

Customer Opinion  
and  
Organisational Learning in  
Adult Social Care

Annual Report  
2018/19

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# Introduction

This report relates to customer feedback and learning for the previous Borough of Poole Council, for the year 2018/19.

Feedback from customers is vital to any organisation in making improvements. Adult Social Care welcomes and encourages feedback by any means including complaints, compliments, comments, surveys, consultation, engagement or audits and uses this feedback systematically to try to make services better.

Locality authorities have a statutory responsibility to report complaints and other representations about health and adult social care under the Local Authority Social Services and National Health Service (NHS) Complaints (England) Regulations 2009. They require councils and NHS bodies to produce an annual report about the complaints they have received, issues that have been raised and any action that has been taken to improve services.

This annual report covers feedback and learning for the period 1 April 2018 to 31 March 2019. It aims to:

- review the management and performance of the statutory complaints and representations process in 2018/19 (including statistics, the nature of complaints and compliments received, and how the learning from these has been used to improve services);
- give examples of how improvements have been made using other forms of customer opinion given by service users, their carers and families.

Read more about the statutory process at [Appendix 2](#).

# Executive Summary

Adult Social Care highly values the opinion of its service users and has continued to encourage feedback from adults who receive care and support services, carers and residents. We also work with all partner agencies to improve services.

In 2018/19, the number of complaints received increased to 70 from 64 the previous year. Communication remained the most common theme of complaints; this has not changed from the previous three years:

- poor communication was raised in 27 complaints;
- professional practice was the reason for 15 complaints;
- decisions around assessment and eligibility were cited in 12 complaints; and
- issues around finance were highlighted in 11 complaints.

A total of 43 concerns were managed outside the complaints process with the individuals involved not wishing to pursue a complaint but feeling they needed support to resolve a situation. These cases were dealt with in conjunction with Adult Social Care operational teams.

In addition, 40 compliments were received this year as well as 77 messages of thanks.

To put complaints into perspective, in the period from April 2018 to March 2019 Adult Social Care received over 40,100 external telephone calls to the Business Support Team and over 9,500 calls to Helpdesk including reports of safeguarding concerns, calls to the Crisis Loan Line for assistance and contact calls to practitioners.

In 2018/19 Adult Social Care received over 4,058 requests for support from adults. Requests included assistance to access community services, ongoing low-level support (such as equipment or aids for around the home), universal services and signposting to other services such as lunch clubs and befriending groups.

Over the year, customer opinion has also been sought via consumer surveys, consultations and engagement events.

## Complaints

### Local resolution

It is stated in legislation that most complaints should be resolved by local resolution. This means trying to resolve complaints at the earliest opportunity and as close to the point of service delivery as possible.

### Investigation

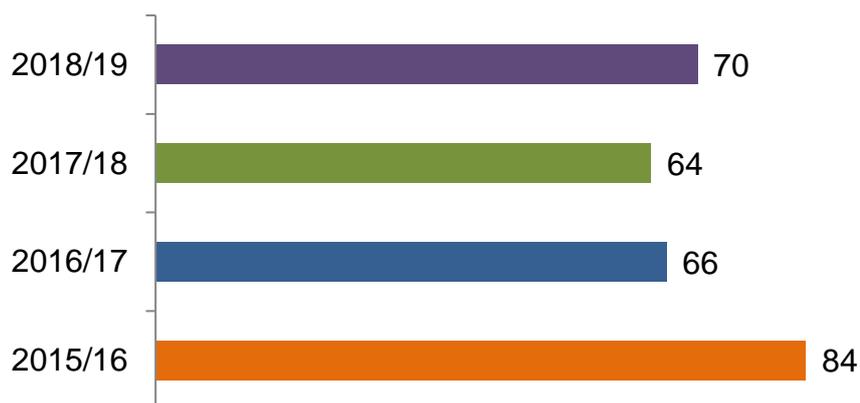
An investigation may be carried out if requested by the complainant, or if it is judged by the Complaints Manager to be the best way to respond to the issues raised.

### Local Government and Social Care Ombudsman (LGSCO)

The complainant can also approach the LGSCO at any stage of the complaint.

