

## **The Vale of Glamorgan Council**

### **Healthy Living and Social Care Scrutiny Committee: 12<sup>th</sup> September, 2016**

#### **Report of the Director of Social Services**

#### **Representations, Complaints and Compliments**

##### **Purpose of the Report**

1. To advise Committee about:
  - activity, performance and achievements within this important area of work during 2015/2016; and
  - improvements planned for 2016/2017.

##### **Recommendations**

T H A T Scrutiny Committee:

1. Notes the report.
2. Continues to receive an annual report in relation to complaints and compliments received by the Social Services Directorate.

##### **Reasons for the Recommendations**

1. & 2. To ensure effective scrutiny of performance in Social Services and to provide evidence about the effect upon the lives of individual service users and their carers.

##### **Background**

2. Handling complaints well is a crucial part of the responsibilities undertaken Social Services. An effective and properly managed complaints and compliments system plays a key role in ensuring that users receive the services to which they are entitled. It enables the Directorate to:
  - acknowledge quickly when mistakes have been made;
  - put them right effectively and apologise, where appropriate; and
  - ensure that we learn lessons from complaints and apply these lessons to improve services and performance.

3. The Directorate has sought to ensure that its systems for managing complaints are robust. Effective monitoring of complaints acts as a valuable source of feedback, highlighting aspects of service delivery which fall below the standard the Council aims to achieve. Handling complaints promptly, efficiently and responsively enhances the Directorate's reputation with all its stakeholders.
4. This is the second year since the revised complaints guidance from the Welsh Government – *A guide to handling complaints and representations by local authority social services* - came into effect. The guidance supports implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014.
5. The new complaints procedure is a two-stage procedure as summarised below.

#### Stage1 - Local resolution

- The local authority must offer to discuss (either face-to-face or over the telephone) the complaint or representation with the complainant in an attempt to resolve the matter. This discussion must take place within 10 working days of the date when the complaint was acknowledged. Where this approach leads to a mutually acceptable resolution of the matter, the local authority must write to the complainant within a further 5 working days.

#### Stage 2 – Formal Investigation

- A complaint or representation subject to a Formal Investigation must now be investigated by an Independent Investigator from outside the local authority. An Independent Person must also be involved where a representation is considered at the Formal Stage. The Investigating Officer will be required to produce an investigation report, which may include recommendations for the local authority to consider. This stage must be completed within 25 working days of the date the complaint is agreed with the complainant. If the local authority is not able to send a written response to the investigation report within 25 working days due to exceptional circumstances, it must write to the complainant explaining the reasons for the delay and when a response will be provided. The local authority's response must advise complainants that they have the right to complain to the Public Services Ombudsman for Wales if they remain dissatisfied following this stage of the procedure.
6. This two stage process is in line with the *Model Concerns and Complaints Policy and Guidance* issued by Welsh Government and the NHS Complaints procedure *Putting Things Right*.

### **Relevant Issues and Options**

7. The Annual Social Services Representations and Complaints Annual Report 2015/2016 is attached at Appendix 1. It contains a very detailed account and some of the most significant aspects are set out below.
8. The Directorate received 87 concerns or complaints in 2015/2016. The breakdown across the service is shown below.

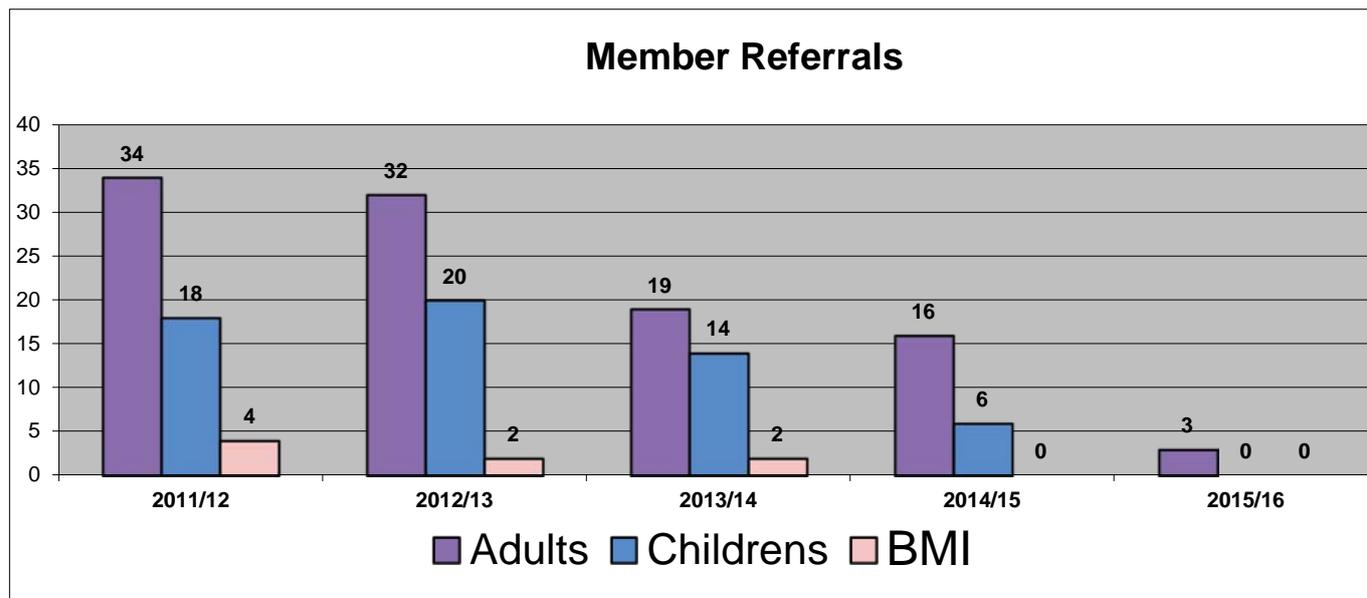
	Enquiries*	Complaints
Adult Services	18	26
Children and Young People Services	20	23
Business Management and Innovation	0	0
Total	38	49

\*An enquiry is an issue of concern to the service user, dealt with by the team, without escalation to a complaint.

9. The information shows a small increase in the number of enquiries (34 in 2014/15), and a small decrease in number of complaints (55 in 2014/15).
10. The Public Services Ombudsman Wales (PSOW) provides an external independent service for the purpose of considering complaints made by members of the public in relation to all local authority services, including Social Services. During 2015-16, the Ombudsman received four cases involving Social Services in f the Vale of Glamorgan. Two of these complaints were not investigated by the Ombudsman. Two were investigated but had not been completely resolved by the end of March 2016. However, both have now resulted in voluntary settlements; one is concluded and the other matter is near completion.
11. Increased staff awareness about their responsibilities under the Complaints Procedure and their commitment to resolving concerns at the earliest opportunity are considered to be key factors in reducing the volume of complaints. All staff have received refresher training on the new Procedure and the Complaints Officer supports them to ensure compliance. The Complaints Officer has continued to take on a mediation role, using a range of approaches including discussion, supplying information and listening to the concerns of the individual and ensuring that the relevant service area is notified.
12. To understand the volume of complaints vis-à-vis the number of service users, the figure was approximately 0.55% in Adult Services (4668 people receiving social services or referred during the year and 26 complaints). This shows a slight increase in the percentage compared to 2014-15 when it was 0.49%. The figure in Children and Young People Services was 1.27% (1809 service users and 23 complaints). This represents a slight decrease in Children and Young people services compared to 2014/2015.
13. The Social Services Procedure includes timescales within which complainants should have received a response to their complaint. During 2015/2016, there was a reduction in performance, with 24% not having met prescribed timescales. This is a significant increase on the 6% in 2014/15. A number of reasons contribute to this figure, including the complexity of complaints and a change in the way the figures are collated, as well as some administrative errors.
14. The most common complaints received were as follows.

<b>2015/2016 – Most Common Complaints Recieved</b>	<b>Adult Services</b>	<b>Children and Young People Services</b>	<b>Business Management and Innovation</b>
Charges for Services	3	0	0
Denied a Service	0	3	0
Lack of response from a team	0	3	0
Quality / level of service	9	10	0
Placement provision	1	0	0
Policy dispute	2	0	0
Ongoing concerns	1	0	0
Complaint about staff	4	5	0
Unhappy about care provision	4	0	0
Other	1	5	0
<b>Total</b>	<b>26</b>	<b>23</b>	<b>0</b>

15. Compliments are also regarded as important information and used to identify good practice. The Directorate received 28 compliments during 2015/2016, compared to 76 in 2014/15. Details are included in the annual report.
16. The Representations and Complaints Procedure does not preclude the right of an individual to approach their Local Councillor, Assembly Member or Member of Parliament. On behalf of their constituents, they undertake an important role in handling concerns and queries that individuals may have. These referrals can range from comments and queries, to complaints. If an Elected Member does not consider it to be appropriate for them to deal with a concern, the matter can be dealt with under the Complaints Procedure.
17. During 2015-2016, Social Services received a total of 3 referrals from MPs and AMs relating to social care services. Of these 3 referrals, none originated from Members of Parliament and the remaining 3 were from Assembly Members. All the referrals received a response from the relevant Cabinet Member. A four year comparison of these referrals is shown in the table below.



18. The above shows an overall decrease year on year. The process for reporting responses to these referrals has been streamlined and is working efficiently.
19. The Directorate continues to improve the way in which complaints are dealt with and achievements in 2015/2016 include :
- The new complaints procedure was reviewed and amended to ensure compliance with the requirements of the Social Services and Wellbeing (Wales) Act 2014;
  - The complaints officer has worked increasingly with the Public Services Ombudsman Wales on complaints not resolved following Stage 2 of the complaints process;
  - The Complaints Officer has contributed to the monthly Quality Assurance – Provider Performance Group;
20. The priorities for improving the complaints and compliments service during 2016/2017 include :
- Improve the response timescales at Stage 1 by reviewing the support offered to managers and how this information is collated and reported;
  - Encourage staff to forward compliments so that they can be recorded and reported;
  - Increase the number of Independent Investigators and Independent Persons on the database;
  - Continue to attend and actively participate in the Quality Assurance meetings.

