



Customer Opinion  
and  
Organisational Learning in  
Adult Social Care

Annual Report  
2017-2018

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# Introduction

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.

Borough of Poole has 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. This requires 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 2017 to 31 March 2018. It aims to:

- review the management and performance of the statutory complaints and representations process in 2017/18 (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

Borough of Poole Adult Social Care highly values the opinion of its customers 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 2017/18, the number of complaints received decreased by 4% from 67 the previous year to 64. Communication remained the most common theme of complaints; this has not changed from the previous two years:

- poor communication was raised in 35 complaints;
- issues of a financial nature were highlighted in 24 complaints;
- professional practice was cited in 17 complaints.

33 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 social care operational teams.

102 compliments were received this year, as well as 61 messages of thanks and 66 other pieces of positive feedback.

To put complaints into perspective, in the period from April 2017 to March 2018 Adult Social Care received over 42,000 telephone calls to the Business Support Team and over 11,000 calls to Helpdesk, including reporting safeguarding concerns, calls to the Crisis Loan Line for assistance and contact calls to social care practitioners.

In 2017/18 Adult Social Care received over 4,660 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

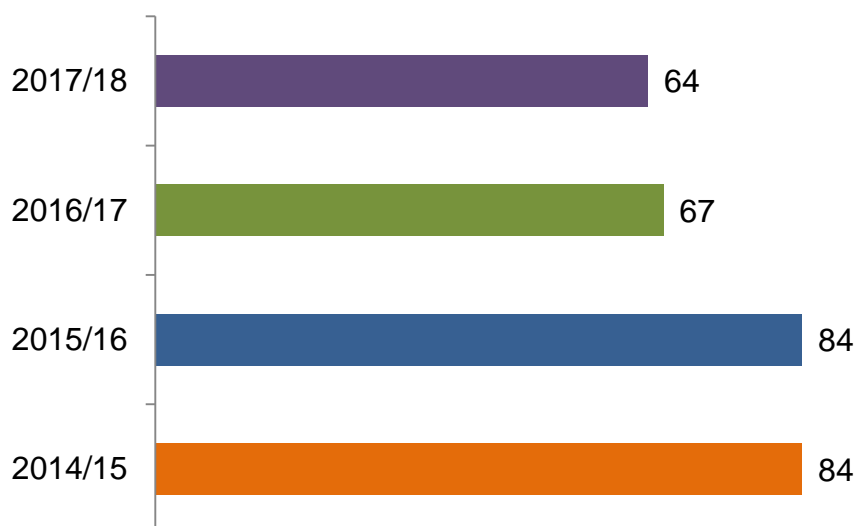
An investigation may be carried out if requested by the complainant, or if it is judged by the Complaints Manager to be the best way to respond to the issues raised.

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

The complainant can also approach the Local Government and Social Care Ombudsman (formerly the Local Government Ombudsman) at any stage of the complaint.

