

# Listening To & Learning From Our Customers

2013/14 Annual Report on Customer Feedback  
including Complaints for Children, Adults &  
Health Department

## Executive Summary

This executive summary highlights key points from the analysis of Customer Feedback 2013/14. The report looks at the range of customer feedback (Compliments, Comments, Concerns and Complaints).

### Compliments

The total number of compliments fell slightly on the previous year (341 compared to 342 in 2012/13), which could be due to a number of factors as highlighted in the complaints section below. Overwhelmingly the compliments demonstrate the high level of customer service and professionalism provided by staff. Customers have explained how appreciative they are of the service provided and the big difference their input has had on their lives.

### Comments

The Department actively gathers feedback from our customers; e.g. stakeholder events, consultations, focus groups. This is vital in understanding our existing and potential customers' views and shaping the way we deliver services. Appendix two provides examples of feedback and what we did with the comments.

### Concerns and MP enquiries

Concerns fell in 2013/14 (202 compared to 213 in 2012/13). Of the 202 concerns only 4 became complaints. Concerns are issues raised by the service user or carer where they are happy to resolve the problem directly with the key team or service. They are advised that if they remain dissatisfied they should contact the Complaints & FOI Team to register their complaint.

The number of MP enquiries received during 2013/14 has also fallen (217 compared to 283 in 2012/13). Some of the enquiries related to:

- Queries about banding allocation in relation to the Choice Based Lettings system;
- Availability of suitable properties for particular areas in the district;
- Advice on homelessness, and eligibility for a property;
- Disagreement with Council decisions over funding for adult care;
- Queries around support to people living in an Extra Care Housing whose needs change;
- Request for the Council to use its discretion over Home to School transport policy;
- Queries around school admissions and
- Requests for information and advice around support from children's services for families.

### Complaints

The Department has continued to see a reduction in the number of complaints received (225 compared to 253 in 2012/13), against a backdrop of increasing public expectations. The decrease could be due to a number of factors including:

- more people choosing to purchase adult care services themselves
- a decrease in the number of home care hours provided
- fewer people in receipt of a council commissioned adult care service as the number of direct payment recipients increases (the local authority can only handle complaints about what it is responsible for and therefore cannot consider complaints about services which the individual purchases directly themselves).
- the promotion of complaints handling best practice and customer service standards with providers over recent years.

Of the 225 complaints, which reached completion during the period, 57% were upheld or partially upheld, 31% were not upheld, 5% were withdrawn and no conclusions could be drawn in 7% of the cases.

Six formal enquiries were received from the Ombudsman during 2013/14 (four in 2012/13). The Ombudsman was satisfied with the actions or proposed actions of the local authority in five cases. There was evidence of maladministration and injustice in one case and this related to the lack of Speech & Language Therapy service provided in line with the statement of special educational needs.

Communication issues remain the most frequently raised reason for complaint.

During 2012/13 the department brought together the managing of compliments, complaints and requests for information into one team. It also streamlined information to customers and staff. A number of actions have been identified for 2014/15 including preparing staff and customers for understanding the appeals and complaints processes within the new 0-25 service.

Appendix three provides some examples of the service improvements arising from complaints.

This report focuses on customer feedback from 1st April 2013 to 31st March 2014. It includes feedback on Children's and Adults Social Care services, as well as Education and Housing services. From April 2013 the responsibility for Public Health transferred to the local authority. It is important that the Department gathers people's views about the services they receive. Feedback can be broadly divided into four types – Compliments, Comments, Concerns and Complaints.

It is necessary in some parts of this report to separate the adult and children's social care complaints from those which are handled under the council's corporate complaints procedures (for example, complaints about education and housing services). This is because they are handled under slightly different complaints procedures:

- the statutory procedure for Children's Social Care is issued under the Children Act 1989 Representations Procedure (England) Regulations 2006 and accompanying Statutory Guidance *Getting the Best from Complaints*.
- the statutory process for Adult Social Care issued under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and accompanying Statutory Guidance *Listening, Responding, Improving*.
- the statutory process for Public Health issued under the NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012.
- South Gloucestershire Council Public Complaints Procedure (corporate complaints procedure).