## Summary of complaints activity in 2018/19

### Complaints received



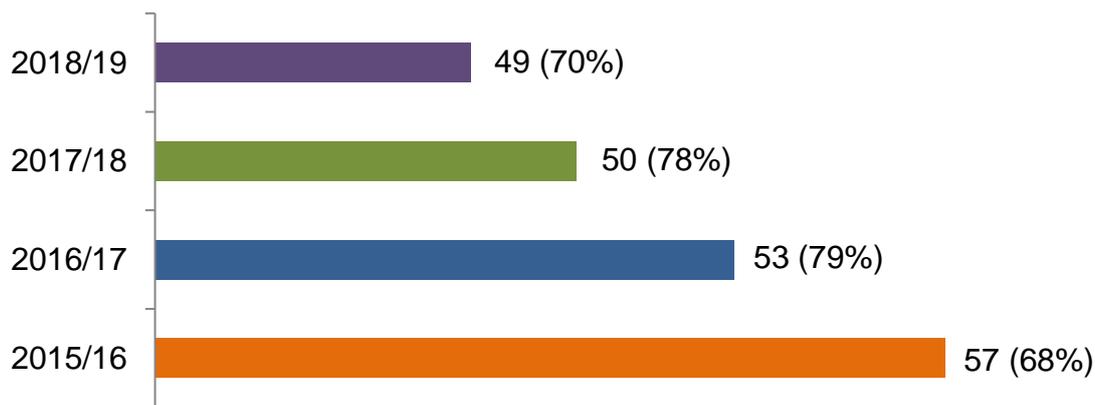
### Acknowledgement of complaints

	Acknowledged within	
	3 days (required by legislation)	Over 3 days
<b>2018/19</b>	69 (99%)	1
<b>2017/18</b>	63 (98%)	1
<b>2016/17</b>	63 (94%)	3
<b>2015/16</b>	78 (93%)	6

### Complaints resolved by local resolution, formal investigation and via the LGSCO

	Complaints resolved by		
	Local resolution	Formal investigation	LGSCO
<b>2018/19</b>	69 (99%)	0	1 (1%)
<b>2017/18</b>	54 (84%)	1 (2%)	9 (14%)
<b>2016/17</b>	60 (90%)	3 (5%)	3 (5%)
<b>2015/16</b>	79 (94%)	3 (4%)	2 (2%)

### Complaints resolved within 20 days (local best practice)



### Complaints made to the Local Government and Social Care Ombudsman (LGSCO)

Over the year, three LGSCO enquiries and two decisions were dealt with:

- Of the two decisions received in 2018/19, one was upheld and one was not (these were complaints received in 2017/18).
- One decision is still awaited.
- Two complaints were investigated – one about finance and the other respite.

Please see [Appendix 3](#) for details around cases and decisions.

## Complaint themes

Themes are now granular, allowing us to be more specific in our recording and identifying of key areas of learning and improvement.

Complaint theme	Number of complaints encompassing this theme	
	2018/19	2017/18
Communication (perceived inadequate communication, information and advice)	27	37
Professional practice (level of support and guidance, feeling involved/empowered in assessment process)	15	17
Decision around assessment and eligibility	12	12
Finance (decisions around funding, invoice disputes/delays, self-funders approaching the Council for funding, financial assessment)	11	24
Policy	11	8
Commissioning	7	5
Respite	7	4
Quality of domiciliary provision	5	5
Extra Care Housing	3	4
Delay in providing a service	5	3
Quality of residential or nursing home	3	3
Safeguarding process	2	3
Process around depletion of capital	0	4

### Communication

Communication remains the most common area of complaint. Many of the complaints around communication relate to providing information in a timely manner and to the expectations service users and carers have of our response to contacts and queries. Adult Social Care is looking to address this issue and consider what additional support can be provided to staff to improve communication.

### **Financial (funding issues, charges or fees)**

We have seen a significant decrease in complaints regarding financial issues, although individuals continue to challenge national and local policy decisions in terms of funding eligibility.

### **Complaints about professional practice**

Challenges have been made around the expectation of the level of service provision available and the approach to how needs and services are determined. These include individuals not feeling empowered and supported during the assessment process.

## The lessons we have learnt from customer feedback

In many instances, outcomes to complaints are specific to the case, and there are few general learning points that would influence policy or procedure. This is similar to the national picture, as noted by the LGSCO, who reports that in 78% of the cases they investigate the outcome is a remedy for injustice for the individual, i.e. an apology, financial redress or provision of service, with the remaining 22% recommending organisational learning and improvement at organisational level, e.g. staff training or procedural change (reference <https://www.lgo.org.uk/information-centre/reports/annual-review-reports/adult-social-care-reviews>).

Individual issues about specific teams are dealt with through supervision with the team managers and team meetings. This can be followed up through the performance management and operational management meetings where specific elements of learning are discussed and actions agreed as required.

Origin of learning and issues raised	Learning improvement identified	Further improvement in 2018/19	Measure/outcome of learning
2017/18 complaint	A communications training statement was shared with relevant feedback officers to remind staff of the importance of recording details of telephone calls and ensuring that the correct information is given to the relevant Council unit.	Practice embedded.	No reported incidents of telephone calls not being recorded.
2017/18 complaint	Configuration of the new case management system was undertaken to ensure that any requests for financial assessments raised an alert to the Financial Assessment Team.	Case system changes embedded.	No complaints around delay in financial assessment.