### Resource Implications (Financial and Employment)

21. Operating the Complaints Policy and Procedure is a statutory responsibility and the work has to comply with regulations. There are costs which accrue to the Directorate and officers often devote a considerable amount of time to resolving an individual complaint. However, the costs have been managed within the budget set for this area of work.

## **Sustainability and Climate Change Implications**

22. Effective delivery of the complaints and representations procedures assists the Council to deliver good governance.

## **Legal Implications (to Include Human Rights Implications)**

23. This report supports implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and Representations Procedure (Wales) Regulations 2014.

## **Crime and Disorder Implications**

24. There are no Crime and Disorder implications as a direct result of this report.

## **Equal Opportunities Implications (to include Welsh Language issues)**

25. All service users and their carers are able to access the Social Services Complaints Procedure and informed appropriately.

## **Corporate/Service Objectives**

26. Implementation will help the Council to achieve the following objective:
- Wellbeing Outcome 4: An Active and Healthy Vale
  - Objective 8: Safeguarding those who are vulnerable and promote independent living
- To ensure that people have access to comprehensive information about Social Services and other forms of help and support, are appropriately signposted to help and supported by proportionate assessments, care and support plans, and services which meet their individual assessed needs.

## **Policy Framework and Budget**

27. This report is in accordance with the Council's policy framework and budget.

## **Consultation (including Ward Member Consultation)**

28. There are no matters in this report which relate to any individual Ward.

## **Relevant Scrutiny Committee**

29. Healthy Living and Social Care.

## **Background Papers**

None

## **Contact Officer**

Suzanne Clifton, Interim Head of Business Management and Innovation.

**Officers Consulted**

Social Services Complaints Officer

**Responsible Officer**

Philip Evans, Director of Social Services.

**Vale of Glamorgan Council**

**SOCIAL SERVICES  
REPRESENTATIONS AND  
COMPLAINTS**

**ANNUAL REPORT  
2015/2016**

**SOCIAL SERVICES  
REPRESENTATIONS AND COMPLAINTS 2015/2016**

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## 1. INTRODUCTION

The purpose of this report is to provide a review and statistical analysis of the complaints, comments and compliments received by Social Services during the reporting period.

The report covers the period 1<sup>st</sup> April 2015 to 31<sup>st</sup> March 2016. It deals with all three divisions within the Social Services Directorate: Adult Services, Children and Young People Services and Business Management and Innovation. This is the 6<sup>th</sup> combined report to be produced since a unified complaints service for the Directorate was introduced in early 2009 and the second to be produced following new complaints guidance (A guide to handling complaints and representations by local authority social services) which came into effect on August 1<sup>st</sup> 2014. This guidance replaces *Listening and Learning* which was introduced in 2006. The guidance supports the implementation of the *Social Services Complaints Procedure ( Wales) Regulations 2014* and the *Representations Procedure ( Wales) Regulations 2014*.

The NHS and Community Care Act (1990), Children Act (1989 Part III) and the National Minimum Standards and Regulations (2002) for Fostering Services require local authorities to maintain a representations and complaints procedure for social services functions. The Welsh Government (WG) expects each local authority to report annually on its operation of the procedure.

The Social Services Directorate believes strongly that handling complaints well is a crucial part of its responsibilities. A good complaints handling system is a vital part of ensuring that our service users receive the service to which they are entitled. It enables the Directorate to:

- Acknowledge quickly when mistakes have been made;
- Put them right effectively and to apologise where appropriate;
- Ensure that we learn lessons from complaints.

## 2. WHY DO PEOPLE COMPLAIN?

The most common reasons reported for making a complaint include:

- Wanting to be heard;
- Ensuring that concerns are recognised, acknowledged and taken seriously;
- Ensuring that appropriate action is taken to remedy problems and avoid similar incidents in the future; and
- to receive an apology.

## 3. THE COMPLAINTS PROCEDURE

A new complaints procedure came into effect on August 1<sup>st</sup> 2014. All complaints registered with the complaints team after this date have been handled in line with the new regulations and guidance.

The (new) regulations confirm the arrangements for the:

- Setting up of a procedure;
- Designation of a senior officer to be responsible for ensuring compliance with arrangements made by the local authority;
- Appointment of a complaints officer to manage the procedure;
- The training of staff; and
- The production of an Annual Report.

## **The 2 stage procedure**

### Stage1 - Local resolution

The local authority must offer to discuss (either face- to- face or over the telephone) the complaint or representation (where the matter complained about relates to functions carried out under sections 26(3), section 36 (3B) and 26 (3C) of the Children Act 1989) with the complainant in an attempt to resolve the matter. This discussion must take place within 10 working days of the date of the acknowledgement of the complaint. Where this approach leads to a mutually acceptable resolution of the matter, the local authority must write to the complainant within a further 5 working days.

### Stage 2 – Formal Investigation

A complaint or representation subject to a Formal Investigation must now be investigated by an Independent Investigator, a person who is independent of the local authority. An Independent Person must also be involved where a representation is considered at the Formal Stage. The Investigating Officer will be required to produce an investigation report which may include recommendations for the local authority to consider. This stage must be completed within 25 working days of the date the complaint is agreed with the complainant. If, due to exceptional circumstances, the local authority is not able to send a written response to the investigation report within 25 working days it must write to the complainant explaining the reasons for the delay and when a response will be provided. The local authority's response must advise complainants that they have the right to complain to the Public Services Ombudsman for Wales if they remain dissatisfied following this stage of the procedure.

This two stage process is in line with the *Model Concerns and Complaints Policy and Guidance* and the NHS Complaints procedure *Putting Things Right*.

## **4. THE PUBLIC SERVICES OMBUDSMAN FOR WALES**

The Public Services Ombudsman for Wales provides an external independent service for the purpose of considering complaints made by members of the public in relation to all local authority services, including Social Services. The Public Services Ombudsman also has jurisdiction to examine and determine complaints of injustice as a result of maladministration on the part of the local authority.

From August 1<sup>st</sup> 2014 if a complaint or representation is not resolved at the Formal Investigation Stage (Stage 2) the complainant must be advised that they have the right to complain to the Public Services Ombudsman. The Ombudsman's office will aim to complete all investigations within 12 months but most are concluded sooner.

During 2015-2016, four Social Services cases in respect of the Vale of Glamorgan were received by the Ombudsman:

Two of these complaints were not investigated by the Ombudsman. Two were investigated, by the ombudsman but neither had an outcome before the end of April 2016.

## **5. MEMBER REFERRALS**

The Representations and Complaints Procedure does not preclude the right of an individual to approach their Local Councillor, Assembly Member or Member of Parliament. On behalf of their constituents, they undertake an important role in handling concerns and queries that individuals may have. These referrals can range from comments and queries, to complaints. If an Elected

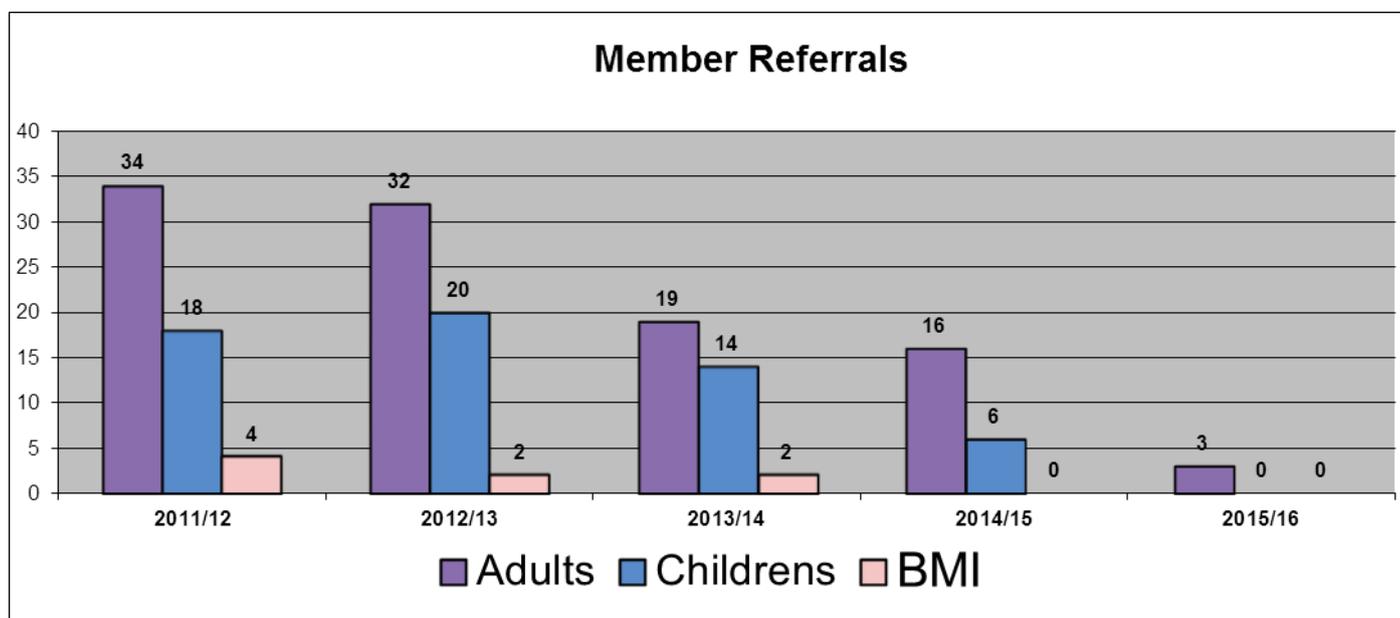
Member does not consider it to be appropriate for them to deal with a concern, the matter can be dealt with under the Complaints Procedure.

During 2015-2016, Social Services received a total of 3 referrals from MPs and AMs relating to social care services. Of these 3 referrals, 0 originated from Members of Parliament and the remaining 3 were from Assembly Members. All the referrals received a response from the Cabinet Member for Social and Care Services. A breakdown of these referrals is shown in Table 1 with a four year comparison demonstrated as a graph.

**Table 1**

Origin of Referral 2015-2016	Adult Services	Children and Young People Services	Business Management and Innovation
Members of Parliament	0	0	0
Assembly Members	3	0	0
<b>Total</b>	<b>3</b>	<b>0</b>	<b>0</b>

A comparison of this level of request over the past four years is shown below:



The above shows an overall decrease on the previous year. The process for reporting responses to these referrals has been streamlined and is working efficiently.