## Contents

	Page
<a href="#"><u>Compliments Overview</u></a>	6
<a href="#"><u>Comments Overview</u></a>	7
<a href="#"><u>MP enquiries and Concerns overview</u></a>	9
<a href="#"><u>Complaints Overview</u></a>	10
<a href="#"><u>Analysis of complaints</u></a>	11
<a href="#"><u>Improving services from complaints</u></a>	14
<a href="#"><u>How quickly are we responding to complaints?</u></a>	15
<a href="#"><u>Who is using the complaints procedure</u></a>	16
<a href="#"><u>Financial aspects of complaints</u></a>	18
<a href="#"><u>Training</u></a>	19
<a href="#"><u>Monitoring effectiveness and customer satisfaction</u></a>	20
<a href="#"><u>Management Audits</u></a>	22
<a href="#"><u>Reporting on achievements of actions from 2012/13</u></a>	23
<a href="#"><u>Actions for 2012/13</u></a>	24
<a href="#"><u>Appendix One – compliments received year on year by team</u></a>	25
<a href="#"><u>Appendix One – examples of compliments received</u></a>	26
<a href="#"><u>Appendix Two – examples of comments received</u></a>	29
<a href="#"><u>Appendix Three – complaints received year on year by service</u></a>	30
<a href="#"><u>Appendix Three – examples of learning from complaints</u></a>	31
<a href="#"><u>Appendix Four – Equality and Diversity</u></a>	33

## Compliments Overview

- This section looks at compliments received from customers. Figure 1 compares the compliments received in 2013/14 with those received in previous years. Overall the total number of compliments has remained the same with an increase in compliments recorded for Integrated Children's Services and a reduction in those received for Adult Care Services. This could be due to a number of factors including:
  - an increase in the number of Vinney Green Secure Unit compliments received
  - more people choosing to purchase adult care services themselves
  - a decrease in the number of home care hours provided
  - fewer people in receipt of a council commissioned adult care service as the number of direct payment recipients increases (the local authority can only handle customer feedback about what it is responsible for and therefore cannot accept compliments for services which the individual purchases directly themselves).

Fig 1: Compliments by year	2011/12	2012/13	2013/14
<i>Adult Care Services</i>	317	262	192
<i>Integrated Children's Services</i>	23	71	142
<i>Health &amp; Wellbeing</i>	0	0	2
<i>Corporate (Education &amp; Housing)</i>	30	9	5
<b>Totals</b>	<b>370</b>	<b>342</b>	<b>341</b>

- Appendix one shows a breakdown of the compliments figures across teams and services.
- The number of compliments for the Secure Service rose from 59 to 142 for the year, a substantial increase from any of the previous years and can be explained due to the increased practice of young people complimenting care staff when they leave the Unit. In total 28 young people submitted compliments. The young person who made the most complaints in the year also submitted 48 different compliments.
- Overwhelmingly the compliments demonstrate the high level of customer service and professionalism provided by staff. Customers have explained how appreciative they are of the service provided and the big difference their input has had on their lives.

## What positive things are people saying?

*[Member of Secure Unit staff] has been very supportive and calm throughout the time I have spent here. He is fair not just to me but he's fair to every yp and treats us all the same in a positive way.*

*I have been looking after my friend age 86 all the services who helped me were great and made a difficult job easier. I felt like I had won the pools the support was so wonderful.*

Appendix one also provides a further selection of some of the compliments received for each service / team.

## Comments Overview

5. The Children, Adults & Health Department is committed to seeking the views and experiences of a variety of stakeholders about the services it provides and commissions. Considerable efforts are made across the Department to gather this feedback. Examples of service improvements from customers' comments can be found in appendix two.
6. Comments are suggestions of ways to improve services. This section also focuses on the results of service user engagement where people's views of current services, or plans for future services, are sought.
7. The following are examples of different ways feedback is gathered from our customers:
  - stakeholder events / workshops
  - quality assurance monitoring
  - consultations
  - satisfaction surveys
  - focus groups and forums
  - comments books
  - course evaluations
  - during reviews and reassessments
  - contact with advocacy services in relation to children and young people's views
8. In relation to the Council's Children's Centres the recent Ofsted report stated '*Adults greatly value the support they receive, as well as the determination of staff to find solutions to difficulties which improve their lives. A comment made by one parent was typical of the views of most when they said, 'I never really felt good about myself until I came here.'*
9. The Family Intervention and Support Service (FISS) produced a film clip of parents discussing the service they had received for a multi-agency conference and also use this for training staff.
10. Each year, the Council conducts a survey of how satisfied parents and carers are with the availability of childcare. (The Council has a statutory duty to ensure the availability of 15 hours per week free childcare for 3 and 4 year olds and less disadvantaged 2 year olds).

The 2013 survey found that 74% of respondents had found local childcare which fully met their needs and 15% were partly satisfied. 76% of respondents reported no difficulty in finding the childcare they wanted.