Origin of learning and issues raised	Learning improvement identified	Further improvement in 2018/19	Measure/outcome of learning
2017/18 complaint	Commissioning practice and plans have been reviewed to ensure there is a stronger focus on quality assurance to prevent issues escalating, including communications, monitoring and evaluation when embedding a service.	Monthly quality assurance and communication meetings were held between teams for the new domiciliary framework and the new Extra Care Housing provider, to ensure that service issues, safeguarding concerns and complaints were dealt with as a whole and expectations of the service were managed.	<p>In 2017/18, four complaints, including one large-scale investigation, were received around Extra Care Housing. This year there have been three that were resolved at local resolution. Even though the service continues to require improvement, Adult Social Care was aware of the issues and worked with the provider to improve. After the first year of service a satisfaction survey was sent to residents and positive feedback was received in comparison to the same survey conducted in the previous year.</p> <p>Three complaints this year around home care as opposed to five last year.</p> <p>User survey results showed a marked increase in satisfaction levels with home care – 69% in 2017/18 up to 75% in 2018/19.</p>
2017/18 complaint	There were proactive discussions at operational team meetings around the importance of regular and effective communications.	The Difficult Conversations training course was implemented in June 2018 and rolled out to frontline teams to support staff with communication practices. The course has been well attended and received very positive feedback. Plans are being considered to develop the training further.	Even though communication remains the biggest theme for complaints (27) this compares favourably to 37 in 2017/18.

Origin of learning and issues raised	Learning improvement identified	Further improvement in 2018/19	Measure/outcome of learning
2017/18 complaint	A new procedure was developed to ensure a clear pathway and governance structure to manage growing demand from adults who previously funded their own care but need to approach the local authority for funding as they have depleted their capital.	Public self-funding factsheets have been developed to support individuals and families in knowing what to do when they reach the capital threshold. There is also a self-funding staff factsheet to aid the process.  Process is becoming embedded.	No complaints around capital depletion have been received this year (compared to 4 in 2017/18).
2018/19 complaint	One complaint was received from a provider who had increased the home's fees and complained about the time taken to agree the new fee.	Process now in place with Contracts Team to address these issues.	To be measured in 2019/20.
Quality Assurance Team User and Carer Focus Group	It was suggested by the group that a Frequently Asked Questions (FAQs) sheet accompany finance letters and that some of the letters needed updating.	The group worked with the Finance Manager to produce the FAQs and amend letters to be more user friendly.	To be measured in 2019/20.
2018/19 complaint/ Adult Social Care User Survey	Further staff and public factsheets have been created following complaints or survey feedback, including 'Notice periods' and 'Working with your home care provider'.	The 'Working with your home care provider' factsheet is now also being rolled out across the whole of Adult Social Care.	To be measured in 2019/20.

Further improvements planned from learning from 2018/19:

- The Quality Assurance Team are planning to attend team meetings around complaint themes and trends.
- Complaints training will be reviewed as part of the ongoing service development for BCP Council including the involvement of the user voice in sessions.

## Monitoring the effectiveness of the complaints procedure

Feedback is sought on the process through a complaints questionnaire. The questionnaire focuses on qualitative questions, to give a richer insight into complainants' personal experience of making a complaint. A number of positive comments were received including:

“ Following concerns about my experience with social services regarding my mother, the Complaints Manager suggested a meeting with herself, the Complaints and Improvement Officer and [an officer] from finance. This proved to be a very informative and productive meeting. My husband and I explained the problems we had faced and our frustrations at a lack of clarity from the various departments. We were also concerned that these problems could be experienced by other families coping with a similar situation to ourselves. I believe that the representatives from social services were genuinely surprised at the problems we had incurred and they appreciated the fact we wished to ensure others did not face similar issues.

[The finance officer] was able to provide us with greater detail concerning finances and also arranged a refund of money that had been incorrectly charged. It was also reassuring that the Complaints and Improvement Officer took our concerns so seriously that she gave advice on the complaints procedure which hopefully will ensure greater efficiency and understanding from the departments involved. ”

## Staffing

The part-time role of Complaints and Improvement Officer co-ordinates complaint responses from service areas and external service providers. The officer acknowledges complaints and supports managers with responses where appropriate. The officer also delivers Adult Social Care complaints training and undertakes internal investigations and audits where appropriate.

## Training

Training is managed by Commissioning and Improvement \_ People Services and delivered by the Complaints and Improvement Officer for both staff and managers. The training reinforces that staff should be knowledgeable about the complaints process and able to signpost service users and their representatives if they are dissatisfied with services provided. The training also emphasises how complaints can lead to organisational learning, which benefits residents.