## 6. MEDIATION

Some people who contact Social Services are not sure if they want to make a formal complaint. In these cases, the Complaints Officer offers to meet with them to try and help clarify the issues and listen to their concerns. Whilst time consuming, this approach has proved to be valuable and effective in terms of reaching an early resolution of concerns. This initiative is in keeping with the spirit of 'Listening and Learning' and acknowledges the extended duty placed on local authorities by the guidance to safeguard and promote the welfare of service users.

It involves the Complaints Officer using a variety of approaches, including discussion, supplying information and, in many cases, listening to the concerns raised and ensuring the relevant service area is notified. The Complaints Officer has also found ways of engaging with service users who have not made complaints, for example by visiting residential and day care settings, schools and advocacy providers. This approach assists in disseminating information about the Complaints Procedure.

The Complaints Officer made 162 visits to service users/families of service users during the reporting period. 3 service users/families of service users visited went on to make a complaint as in the majority of cases the Complaints Officer was able to alleviate their anxieties, or to signpost them to other services. In 2014-15, no enquiries progressed to Stage 1. In 2013-14, 2 visits progressed to Stage 1; 2012-2013, no visits progressed to Stage 1 and in 2011-2012, 46 progressed to Stage 1. This indicates the effectiveness of this service in providing the best outcome for service users.

Complainants are entitled to request a Stage 2 investigation if they are not happy with the response at Stage 1. As a positive means of resolution, Senior Managers in the Vale of Glamorgan offer to meet with the complainant for further discussion before progressing to Stage 2. This practice has continued successfully in 2015-2016.

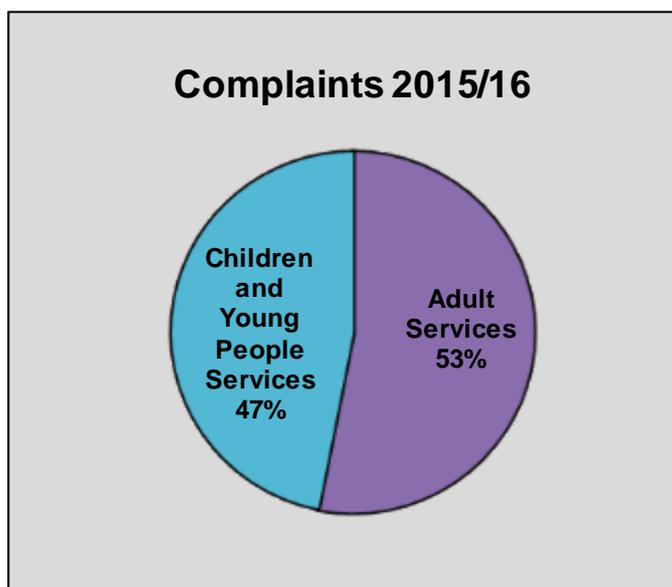
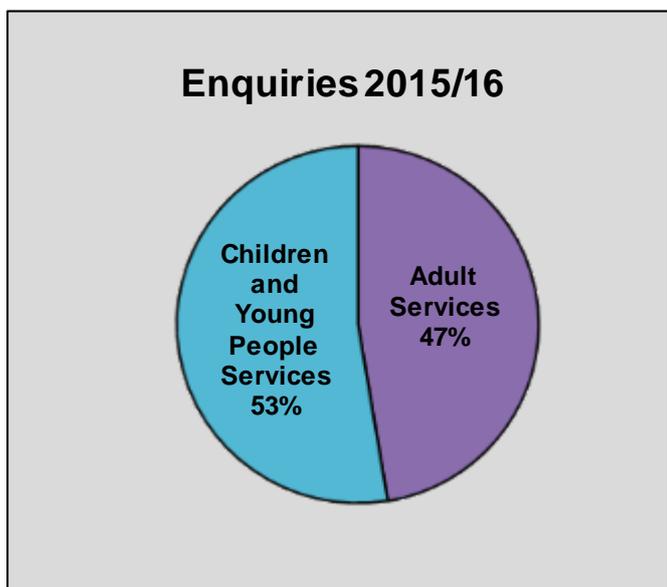
## 7. STATISTICAL INFORMATION 2015-2016

### 7.1 Number of representations received by the Directorate

Table 2

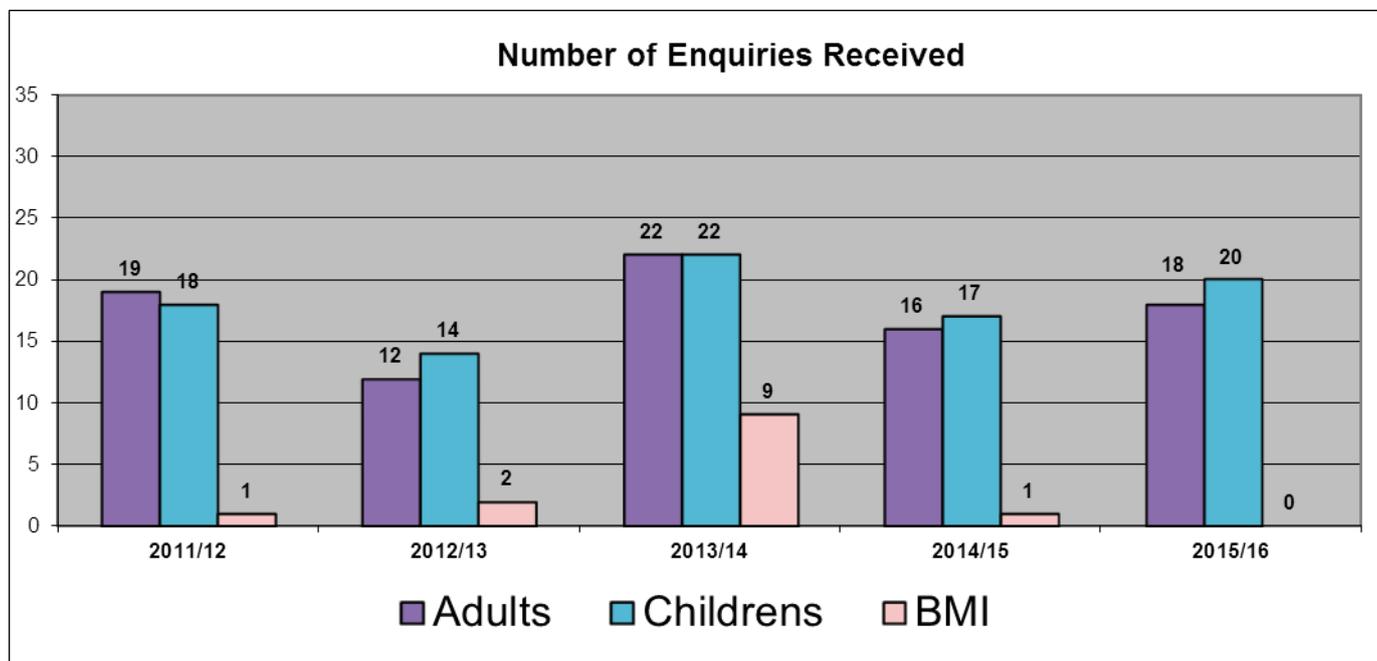
	Enquiries*	Complaints
Adult Services	18	26
Children and Young People Services	20	23
Business Management and Innovation	0	0
<b>Totals</b>	<b>38</b>	<b>49</b>
	<b>87</b>	

\*Enquiries are issues of concern to the service user, dealt with by the team, without escalation to a complaint.



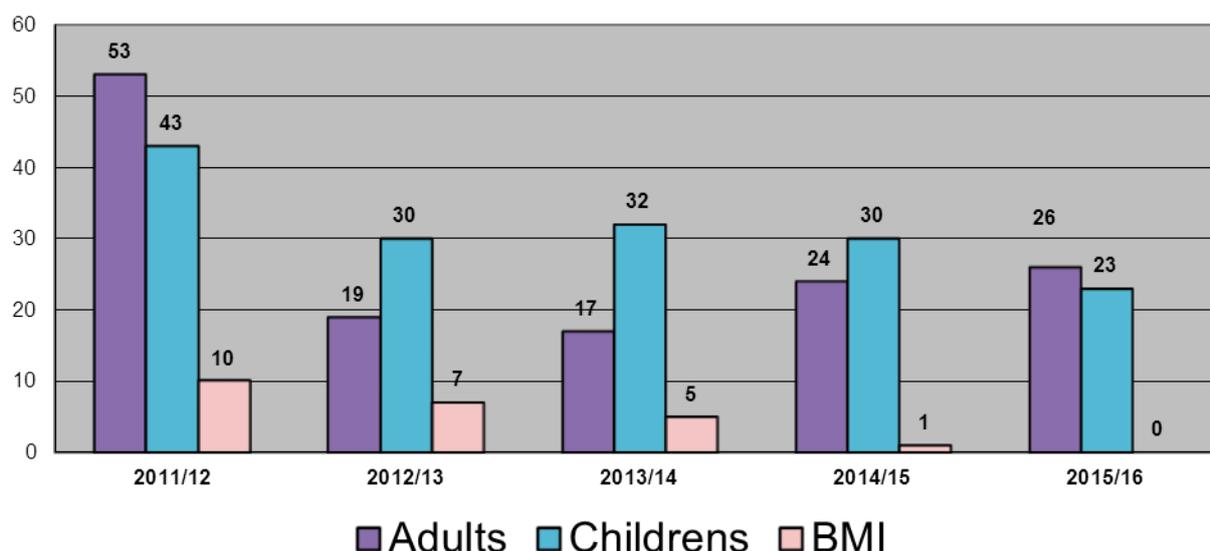
Information collated shows an increase in the number of enquiries recorded from 34 in 2014/15 to 38 in 2015/16 and a decrease in the number of complaints from 55 in 2014/15 to 42 in 2015/16. No complaints or enquiries were received for Business Management and Innovation compared to the one complaint and one enquiry that were received in 2014/15. These figures do not include complaints made directly to the ombudsman.

The charts below provide details of the number of representations received in relation to the delivery of Social Services over a four year period.