11. All customers visiting the HomeChoice Team for housing advice are encouraged to complete a pre-paid postcard to provide feedback on the service they receive. Feedback from customers was broadly positive; 100% of respondents felt that staff listened to what they said and 92% of customers understood the advice they received.
12. The adult Customer Service Team sent 1,326 surveys and 224 were returned (17%). Of those returned 98% said they were highly satisfied or satisfied with the service received and the content of the self assessment form.
13. During August 2013 we worked with our providers, Healthwatch and the Care Quality Commission to design a Quality Assurance survey of our HomeCare service users. The resultant questionnaire closely modelled a Department of Health survey used in 2006 and 2009 which enabled results to be compared and trends identified.
14. In August 2013 we sent the questionnaire to all 998 our homecare service users with postage paid envelopes enabling responses to be returned to, and analysed by, Healthwatch. This used a unique identifier number to maintain anonymity but allow us to be alerted to and follow up with anyone who raised issues of concern.

The response rate was 42% and analysis of the 10 questions relating to satisfaction showed that:

- 4 questions indicated higher satisfaction ratings than in either the previous survey in 2006 and 2009.
  - 4 questions were scored higher than one of the two previous surveys but lower than the other.
  - 2 questions were scored lower than the results in either 2006 or 2009.
15. We will use these surveys results to work with provider partners as a group to drive sector led improvement, inform training and development, procurement. The survey results also provide us with detailed results for each individual provider to share with them and use as part of individual contract management, to build on success and support improvement planning.
  16. The development of the 0-25 services engagement exercise was completed in partnership with the South Gloucestershire Parents' and Carers' Forum. Over 300 people attended 8 events. Feedback from these events will be used to inform the development of the services which will commence in September 2014. In addition, the organisation, KIDS, has consulted with children and young people through a

number of events. Feedback from these events will also feed into the developments of the 0-25 service.

## What people told us and what we did with their feedback

<b>They Said</b>	<b>We Did</b>
<i>People considering having a direct payment told us that opening a separate bank account and providing financial monitoring was time consuming and complicated</i>	<i>We are implementing a payment card service for delivering and managing direct payments</i>
<i>Participants of parenting courses said they wanted more informaton about certain issues, for example ADHD</i>	<i>Facilitators have included information about this in the course now</i>

Appendix two provides further examples of some of the comments we received.

## MP Enquiries and Concerns Overview

17. Figure 2 provides a comparison of the number of MP enquiries and concerns received over the last three years.

Fig 2: MP Enquiries & Concerns	2011/12		2012/13		2013/14	
	<i>MP</i>	<i>Concerns</i>	<i>MP</i>	<i>Concerns</i>	<i>MP</i>	<i>Concerns</i>
<i>Adult Social Care</i>	55	192	50	173	44	124
<i>Children's Services</i>	105	16	87	18	65	46
<i>Public Health</i>	N/A				0	1
<i>Corporate (Housing &amp; Education)</i>	157	21	146	22	108	29
<b>Totals</b>	<b>317</b>	<b>229</b>	<b>283</b>	<b>213</b>	<b>217</b>	<b>202</b>

## 18. Overview of MP Enquiries

The majority again for this year relate to Housing Services (HomeChoice). The enquiries received related to:

- Queries about banding allocation in relation to the Choice Based Lettings system;
- Availability of suitable properties for particular areas in the district;
- Advice on homelessness, and eligibility for a property;
- Disagreement with Council decisions over funding for adult care;
- Queries around support to people living in an Extra Care Housing whose needs change;
- Request for the Council to use its discretion over Home to School transport policy;

- Queries around school admissions and
- Requests for information and advice around support from children's services for families.

## 19. Concerns Overview

Concerns that come in through the Complaints & FOI Team have continued to be recorded. Concerns are issues raised by the service user or carer where they are happy to resolve the problem directly with the key team or service. They are advised that if they remain dissatisfied they should contact the Complaints & FOI Team to register their complaint.

Of the 202 concerns recorded 4 moved into the complaints procedure, while the rest were resolved without the need to escalate the matter.

This approach to catching concerns early on is highlighted in the statutory complaints guidance *Getting the Best from Complaints* (children) and *Listening, Responding and Improving* (adults).

*Solving the problems that generate complaints should be at the forefront of the local authority's approach to responding to children and young people. Involving people and agencies in the community who provide independent advice can assist problem solving and may prevent dissatisfaction developing into complaints. Getting the Best from Complaints, 2006*

*The initial contact an organisation has with a person who is unhappy about their service is key. It is crucial to obtain all the information that will allow you to assess someone's concerns correctly, resolve them quickly if you can and build a good ongoing relationship with them. Listening, Responding, Improving, 2009*

## Complaints Overview

20. One of the main changes to the statutory complaints regulations for adult social care in April 2009 resulted in the removal of references to 'stages'. However for parity with the different complaints procedures in operation across the department reference has been made below to Local Resolution (Stage One), Independent Investigation (Stage Two) and Review Panel (Stage Three).

