



## **Adult Services**

# **Consultation Report for Service User Satisfaction 2008/9**

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**Final Consultation Report**  
**Service User Satisfaction within Adult Services 2008/9**

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## **1. Introduction**

The terms 'participation', 'involvement' and 'engagement' cover a range of activities designed to enable service users to have a say in how services are delivered. These activities can be seen as a spectrum, from consultation approaches where users are passive participants, through to user control of services. There is a number of ways in which people can be engaged, including forums, user panels, consultation, interest groups, and campaigning or direct action.

The Vale of Glamorgan Council Social Services Directorate is committed to consulting with its service users in order to identify areas of good practice and also where improvement and development may be required. As part of this commitment a two-year rolling programme for consultation into user satisfaction has been developed and was implemented in April 2004. During the first year of the cycle, surveys were carried out with users of Children and Family Services and during the second year were completed within Adult Services. Consultation for Children and Adult Services was repeated in 2007 and with Adult Services again in 2008. The resulting overview is presented below.

Adult Services aims to provide a service to those in the community who need support to live their lives as independently as possible. Services are provided for adults who are older people and for people with learning disabilities, physical disabilities or a mental illness. Support is also given for people who have sensory impairments, problems with alcohol, drugs and for unpaid carers.

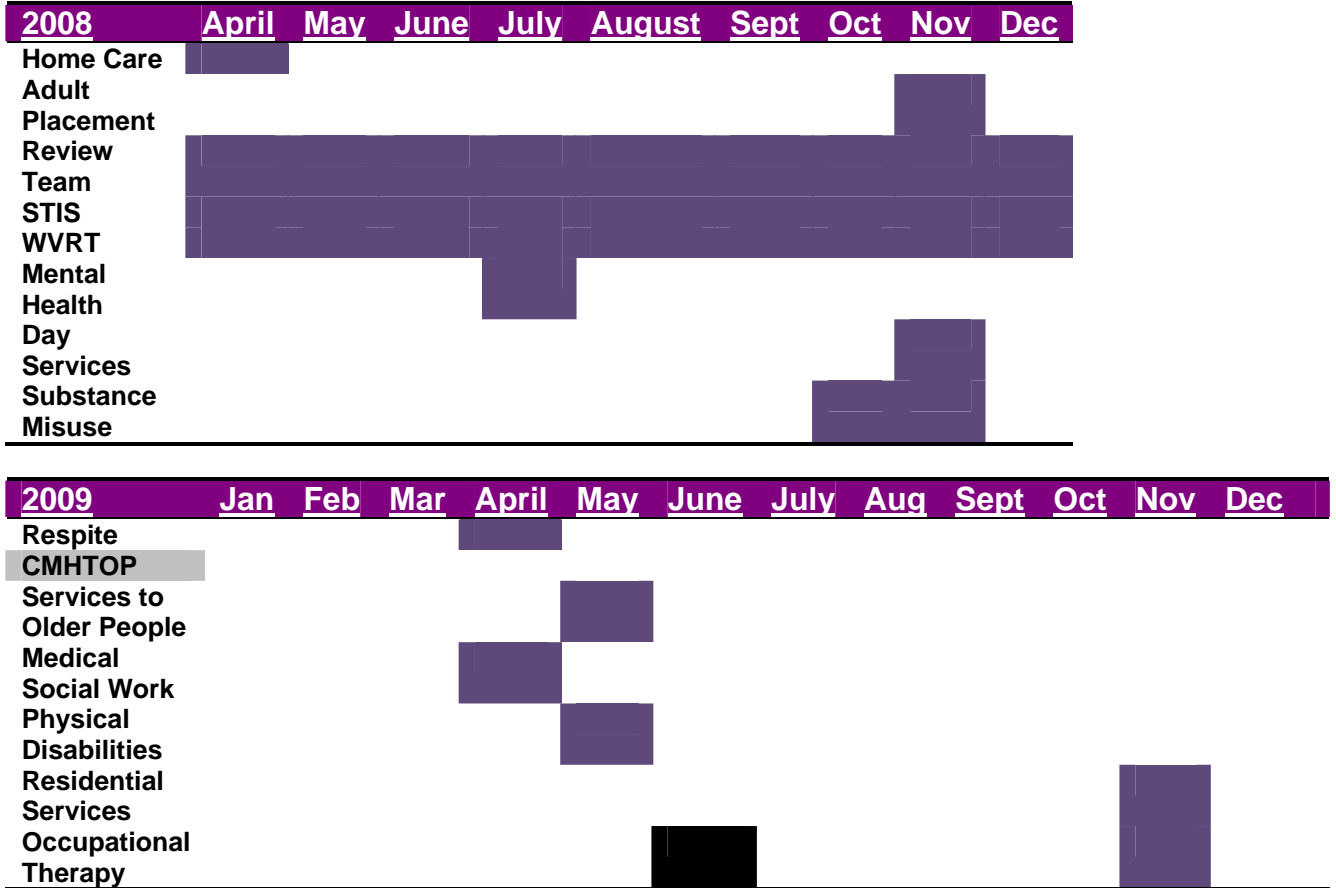
This report presents the key findings found during consultation with those receiving such services. As part of this, the methodology used and lessons learned are also discussed. **Full reports from consultation with each client group are attached as appendices.**