## Summary of complaints activity in 2017/18

### Complaints received



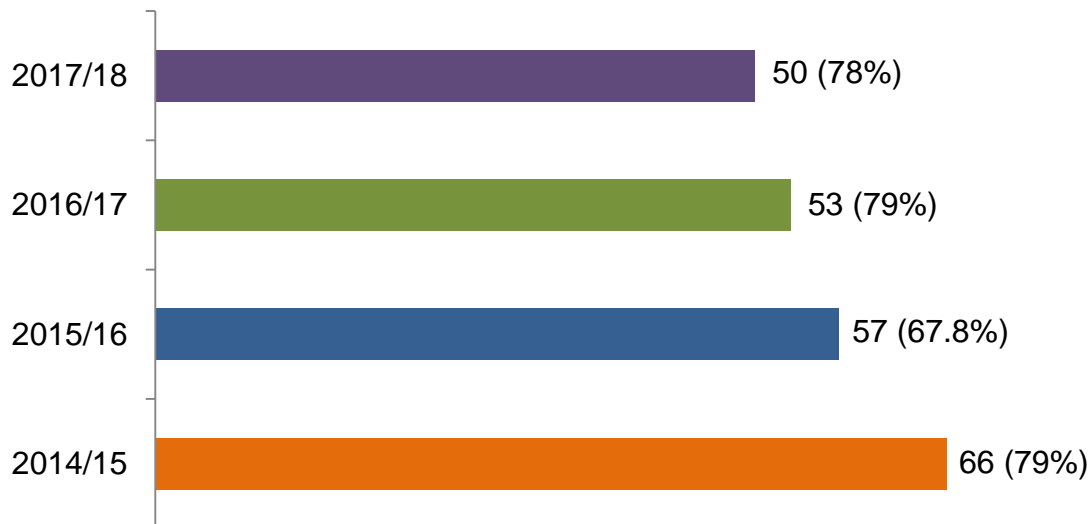
### Acknowledgement of complaints

	Acknowledged within			
	3 days (required by legislation)	4-6 days	7 days	8 days
<b>2017/18</b>	63 (98%)	1	0	0
<b>2016/17</b>	63 (94%)	3	0	1
<b>2015/16</b>	78 (93%)	6	0	0
<b>2014/15</b>	76 (91%)	6	2	0

### Complaints resolved by local resolution, formal investigation and via Local Government and Social Care Ombudsman (LGSCO)

	Complaints resolved by		
	Local resolution	Formal investigation	LGSCO
<b>2017/18</b>	84% (54)	2% (1)	14% (9)
<b>2016/17</b>	90% (61)	5% (3)	5% (3)
<b>2015/16</b>	94% (79)	4% (3)	2% (2)
<b>2014/15</b>	88% (74)	2% (2)	10% (8)

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



## Formal investigations

One formal investigation took place in the year as detailed below:

### Complaint 1

A complaint was received from two residents in an Extra Care Housing scheme within Poole. The care and support provided by the on-site commissioned provider was felt by residents to have deteriorated when compared to the previous arrangements.

Highlighted concerns were investigated, including the provision of the support service, delivery of social and recreational activities, staff and management oversight, complaint handling and general communication and information from the provider.

Information was gathered from a number of sources, including the Adult Social Care Service Improvement Team, the Contracts Monitoring Team, social workers, assistant care managers and safeguarding adults practitioners. Residents were approached for their views and all were offered the opportunity to complete a detailed survey about the quality of the service they were receiving. The investigator met with managers from the commissioned provider, and met with residents face-to-face when this was requested.

Recommendations for newly commissioned services were identified.

### Outcome:

The majority of the complaint was upheld, with one aspect partially upheld.

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

Over the year **14 LGSCO enquiries were dealt with:**

- 3 of the enquiries were referred to the LGSCO in the year 2016/17, but work continued and final decisions were received in 2017/18;
- 11 of the enquiries were referred to the LGSCO in 2017/18, but 2 of these referrals were not accepted by the LGSCO for investigation; and
- of the 12 decisions received in 2017/18, 58% of cases (7 complaints) were not upheld. This compares favourably to the LGSCO national average where 37% of cases were not upheld.

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

## Complaint themes

This year we have changed the way we categorise complaints as we recognised that some complaints cannot always be categorised under a single theme. Themes are now granular, allowing us to be more specific in our recording and identifying key areas of learning and improvement.

<b>Complaint theme</b>	<b>Number of complaints encompassing this theme</b>
Communication (perceived inadequate communication, information and advice)	35
Finance (decisions around funding, invoice disputes/delays, self funders approaching the Council for funding, financial assessment)	24
Professional practice (level of support and guidance, feeling involved/empowered in assessment process)	17
Decision around assessment and eligibility	12
Policy/commissioning (decommissioning of services, respite policy)	10
Quality of domiciliary provision (including extra care)	7
Quality of residential or nursing home	3
Delay in providing a service	3
Safeguarding process	3

## Communication

Communication remains the most common area of complaint. Many of the complaints around communication relate to providing information in a timely manner and expectations in responding to contacts and queries from the adult who uses services and their family. Adult Social Care are looking to address this issue and consider what additional support can be provided to staff to improve communication.