21. The total number of complaints received by the Department fell in 2013/14 from 253 to 225.

Fig 3: <b>Complaints by year</b>	2011/12			2012/13			2013/14		
	<i>one</i>	<i>two</i>	<i>three</i>	<i>one</i>	<i>two</i>	<i>three</i>	<i>One</i>	<i>two</i>	<i>three</i>
<i>Adult Social Care</i>	230	4	0	148	0	0	128	1	0
<i>Children's Social Care</i>	117	2	0	89	1	0	81	2	0
<i>Public Health</i>	N/A						3	0	0
<i>Corporate (Education &amp; Housing)</i>	13	0	0	15	0	0	10	0	0
<b>Total</b>	<b>366</b>			<b>253</b>			<b>225</b>		

<b>Ombudsman</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
<i>Adult Social Care</i>	4	2	0
<i>Children's Social Care</i>	2	1	0
<i>Corporate (Education &amp; Housing)</i>	2	1	6

22. There were three complaints requiring formal investigation (stage 2). One was for adult social care services in relation to communication around the safeguarding process and was upheld. The other two were for children's services; both were partially upheld. One was made by a young person and concerned the quality of support provided to them as a looked after child, this was partially upheld. The other related to how a potential children's safeguarding enquiry was undertaken and was partially upheld.

23. Six formal enquiries were received from the Ombudsman during 2013/14 (two in 2012/13). The Ombudsman was satisfied with the actions or proposed actions of the local authority in five cases. There was evidence of maladministration and injustice in one case and this related to the lack of Speech & Language Therapy service provided in line with the statement of special educational needs. The complaints related to:

- There were two complaints relating to statements of special educational needs. One was about failing to amend the statement to prepare the young person for the transition to secondary school; the Ombudsman was satisfied with the Council's offer of £500 to remedy the injustice. The second related to a failure to ensure that speech and language therapy was provided as specified in the statement. Whilst the service was provided by the NHS the Council is responsible for ensuring the requirements of the statement are provided. The Ombudsman recommended that the Council pay the complainant £9,354.16; the intention is that a private speech and language therapist will set up a programme of works to set up an iPad as a communication tool for the young person. The Council continues to work with NHS partners to ensure that actions identified as a result of the complaint are fully implemented.

- Discretionary home to school transport – there were two complaints following revision of the policy. In both cases the Ombudsman found that the Council had acted reasonably. The Ombudsman asked the Council to clarify its published appeal arrangements on home to school transport. This has been done.
- An individual complaint from a parent about the handling of his concerns about his son's welfare. The Ombudsman found that there was no evidence of significant fault.
- The erection of a school classroom close to boundary of complainant's property. The Ombudsman found no evidence of fault.

24. In addition, the Ombudsman made decisions in a further three complaints without formal investigation. Two of these related to adult social; one was outside of the Ombudsman's jurisdiction and the other one the Ombudsman was satisfied with the Council's response and did not initiate an investigation in the other. The third related to a procurement process; the Ombudsman was satisfied with the Council's response and did not initiate an investigation.

25. There were a further three premature complaints to the Ombudsman which were passed back to the council to investigate.

26. All requests for information were responded to within the 28 days the Ombudsman requires.

## **Analysis of complaints**

27. This section of the annual report analyses the reasons for complaint and identifies any trends.

28. The number of complaints received by team or service during 2013/14 was 236 (appendix three shows the full breakdown of complaints by service / team). This compares to 266 in the previous year. Where a complaint concerns more than one service area it will be counted more than once, which will account for the difference with the figures shown in figure 3. The decrease could be due to a number of factors including:

- more people choosing to purchase adult care services themselves
- a decrease in the number of home care hours provided
- fewer people in receipt of a council commissioned adult care service as the number of direct payment recipients increases (the local authority can only handle complaints about what it is responsible for and therefore cannot consider complaints about services which the individual purchases directly themselves).
- the promotion of complaints handling best practice and customer service standards with providers over recent years.