Some issues had to be considered when planning this exercise:

1. Many of the people who are referred to Social Services do not see themselves as 'service users' and might consequently be unwilling to participate in user satisfaction surveys.
2. In addition, some unpaid carers do not see themselves as such and some found it difficult to view themselves in this capacity to respond to the carer's questionnaire.
3. Many of the service users had particular needs that had to be considered before contacting them. Every attempt was made to gain their views, however there may still have been some who were not effectively engaged, for example those with a learning disability, or who have not been identified as a carer.
4. There had been some additional consultation regarding the Day and Residential Services within the Directorate in early 2009, and this may

have affected some of the results of the service user satisfaction consultation. Any other consultation exercises planned with a client group were considered and joined-up where applicable to avoid duplication and over-consultation.

## 2. Work Programme for 2008/2009



## 3. Methodology

Initial meetings took place with Team Managers during October and November 2005, and again in 2008 to discuss the most appropriate timing, methods and question areas for their specific client groups. Where there were areas that the team managers felt would be useful to gather information on, for service development purposes for example, these were incorporated. It was agreed that it would be more effective if consultation was split into more recent referrals and assessments (via each social work team), and groups who had received services for a period of time. This was to increase reliability of information provided and capture the breadth of experience of services.

Various options were explored to effectively capture viewpoints both quantitatively and qualitatively. The circumstances and abilities of the client dictated the design of questionnaires, interviews and focus groups. The views of

informal/unpaid carers and relatives of service users were sought in most areas because service provision affects their lives significantly.

Outlined below are the methods that were selected for consultation in each area:

### **Social Work Teams – (Assessment & Referral)**

- 3.1**
- a) Older People’s Team**
  - b) Hospital Social Work Team**
  - c) Community Mental Health Team for Older People**

Both questionnaires and structured interviews were carried out for the above groups of service users to gain a fuller, more detailed analysis. Swift was used to obtain a list of service users who had been referred and assessed in the previous 6 months. If this was not possible, or it was unadvisable to contact some service users, time frames were increased to gain a larger population sample.

As representative a sample as possible was obtained in all cases.

### **3.2 Occupational Therapy**

A list of service users was obtained from Swift and checked by the Team Manager. This comprised those who had been referred and received assessments and minor adaptations in the past 6 months. In addition, questions were asked regarding the delivery and installation of their equipment and after care/follow up as part of the service received. Service users were contacted using questionnaires only.

### **3.3 Physical and Sensory Disabilities (Care Management and Specialist Referrals).**

Both questionnaires and interviews were used to consult service users who had recently been referred and assessed. The previous consultation was split into specialist areas so that views could be gained from service users with visual and hearing impairments. This time however, as there are currently no specialists in post, service users involved with the team as a whole were contacted. A general questionnaire was designed which incorporated most aspects of involvement with the Physical and Sensory Impairment team.