A total of 19 Adult Social Care staff attended the training in 2018/19:

- 100% rated the trainer's knowledge and understanding of the topic as either good or excellent;
- 100% rated the trainer's interaction with the group as either good or excellent;
- 100% said the mix of group work, discussion and presentation was proportionate and effective.

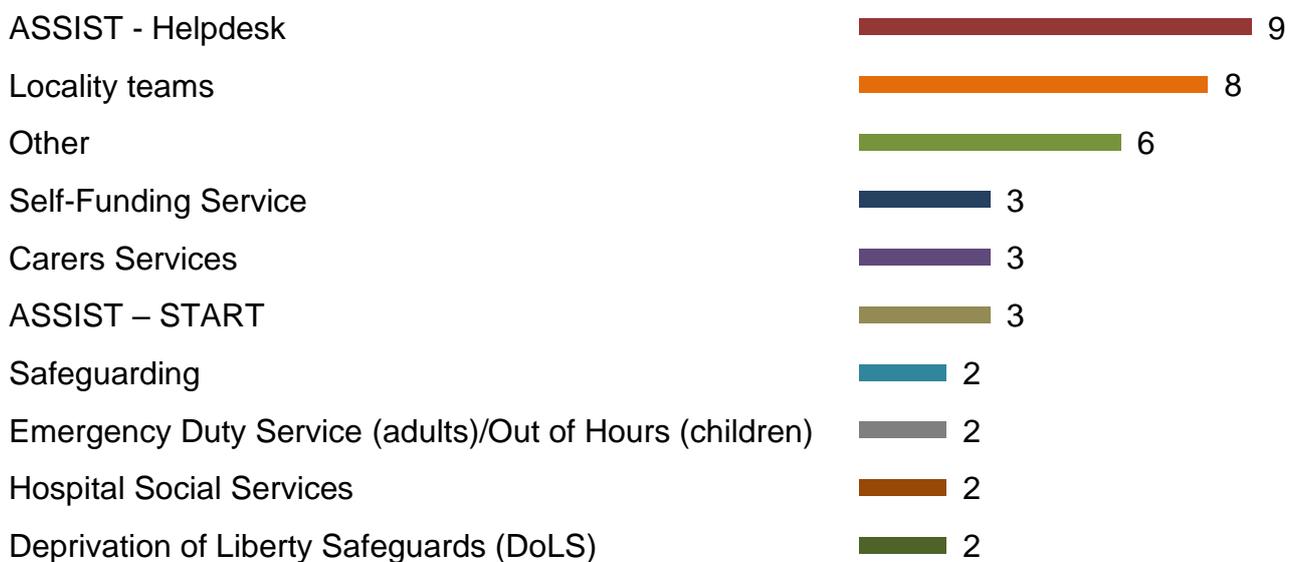
- Consistently, attendees said the training had given them a better understanding of the complaints process, more confidence to deal with any complaints effectively and clarified the most up-to-date practice.
- One person suggested a full-day course would be beneficial to be able to explore the content more.

## Compliments

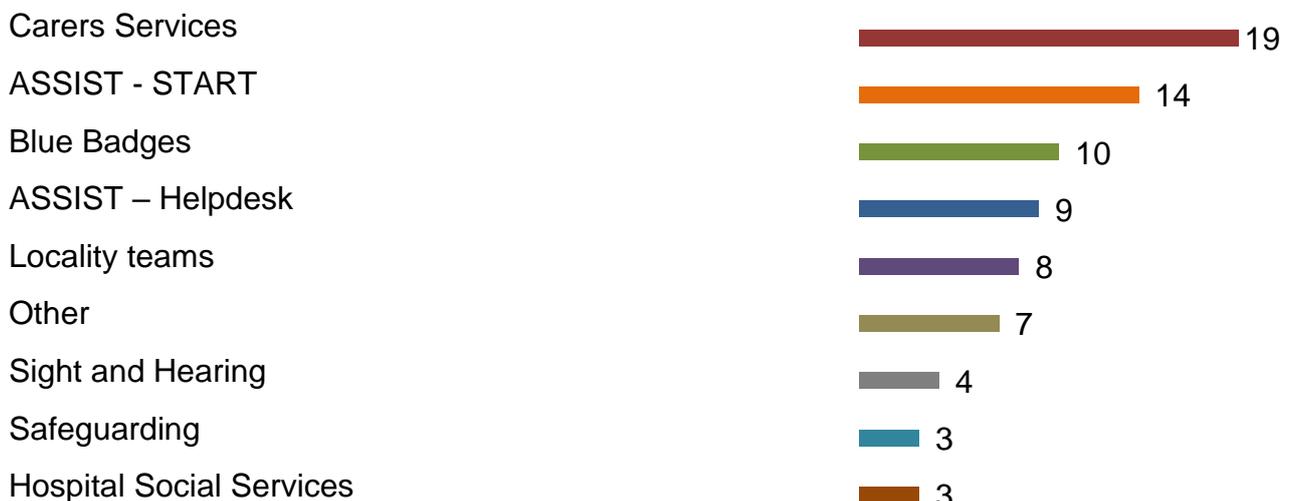
Service users and staff are encouraged to report feedback about services. Compliments are vital because they help to give us a complete picture of the services offered. In addition to complaints, they can help us make changes to improve services further by identifying good practice.