29. The volume of complaints should be viewed in the context of the work of the Department.

### Adult Services

- 5,646** people receiving adult social care assessments (5,514 in 2012/13)
- 4,512** people in receipt of adult social care services (5,122 in 2012/13)
- 3,889** people received 'self directed support'; they were provided with a budget and chose services themselves (2,824 in 2012/13)
- 3,338** people received community based services that the Council commissioned (4,010 in 2012/13)
- 959** people received Home Care in an average week (1,051 in 2012/13). 34.2% (328) of people received intensive home care (10 or more hours per week). In 2012/13 25.5% (268) of people received intensive home care
- 3,895** Home Choice applications received (3,737 in 2012/13)
- 1,986** households contacting us for housing advice (1,958 in 2012/13)
- 1,940** people were provided with additional support to remain in their own homes through aids and adaptations (1,950 in 2012/13)

### Children's Services

- 57,046** young people (0-17) in South Gloucestershire (56,888 in 2012/13)
- 168** young people were in care (97 male and 71 female) (167 in 2012/13)
- 116** where subject to a children protection plan (59 male, 53 female and 4 unborn) (193 in 2012/13)
- 809** young people assessed as children in need (415 male, 386 female and 8 unborn) (792 in 2012/13)
- 12,994** contacts received compared with 10,706 in the previous year
- 454** assessments within the Common Assessment Framework compared with 352 in 2012/13
- 1,182** initial assessments undertaken compared to 1,575 in 2012/13
- 1,306** Core assessments compared with 1,083 in 2012/13

30. The following common issues have been identified from analysis of complaints received:

Adult social care	<p>Many of the adult care complaints were linked to the cost of a service, these included:</p> <ul style="list-style-type: none"> <li>• Concern about lack of consistency of information provided to</li> </ul>
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	<p>customers about the cost of a service</p> <ul style="list-style-type: none"> <li>• Lack of timely information about the actual cost in advance of the service starting, also linked with delays in invoices being sent.</li> <li>• Confusion around whether a Home Care service was free for the first six weeks; this was around the time of introduction of the Reablement service which is free up to six weeks.</li> <li>• Disputed decisions regarding the outcomes of assessments e.g. number of hours Direct Payment assessed as required, not being assessed as meeting eligibility criteria to access certain services through the Council and eligibility for Council funding of residential placements</li> </ul>
Home Care	<ul style="list-style-type: none"> <li>• Issues around communication feature highly and this is linked to not being told about changes to timings of visits and scheduled carers as well as issues around quality of recording.</li> <li>• Lack of knowledge of key safe numbers so difficulty in accessing property</li> <li>• Concerns around personal hygiene tasks such as positioning of incontinence pads, changing gloves and some personal care being missed</li> <li>• Attitude / behaviour of staff</li> </ul>
Residential care	<ul style="list-style-type: none"> <li>• Concerns about dignity of care provision around continence issues</li> <li>• Issues around the provision of food, quality and ensuring it meets the service users needs</li> </ul>
Children's Services	<ul style="list-style-type: none"> <li>• Communication issues between all parties involved with placements</li> <li>• Concerns regarding the level of support provided to families and children</li> <li>• Disputes of assessments, errors in assessments</li> <li>• Attitude / behaviour of staff</li> <li>• 30 young people at the Secure Unit made complaints about either the service they were receiving, other young people or issues concerning resettlement. The single most contentious issues related to what young people consider to be consistency in respect of the Rewards and Incentives scheme or where they perceived they were being treated differently or single issue relating to a concerted 'voice'. 8 Complaints were received in a day period when the menus were changed to reflect an increased emphasis on healthy options. One young man complained six different times.</li> </ul>
HomeChoice	Lack of effective communication provided by some staff in relation to housing issues

31. The complaints process at the Secure Unit is completely confidential, with secure complaints boxes available. Increasingly this service has become a conduit for

general concerns about the young people's lives and their relationships with others and not always directly about the service that they receive. Any form of communication which is 'posted' into the complaint boxes is treated and recorded as a complaint.

All young people receive a written response from the Head of Secure & Emergency Services. This response also includes a tear off slip for the young people to indicate their satisfaction with the outcome. Very few of the complaint tear off slips are returned, making it difficult to evaluate the rate of satisfaction in response to young people's complaints. However, the Ofsted inspection of September 2013 indicated that the young people felt that the complaints system was robust and that they were listened to.

Of the 59 complaints, 21 were deemed to have been justified, or partially justified. Proportionately, 35% of complaints are therefore considered to be appropriate and would suggest the young people are using the process appropriately.

32. Of the 225 complaints, which reached completion during the period, 57% were upheld or partially upheld, 31% were not upheld, 5% were withdrawn and no conclusions could be drawn in 7% of the cases.

## Improving Services from complaints

33. This section looks at what action the Department has taken to improve service delivery as a result of the feedback received. Many of the actions resulting from complaints are to do with improving outcomes for individuals. Complaints are also used as a reminder to individual staff and teams on improving performance with regard to effective communication / customer care and to draw attention to current procedures and best practice.

Below are examples of service improvement that have come from complaints. There are more examples to be found at appendix three. This is the learning which helps to improve services by responding positively to feedback received, it may relate to a particular situation or be more far reaching and impact on several Service Users. It has also been helpful to share some of these ideas with colleagues and partner organisations to increase the impact of the improvements.