### **3.4 Adults with a Learning Disability (Adult Community Support Team)**

Various options were explored during this part of the consultation. Considering the needs of the client meant that we would be looking at how we would best capture viewpoints. Four methods were selected, with valuable input and assistance from other professionals who had prior experience of communicating with those with a learning disability. These were: questionnaires (to service users who were able to complete alone, and carers/relatives), symbolic questionnaires, structured interviews at Maes Dyfan School. A PeopleFirst meeting was held at the Hub at which the Policy and Consultation Officer could attend and observe.

## **Teams Providing Services**

### **3.5 Home Care**

All of those receiving Home Care were consulted using both questionnaire and interview. In addition to asking about services received, the sample was also asked about information and record-keeping during the service.

### **3.6 Short Term Intervention Service & Review Team**

As these services are shorter term for groups of people at a time, questionnaires were distributed to those who had come to the end of their service in the preceding 3 months. This was repeated every quarter so that views could be obtained from multiple samples over the 12 months. A final report was then compiled which included information from the whole 12 months.

### **3.8 Day Services**

Questionnaires were distributed to a selection of service users who had received services from day centres within the Vale of Glamorgan for 12 months or longer. Interviews were also carried out with those who were willing, during the days on which they attended the day centres. At Hen Goleg, a focus group was organised so that those who were willing could contribute with their views. As part of the Day Services Review that was carried out within Social Services, the Policy & Consultation Officer and Carer's Development Officer for Social Services were tasked with consulting carers within the Vale of Glamorgan to ascertain their views about day services. A focus group was arranged with an external provider to gain carer's views. A questionnaire was also designed, based on one used for the current rolling consultation programme in Social Services. The questionnaire was sent along with an invitation to the focus group so that those who couldn't attend were given an opportunity to express their views.

### **3.9 Respite Service**

Both interviews and questionnaires were used to consult with those who had been using the respite service. Interviews were carried out at Rhoose Road, where some of the service users were staying at the time. Parents/carers were sent questionnaires also to elicit their views about the service provided to their family.

### **3.10 Community Mental Health Team (Community Support)**

Service users who had been allocated a support worker from the team were contacted regarding the service they received during the previous 12 months. Names were checked by the Team Manager and those who were able to complete a questionnaire were sent one, and some service users were selected to be interviewed at their home. Questions were asked regarding the support, activities and opportunities offered by the service.

### **3.12 Substance Misuse**

Before the questionnaire was reproduced, the Policy and Consultation Officer discussed potential amendments with the Managers at Newlands. As with the previous consultation exercise, questionnaires were distributed by staff at Newland to service users when they attended the clinic for their appointments. Individuals who attended were offered a questionnaire to complete and return either to the Policy & Consultation Officer in an addressed envelope, or to Newland at the end of their session. This would ensure confidentiality is maintained. When planning the initial exercise, the managers and the Policy & Consultation Officer decided that it would be best to carry out the consultation in the Autumn as this is a time of year that they experience an increase in referrals. This was agreed for the present consultation also. Questionnaires were therefore distributed to Newland at the end of October and consultation closed late November.

### **3.13 Western Vale Reablement Team.**

Continuing previous practice, the consultation used questionnaires, updated to reflect any changes in the service, or improvements in methodology since the previous exercise. During initial meetings with representatives from both areas, any issues were identified for the Policy and Consultation Officer to consider when contacting any service users.

It was decided that every three months, service users who had finished receiving the service within that period would be contacted. This meant that questionnaires were distributed four times within the 12 month period of consultation in an effort to gain as wide a response as possible. The list of service users was provided from the team at the end of each quarter, and all listed were contacted with a questionnaire.

### **3.14 Adult Placement Service**

During the previous consultation, it was decided that it would be beneficial to consult both service users who had been placed with host families, and social work teams who had had involvement with the team to provide support to their service users. During the present exercise, the hosts themselves were also contacted for their views. This was to find out about how the Adult Placement Team were supporting the hosts (i.e. with training etc).