## Financial (funding issues, charges or fees)

Whilst we have seen a decrease in complaints from individuals around being informed that they may be charged for services, we have seen an increase in people challenging 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. This includes individuals feeling empowered and supported during the assessment process.

## The lessons we have learnt from complaints

In many instances, outcomes to complaints are specific to the case, and there are no general learning points that would influence policy or procedure. 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.

In regards to learning from complaints that have involved financial issues:

- A communications training statement has been shared with relevant feedback officers across corporate services and Adult Social Care as per the LGSCO's recommendation. This is 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.
- 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.

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. This is already in practice for the newly commissioned Extra Care Housing provider and mobilisation of the new domiciliary care framework.



There were proactive discussions at operational team meetings around the importance of regular and effective communications with service users and their families with regard to development and progress with service planning and provision.

A new procedure has been developed to ensure there is a clear pathway and governance structure to manage growing demand from adults who have previously funded their own care but now need to approach the Local Authority for funding as they have depleted their capital. This is to ensure decisions are made quickly and that expectations are managed from the outset (including care home managers) and that the process is clearly defined and easy to use. Information and advice factsheets are being developed by the QA team for families and care home managers to communicate the process.

Consideration is being given to how to include the user's voice and experience within complaints training in order to reflect on the importance of communication in practice. This is likely to include user participation and internal staff factsheets on guidance.

## Equalities information

N.B. Carers do not have a Primary Support Reason, so any complainants who are carers have not been included.

<b>Primary Support Reason</b>	<b>2017/18</b>	<b>2016/17</b>
Physical Support - Personal care support	47% (30)	44% (30)
Physical Support - Access and mobility only	17% (11)	5% (3)
Learning Disability Support	16% (10)	14% (9)
Mental Health Support	6% (4)	5% (3)
Corporate (e.g. a complaint by a provider)	5% (3)	8% (5)
Support with Memory and Cognition	2% (1)	14% (9)
Sensory Support - Support for visual impairment	2% (1)	6% (4)
Social Support - Support to carer	2% (1)	1% (1)
Social Support - Substance misuse support	0	3% (2)

<b>Gender</b>	<b>2017/18</b>	<b>2016/17</b>	<b>2015/16</b>	<b>2014/15</b>
<b>Female</b>	56% (36)	57% (37)	56% (47)	60% (50)
<b>Male</b>	39% (25)	36% (24)	38% (32)	35% (29)
<b>Corporate (e.g. a complaint by a provider)</b>	5% (3)	8% (5)	6% (5)	6% (5)

<b>Ethnicity</b>	<b>2017/18</b>	<b>2016/17</b>	<b>2015/16</b>	<b>2014/15</b>
<b>White - English/Welsh/Scottish/ Northern Irish/British</b>	93% (60)	88% (59)	90% (76)	92% (77)
<b>Corporate (e.g. a complaint by a provider)</b>	5% (3)	8% (5)	6% (5)	6% (5)
<b>White any other</b>	2% (1)	3% (2)	2% (1)	2% (2)
<b>White Irish</b>	0	0	2% (2)	0

## 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:

“ Once I knew where I could complain to and to whom, it was brilliant. The staff were very polite and obliging...[Complaints Officer] kept Mum informed on everything, and everything that Mum mentioned to [Complaints Officer], she dealt with. My Mum and Dad are very grateful, as I am, for all the help and response we have had from [Complaints Officer] and the team...I am so pleased everything is being dealt with and has been turned around to make me feel safer, and happier. I know we are very grateful to [Complaints Officer], safeguarding adult practitioner and my social worker. Well done, and it's great to know we have your team to be there for us. ”

“ I was very grateful for the time and care that both [Complaints Officer] and [Locality Manager] took to help me and my disabled partner...They both made us more secure and less worried about our situation and the future. I want to say a big thank you for all the time and care and understanding shown to us. ”

“ I feel reassured that the complaints department listened and actioned my complaint to a reasonable standard.

Thank you to all concerned, especially [Complaints Officer] who was polite, courteous, informative and professional. ”

## Staffing

The part-time role of Complaints 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 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 Poole residents.

