything that they feel does not reflect their understanding. This takes place before the actions are implemented, and has improved communication between users and staff as well as enable further support during the necessary adjustments.

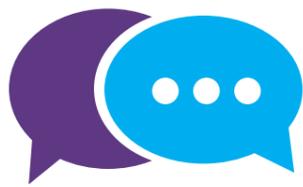
Case Study 2

Children's Services

Social work staff were providing work mobile numbers to families for continuity purposes and to ensure that they could be contacted directly to quickly answer queries. Although intentions were well meant, there were complaints from families who could not get in touch during the weekend, when mobile phones were switched off.

Improvement Action

Staff now provide the Emergency Social Work Services (ESWS) number, as well as the social work landline number, which has an answering service that provides details of the ESWS when the office is closed.



Case Study 3

Children's Services

There have been a number of complaints about Social Workers not returning calls to service users. The issue being that service users were being informed that the message was passed onto the worker and they would be back in touch within a certain timescale. On occasion the worker did not return the call within the specified time for various reasons; not appropriate, out and about so didn't get message, on leave or off sick. This then lead to another call from the service user complaining that no one had been in touch. In order to resolve this issue we arranged for a meeting to agree what would a service user be advised when calling into speak to their worker and what was a realistic timescale in relation to a follow up call and who else should be contacted if worker not around (eg Team Leader).

Improvement Action

There are ongoing meetings between children's services staff and the contact centre staff to enhance our working relationship and to ensure a smooth transition of calls and messages from service users to the allocated worker. There are also regular senior manager meetings to look at how we can continue to improve communication and practice.

Case Study 4

Criminal Justice

An incident occurred where a service user, who was subject to a Community Payback Order and was undertaking unpaid work hours within the community made a rude, dismissive remark to a member of the public who had asked a question. The service user was accompanied by a member of Midlothian Council staff, who was not directly present during the incident. The member of the public mistakenly thought that the service user was council staff and rightly complained.

Improvement Action

Although it was concluded that it was not a member of staff who was rude, the Criminal Justice service

have used the incident as an example during training programmes for staff who have supervisory and mentoring responsibilities. Demonstrating good practice through mentoring will help to ensure service users treat members of the public with respect whilst carrying out unpaid work.

Case Study 5

Adult Social Care

There were recurrent complaints about one of Midlothian Council's care providers. Various improvement attempts were made, but unfortunately development objectives were not met.

Improvement Action

The contract between the council and the care provider was eventually removed. The SW Complaints Handling Procedure provided robust supporting evidence in the decision making process in dealing with this case. Quantitative data could be used to support the outcome analysis.

Case Study 6

Adult Social Care

Following an assessment, and establishing the requirements for 'Care at Home' packages, there have been a number of complaints about unreasonable wait times to implement the necessary care. This is a capacity issue whereby care providers have not been able to meet the demands of the service.

Improvement Action

Issues of capacity within care at home is not purely a Midlothian Issue; however Midlothian Council's Care at Home service is undergoing a fundamental redesign whereby there is a review of service providers in progress, and a project is in progress to promote the care profession, targeting groups such as returners to work and men. There is also an 'E-Frailty' project underway that will direct better primary care pathways for

older people by considering individual frailty rather than chronological age. Working collaboratively with GPs and Health is facilitating the identification of the most vulnerable patients for targeted care. This will assist in the reduction of unplanned hospitalisations and ensures that those who may benefit most are identified for integrated services.

Case Study 7

Adult Social Care

There have been a small number of complaints and issues about use of equipment, recommended by an OT within the home environment. Often these pieces of equipment are critical for the safe handling of service users and the reluctance of the partner to allow the equipment within the home has resulted in Adult

Support and Protection proceedings. There has been some objections to the insistence of the use of equipment. This in turn has resulted in complaints about staff attitude.