In order to gain as full a response as possible, both interviews and questionnaires were used to consult with service users. Case managers have previously been consulted as a group during their team meetings however an electronic questionnaire was also sent this time to ensure that each case manager had a chance to give their views.

### **3.15 Meals on Wheels**

Continuing previous practice, the consultation used questionnaires, updated to reflect any changes in the service since the previous exercise. The Policy and Consultation Officer contacted the Day Services Manager to identify which service users would be able to respond via a questionnaire, and then contacted as many service users as possible. The Meals on Wheels co-ordinator was also able to identify those who would be physically able to complete the questionnaires. Questions were asked about the meals themselves, the arrangements surrounding delivery and staff they had contact with.

### **3.16 Older Peoples Forum**

As a reference group and a voice for older people, the Older People's Forum provides an opportunity to those who deliver services to listen and learn from older people and to explore what independence means to them.

Forum members were approached in 2006 and again in Autumn 2008 to ascertain interest in attending a focus group to discuss community care service provision. Members of the Health Group of the Forum were approached for the latter focus group, whose knowledge informed the consultation, and they provided feedback about information provision from the viewpoint of potential service users.

### **3.17 Carers**

During the previous consultation, questionnaires were also sent to any informal carers of the service user, as the design of the service user's questionnaire allowed relatives and carers to respond from their own viewpoint. However, this time a separate questionnaire was designed solely for the carers to respond to containing general questions about how Social Services (across Adult Services) were supporting carers, as well as how they were being supported by the particular team they were involved with. Carers were also contacted regarding the current day services to inform service development, and attended focus groups for this purpose. Their responses are provided in each section below where appropriate.



#### **4. Response rates (refer to appendix 1)**

Overall, response rates were below average (40%), perhaps reflecting some of the issues discussed in the introduction. However, response rates varied across the teams as outlined in appendix 1).

#### **5. Key findings**

Service users and Carers: There were five key areas that the questionnaire and structured interviews explored. These were:

- **Information**
- **Referral and Assessment**
- **Complaints and Compliments**
- **Your Views**
- **Equal Opportunities Monitoring**

The following is an overview of the results under each of the above areas.

#### **Social Work Teams – (Assessment & Referral)**

##### **5.1 Information**

As found previously, information was readily available, however, in some cases information had to be requested. Most respondents had received verbal information, however more written information (e.g. leaflets) was required in some areas.

As found previously, financial information such as benefits and entitlement was often asked about; also the role of the key workers needed to be clarified further and the service users signposted to the appropriate services. In addition, there seemed to be a lack of knowledge of the teams. Again, more information was required about initial arrangements (financial etc) at the start of the service. Where service users had required advice, many were satisfied with the ability to get to someone on the telephone. Social Workers also regularly returned phone calls. Some respondents also said they did receive enough written information. Information was received in a preferred format in many instances (where applicable) as found previously. This time suggestions for an audio format was made, and also for care plans to be in symbolic format. There were many comments about how helpful the social worker had been during initial contact.

##### **Carer's Perspective**

Many carers commented that information was limited, and that they would have liked more about what services were available and how the process of referral works in Social Services. There were also comments regarding continuous communication with Social Work Teams after the service user has become

involved. Many carers did seem to be aware of the pressure some social work teams were under, however they still felt that they had to push for information. Carers were asked whether they felt that the Department had helped them to think through the options and choices available to them as a carer. Most of the carers involved with the teams felt that they had been informed of the options and choices available to them. There was still a mixed response here though. Some found information from other sources. In one area carers recommended putting someone in place to assist service users to complete forms and obtain information, especially if they are over 70 years of age.

## **5.2 Assessment & Referral**

This section of the questionnaire referred to the assessment and the service itself, and explored care and contact with the team. In most cases (not all), service users and carers were aware of who their social worker was, seemingly more so than previously found. Many respondents felt that the referral and assessment process was quite efficient, although a small number of service users and carers were dissatisfied, commenting that they had waited too long. Where appointments had been made, most service users reported that they were seen in a timely manner. Where this issue was raised, many service users and carers appeared to understand the pressures that teams and services were under.