Consideration is being given to how to bring the complainant's voice to the training process, to emphasise the importance of user experience, in particular around communication.

25 Adult Social Care staff attended the training in 2017/18:

- 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;

- 96% 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 and more confidence to deal with any complaints effectively.
- A number of people suggested the course could be longer to enable them to go through more examples or to give them more time to explore interesting elements of the course.

Comments included:

- “ [Complaints Officer] was very experienced and knowledgeable in the info provided. It was all very relevant and beneficial. ”
- “ Really informative, [Complaints Officer] is a really engaging trainer, kept us all involved. The time went very quickly. ”
- “ Very informative and [Complaints Officer] kept it interesting, relevant and kept me engaged in the morning. Good balance of presentation and group work. ”
- “ Thank you. This training is very helpful in my job role. Interesting topics. ”

In addition to twice yearly scheduled complaints training the Complaints Officer has attended individual team meetings with various operational teams to undertake question and answer sessions about the process and organisational learning. This included a complaints information and awareness workshop with an operational team ahead of a Care Quality Commission (CQC) inspection.

Operational managers also receive feedback at team meetings on complaints and surveys so that they can cascade information, including trends and learning, to their teams.

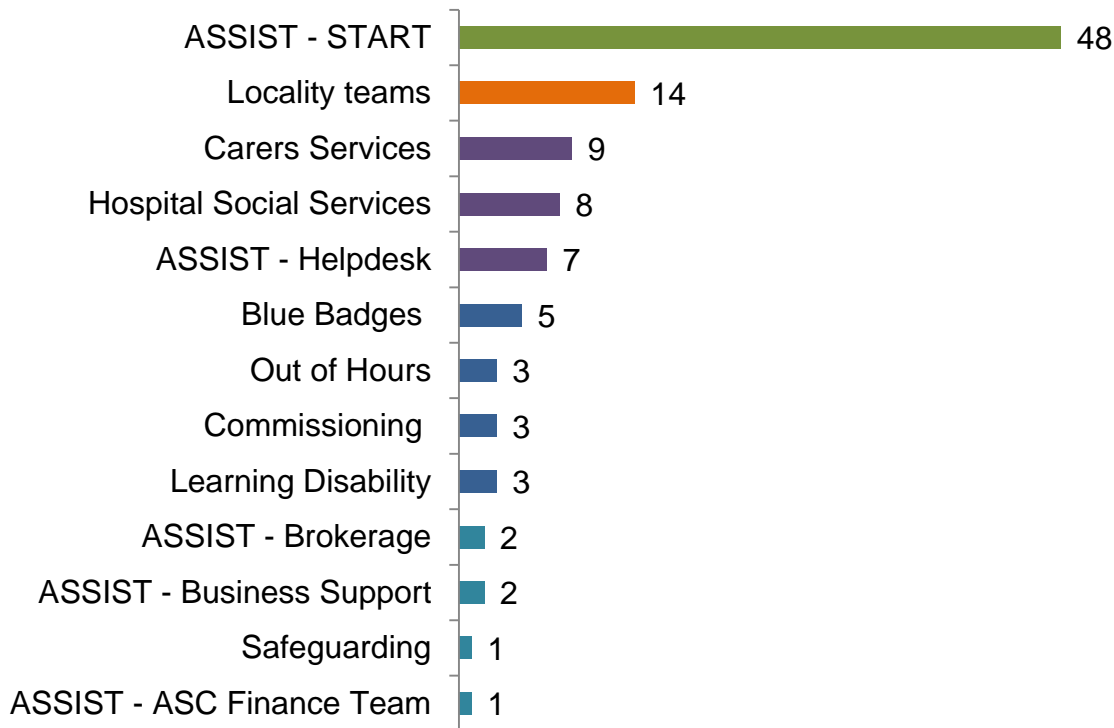
## Compliments

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 service offered. In addition to complaints, they can help us make changes to improve services further by identifying good practice.