Improvement Action

Some work is now being carried out about the best way to provide more emotional support to partners who have been dealing with/doing things a certain way for long periods. Sessions have taken place that recognise the impact of feeling less in control and/or dealing with significant changes within the home, and the consideration that is needed when alterations to the home are underway. This is a small but important factor that counts towards the continual improvement of the service. Number of complaints is being used as one of the impact outcomes that will count towards the measure of success.

DEVELOPMENT

- **Recording the Complaint Data**

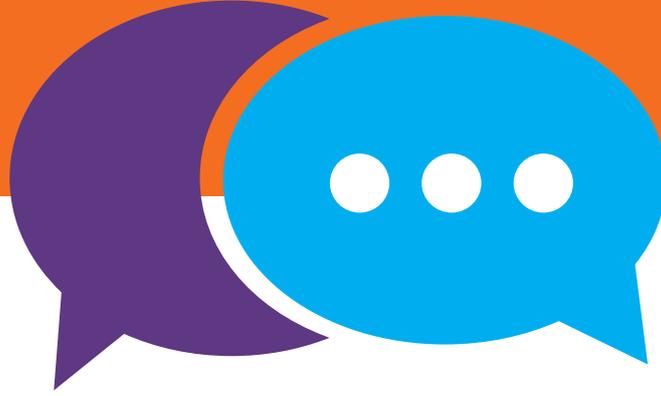
There are challenges in ensuring that all complaints data is captured. Training about the new SW Complaint Handling Procedure is ongoing. There is also continuing system development as the procedure evolves, however development on the current Customer Relationship Management (CRM) system is limited since there is a new CRM in the pipeline. Procuring the new CRM is a lengthy process but when it is installed, full scale training will take place that will refresh learning about complaints.

- **Using Complaints Data to Improve**

Self-evaluation using the social work complaints data is being developed, and the data is being further considered in impact assessments during service/process reviews (i.e. how many complaints before/after any changes that have taken place), and as a quantitative measure of success in outcome reviews.

- **Development of the Quarterly and End of Year Report**

Since this is the first Annual Social Work Complaint Report there is little comparative data. Future reports will illustrate year on year comparisons that will highlight areas that have improved or that require more work, as well as sector norms and benchmarking information.



COMMUNICATING CLEARLY

We are happy to translate on request and provide information and publications in other formats, including Braille, tape or large print.

如有需要我們樂意提供翻譯本，和其他版本的資訊與刊物，包括盲人點字、錄音帶或大字體。

Zapewnimy tłumaczenie na żądanie oraz dostarczymy informacje i publikacje w innych formatach, w tym Braillem, na kasecie magnetofonowej lub dużym drukiem.

ਅਸੀਂ ਮੰਗ ਕਰਨ ਤੇ ਖੁਸ਼ੀ ਨਾਲ ਅਨੁਵਾਦ ਅਤੇ ਜਾਣਕਾਰੀ ਤੇ ਹੋਰ ਰੂਪਾਂ ਵਿੱਚ ਪ੍ਰਕਾਸ਼ਨ ਪ੍ਰਦਾਨ ਕਰਾਂਗੇ, ਜਿਨ੍ਹਾਂ ਵਿੱਚ ਬਰੇਲ, ਟੇਪ ਜਾਂ ਵੱਡੀ ਛਪਾਈ ਸ਼ਾਮਲ ਹਨ।

Körler için kabartma yazılar, kaset ve büyük nüshalar da dahil olmak üzere, istenilen bilgileri sağlamak ve tercüme etmekten memnuniyet duyarız.

اگر آپ چاہیں تو ہم خوشی سے آپ کو ترجمہ فراہم کر سکتے ہیں اور معلومات اور دستاویزات دیگر شکلوں میں مثلاً بریل (تایپنا افراد کے لیے ابھرے ہوئے حروف کی لکھائی) میں، ٹیپ پر یا بڑے حروف کی لکھائی میں فراہم کر سکتے ہیں۔

Contact 0131 270 7500 or email: enquiries@midlothian.gov.uk

Midlothian