Quite a large number of service users said they did not have a copy of their care plan. This may partly stem from confusion as to what different documents are known as, because a few asked what a Care Plan is. Carers and relatives seemed to be involved in developing care plans. Some of those who said they hadn't felt involved, sometimes feeling they weren't listened to. As with the previous consultation, in some cases service users couldn't be involved, as they were physically or mentally unable to. Others felt 'completely' involved and said that they could easily speak to the care manager about what activities they wanted to be able to do. Most (where applicable) said they felt involved in the decisions made about their care.

Service users were asked about their assessment and care packages that were arranged. Most felt that their assessment was comprehensive. In areas where specialist assessments were required, most were very satisfied with the knowledge and understanding displayed by the teams. They felt that their circumstances were taken into account, and that good advice and suggestions had been provided.

Service users were mostly satisfied with the packages of care they had been provided with. They felt it generally meets their needs and that their lives had been improved in many ways. Some felt they needed additional support but appreciate that financial and staffing issues have prevented this. As previously found, not all respondents were able to remember how long they waited for initial contact from the team, however those who did were mostly satisfied with this time. Most who responded felt that the person assessing them

understood their needs and circumstances and took their views into account well. This is an improvement from the previous consultation. As found last time, many respondents felt that members of the teams have displayed professionalism, had been understanding and very helpful. They felt they had received much support and moreover, they knew who to contact if needs changed. One very positive outcome is that this was reflected in the views of unpaid/informal carers.

### **Carers Responses**

Carers were also asked to rate their satisfaction with the process of communication (e.g. between their GP/hospital staff and their social worker) to ensure the support is suitable for the service user's needs. In most cases carers were satisfied with this, but some who were not had to request further information as communication had been very poor.

Within this section of the carers questionnaire, carers were asked specific questions about their own support from the team, and Social Services overall. There was little evidence across the service that Carer's assessments are regularly being undertaken. There were also a few instances where carers were unaware of what a carer's assessment was. Some carers however felt that the planning and assessment process had been very helpful.

Many carers also felt that social workers were providing support and assistance to meet the service user's needs. Most carers seemed to feel that the department was taking their needs into account in the way that it supported the person they cared for. Some commented that they didn't know and that much more help is needed.

Most of the carers responding over all social work teams felt that their views as a carer/relative had been taken into account during the service provided to the service user. In most cases, carers also felt that the department had understood the impact of caring upon them however some carers mentioned that more understanding of their situation would be beneficial. Other carer's comments were quite negative, regarding the lack of help and support offered. They felt that help is only given at times of crisis. One said they didn't feel that the team really knew the service user, or tried to get their views.

Carers were then asked whether they felt that the department had helped to ensure they had some free time away from caring each week. Although most felt that it did, in some areas only around half said that it did, and many felt that it did not. Carer assessments should continue to increase so the support for carers should be more evident in the future.

### **5.3 Complaints and Compliments/Your Views**

Service users and carers were asked what they felt were the benefits of the help they got from the team or their social worker. Nearly all service users provided comments which were very positive. Many described how helpful and supportive their care manager was and how they help the service user to develop some independence.

The areas for improvement tended to be about waiting times for referrals and appointments. Generally respondents were happy with the contact from the social work teams. Some wanted more time, more frequent contact and communication with their care manager. One person said the social workers were not always forthcoming about the opportunities that were available. In addition, there was some dissatisfaction with the consistency of the social workers. Lack of contact was also an issue raised here. Others said that nothing could really be improved about the support and that they were satisfied with the help they received.

Many respondents (carers and service users) had been advised of their right to make a complaint about the service, or had been given a copy of the Council Complaints Procedure. Less than half of service users and carers were aware of the procedure in some areas however. Despite this, many respondents had never felt the need to complain about their involvement with teams. Where some had complained, most were satisfied with the outcome. A few other respondents had even written to compliment their social worker. Some carers had actually made a complaint, however had received limited or no feedback.