**102** compliments were received this year, as well as 61 messages of thanks and 66 other pieces of positive feedback.

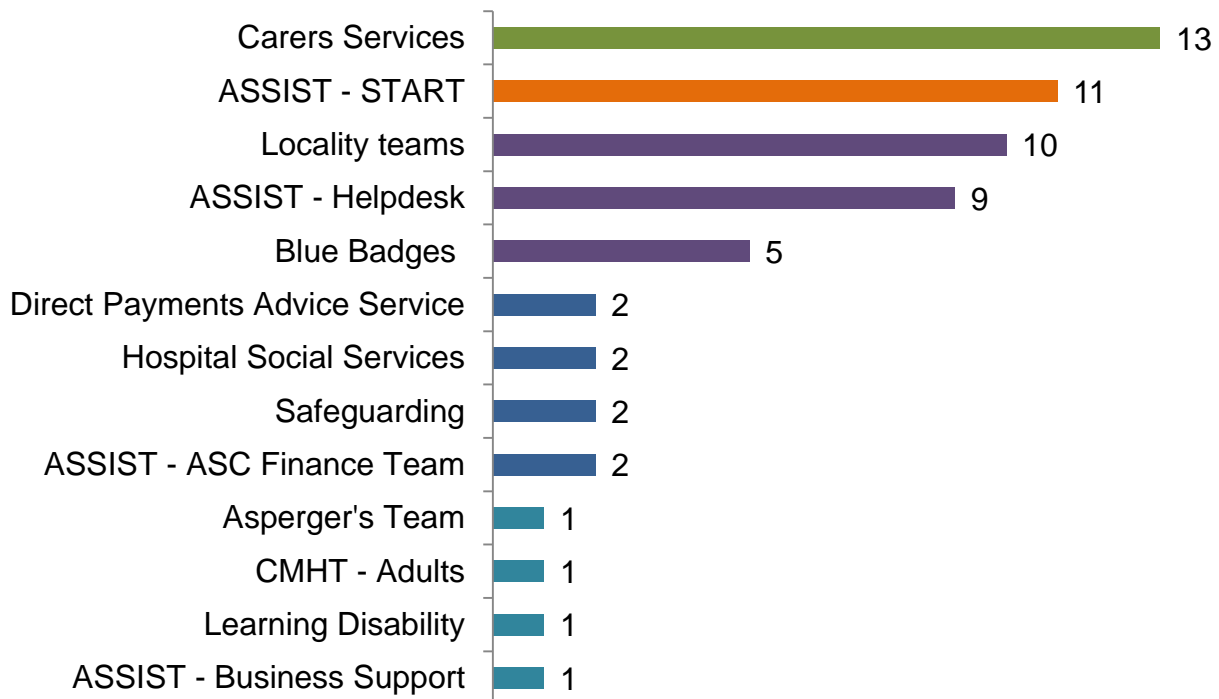
The largest number of compliments, thank you's and positive feedback were received by the following teams:

## Compliments



(N.B. Some compliments were addressed to more than one team.)

## Thank you's



Compliments and positive feedback are shared with staff on a weekly basis through the Unit 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 received is at [Appendix 1](#).

# Other forms of customer and community feedback

## a) Satisfaction surveys

### Department of Health Adult Social Care User Survey

In January 2017, 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. 469 people completed the questionnaire, a 36% 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 validation):

##### 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	Poole 2017/18	Poole 2016/17
QOL score	19.0	19.2

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

Response	Poole 2017/18	Poole 2016/17
I have as much control over my daily life as I want	79%	81%

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

Response	Poole 2017/18	Poole 2016/17
I have as much social contact as I want with people I like	44%	42%

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

Response	Poole 2017/18	Poole 2016/17
I am extremely/very satisfied with the care and support services I receive	60%	64%

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

Response	Poole 2017/18	Poole 2016/17
In the past year, I have generally found it very easy to find information and advice about support, services or benefits	76%	82%

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

Response	Poole 2017/18	Poole 2016/17
I feel as safe as I want	71%	68%

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

Response	Poole 2017/18	Poole 2016/17
Care and support services help me in feeling safe	87%	90%

Performance has declined in regards to 5 out of 7 of the ASCOF indicators. Results around having enough social contact and feeling safe have improved; however, measures around quality of life, access to information and advice and overall satisfaction have dropped.

