



Haringey Council

APPENDIX 1

Haringey Council

Adult, Culture and Community Services

**COMPLAINTS AND MEMBER ENQUIRY
PERFORMANCE IMPROVEMENT PLAN**

2007/08

(Progress Update –31 March 2008)



Haringey Council

1. Vision and Key Service Objectives

- To promote a easily accessible and transparent complaints procedure
- To achieve our performance targets
- For all staff to embrace the complaint procedure
- An understanding in the services that complaints are the best way to improve services
- To provide an excellent and effective training scheme for all staff
- Learn to apologise and not always take complaints as a criticism
- For investigators to realise the importance of resolution over response
- For staff to realise that it is okay to make mistakes – as we will learn from these



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2. Key Areas for Improvement

Key to RAG Status Symbols	
G	GREEN – On target and no major risks/issues have been uncovered.
A	AMBER – Some slippage has occurred but this can be managed.
R	RED – Slippage has occurred that is not recoverable and will have a major impact on the project.
N	NO INFORMATION – This information has not been provided or unobtainable by the project.



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Objective	Milestones Key stages to achieve objective	Date	Whom	Measure & Targets	Monitoring Method	Progress to date	RAG
R1. To complete 80% of complaints within timescale	To achieve the corporate target and the Adult Social Care targets at all stages of the corporate and the NHS & Community Care Act complaint procedures.	By end of March 2008	Service Areas and complaints team	SI 07/08 -80% S2 07/08 – 80% (Corporate) S2 07/08 NHS – 40% S3 07/08 - 95% (Corporate and NHS)	Monthly performance reports	YTD: Corp.S1 – 90% S2 – 75% NHS S1 –100% S2 – 50% S3 corporate figure is not split between directorates – 88%	G
R2. To complete 90% of member enquiries (ME's) within timescale	To achieve the corporate target of 90% of ME's to be completed within timescale	By end of March 2008	Service Areas and complaints team	ME's – 90%	Monthly performance reports	ME's – 88% Outturn 2008/09 currently performance is 95%	A
R3. Ensure that the Council's corporate feedback scheme and the Adult Social Care complaints procedure are fully adhered to	<ul style="list-style-type: none"> Monitoring of complaints procedure both in house and service providers Ensuring timescales are met Implementation of findings from the Central Feedback Teams annual audit Review the improvement plan Ensure that the WOW! Scheme is implemented correctly 	Ongoing Annually	Complaints team Contracts team Central Feedback Team DCO DCO	Regular reporting Monitoring meetings with service providers Reporting and audit from Central Feedback team (CFT) Contact with access areas	Reports to DMT Twice yearly meetings with Central Feedback Team Emails mainly sent to check stock levels.	Reports are written on time Monthly meeting take place between the contract team and providers Two meeting have taken place with CFT March 08 Regular emails sent.	G



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	<p>and this includes the publicity</p> <ul style="list-style-type: none"> • Include complaint handling and performance in performance appraisals where appropriate • To develop guidance on remedies for services where appropriate 	<p>From April 08</p> <p>From April 08</p>	<p>All staff involved in complaint investigations</p> <p>DCO</p>	<p>Managers need to ensure this is discussed. Feedback to DCO</p> <p>To have this information on Harinet</p>	<p>Reviewing officers need to check the performance appraisals (PA'S)</p>	<p>DCO to ask for info once all PA's are complete</p>	G
R4 Ensure that all service users are informed of their right to complain and are enabled to complain	<ul style="list-style-type: none"> • Ensure staff inform all service users about the complaints process • Ensure that all publicity is displayed in the service access areas 	Ongoing	Directorate Wide	<p>As part of the welcome pack to new service users</p> <p>Checking with contact staff if information is still on display - quarterly</p>	<p>Mystery shopping survey in conjunction with Central Feedback Team.</p>	<p>There is a risk factor involved in this as there may not be funding for printing</p>	G
R5 Ensure that all service providers have their own complaints procedure in place	<ul style="list-style-type: none"> ▪ Commissioning managers must ensure that all commissioned service providers have a transparent, accessible complaints procedure ▪ Service users need to understand what they need to do in the event 	Ongoing	Commissioning managers and contracts team	<p>As part of the monitoring process of the service provider,.</p> <p>Information must then be fed back to complaints team</p>	<p>Quarterly reports from the service providers. Info then to be reported in our own quarterly reports.</p>	<p>DCO has met with one service provider and meetings have taken place with the Voluntary Sector.</p> <p>Meeting taken place with new brokerage team manager.</p>	G



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	<p>of something going wrong.</p> <ul style="list-style-type: none"> Service providers need to be aware of the importance of and have a commitment to learning from complaints 	Ongoing	Contracts and complaints teams	Regular meetings and reporting	Annual Report Quarterly reports	Received a 07/08 report	G
R6 To ensure that recommendations agreed in regards to complaints are carried out	<ul style="list-style-type: none"> Service areas must take responsibility for feeding back progress when implementing recommendations. Service areas to take responsibility for completing the service investigation form and returning to complaints team for monitoring Complaints team to ensure that the service investigation form is sent with all complaints to service area 	From April 08	All service managers DCO	Monthly reports to the DCO DCO to do spot checks	Quarterly report to DMT Annual audit which is conducted by Central Feedback Team	<p>The information used from the complaints system, and the provision of advocacy, were utilised in innovative ways to support people's communication with the council</p> <p>After a stage 2 investigation a meeting will be set up between the DCO and the service manager and team manager.</p>	G