### **Teams Providing Services**

The question/discussion about services received comprised four main areas, which were:

- **Information**
- **Referral and Assessment/Services Received**
- **Complaints and Compliments/Your Views**
- **Equal Opportunities Monitoring**

The resulting overview is presented below with reference to the above areas:

#### **5.4 Information Received**

Most service users had received enough information about the service they were going to receive; however, as with social work teams, many would have also wanted written information on a leaflet, for example. This was similar to the previous consultation. More information was also required about facilities in some cases. Very positive comments were made in cases where service users were physically able to visit the service, or had received visits at home before commencing the service. Suggestions for further information included a 'who's who' and clarification of the roles of staff. Most in areas such as Respite and Day Services had received a 'welcome pack' and had also been able to visit. Those in residential services who had managed to visit the home prior to moving in, reflected on the visit very positively.

Most information for service users and carers had been provided verbally (65%) however again some indicated that some form of written information would have been useful initially, such as leaflets providing contact details etc. Of those service users who would have liked information in an alternative format (Braille, other language, larger print etc), many did receive it - however some did not. Social Services is continuing to develop this however by increasing the range of formats available. Satisfaction with information provision was generally very positive.

As previously found, overall comments about information provision were positive for services. More information was required about initial arrangements (financial etc) at the start of the service. There was an issue here however as some information is provided by social workers rather than the provider staff. There were a few comments that service users didn't know the service existed and they were not offered much information.

Quite a few respondents also said that they had not received an information booklet at the start of their service, and this was reflected in the carer consultation for Day Services Review. Despite this, when managers were advised of this all clarified that this is a standard part of the service. Communication throughout the service was satisfactory, for example where aspects of service delivery were altered.

## **5.5 Services received**

Nearly all who responded (both carers and service users) felt welcome when the first started using the service. Service users were asked about how the service has met their needs and assisted in maintaining or regaining their independence. Most respondents experienced a vast improvement in daily living. In cases where there has been an intervention/equipment provided to them, most felt safer, more mobile and felt able to complete tasks they had previously hadn't been. Those attending Council facilities such as residential homes and day centres felt that their needs were well catered for. They were especially satisfied that assistance was on hand, and there was always somebody there if necessary.

Most respondents were satisfied with all aspects of mealtimes in Day Centres and Residential Homes. As before, service users were asked about the attitude, reliability and communication skills of staff they were involved with in all service areas. There were very positive results here, with most feeling that staff were always or mostly courteous, and very reliable. Most respondents (including carers) said that they had been treated with courtesy and respect when care was provided, and all said that they were kept informed about issues relating to their care (e.g. if hours had been altered/there had been a change of care worker). If there had been any instance they had been delayed or the contact had been cancelled, they were generally satisfied with the reasons.

Employees have become more like friends to many service users. Consistency seemed to be appreciated by service users as before. In some cases staff are the only contact they have and visits/outings are much anticipated. There was very high regard for the staff in all services and cases where they were considered to have gone out of their way to help. When previously asked about the opportunities and activities provided either by support workers or staff at the homes and day centres, most were very satisfied. This time carers also felt happy with the activities and opportunities provided at the centres, commenting that it gave service users a small opportunity for independence. There were a few issues about the activities where some service users weren't keen to be involved, and suggestions were made at interview and during discussion, which seem to have been taken forward this time. Most respondents were satisfied with the surroundings of the centres, including furnishings and access to public areas. There was some dissatisfaction with the activities and opportunities available to service users, however when this was explored, there were sometimes issues with resources. This time, when exploring Residential, Day and Respite Services, respondents seemed to be more involved in decision making about what activities they would like to do. In some cases, activities logs had also been developed with service users.

### **Carers Perspectives**

Informal carers who responded also felt that the staff/support workers made them and the service user feel at ease when they first had contact. Within this section of the questionnaire for informal carers, additional questions were asked. They were asked whether they thought that the Social Services Department is taking

their needs into account in the way it supports the person they care for. Most did feel that it is. On a more general note, the informal carers were asked whether they felt that the Department has understood the impact that caring has had on them. Most agreed and many also felt that the Department had helped to make sure they had some free time or a break from caring each week. A significant number felt that the Department has helped them think through the options and choices available to them as a carer which is another positive outcome.