In response to the above findings a number of actions have been taken:

- Collaboration with the Council for Voluntary Services and other stakeholders has enabled the Council to secure funding from 'place based social action' to commence a project on tackling loneliness in Poole.
- Work continues to improve and re-invigorate the information and advice offer within Adult Social Care, one example being refreshing frontline staff knowledge and use of My life my care.
- Lower performance in satisfaction caused particular concern; this has led to in-depth analysis of the reasons why people were either extremely, very or quite dissatisfied with services. The analysis highlighted this may be a result of experiences of homecare, predominantly due to missed or late calls, rotas, inconsistent care, lack of staff training and language barriers. Further work is being undertaken in the form of semi structured interviews with a small sample of individuals across Bournemouth and Poole who are in

receipt of homecare services and indicated they were dissatisfied. This will allow a more in-depth understanding of their experiences and the information will be used to develop a service improvement plan.

## 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 2017, 128 surveys were completed and out of the people who answered each question:

- 75% (76 people) said START supported them to build their confidence;
- 70% (74 people) said the service enabled them to maintain maximum possible independence, choice and control;
- 62% (66 people) said they strongly agreed that they had been involved as much as they wanted to be in the decisions about their support;
- 82% (90 people) said staff were friendly and courteous and 82% (92 people) said assistants were friendly and approachable;
- 65% (66 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 receive information and advice, have a visit and/or an assessment by a visiting officer.

In 2017, 69 people completed a survey and over 90% said that they found the visit helpful and informative, that their needs were identified and that they were referred to the right service.

Many positive comments were received. One person said that 'it was so nice to discuss problems with someone so understanding' and a daughter said that 'Mum's situation was fully understood'.

## 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 survey, we identified 94 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 feedback on the new Out of Hours service.



- A small focus group of service users and carers has been established to further engagement around the information and advice offer, in particular ASC factsheets and the forthcoming lead on My life my care online service.
- The Complaints Officer and Service Manager for Older People, Physical Disability and Learning Disability continues to run a Carers Steering Group.
- The Learning Disability Partnership Board continues to drive service improvements through the change action groups as part of the Big Plan. Events were held throughout the year to engage with adults, families, carers and providers, for example the Housing Information event, provider forums and Big Plan consultations.
- Poole Over 55s forum continues to be supported by the Council and joint working with Poole Well-being Collaborative and Council for Voluntary Services. Membership is growing and projects around social isolation are being developed including partnership in the Place Based Social Action funding bid won to tackle loneliness in Poole. PO55 took the lead on the well attended and successful Full of Life Day celebration event in Poole.
- A number of quality assurance surveys were developed for internal teams to improve feedback around services, e.g. Supported Living Services, Shared Lives and Direct Payments.
- A schedule of care provider events was held at the Civic Centre and included guest speakers from the Dorset Clinical Commissioning Group (Dorset CCG), Short- and Long-Term (SALT) team and safeguarding. The events were based around information sharing with a more formal aspect at the end to allow engagement with the providers. The events were very well received and attended and there is now a schedule of events planned for the coming year.
- Within the Proud to Care initiative a recruitment fair was held in Poole as well as the Daily Echo care awards.
- The QA team worked with care providers and the Dorset Homecare Association to produce promotional material based on an interview with a male carer and his experience of the caring profession. The poster is now being promoted across Poole to encourage male carers into the industry in an attempt to improve recruitment.
- A care provider newsletter continues to provide regular updates and communications.
- The QA team created a Facebook page for the Poole Dementia Action Group and continue to support them with promotion and maintenance.
- Work continues to promote Adult Social Care factsheets with GPs, community centres and libraries. The factsheet files have now been rolled out to all 30 pharmacies across Poole who welcomed the information to use with their patients.
- Since the factsheets replaced our leaflets, there have been over 39,000 downloads from the factsheet page with Comments, Compliments and Complaints, START and The 12 week Property Disregard being the most popular.