In total, **40** compliments were received this year, as well as **77** messages of thanks:

### Compliments



### Thank yous



Compliments and positive feedback are shared with staff on a weekly basis through the staff newsletter. At the same time, teams are reminded to feed back comments from adults and carers and many teams now have a systematic way of doing this. A small selection of compliments and thank yous received is at [Appendix 1](#).

# Other forms of customer and community feedback

## a) Satisfaction surveys

### NHS Digital Adult Social Care User Survey

In January 2019, local authorities with adult social care responsibilities took part in the national annual survey that asks users of adult social care services about their quality of life and how services they receive impact on this.

The survey was sent to all adults in receipt of long-term support services funded or managed by the Council on the date chosen to extract the data. A total of 438 people completed the questionnaire, a 32% response rate. The survey informs seven performance measures in the Adult Social Care Outcomes Framework (ASCOF).

#### Adult Social Care Outcomes Framework (ASCOF) indicators (subject to ratification):

##### 1A – Social care related quality of life

This indicator gives an overarching view of the quality of life (QOL) of service users, out of a maximum score of 24. The measure is an average, composite score based on the responses to eight questions around control, keeping clean/presentable, nutrition, accommodation, safety, social contact, spending their time as they want, and feelings about how they are helped and treated.

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
QOL score	19.2	19.0	↑	19.3 (2017/18 19.4)	TBC	TBC	TBC

##### 1B – The proportion of people who use services who have control over their daily life

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
I have as much control over my daily life as I want	78.8%	79.5%	↓	81.7% (2017/18 81%)	TBC	TBC	TBC

### 1/1 – The proportion of service users who report that they have as much social contact as they would like

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
I have as much social contact as I want with people I like	42.3%	43.8%	↓	46.9% (2017/18 45.1%)	TBC	TBC	TBC

### 3A – Overall satisfaction of people who use services with their care and support

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
I am extremely/very satisfied with the care and support services I receive	60.3%	60.2%	↑	63.1% (2017/18 69.5%)	TBC	TBC	TBC

### 3D1 – The proportion of service users who find it easy to find information about services

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
In the past year, I have generally found it very easy to find information and advice about support, services or benefits	78.4%	75.6%	↑	72.4% (2017/18 78.7%)	TBC	TBC	TBC

### 4A – The proportion of people who use services who feel safe

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
I feel as safe as I want	71.1%	70.6%	↑	69.4% (2017/18 72%)	TBC	TBC	TBC

#### 4B – The proportion of people who use services who say that those services have made them feel safe and secure

Response	2018/19	2017/18	Poole performance	Bournemouth	Dorset	South West average	England average
Care and support services help me in feeling safe	90.8%	86.6%	↑	83.6% (2017/18 86.5%)	TBC	TBC	TBC

Performance has risen in 4 out of 7 of the ASCOF indicators.

A number of actions have been taken in response to the results of the survey:

- Work has begun to gain more feedback around information and advice, including meeting with the Learning Disability Partnership Board and further engagement with users who said that information and advice was difficult to find. These findings will enable improvement plans to be put in place.
- The Quality Assurance team is reviewing information and advice for individuals receiving long-term services, including designing information packs for reassessments and working with a small focus group to understand what information would be useful when adult social care services have been received for a longer period of time.
- Promotion work for the My life my care information directory is being rolled out with locality teams to ensure everyone is aware of the information available. Further improvements for My life my care are being considered such as widening the scope for signposting and preventative information and links to the local offer 'Preparing for adulthood' pages for young adults in the Family Information Directory.

#### NHS Digital Carers Survey 2018/19

In November 2018 local authorities with adult social care responsibilities were invited to take part in a national survey. The aim of the survey was to find out carers' perceptions of the support they receive to perform their caring role. The survey results were used by Adult Social Care and NHS Digital to look at ways to improve service delivery.

The Carers Survey is biennial and informs five performance measures in the Adult Social Care Outcomes Framework (ASCOF).

#### 1D – Carer-reported quality of life

This indicator gives an overarching view of the quality of life (QOL) of carers. The measure is an average QOL score (out of a maximum of 12) which is a composite score based on the responses to six questions relating to occupation, personal care, safety, social participation and encouragement and support.