<b>Issue</b>	<b>Action</b>
<i>Concerns that there is no indication as to the cost of services before the service commences</i>	<i>Letters to service users to be amended to include a clear reference to the 'Money Matters' leaflet. A telephone number is included in the letters which allows service users or their families to phone for an estimated charge for their service. The self</i>

	<i>assessment form now makes clear that there will be a charge for the service above a specific financial threshold. Template letters have been updated to include the number to call to get an estimate of the cost.</i>
<i>Concerns that a service included a BMI 'ceiling' limit and that this was discriminatory.</i>	<i>Body Mass Index (BMI) ceiling will be raised and policy to be reviewed when NICE guidance is issued.</i>

## How quickly are we responding to complaints?

34. This section looks at how we perform against the standards for responding to complaints. Our aim is to acknowledge all complaints within three working days and respond to most complaints within 10 working days or up to working 20 working days for more complex cases.

### Acknowledging

35. A total of 86% were acknowledged within three working days. 14% were not acknowledged within the prescribed timeframes. This was mainly due to staff delay in acknowledging receipt but most were acknowledged within 5 working days.

### Responding

36. A total of 93% (198/214) were responded to within 10 to 20 working days. 7% were not responded to within the prescribed timeframes (16/214). The major reasons for those complaints which take longer than 20 working days to respond to is due to:

- the complexity of the complaint requiring a significant number of people to be interviewed and records read
- there being more than one organisation involved and a coordinated response is required
- cross over with other investigations and procedures, in particular safeguarding
- working to the complainant's own timescales or timescales agreed with the complainant in the circumstances of the case

37. The Investigator or the Complaints & FOI Team ensures that the complainant is kept informed as to progress of the investigation.

## Who is using the Complaints Procedure?

38. This section looks at who has been making complaints, whether they have come from service users or their relatives and some analysis of equalities and diversity

data. This gives us an indication of where accessibility to the process may need to be further considered. The data analysis is provided in full at appendix four.

39. Equalities data is collected from the complaints form used to register a complaint. Where possible missing data is gathered by cross-checking against the client record system. For consistency the information is based on service user details rather than complainants as this enables better comparison against departmental data. The following key points have been identified following analysis.

- a. We continue to have a higher proportion of complaints from female complainants, as can be seen in figure a. at appendix four.
- b. The proportion of complaints from those accessing support from the mental health service is proportionate with the departmental data. Further analysis shows that the majority of these are in relation to older service users with dementia. 5% were from (or on behalf of those of a working age) and this is also proportionate with the departmental data. Recent communications with Avon & Wiltshire Partnership NHS Trust show that most problems are resolved by the local team without the need to escalate the matter through the complaints process. Joint work with the AWP PALS & Complaints Team (as well as with the local teams) will continue into 2014/15. This will ensure that communication between the two organisations is robust in terms of joint consideration of concerns and complaints.

Complaints made by or on behalf of adults with a learning disability have increased (6.4% in 2012/13, 10% in 2013/14) on the previous year but are still lower when compared to the departmental information (17%). There is therefore still a need to focus resources on improving accessibility to the complaints process for adults with learning difficulties. The Complaints Manager continues to work with the Co-Chair of the Learning Difficulties Partnership Board to raise awareness of speaking up amongst people with learning difficulties. Four sessions took place during the last twelve months and there are more sessions planned for 2014/15.

The easy read CAH Customer Feedback Factsheet has been further reviewed and has been considered by the parent and carers focus group. A further review is planned for September 2014 in light of the 0-25 service development.

- c. 7.4% of complaints received were from people of black and minority ethnic (BME) backgrounds during 2013 / 14 (figure c of appendix four) and this more than comparable with the census information.
- d. There were no complaints received directly from children under the age of 12 year. Most complaints about children's services are made by adults on behalf of

children or about their own involvement with children's services. With the development of the 0-25 service it will be important to ensure that service users, parents and carers receive timely information about how to raise a complaint as necessary (figures d, e and f of appendix four).

There were two young people who made complaints relating to their time in care (one was a care leaver). In addition, two Foster Carers made complaints on behalf of children in their care and clearly represented the views of those young people. All other complaints were made by parents or other adults usually in relation to their own involvement with children in care services. This means that 2% of children in care accessed the complaints procedure with support. There is work to be done in 2014/15 to ensure the complaints process is accessible, with support, to children and young people in care.

Analysis also shows that as people get older complaints are generally made by family members on their behalf. It is important that family members know how to access information about the complaints process especially as they may not have been initially involved in the assessment process. A review of web based complaints information is planned for 2014/15.