## **5.6 Complaints and Compliments/Your Views**

In this section, service users were asked about their experience with making a complaint about any aspect of their involvement and service. Many people commented that they had never had cause to complain. There were various numbers who had felt the need to complain. However of these, most of the complaints made had been acknowledged and dealt with in a satisfactory manner.

Most service users and carers were aware of the Complaints Procedure and had a copy of it. In some cases though, as found previously, service users and carers were unfamiliar with the complaints process and also hadn't been advised about the procedure, which needs to be addressed.

The benefits and negative aspects of services were explored. Despite some areas of dissatisfaction with services, overall there was a very high level of satisfaction amongst service users and their families/Carers. Staff in all areas were warmly praised and the emotional difference made to people's lives is very significant.

Main benefits were that confidence levels have risen, and people feel more independent. Service users liked meeting people and socialising. Routines add structure to the day and service users look forward to it. Carers reported that service users saw day services as a positive experience. It was a great reassurance for them and their relatives to know that the service users were being cared for.

Previously, negative points included a lack of provision for some people to do activities they enjoyed. Some respondents felt that transport was often an issue, regarding trips and activities, and also daily transport to and from Community care services. This wasn't brought up as an issue this time.

Carers mentioned that more support was necessary for certain services, for example more resources, staff and management. There was also some comment regarding further centres to be opened and available for the community. There were some comments this time regarding lack of knowledge about the Complaints and Compliments Procedures. Despite this, some of the manager's feedback did confirm that this is contained in the documents provided at the start of the service. Most carers felt reassured that the service user was being well looked after while using the service.

## **6. Conclusions**

Overall, results have been very positive and encouraging. Some organisational barriers were evident, for example, a lack of adequate time and resources mean that it can be difficult for social work teams to devote enough time to service users. In some cases this may be resolved by informing service users of potential delays and reasons why. The consultation identified difficulty managing the expectations and demands of service users. This came across especially in provider services. For example, if the changes that users want contradict priorities, it is difficult for providers to respond. Departmental restructuring has also caused concern in some areas, and some negative viewpoints emerged from staff in certain areas.

Valuable information has been gained about how social work teams are carrying out referrals and assessments, and also about how service is provided. This is therefore valuable to team managers to inform their service improvement and development.

### **Process issues**

Future consultation will consider ways to improve response rates and increase engagement. Despite this, rates were an increase upon the previous consultation by 5%. Sending the questionnaires on an ongoing basis for the Western Vale Reablement Team, the Review Team and the Short Term Intervention Service served to improve response rates from the previous consultation. This may have been because the questionnaires were sent to those recently referred to the team within each quarter. It seems that structured interviews were effective in all areas for gaining in-depth and personal views. It would therefore be beneficial to try and increase the number carried out in future consultation exercises.

There were some issues surrounding the future of Day and Residential services at the time of consultation. Some service users and their families felt concerned and didn't feel they had received sufficient information about this.

In addition, recommendations of a recent Ombudsman's report outline the importance of putting the service user at the 'heart of our business and of decision-making processes'. The present consultation exercise aimed to incorporate this, by ensuring that the relevant teams and managers had an 'issues log' in which they describe actions to take and recommendations to improve the service as a result of the information provided by service users and their families.

Designing a questionnaire for informal carers to complete separately, allowed for comprehensive and valuable information to be gained in this consultation exercise. They were able to comment about their own needs and support from Social Services on the whole, although this wasn't always directly relevant to all services. The outcome from this was generally positive with many carers feeling that Social Services have been supportive and helpful with their personal situation.