## Appendix 1 – a selection of compliments received

- “ I would like to thank all the members of the START team. They have, without exception, been unfailingly considerate, kind, patient, efficient and above all, caring. In fact we could not have managed without them - they have, for me especially, been literally a godsend, making our lives much easier and I feel, have contributed greatly to my husband's recovery. I cannot commend them highly enough and I thank them with all my heart. They have supported me through a very difficult time; I shall miss them enormously and I am so grateful, more than I can say. ”
- “ I followed up your call and Mrs J wanted me to pass on her thanks to you. She said you were calm and reassuring and really listened to her and she felt confident things would move forward. When I contacted her she was calm and this made my intervention with her incredibly straightforward. ”
- “ Miss G had discussions with Poole Social Prescription Service. Everything is very positive and she is looking forward to her year ahead. She thanked the Helpdesk officer, saying that none of this would have been possible without his input; she feels that her voice has been heard and that's all she needed for her to come out of her depression and get on and make her life better. She's been able to do simple tasks like make her own dinner from scratch. It has made a world of difference to her and she couldn't thank him enough for everything. ”
- “ I would like to take this opportunity to thank you for the chance to use the beach hut at Sandbanks. I thoroughly enjoyed the two days I had in the hut. The weather was kind for me and it was a pleasure to be by the sea. I have also been in receipt of vouchers for the carers Take a Break scheme. These vouchers have been so beneficial to me, not only as a break but also for my own health. Many, many thanks. With very grateful thanks to all involved at CRISP carers support. ”
- “ Our social worker has a very calm and supportive nature which was very reassuring at a difficult time...He explained the process of requesting a care package through Brokerage to the family and Dad. He was very clear about care not being available and explaining what was happening. He has a very nice manner communicating with Dad and the family. He always treated my father with respect...All parties felt discharge home was the priority for my father. He worked very hard liaising with hospital staff, Dad and family to ensure Dad's care was put in place at home to avoid any more delays for a successful discharge. He has continued to provide support to the family since discharge to ensure Dad has the correct level of care. I had confidence he was doing his best for Dad. He made time to chat to Dad on the hospital ward. I always felt I could phone him for an update on Dad's care. ”
- “ You have been an absolute star and the loving kindness that you especially and many others have shown my Mum over the past months has been so refreshing in this difficult world in which we live. Thank you so much. I too have noticed how much better Mum is, every day she is getting better and better. The care you have put in place is much needed and perfect giving Mum the pleasure of living in her own home with all that is familiar around her. You do a great job. It's sad that you are no longer going to be attached to Mum's case but if you are ever free for coffee in Poole I would love to meet up and buy you one. All the very very best and my family's heartfelt thanks. ”

## 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, to request a further meeting or they can approach the Local Government 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, 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 Decisions received in 2017/18

### Cases referred in 2016/17

#### **Complaint 1**

This was a complaint made to the NHS and the Local Authority and was managed under the Protocol for Dealing with Joint Complaints. Mr A complained that the hospital and Council did not put in place appropriate support when his wife was discharged from hospital. The Ombudsman found no fault with the way the hospital and Council handled Mrs A's discharge or its assessment of her needs.

**Final LGSCO decision: Not upheld**

#### **Complaint 2**

Mr Y complained that he was not provided with intermediate care services free of charge following a hip operation at Bournemouth hospital. The Ombudsman did not uphold that Mr Y was entitled to this service based on eligibility. However, the Ombudsman did find that the Council did not provide the complainant with all the relevant information for him to effectively deal with his complaint and the Council agreed to make a payment of £150 to Mr Y for his time and trouble in progressing his complaint.

**Final LGSCO decision: Not upheld**

#### **Complaint 3**

Mr X complained that the Council omitted to advise him that his mother, Mrs Y, would have to contribute towards the cost of her care. He also complained that the Council delayed in carrying out a financial assessment and in calculating her contribution and that care had already begun before Mrs Y was informed of the charges she was incurring. The Ombudsman concluded that the Council did not fully record its discussions with Mr X and Mrs Y in relation to the financial assessment and possible contribution and subsequently delayed in notifying Mrs Y of the contribution. The Ombudsman cited this caused Mrs Y an injustice and recommended that the outstanding contribution charges were partly waived, which the Council agreed to.