As mentioned above, the process has now changed so that discussions are undertaken with the complainant in many cases before escalating to a complaint. These are recorded as enquiries.

### Number of Complaints Received



To understand the volume of complaints vis-à-vis the number of service users, the proportion in Adults services was approximately 0.55% which is (4668 people receiving social services or referred during the year and 26 complaints). During 2014/15 the proportion in Adult Services was 0.49%. The proportion in Children and Young People Services was 1.27% which is (1809 children receiving social services or referred during the year and 23 complaints). During 2014/15 the proportion in Children and Young People Services was 1.75%.

The higher proportion of complaints per service user in Children and Young People Services reflects the fact that families are more likely to experience intervention on an involuntary basis, as the result of safeguarding concerns.

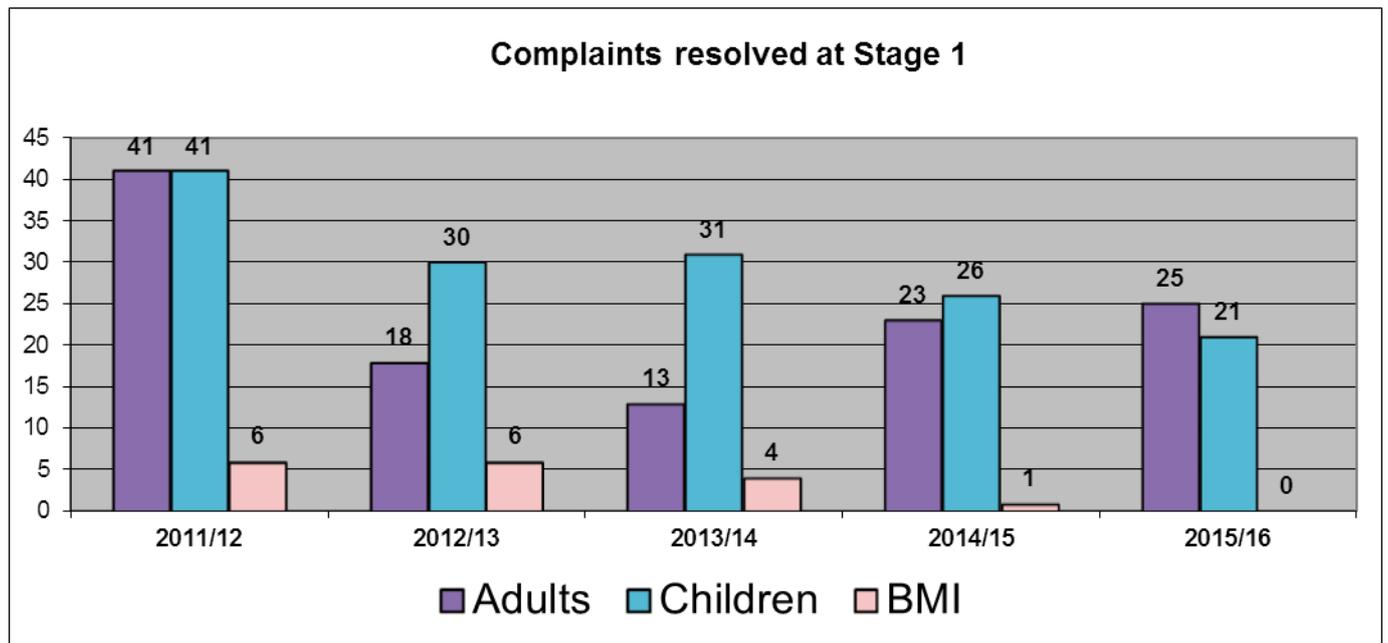
### 7.2 Stages at which complaints were resolved

The table and charts below provide details regarding the stage at which complaints were resolved

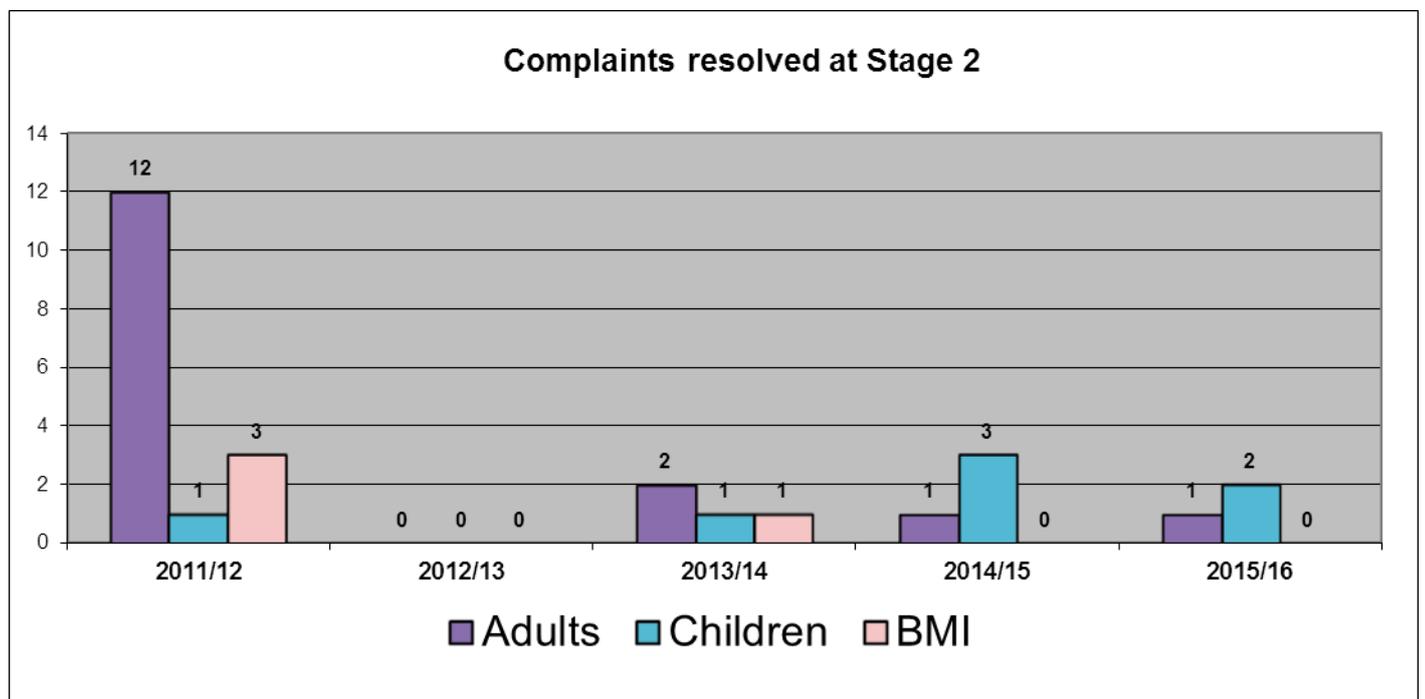
**Table 3**

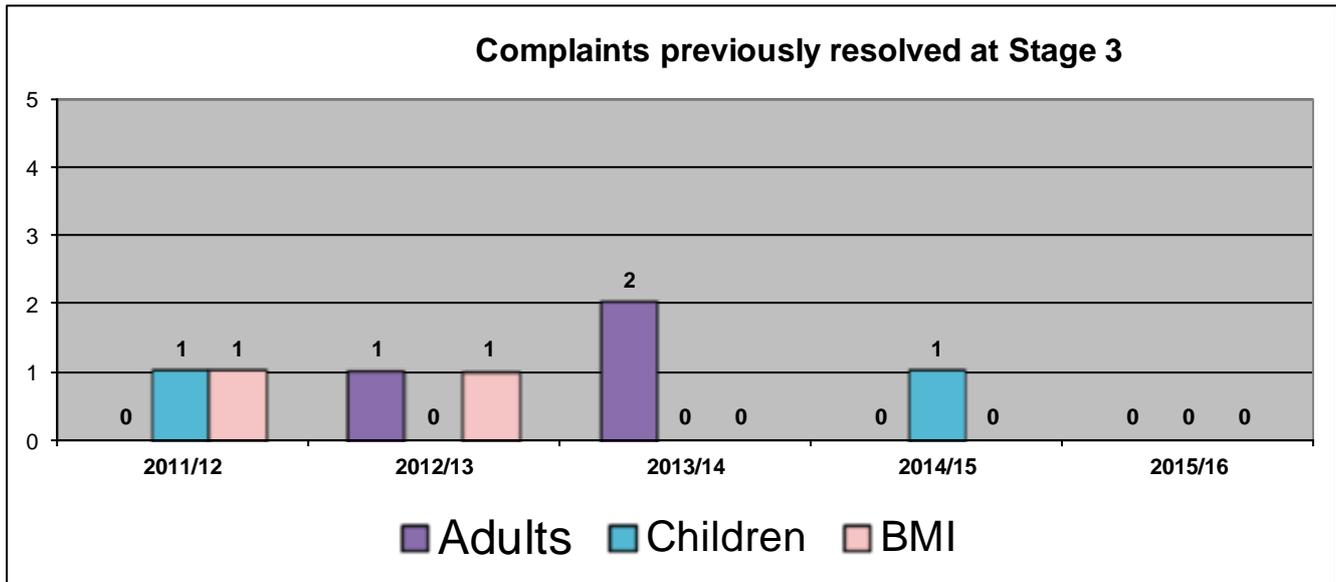
Stage at which complaints were resolved	Adult Services	Children and Young People Services	Business Management and Innovation
<b>Stage 1</b> Local Resolution	25	21	0
<b>Stage 2</b> Formal Consideration	1	2	0
<b>Stage 3</b> The Independent Panel			
<b>Total</b>	<b>26</b>	<b>23</b>	<b>0</b>

The chart below highlights the overall improvement in the Council's resolution of complaints at an early stage. The chart includes both the old and new complaints processes.



The number of complaints resolved at Stage 1 is due, in the main, to the commitment of team managers to resolve issues in respect of their service and the positive involvement of senior managers before escalation to Stage 2.





There is no longer a third stage to the complaints procedure. Complainants who remain dissatisfied following stage 2 of the complaints procedure can now ask the Public Service Ombudsman for Wales to consider their complaint.