Response	2018/19	2016/17	Poole performance	Bournemouth	Dorset	South West average	England average
QOL score	7.9	8.3	↓	7.1 (2016/17 7.4)	7.7 (2016/17 7.8)	7.3	7.5

The following are the scores for the individual questions that make up the composite score for 1D:

Response	2018/19	2016/17	Poole performance
I don't do anything I value or enjoy with my time	10.8%	11%	↓
I have some control over my daily life but not enough	63.7%	62%	↑
I have no control over my daily life	10.7%	9%	↑
Sometimes I can't look after myself well enough	26.9%	25%	↑
I feel I am neglecting myself	11.7%	9%	↑
I have no worries about my personal safety	87.4%	88%	↓
I am extremely worried about my personal safety	1.7%	1%	↑
I have some social contact with people but not enough	50.9%	47%	↑
I have little social contact with people and feel socially isolated	13.9%	12%	↑
I feel I have no encouragement and support (in my caring role)	17.8%	14%	↑

**1I – Proportion of people who use services and their carers who reported that they had as much social contact as they would like.**

This question was asked in the previous survey but this is the first time it has been a performance indicator.

Response	2018/19	2016/17	Poole performance	Bournemouth	Dorset	South West average	England average
I have as much social contact as I want with people I like	35.3%	41.6%	↓	24.5% (2016/17 29.2%)	32.7% (2016/17 35.4%)	28.9%	31.2%

### 3B – Overall satisfaction of carers with social services

Response	2018/19	2016/17	Poole performance	Bournemouth	Dorset	South West average	England average
I am extremely satisfied/ I am very satisfied	38.1%	45.2%	↓	39.4% (2016/17 41.1%)	41.5% (2016/17 45.9%)	38.2%	38.6%

### 3C – The proportion of carers who report they have been included or consulted in discussions about the person they care for

Response	2018/19	2016/17	Poole performance	Bournemouth	Dorset	South West average	England average
I always felt involved or consulted/ I usually felt involved or consulted	73.4%	77.8%	↓	62.5% (2016/17 69.7%)	72% (2016/17 75.4%)	69.3%	69.5%

### 3D – The proportion of people who use services and their carers who find it easy to find information about services

Response	2018/19	2016/17	Performance	Bournemouth	Dorset	South West average	England average
Very easy to find/ Fairly easy to find	75.6%	80.7%	↓	64% (2016/17 66.8%)	69.6% (2016/17 67.9%)	64.7%	62.6%

In response to the decline in satisfaction with information and advice, a number of actions have been taken:

- Communication and support themes have been highlighted in learning from complaints. Action has been taken encouraging social workers to attend the 'Difficult Conversations' training course.
- Bespoke complaints training is being offered around communication.
- Improvement of staff guidance to ensure consistency is already in place.
- Public information is constantly being reviewed and a small focus group now co-designs new factsheets and My life my care pages.
- Improving information for people with a learning disability is being considered including working with Carers Resource, Information and Support Programme (CRISP) to roll out

the Learning Disability Partnership Board newsletter to all learning disability carers; redesigning of the local offer for younger people; and ensuring adults are signposted to Dorset Healthcare University NHS Foundation Trust learning disability information web pages.

## Feedback about the Short-Term Assessment, Reablement and Telecare (START) service

Surveys are sent out to individuals receiving the START service and, where possible, feedback forms are completed at the last visit.

A full-year report is compiled at the end of each calendar year. In 2018, 75 surveys were completed and out of the people who answered each question and responded they 'strongly agreed' or 'agreed':

- 100% (65 people) said START supported them to build their confidence;
- 100% (65 people) said the service enabled them to maintain maximum possible independence, choice and control;
- 95% (61 people) said they had been involved as much as they wanted to be in the decisions about their support;
- 100% (74 people) said staff were friendly and courteous and 100% (74 people) said assistants were friendly and approachable;
- 96% (64 people) felt their quality of life had been improved by receiving the service.

## Helpdesk questionnaire

Surveys are now sent to individuals who contact Helpdesk and who then receive information and advice, have a visit and/or an assessment by a visiting officer.

In 2018, 95 people completed a survey. Of these, 95% said that they found the visit or call was helpful and informative and that their needs were identified, and 96% felt they had received the right information and advice.

Many positive comments were received. For example, one person said the telephone service, assessment and follow-up visit were wonderful and they were thrilled with the equipment they had received because it was so useful and made them feel safe. Another said the team had been very helpful and their life had changed so much for the better they could not thank them enough.

## b) Consultations/engagement/information and advice

A number of engagement and consultation exercises have been carried out with adults who have used services over the past year including:

- Through the Adult Social Care User Survey, we identified 95 people who said they may like to be involved in the work of Adult Social Care in developing services.