**Final LGSCO decision: Upheld**

### Cases referred in 2017/18

#### **Complaint 4**

Miss B complained that the Council did not advise her that it would make charges for her home care package and sent her an invoice backdating the charges for several months. The Ombudsman found that the Council gave incomplete advice about how a change in Miss B's income would affect her payments towards her care. It recommended that the Council should reduce the amount it charged, come to a payment arrangement with the complainant and share the decision with relevant staff.

**Final LGSCO decision: Upheld**

## **Complaint 5**

Mrs X complained on behalf of her father, Mr Y, that the Council did not properly consider the request for 2 weeks residential respite services while she was away or take account of all his needs when carrying out the assessment. The Ombudsman found no fault and said that the Council considered her request and assessed Mr Y's needs appropriately.

**Final LGSCO decision: Not upheld**

## **Complaint 6**

X complained that the Council took too long to conclude a safeguarding enquiry and to decide that clients could return to their care. They complained that not only did this mean loss of earnings but it also caused them and their clients distress and frustration. The Ombudsman stated that the Council properly considered the complainants' registration as carers during and following the safeguarding investigation.

**Final LGSCO decision: Not upheld**

## **Complaint 7**

Miss X complained about the amount of contribution required to pay towards the cost of the care package and stated that she felt the Council did not support her in finding suitable domiciliary carers. The Ombudsman found no flaw in the support the Council provided to assist Miss X in finding carers or in the way it assessed Miss X's contribution to the care charges.

**Final LGSCO decision: Not upheld**

## **Complaint 8**

Mr Y complained on behalf of his mother, Mrs X, that the Council did not regard his notification that the payment of Mrs X's contribution for care at the home would be withheld because of the poor care Mrs X received whilst residing there.

The Ombudsman's draft decision finds that the Council did not act on Mr Y's notification that he did not intend to pay Mrs X's assessed contribution and this necessitated Mr Y's complaint and put him to the time and trouble of pursuing the Council. The Ombudsman recommended that the Council apologise to Mr X and undertake a review of how such notifications are handled in the future; however, the LGSCO found no grounds to recommend the Council waive Mrs X's assessed charge towards her care costs for this period.

**Draft LGSCO decision: Upheld**

## **Complaint 9**

Mrs A complained about the Council's decision to treat her mother as having notional capital because she gave away £150,000. The Ombudsman stated that because the Council did not quote fully from the Statutory Guidance, it meant that the question of motivation was not considered appropriately. The Ombudsman recommended that the decision was reconsidered in line with the Care & Support Statutory Guidance. This was carried out; however, the outcome for the complaint remained not upheld.

**Final LGSCO decision: Not upheld**

### **Complaint 10**

Mrs X complained on behalf of her mother Mrs A, that the Council delayed carrying out a financial assessment for domiciliary care costs until after these costs had accrued. The Ombudsman considered there was an avoidable delay that led to charges which could have been prevented. Therefore the Ombudsman recommended that the Council removed 2 weeks of charges from the total amount due, which was agreed.

**Final LGSCO decision: Upheld**

### **Complaint 11**

Ms B complained on behalf of Mr C that the Council acted unreasonably by seeking to recover an overspend of direct payments for day care, not notifying Mr C of the problem for 12 months or informing him of his right of appeal against the decision. The Ombudsman concluded that the Council was not acting unreasonably in seeking to recover the overspend though it ought to have raised the issue sooner; however, Ms B should have been aware the payments only covered three care episodes per week and not four as this was clearly set out in the support plan.

**Final LGSCO decision: Not upheld**

### **Complaint 12**

Ms C complained that the Council overlooked her repeated requests to review her carer's assessment. The Ombudsman decided that the Council did not carry out a review of the assessment in a timely manner. The Council agreed to the Ombudsman's recommendations to: complete the assessment without delay and backdate any support offered; pay Ms C £300 for the distress caused and time and trouble in making the complaint.

**Final LGSCO decision: Upheld**