### 7.3 Timescales for completion of complaints

The timescale for completion of Stage 1 complaints received prior to 1<sup>st</sup> August 2014 was 10 working days. It should be noted that often there are genuine reasons for not being able to meet the prescribed timescales. For example, some cases can take longer due to the complexity of the issues raised and the need to ensure that cases are thoroughly investigated.

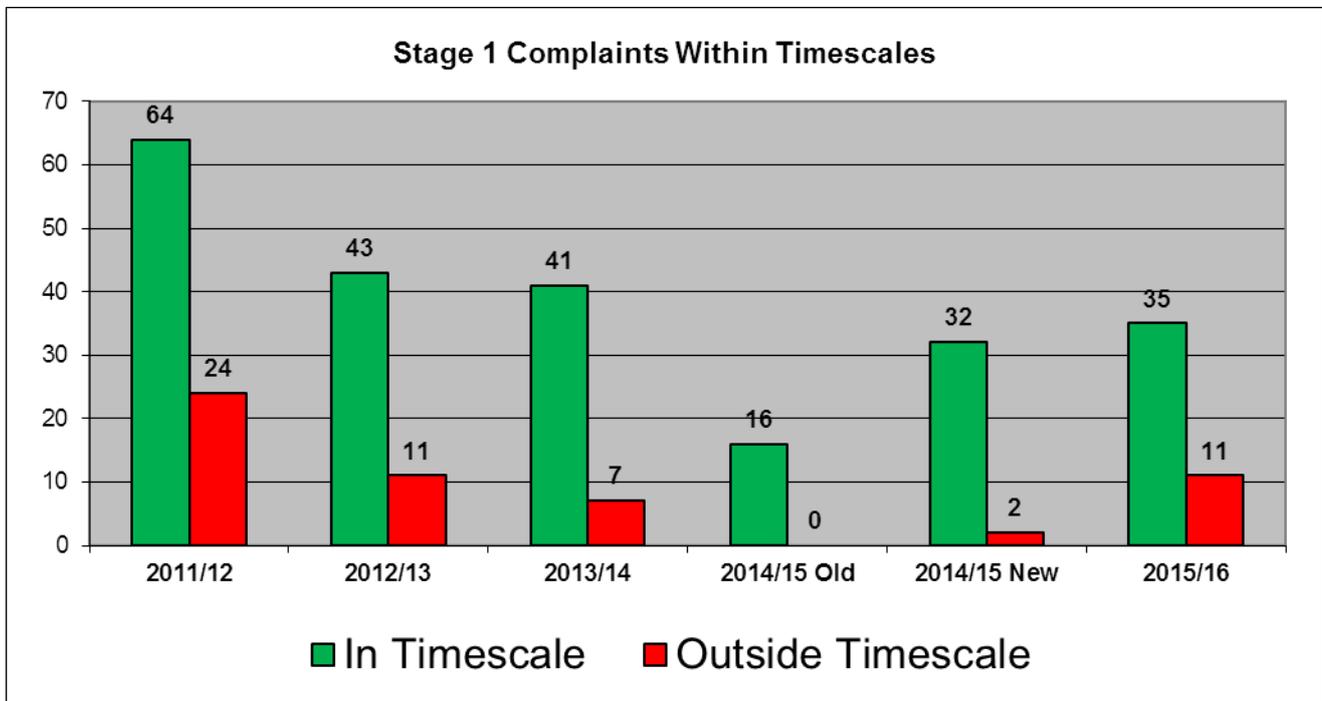
In these cases, an extension to the timescale (of a further 10 working days) is normally agreed with the complainant.

The timescales associated with Stage 1 complaints are:

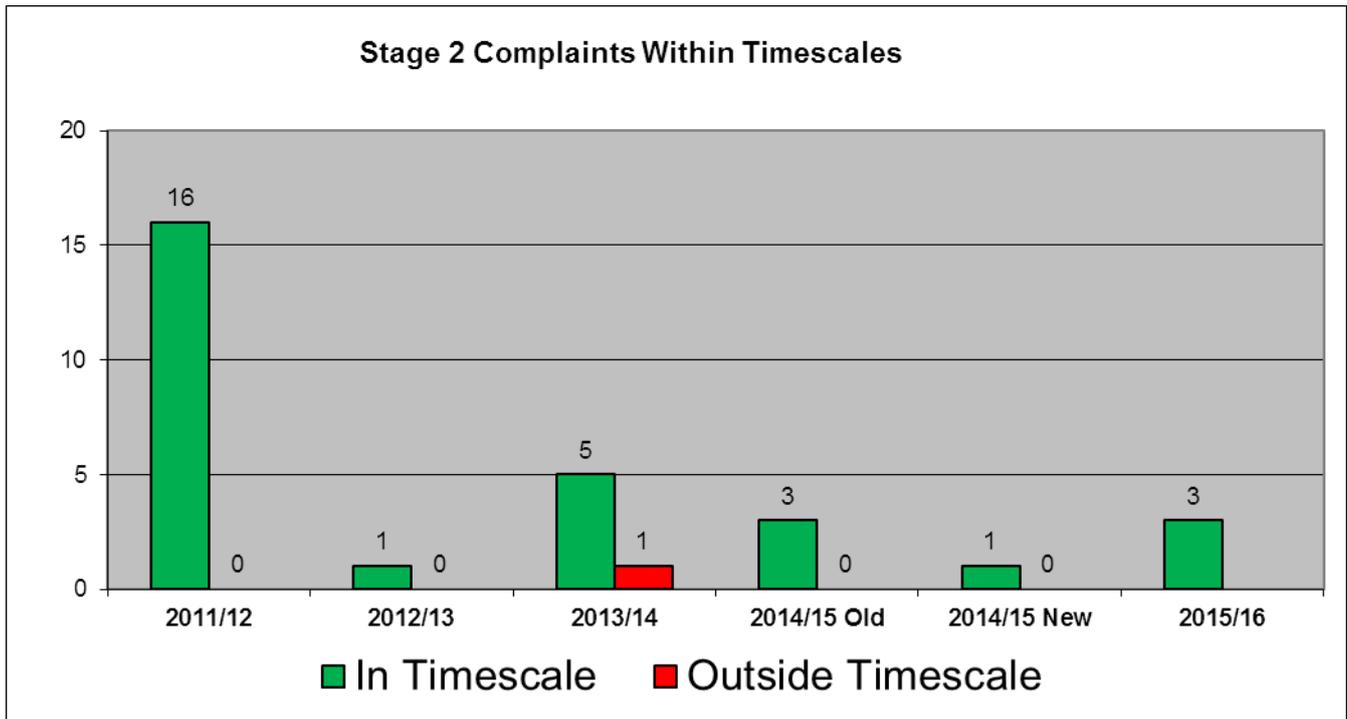
Acknowledgement of complaint within 2 working days of receipt.

Complainant contacted and offered a meeting or discussion within 10 working days of acknowledgement date.

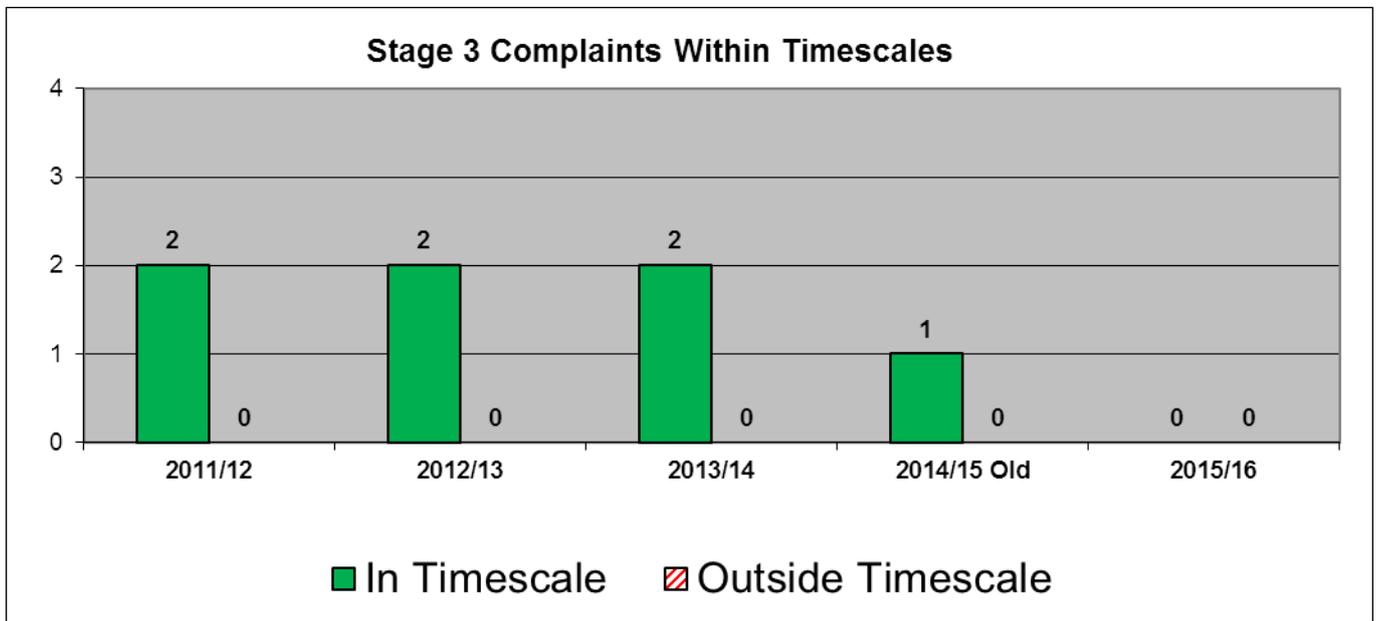
Written outcome of discussion provided to complainant within 5 working days of meeting /discussion.



In 2015-2016 the percentage of Stage 1 complaints not completed in timescale increased to 24% compared to 6% in 2014/15. As mentioned above there may be genuine reasons for not being able to meet the prescribed timescales but the increase may also be due to the way the process has been broken down into the various timeframes at stage 1 and the way in which this information has been collated.



In 2014-2015 the percentage of Stage 2 complaints completed in the agreed timescales under both the old and new processes increased to 100% compared to 83.33% in 2013/14. All Stage 2 complaints were completed within the agreed timescale in 2015/16.