- The Virtual Consultation Group is ongoing and has been used on a regular basis, including to give feedback on new My life my care pages and updates to finance letters.
- A small focus group has been established to further engagement with service users and carers around the information and advice offer and other areas of business when needed.
- The Complaints and Improvement Officer and Service Manager for Older People, Physical Disability and Learning Disability continued to run a carers group.
- The Learning Disability Partnership Board now represents the BCP Council area and continues to drive service improvements through change action groups as part of the Big Plan 2018 to 2021. The Board and action groups engage with adults with a learning disability and family carers to enable them to have a voice, as well as with partners such as Health and the police. The care and support framework for adults with a learning disability and/or autism was successfully co-produced through engagement with self-advocates and carers.
- Poole Over 55s forum is approaching its third Annual General Meeting and is working more independently. Its membership now reaches over 90 people. The Council is working with Prama to support the group where needed. Its focus this year is to address barriers to older people being online and they are planning a digital discussion event in the summer.
- A number of quality assurance surveys were developed for internal teams to improve feedback around services, e.g. Shared Lives and Helpdesk.
- A schedule of care provider events was held at the Civic Centre and included a very successful workshop where GPs, paramedics and district nurses were invited to discuss care agency perceptions with care providers.
- A care provider newsletter continues to provide regular updates and communications.
- Work continues to promote adult social care factsheets with GPs, community centres and libraries and this is being extended to places of worship and sheltered accommodation.
- Since the factsheets replaced our leaflets, there have been over 56,000 downloads from the factsheet web page with Comments, Compliments and Complaints, START and The Financial Assessment being the most popular.
- The My life my care online information directory has been promoted at a diverse range of events and meetings across Bournemouth, Christchurch and Poole to professionals and the public alike including patient participation groups, locality teams and hospitals. The site received 103,000 hits in 2018/19. Pages have been reviewed and new information is being developed such as preventative services pages and advice from the Preparing For Adulthood Team and the local offer for young adults.

## Appendix 1 – a selection of compliments and thank yous received

- “ Mr B was very impressed following involvement with the EDS last week. He told us the service provided was excellent, from his initial enquiry, to establishing a service that might help, to finding and sending the information. He said it surpassed his expectations and the contact officer’s willingness to ‘go the extra mile’ should be commended. ”
- “ He just wanted to tell me how lovely you were, helpful and reassuring, and he really enjoyed your visit. He stated he found you very knowledgeable and professional and wanted to give credit where it was due. ”
- “ I have been extremely impressed by Poole Adult Services’ attentiveness and professionalism throughout my wife’s time in care. ”
- “ The client said the service she has had from Poole ASC has been ‘amazing’ – she went on to advise that [the officer] ‘has been efficient and helpful at getting things sorted’. They have now signed up to lifeline and had a carers assessment and are looking forward to hopefully getting some sitting service respite. ”
- “ Thank you for journeying through this issue with Ms B and myself and working to get Ms B the right support for the situation. I do appreciate the support that is now in place for her. Thank you. ”
- “ I am writing to express my sincere thanks and appreciation to the home carers who took care of me during my recent illness; I cannot speak too highly of them, and the very considerable help I received, and, also, their encouragement they gave to me to get better. I am grateful, also, to the organisers for the exemplary way the team worked. Once again my thanks to all concerned in easing my illness and I am now feeling much better. ”
- “ I just wanted to thank you for taking the time to find out this information for me. I am still processing what this means for future practice but it is really valuable. I will definitely follow up some of those contacts for more information. ”
- “ Wanted to thank everyone involved with the referral for her brother. She said that Poole Adult Social Services have provided a brilliant service for her brother and she felt supported throughout the whole experience and is amazed at the speed of service we have provided to help her brother through a very difficult time. ”
- “ We wanted to thank the team for our last minute short break at Brixham. We had a wonderful time and we were extremely lucky with the weather. The accommodation exceeded our expectations and the staff were helpful and professional. It is a wonderful resource and it allowed us to recharge our batteries. ”

## Appendix 2 – the Joint Adult Social Care and Health Complaints Procedure

### What is a complaint?

An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social care services provision which requires a response.

### What is a representation?

A comment, suggestion or compliment made about the service provided. Legislation states that if it is possible to resolve a lower level matter immediately or within 24 hours, there is no need to engage the complaints process.

### Who can complain?

An adult who is entitled to, or has a possible need for, a personal social service at any stage in their contact with the service. They also qualify if they are acting on behalf of the adult as their representative and acting in their best interests.