## **Financial aspects of complaints**

40. There are three aspects of financial costs concerning complaints. The staff and training costs; redress in respect of reimbursement (putting people back in the financial position they should have been in if it were not for the fault, i.e. monies we should have paid out anyway) and goodwill gestures.
41. There are hidden costs for staff and manager time in investigating concerns and complaints as these are absorbed by the teams and services involved. The time and cost associated with handling complaints increases as a complaint escalates so early resolution and learning lessons from complaints can help to reduce this.
42. The total cost to the Department during 2013/14 in respect of reimbursement and goodwill gestures, was £11,816.87 (this compares with £13,713.38 in 2012/13).
43. The Complaints & FOI team budget is £163,710; £126,200 represents 3FTE staffing costs and £37,510 to cover the cost of appointing external investigators and providing some advocacy provision. In addition, the budget (£7,140) for some translating and interpreting work for Children's Services is held with this team.
44. The cost of commissioning three Stage Two equivalent complaints investigations received in 2013/14 was £6,981.44, this includes the cost of appointing an independent person as well as an investigator in two of these complaints (required by the children's social care complaints regulations). It is a more effective use of

resources to commission an external knowledgeable and experienced investigator than to use an internal manager.

## Training

45. Information below shows how many people have attended the former Community Care & Housing department's *Don't Make A Drama Out of a Complaint* training since we established the course in 2007. Fifteen courses have now been run and the need for training is considered annually as part of the review of the complaints training strategy. Individual or small group coaching sessions are also provided by the Complaints & FOI Team throughout the year.

<b>Total attended</b>	<b>261</b>
Made up of the following:	
CAH Department staff and managers	82
Other council departmental staff and managers	7
Staff and managers social care services the council commissions	127
NHS colleagues in South Gloucestershire area	44
Other (colleague from another council)	1

46. A workshop was held with adult social care managers as a result of a trend being identified in relation to finance related complaints. The trend identified a need for social work staff to improve the communication they have with service users and their families about charges for care services. This was held in September 2013 and information was provided to them to cascade to their staff.

47. A review of the training needs of Managers and Team Leaders across the new department was undertaken in February 2014. The above mentioned course is now being run across the new Children, Adult's & Health department. The training strategy review and feedback from managers indicates the need for an in-depth investigation skills training for some managers in 2014/15.

## Monitoring effectiveness and customer satisfaction

48. The Complaints & FOI Team monitors the effectiveness of the complaints process on a number of levels:

- a. *Monitoring of complaints on an individual basis* with investigating officers. This includes providing support and advice on investigation, problem solving and

quality assurance. All Team Managers and Service Managers are informed about relevant feedback for their service / team as they are received.

- b. *Regular reports are produced for senior management and the Commissioning and Contracts Team.* These provide information on the volume of complaints by service, reason for complaint and performance against timescales.
- c. *This annual report forms an element of the monitoring and is produced for Members and Officers and is publicly available on the South Gloucestershire website.*
- d. *Monitoring of actions* required following complaints. This enables the Department to consider service improvements as a result of complaints.
- e. *Views of complainants themselves.* Complainants used to be sent questionnaires to feedback on their experience of making a complaint. The aim was to send questionnaires to every complainant but there were occasions when a questionnaire was not sent these being when:
  - o The complainant is no longer contactable
  - o The complainant has asked for no further contact
  - o It might cause disproportionate distress to the complainant
  - o The complainant has provided feedback already

Some complainants also volunteer feedback post complaint and this is captured against the survey questions. The return rate from customer providing feedback post complaint is very small and it has not therefore been possible to draw any conclusions from the information provided. For example, when the feedback in relation to timeliness of response was compared to the actual complaint response time no correlation could be drawn.

- f. *Number of complaints escalating including those which the Ombudsman considers* and the outcome of those complaints. The number of complaints escalating can provide an indication of satisfaction especially if the outcome of further consideration shows that the complaint could have been resolved at an earlier stage. In addition to the information provided in this report the Corporate Customer Relations Team provides a separate report to Members regarding Ombudsman complaints across the Council.
- g. *Feedback from compliments* following a complaint demonstrates the positive experience for someone who has gone through the complaints process.

## Management Audits

49. In June 2013 the Department gained re-certification against BSi ISO 10002:2004; the complaints management standard. The BSi Assessor's visit coincided with the various service reviews happening with the Children, Adults & Health Department including the Complaints & FOI Team. In his report the Assessor reported that:

*“The Council demonstrates an ongoing commitment to both maintain and improve the complaints management system and to enhance overall performance, this has recently been demonstrated by the fact that the Council are in the process of making improvements to the way complaints are handled via enhancements to the database, procedures, leaflets, resources in lieu of the changes and structural review being completed...”*

BSi report, June 2013

50. The Department’s complaint management process is assessed by Internal Audit as a High Priority System requiring testing every two years. Management audits are carried out by the Council’s Internal Audit Team. Following an internal audit review in February 2013 the outcome was that the system was found to be of a reliable standard and would be re-tested in February 2015.