## **7. Recommendations**

- I. Clarification of certain documents and parts of the service to be given so that service users/carers respond to the questionnaires with reference to appropriate areas (e.g. care plans, responsibilities of social workers etc).
- II. Delays in referral and assessment to be communicated to colleagues, service users and carers.
- III. In conclusion, service users and carers/relatives feel that Adult Services is fulfilling its objective of assisting people in the community to regain their confidence and independence at a time when they feel most vulnerable.
- IV. Ensure consistent provision of complaints information (Policy, process and feedback).
- V. Continue developing issues logs after each consultation, outlining both positive and negative outcomes of the consultation exercises that team managers will provide responses to.
- VI. Carers should be also be asked in their questionnaire whether they had been *offered* a carers assessment in the first place rather than just 'received' one.
- VII. Ensure the responses to the issues logs are used to demonstrate outcomes from the consultation and are used in feedback to participants.
- VIII. The findings and resulting issues logs will provide a benchmark against which service satisfaction will be measured in future. More encouragement is necessary for these to be completed.
- IX. Methods of consultation will be further developed to gather the views of unpaid carers and relatives.
- X. Further attempts will be made to work with other organisations to engage hard to reach groups.
- XI. Methods for consulting directly with clients with a learning disability are further explored and developed between the Policy and Consultation Officer and the Learning Disability Team.
- XII. Information provision will be reviewed in each service area, continue to develop and improve both at initial contact and throughout the service that is received in the community.
- XIII. Further training to be provided to staff regarding the complaints procedure.

- XIV. The Carers Development Officer should continue to promote Carers Assessments to underline their importance and the legal entitlement for carers to receive an assessment of their own needs.
- XV. The Carers Assessments training programme for staff will be reviewed to ensure they provide staff with the necessary skills and local knowledge to support carers.
- XVI. More strategic planning should help to ensure that social workers have more time to respond effectively to service users in their caseload.
- XVII. Team Managers should ensure that consultation questionnaires are completed in such consultation exercises as this so that adequate feedback can be gained from employees as well as service users and carers.

**Appendix 1 – Response Rates for 2005/6 and 2008/9**

Response rates for 2005/6 are shown in red.

Service/Team	Distributed/ Contacted		Response		Overall Percentage response
	Service Users	Carers	Service Users	Carers	Service users and carers
Home Care	189 105	189 105	83 41	15 15	29% 27%
Short Term Intervention Team	47 71	47 71	25 52	6 18	33% 49%
Review Team (over three consultation periods)	55 80	55	34 20	10 13	40% 41%
Older People Social Work Team	68 23	64 21	16 4	4 3	15% 16%
Western Vale Reablement Team	24 58	24	19 45	2	44% 78%
Adult Placement Services	15 (service users only) 15 service users 32 hosts 60 case managers		5 10 9 hosts 10 case managers		33% 27%
Meals on Wheels	42 101	8	21 52	4	50% 51%
Learning Disabilities	48 (and 10 interviews) 104	98	27 36	12 20	67% 28%
Respite	53		15	15	57%
Hospital Social Work Team	27 48	23 48	14 14	5 7	38% 22%
EMI	27 61	25 62	15 12	6 8	40% 16%
Day Care	222		58	11	31%
Residential Services	63 56	36	39	13	82%
Bryneithin	9	13	9	5	64%
Southway	10	21	8	11	61%
Porthceri	12	26	6	13	50%
Ty Dewi Sant	17	5	5	4	41%
Ty Dyfan	5	5	5	3	80%

<b>Substance Misuse</b>	101 (service users only) 85		48 33		47.5% 39%
<b>Occupational Therapy</b>	49 40	80	17 10	4 8	43% 15%
<b>Physical/ Sensory Impairments</b>	<b>Specialist – 49</b>		29	4	67%
	<b>Care Management -</b> 29	27	16	4	34%
	58	45	13	5	17%
<b>Mental Health (Community Support Workers)</b>	96 81		22 34	3	26% 42%

<b>Total contacted</b>	<b>Total literal response</b>	<b>Total percentage response</b>
2005/6 - 1764	2005/6 - 610 (103 carers)	2005/6 - 34.5% (17% carers)
2008/9 - 1698	2008/9 - 660	2008/9 - 39%