There were no stage three complaints during 2015/16.

#### 7.4 How complaints were resolved

A variety of methods were used to resolve complaints. Each complaint was considered separately and the most appropriate method of resolution applied.

Methods included:

- provision of explanation (written) as to reasons for decisions;
- provision of an apology (written), where appropriate;
- mediation;
- senior managers meeting with complainants to discuss their concerns;
- independent investigation;
- action taken to change a decision

All complainants received a written response offering an explanation, outlining recommendations and/or identifying corrective action.

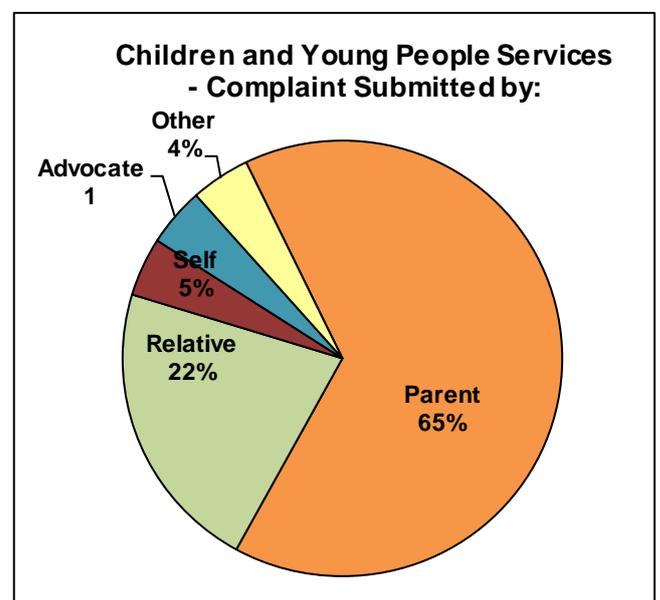
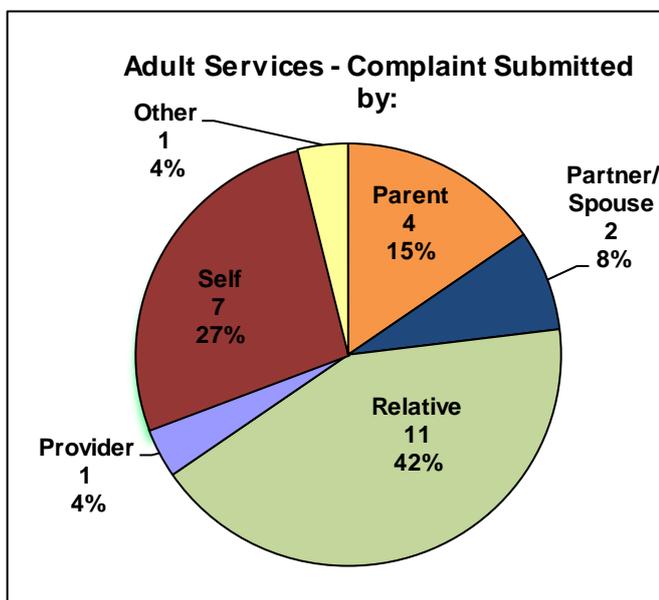
## 7.5 Who made complaints?

Legislation requires the authority to establish a procedure for considering representations, including complaints, made to it by a range of people.

Complaints were received from the following groups of people during 2015/16.

**Table 5**

Complaint submitted by:	Adult Services	Children and Young People Services	Business Management and Innovation
Advocate	0	1	0
Parent	4	15	0
Partner/Spouse	2	0	0
Relative	11	5	0
Self	7	1	0
Provider	1	0	0
Other	1	1	0
<b>Total</b>	<b>26</b>	<b>23</b>	<b>0</b>

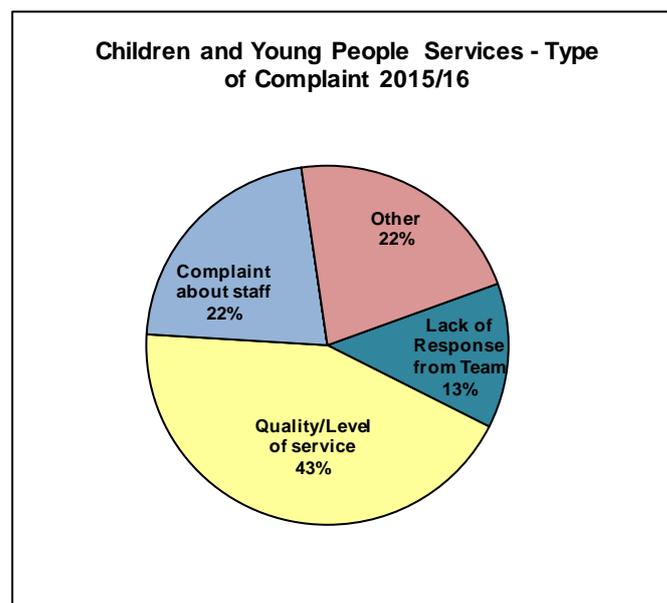
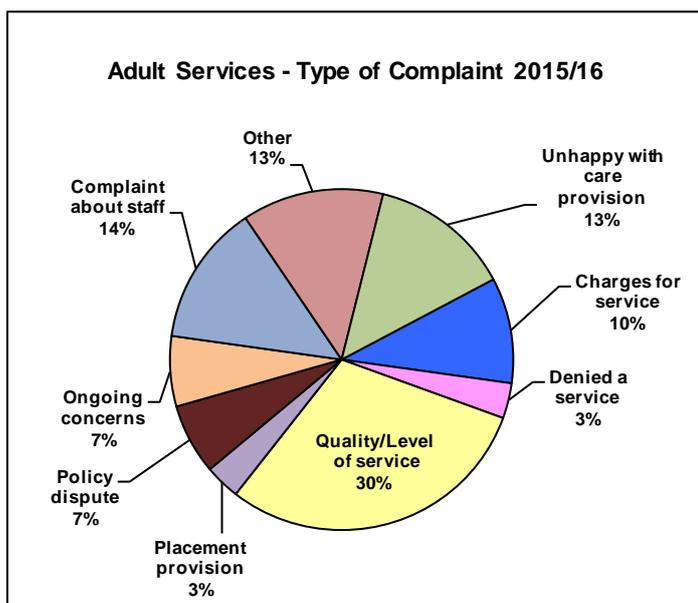


## 7.6 Nature/range of complaints

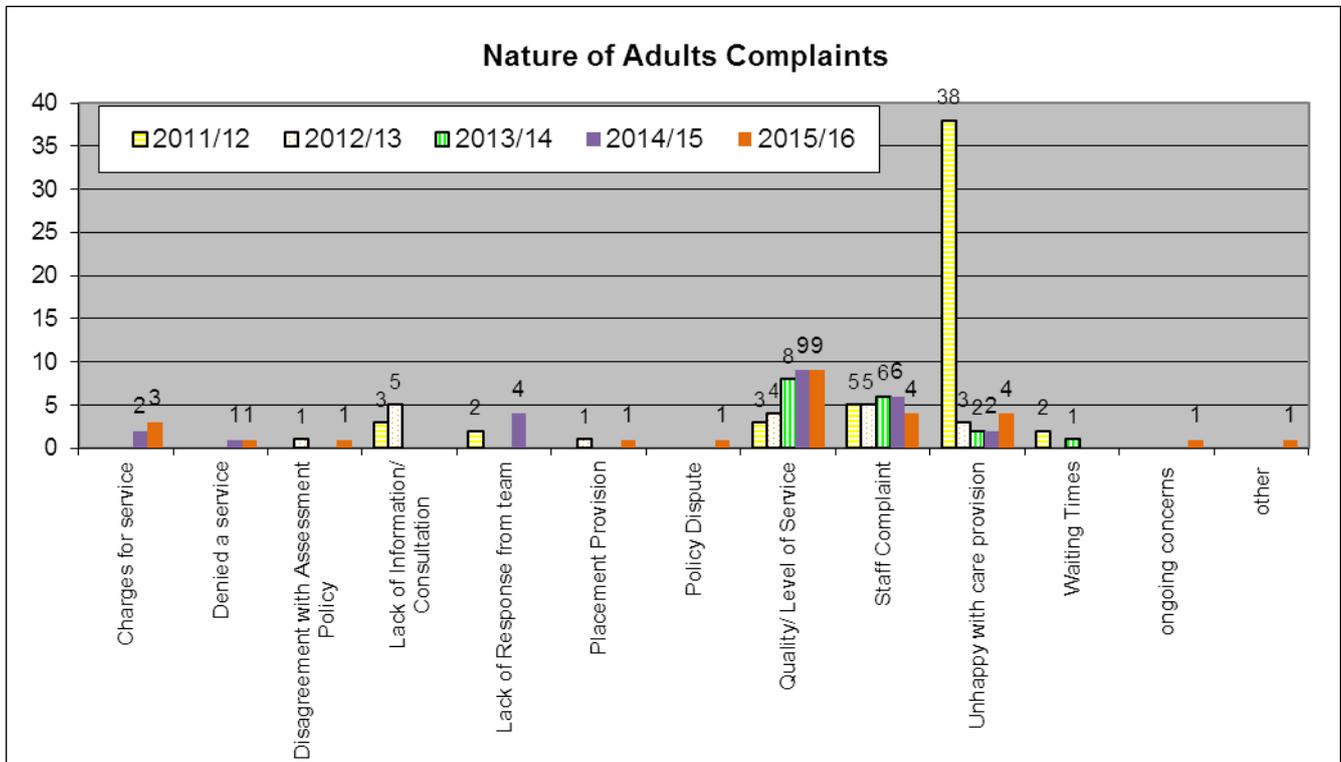
The most common reasons for complaints received during 2015/16 were as follows:

**Table 6**

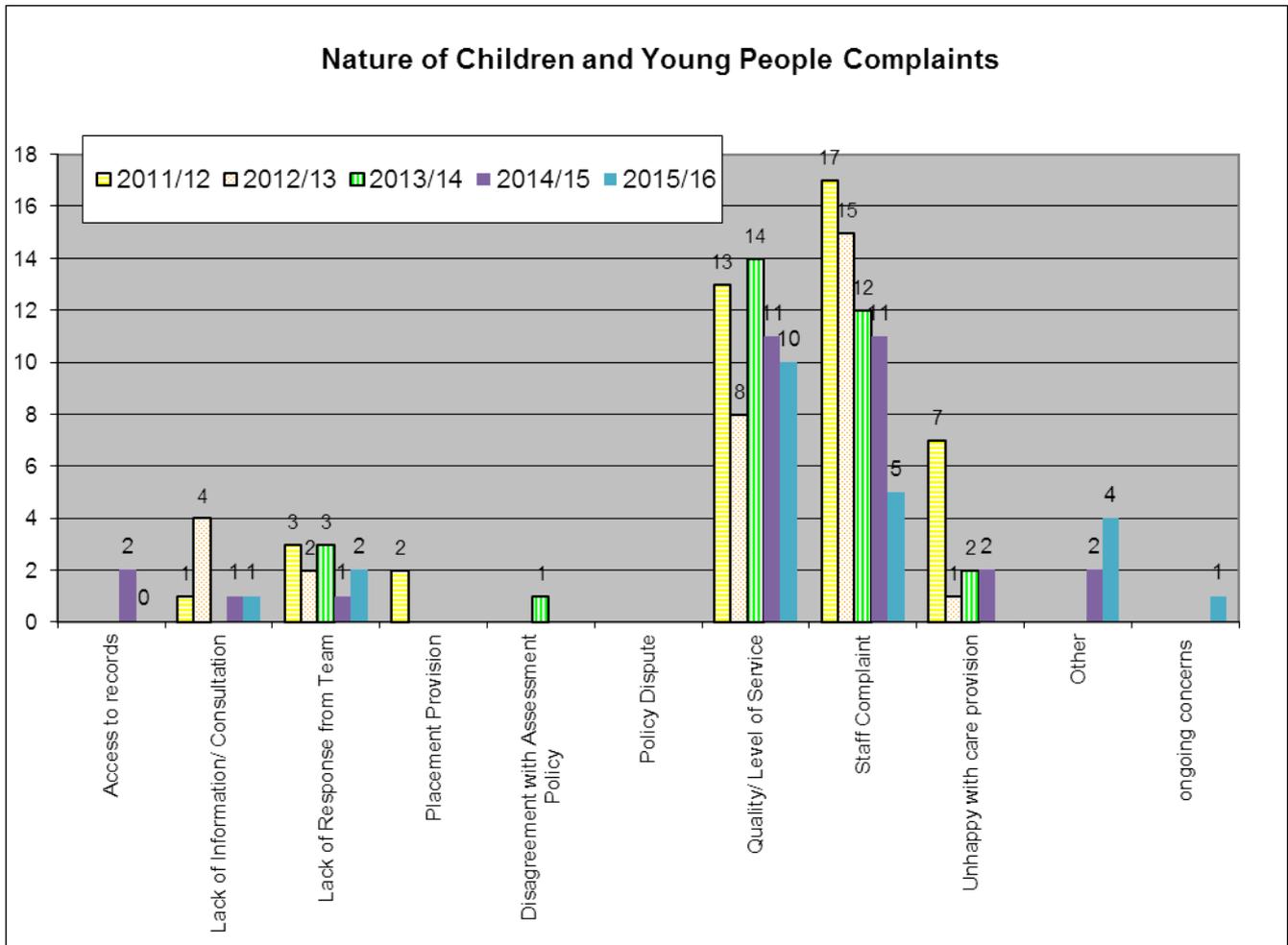
Most common complaints received:	Adult Services	Children and Young People Services	Business Management and Innovation
Charges for service	3	0	
Denied a service	1	0	
Lack of response from team	0	3	
Quality/level of service	9	10	
Placement provision	1	0	
Policy Dispute	2	0	
Ongoing concerns	1	0	
Complaint about staff	4	5	
Unhappy with care provision	4	0	
Other	1	5	
<b>Total</b>	<b>26</b>	<b>23</b>	<b>0</b>

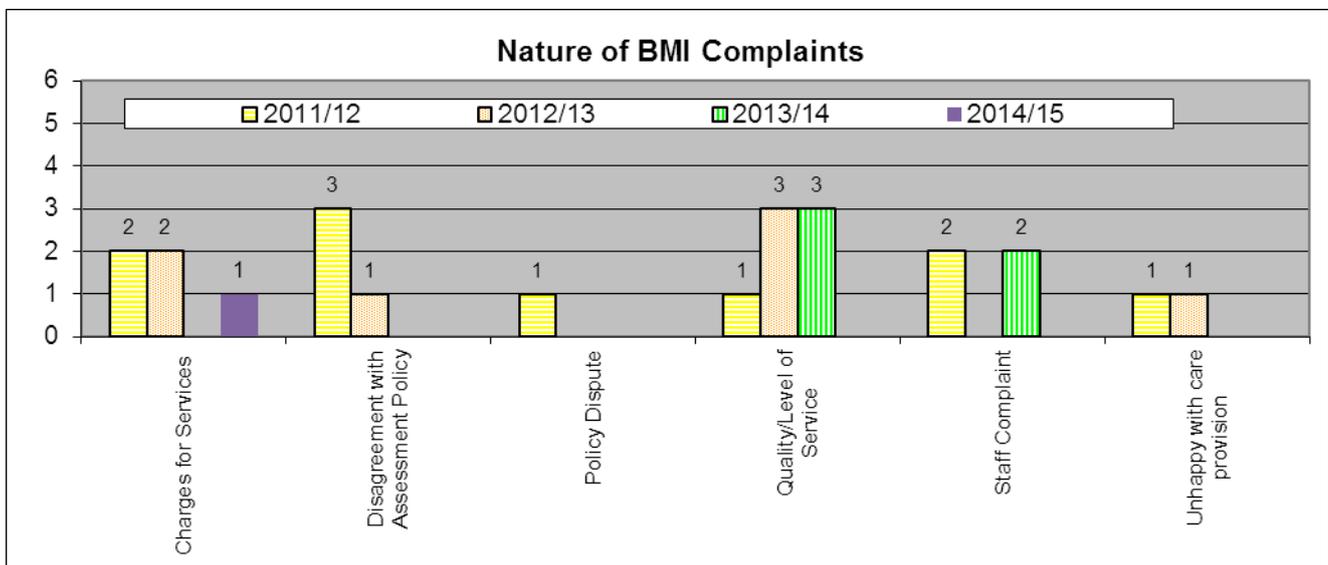


A comparison of the nature of complaints over the past four years is detailed below.



Note re: 2011-2012 figures- The higher than normal number of stage 2 complaints in this year was due to a group complaint in respect of changes to day services at Rondel House.





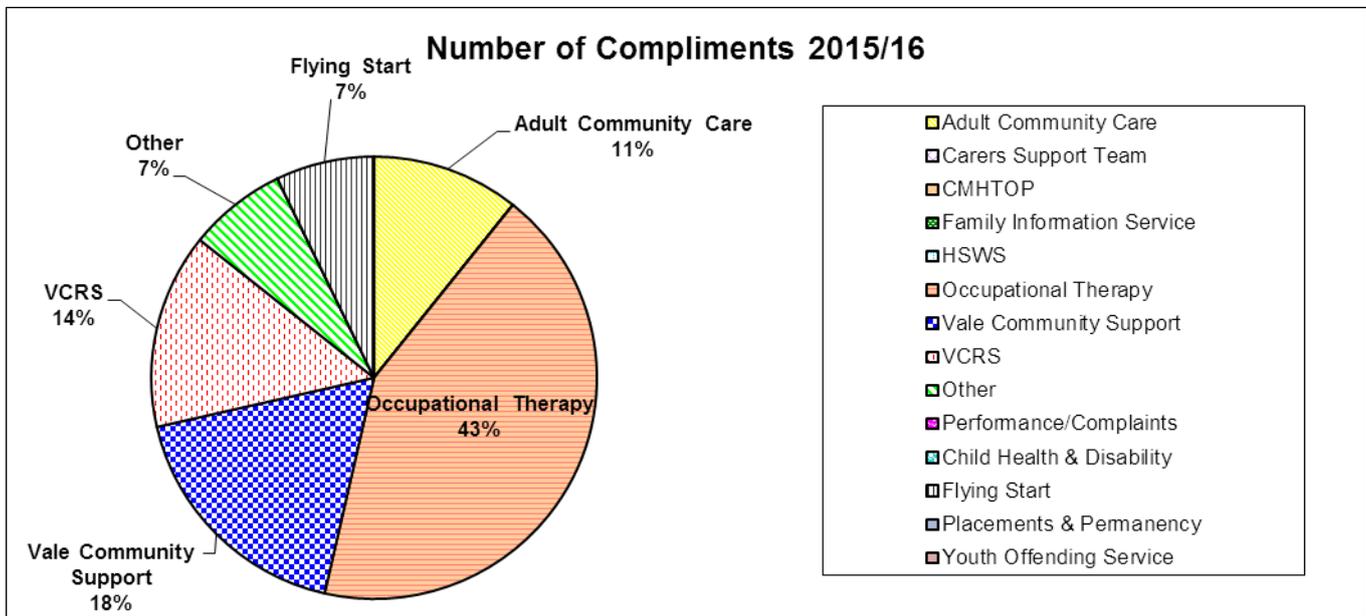
Complaints regarding the quality or level of service were the most common during this reporting period in adult services. In Children’s Services complaints against staff and complaints regarding the quality or level of service were the most common along with complaints regarding the quality or level of service. This is typical of previous years, partly because of the sensitive and sometimes contested nature of the work which staff undertakes but also because the statutory basis for Social Services is very complex. A number of complaints arise in circumstances where staff have acted appropriately in delivering the Council’s policies and priorities but this is not acceptable to families. The improved performance in achieving early resolution of complaints demonstrates the extent to which good investigation can provide opportunities for reconciling different perceptions.

It is often possible to demonstrate that staff have made reasonable decisions, based on all relevant considerations, and acted fairly. Where staff have acted inappropriately or without sufficient sensitivity, managers remain committed to taking effective action in response and to insist on the highest standards of practice in all cases, especially in treating people with respect for their dignity. Similarly, where the Directorate has not kept to its commitments or failed to meet service standards, we are quick to apologise and to rectify matters. In seeking continuous improvement, complaints are used to ascertain the need for reviewing policies and procedures.