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R7. To ensure that information is provided and recorded.	<ul style="list-style-type: none"> All information relating to complaints must be provided to enable the complaints team to record the correct information for monitoring purposes. This should include decisions, solutions, recommendations, complaints made by advocates. 	Ongoing	Service Areas must take responsibility for feeding back information to complaints team	In the improvement plan.	<p>Ongoing monitoring</p> <p>Annual report and regular reporting to CSCI</p>	Following DMT clearance	G
R8. Complaints made by carers/advocates are to be logged as such for monitoring and reporting purposes	<ul style="list-style-type: none"> Complaints team must log any complaints from advocate/carers as such on the complaint database. 	Ongoing	Complaints team needs to ensure that this information is logged correctly	Quarterly reports	<p>Ongoing monitoring</p> <p>Annual report and regular reporting to CSCI</p>	DCO has been doing spot checks on complaints logged. We logged 17 complaints from carers/advocate	G
R9 A strategy needs to be put in place regarding learning from complaints and using this for service	<ul style="list-style-type: none"> Managers must be made aware of the importance of completing the service investigation form and returning to the complaint team. Managers to ensure 	Ongoing	All service areas must take responsibility	<p>Information to be fed back to DCO, monthly</p> <p>Performance reports</p>	Quarterly performance report to DMT	DCO will be carrying out a spot check to see how many forms have been received by the complaints team.	A



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improvement	<p>that all staff investigating complaints are aware of the importance of completing the service investigation form.</p> <ul style="list-style-type: none"> DCO to draft a strategy by the end of September 08 which will then be circulated for consultation 	<p>April 08</p> <p>Sept 08</p>	<p>As above</p> <p>DCO</p>	<p>Update line manager</p>	<p>During 1-1</p>	<p>Task just been set</p>	A
R10 Implementation of decisions for improving complaints made by CEMB	<ul style="list-style-type: none"> Ensure that all staff investigating and dealing with complaints are aware of the importance of resolving complaints quickly and appropriately at Stage 1 to avoid escalation Regular focus on improving complaints performance 	Ongoing	Directorate wide	Meeting all requirements (as requested)	6 monthly review of improvement plan	This should improve with the role out of the new training – see below.	N/A
R11 To update the Adult Social Care training	<ul style="list-style-type: none"> To identify a appropriate training tool which could be used for all staff including senior managers To ensure that all staff attend the training Provide training for 	By April 08	DCO	<p>100% of staff require training if they investigate complaints in a year</p> <p>Ensure complaints responses address</p>	<p>6 monthly review of improvement plan</p> <p>Rolling programme of new intakes</p>	A new training tool has been purchased. The DCO and OD& L have attended the “train the trainer” training and are now looking at how best to roll out training.	G



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	Stage 3 panels for appropriate staff			all issues			G
R12 To update the Haringey website and Harinet when necessary	<ul style="list-style-type: none"> Put the Annual report on Harinet and the website Put information relating to advocacy on the website Information relating to recommendations from complaint outcomes to be posted on Harinet 	Sep 08 Ongoing	DCO/Information Manager DCO/Information manager	Post final Annual Report on web Advocacy information should be on website by w/c 21/01. It will be the responsibility of all complaint investigators to regularly check that the recommendations have been carried out		We have been sent a model from Barking & Dagenham intranet - recommendations from complaint outcomes Will set up new recommendation meetings after all Stage 2 investigations with the service manager and team manager.	A
R13 To update the Adult Social Care Complaints Procedure	<ul style="list-style-type: none"> Review current procedure in line with changes in legislation Post on Haringey Website 	Ongoing	DCO	To be completed by Sept 08.	Regular review	DCO has started new procedures. To be incorporated into the new complaint strategy	A
R14 Ensuring that all service	<ul style="list-style-type: none"> .Ensuring the publicity is kept up 	Ongoing	DCO	Continue to contact service areas to		2007 Wow Award winners were	G



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access areas are publicising the WOW Award scheme	to date and that WOW's continue to be sent in.			ensure that leaflets etc are still in place		commended at first annual staff Award Ceremony. This will act as a platform to market the Wow Award even further within the Directorate.	G
R15 To set new performance targets for the next 3 years	<ul style="list-style-type: none"> Continue to monitor the current performance and to then analyse the figures 	Ongoing	DCO	Targets have been set and agreed by DMT for 2008/09,2009/10 and 2010/11	Stage 1 targets have been set for Stage 1's at 92% for 08/09 95% for 09/10 and 97% for 10/11 Stage 2 targets have been set Stage 2's 100% for all 3 years and Extended to 65 days targets are set at 08/09 – 85% 09/10 – 90% and 10/11 at 95%.	Monthly performance report.	G