### How the procedure works

#### a) Local resolution

In the majority of cases, a problem-solving approach will be adopted to resolve complaints as close to the point of service delivery as possible. Most complaints are resolved using this approach and typically by the operational manager. Timescales for responding to complaints are agreed between the complainant and the Complaints Officer. Locally, complaints are normally responded to within 20 working days. If the complainant is not satisfied with the outcome of their complaint they have the option to ask for their complaint to be formally investigated or to request a further meeting, or they can ask the Local Government and Social Care Ombudsman to consider their complaint.

#### b) Formal investigation

In discussion with the complainant and Complaints Officer, an investigation can be invoked rather than using local resolution. The risk, complexity and seriousness of the complaint will be considered when making this judgement.

An in-depth examination of the complaint is completed by an investigating officer who is independent of the service area. A report will be compiled and forwarded to the Service Unit Head who acts as an adjudicator and will identify the Service Unit's response/decision on each point of complaint and any actions. Timescales for implementation will be included. Timescales are agreed between the complainant, the responding manager and the investigating officer.

#### c) Local Government and Social Care Ombudsman (LGSCO)

The complainant can approach the LGSCO at any time during the procedure or if they remain unhappy after the local authority's efforts at resolution have been exhausted. However, if the Ombudsman considers that issues could be resolved at a local level they will refer the complaint back to the local authority.

### Complaints that have both health and social care elements

There may be some occasions when complaints have elements of both health and social care services. If so, the Complaints Officer will look at the issues and decide whether the Protocol for Dealing with Joint Complaints needs to be adopted and the complaint progressed in accordance with this route.

## Appendix 3 - Local Government and Social Care Ombudsman (LGSCO) decisions received

### Complaint 1

Ms X disputed the Council's decision to recover a debt owed by her late relative from the beneficiaries of her relative's estate. The ombudsman stated that because the Council did not determine the existence of a debt before passing the remainder of the estate to Ms X and others, they should waive the debt.

**Final LGSCO decision: upheld**

### Complaint 2

Mr X stated that he and his mother disagree with his father's contribution from his income to his care home fees. He felt that the Council did not properly consider the impact the contribution has on his mother who finds it impossible to live or maintain the house without the income from her husband.

**Awaiting decision**

### Complaint 3

Mr X complained that the Council had refused to allow him to save up direct payments intended to cover his wife's care and weekly respite needs to spend on longer-term respite breaks. There was no fault in how the Council made this decision. It was entitled to ensure that direct payments were being used to meet all of Mrs X's identified eligible care needs. It has directly commissioned respite care having appropriately considered Mrs X's needs. It has appropriately offered mediation having regard to the breakdown in its relationship with Mr X.

**Final LGSCO decision: not upheld**

## Appendix 4 – Equalities information

<b>Primary Support Reason</b>	<b>2018/19</b>	<b>2017/18</b>
Physical Support - Personal care support	50% (35)	47% (30)
Physical Support - Access and mobility only	14% (10)	17% (11)
Learning Disability Support	9% (6)	16% (10)
Mental Health Support	6% (4)	6% (4)
Support with Memory and Cognition	3% (2)	2% (1)
Sensory Support - Support for visual impairment	3% (2)	2% (1)
Social Support - Support to carer	1% (1)	2% (1)
Social Support - Substance misuse support	0	0
Social Support – Support for social isolation	1% (1)	0
Corporate (e.g. a complaint by a provider)	4% (3)	5% (3)
Not recorded (carers do not have a PSR)	4% (3)	5% (3)
Not recorded (information not recorded for Blue Badge complaints)	1% (1)	2% (1)
Not recorded (information not recorded for Out of Hours complaints relating to children)	1% (1)	0
Not known (details not on CareDirector)	1% (1)	0

<b>Gender</b>	<b>2018/19</b>	<b>2017/18</b>
Female	67% (43)	56% (36)
Male	33% (21)	39% (25)
Corporate (e.g. a complaint by a provider)	4% (3)	5% (3)
Not recorded (information not recorded for Blue Badge complaints)	1% (1)	2% (1)
Not recorded (information not recorded for Out of Hours complaints relating to children)	1% (1)	0
Not known (details not on CareDirector)	1% (1)	0

<b>Ethnicity</b>	<b>2018/19</b>	<b>2017/18</b>
White - English/Welsh/Scottish/Northern Irish/British	79% (55)	93% (60)
Corporate (e.g. a complaint by a provider)	4% (3)	5% (3)
White any other	10% (7)	2% (1)
Black/African/Caribbean/Black British – Caribbean	1% (1)	0
Not recorded (information not recorded for Blue Badge complaints)	1% (1)	2% (1)
Not recorded (information not recorded for Out of Hours complaints relating to children)	1% (1)	0
Not known (details not on CareDirector)	1% (1)	0
Undeclared/not known	1% (1)	0