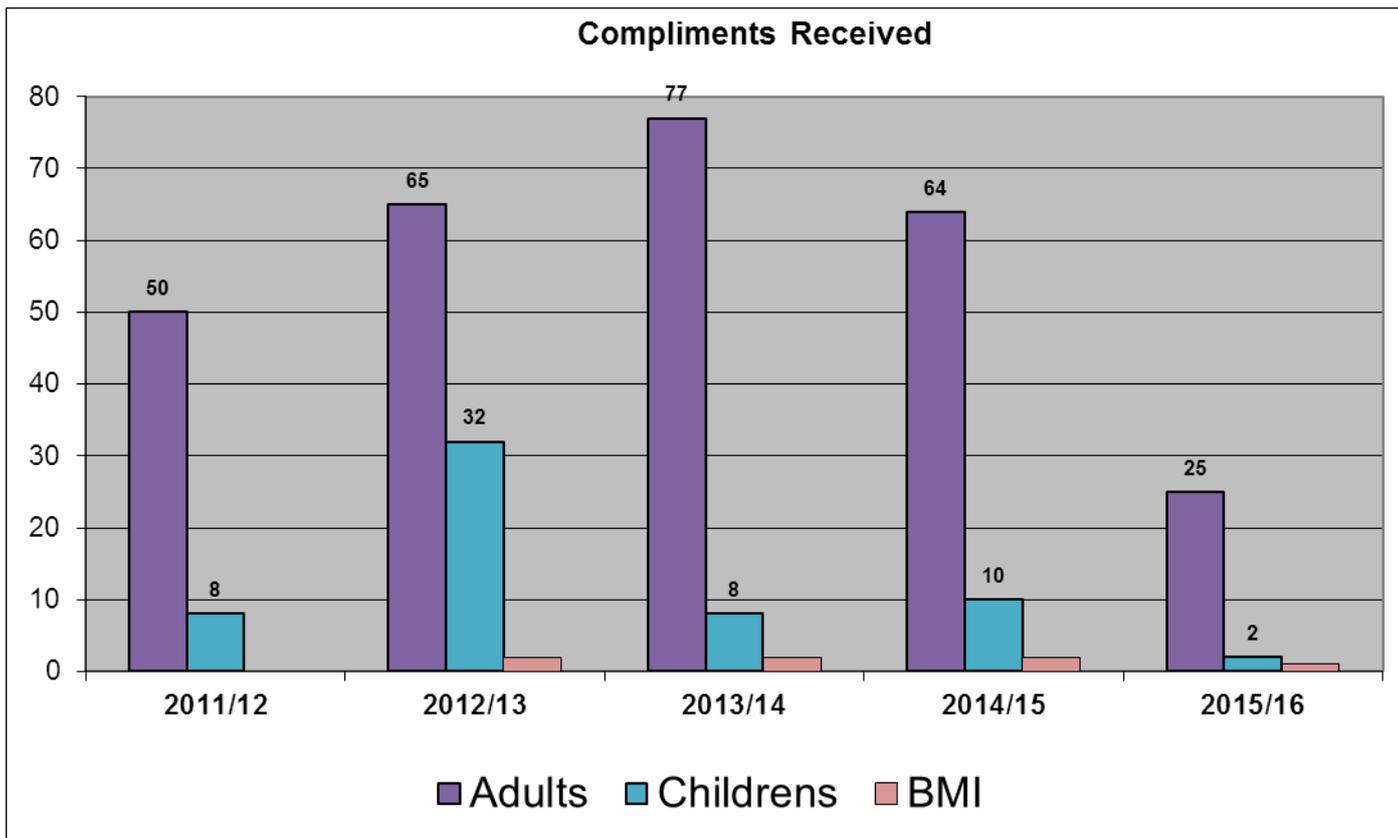
### 7.7 Compliments

Compliments are also regarded as important information that can be used to identify good practice. Compliments are recorded and reported monthly to managers.

28 compliments were received during 2015-16 compared to 76 during 2014/15. The decrease in the number of compliments reported may be due in part to the loss of some data as a result of staffing issues within the team. Prior to the completion of this report requests were made to staff for the re submission of any compliments sent to the complaints team during September – December 2015.



All of the compliments were about the excellent service or support the service user had received and often named specific staff that the individual felt had provided over and above the expected service. It is acknowledged that certain service areas may be better placed than others to receive compliments and some teams are more effective at recording/reporting compliments than others.



## **8. CUSTOMER FEEDBACK – THEIR EXPERIENCE OF THE COMPLAINTS PROCEDURE**

In the past customer feedback has been collated and reported corporately. During 2014-2015 discussions took place with the Corporate Complaints Officer regarding customer feedback and it was decided that Social Services would no longer be part of the survey as it has been found that complaints feedback is subjective and influenced by the outcome of the complaint, i.e. if the complainant was happy with the outcome of their complaint they were happy with the way their complaint had been dealt with and vice versa. For this reason some local authorities do not specifically survey complainants. Current departmental questionnaires contain a section specifically on complaints and compliments and the Policy and Assurance Officer reports on this feedback in her annual report.

Following consultation with the Policy and Quality Assurance Officer a questionnaire has been developed. The Complaints Officer will liaise with the Policy and Quality Assurance Officer on the collection and reporting of feedback received from complainants.

## **9. LESSONS LEARNED**

Complaints from service users provide the Directorate with valuable information on how to improve its services. Formal action plans are usually only developed from recommendations at Stage 2, Stage 3, or by the Ombudsman. The outcomes from a Stage 1 investigation often highlight shortfalls in service delivery which can be dealt with at team, departmental or corporate level.

- To clearly explain to families our duties under the All Wales child protection procedures.
- Explain to family members the rationale behind decisions.
- To ensure that family members understand the implications of court proceedings.
- Ensure service users understand charging policies.
- Ensure there is effective communication with family members.
- The importance of negotiating flexible financial arrangements with service users.
- The need to explain to young people the court/complaint processes.
- To ensure appropriate support is provided to family members.
- To ensure the need to explain to service users the limitations of our resources.
- To ensure the need to explain our quality monitoring process and duty process.
- To ensure that discharge planning meetings take place.
- To ensure social workers fully engage with family members.
- Ensure service users are advised in any changes to appointments.
- Respond to Access to Records requests within a timely fashion.

- To ensure confidential information is not sent to wrong address.
- To be aware of not causing embarrassment when discussing personal care.
- Ensure service users are advised in any changes to appointments.
- Ensure the needs are being correctly met.
- To ensure the importance of clear process given to service users.
- The importance of effective communication with agency staff.
- The importance of managing people's expectations and to communicate any progress/lack of progress.
- The importance of effective & timely communication with service users.
- The need to keep people informed of how investigations are progressing. The importance of promptly appointing investigators.
- The importance of observing designated parking spaces.
- Importance of responding to services users regarding contact promptly.
- Importance of following up referrals with external agencies. Ensure students are advised of issues that can arise when making referrals to partner agencies.
- The need to closely monitor the support to families.
- To take care when raising invoices and credit notes.
- The importance of taking into account family dynamics when planning meetings.
- The importance of remaining professional at all times when dealing with families.
- The importance of dating documents accurately, and checking documents before signing.
- Ensure that people are made aware of the outcome of investigations.
- The importance of returning phone calls in a timely manner.
- The importance of clarifying social work role.
- The importance of observing confidentiality with service users.
- The need to be mindful of any care proceedings.
- The importance of not to take not work related telephone calls in front of service users.
- The importance of providing written responses following verbal messages/information.
- To speak in a professional manner at all times.
- The importance of acknowledging letters with a timescale for response.

- Review the mail distribution process.
- To remind staff of the importance to deal with service users and their families in a sensitive manner.
- To reinforce that staff put decisions in writing following discussions with service users/clients
- Ensure service users are advised in any changes to appointments.
- Advance circulation of agenda's & review previous minutes at each meeting (already implemented).

## **10. ACHIEVEMENTS IN 2015/2016**

- The Directorate's complaints policy was reviewed and amended to ensure compliance with the requirements of the Social Services and Well Being Act.
- The Complaints Officer has worked increasingly with the Public Service Ombudsman on complaints that are not resolved following Stage 2 of the complaints process.
- The Complaints Officer can now work agilely and this has improved communication and enabled out of office working.
- The Complaints Officer has supported service users making complaints regarding provider services in line with the new requirements.
- A training programme was offered to all social services staff following the introduction of the new complaints procedure.
- A customer feedback questionnaire has been developed.
- The number of Independent Investigators and Independent Persons on the database has increased.
- The monitoring and evaluation process has been further developed to improve the ability of the Directorate to learn from complaints and to use the outcomes and recommendations arising from complaints to improve services.
- Information has been provided for biannual Corporate Complaints report.
- The Complaints Officer has worked with AWCOG and the Welsh Government to ensure the complaints procedure is compliant with the Social Services and Well Being Act. The AWCOG network continues to be a valuable source of information and advice.
- The Complaints Officer contributed to the monthly Quality Assurance – Provider Performance Group.
- The Complaints Officer has liaised with the appropriate officers to ensure complaints information is compliant with the requirements of the Welsh Language Act.

## 11. OBJECTIVES FOR 2016/2017

During 2016/2017, the priorities for this service are to:

- Improve the response timescales at Stage 1 by reviewing the support offered to managers and how this information is collated and reported.
- Improve the number of compliments reported by implementing strategies for the routine collection of this data.
- Implement the use of the customer feedback questionnaire.
- Further increase the number of Independent Investigators and Independent Persons on the database
- Continue to work with the Corporate Complaints Team on the process for collating feedback from complaints.
- Continue to share information with the Quality Assurance – Provider performance Group.
- Further develop the monitoring and evaluation process to improve the ability of the Directorate to learn from complaints and to use the outcomes and recommendations arising from complaints to improve services. Provide quarterly reports on Lessons Learned.
- Contribute to the Corporate Complaints reports.
- Support complainants in relation to complaints regarding provider services.
- Implement the policy for dealing with vexatious complainants.

Amanda Green  
July 2016