## Reporting on achievements of actions from 2012/13

Actions for 2013/14	What we achieved
1. Bring together the managing of compliments, complaints and FOI requests into one team.	A new single CAH Complaints & FOI Team came into being from 01 January 2014.
2. All complaints across the department being acknowledged within three working days unless there are exceptional circumstances.	A total of 86% were acknowledged within three working days. 14% were not acknowledged within the prescribed timeframes. This was mainly due to staff delay in acknowledging receipt but most were acknowledged within 5 working days.
3. All stage one equivalent complaints across the department to be responded to within agreed timescales.	A total of 93% (198/214) were responded to within 10 to 20 working days.
4. A target of 80% of customers being satisfied with the timeliness of responses has been set for 2013/14.	It has not been possible to draw any conclusions due to the small number of returned satisfaction forms received.
5. Consider ways of improving customer feedback gathering mechanisms post complaint so that the sample size is larger, which will enable us to better consider the effectiveness of the procedures.	The sample size from customers providing feedback post complaint is very small, it has not therefore been possible to draw any conclusions from the information provided.
6. Review customer feedback factsheets to reflect the new department including the easy English version and age appropriate information. In addition a review of departmental customer feedback web content is also required.	Customer feedback leaflets have been reviewed, including the easy read Factsheet following consultation with parent / carers groups. The Us In Care complaints information has also been reviewed and updated. A Factsheet for complaints against Schools has also been developed.
7. Consider distribution channels for promoting the new customer feedback Factsheet to be used across Children, Adult and Health services.	Web content has been updated and all teams have been advised of the new CAH customer feedback Factsheet so they can share with customers as appropriate. A new Factsheet explaining the children's social care complaints process has also be developed and published to the website for customers and staff to access.
8. Continue raising awareness amongst people with learning difficulties of the importance of speaking up.	Together with the Co-Chair of the Learning Difficulties Partnership Board three further presentations were undertaken in the last year to people with learning difficulties. These were well received.
9. Review accessibility of the complaints procedure for service users of the working age mental health service.	Discussions with Avon & Wiltshire Partnership NHS Trust have assisted us in understanding how their feedback processes work. This work will continue into 2014/15

## Actions for 2014/15

51. Below is an outline of actions which the Children, Adults & Health Department will seek to address in 2014/15 and these will be reported upon in the subsequent Annual Report.

- a. All complaints across the department being acknowledged within three working days unless there are exceptional circumstances.
- b. All stage one equivalent complaints across the department to be responded to within agreed timescales.
- c. A review of the complaints training strategy and feedback from managers indicates the need for an in-depth investigation skills training for some managers in 2014/15.
- d. The complaints management system will be re-tested by Internal Audit in February 2015.
- e. Continue raising awareness amongst people with learning difficulties of the importance of speaking up.
- f. Continue to work with AWP ensuring that communication between the two organisations is robust in terms of joint consideration of concerns and complaints about social care services they provide on our behalf.
- g. Ensure the complaints process is accessible, with support, to children and young people in care.
- h. Ensure that service users, parents and carers receive timely information about how to make a complaint in relation to the new 0-25 service.
- i. Review web based complaints information.

## COMPLIMENTS

### Compliments received year on year by service / team

Fig 2: Breakdown by Service / Teams	2011/12	2012/13	2013/14
<b><i>Adult Social Care</i></b>			
Social Care (assessment)	56	64	56
Occupational Therapy (inc adaptations)	85	64	56
Home Choice	11	4	3
<b><i>Business Support</i></b>			
Complaints & FOI	8	4	2
Finance	11	6	13
Traded Services	1	1	0
<b><i>Commissioning, Partnerships &amp; Performance</i></b>			
Planning & Partnerships	3	10	3
Safeguarding, Quality Audit and Review	0	1	0
<b><i>Health &amp; Wellbeing</i></b>			
Health Improvement	0	0	2
<b><i>Education, Learning and Skills</i></b>			
Admissions	0	2	0
Virtual School	4	0	0
<b><i>Integrated Children's Services</i></b>			
Children's Social Care	7	12	0
Specialist Services	14	54	141
Early Intervention and Preventative Services	1	1	1
<b><i>Service Providers (adult social care)</i></b>			
Day Services	17	10	8
Home Care	131	73	18
Residential Care	42	36	37
Equipment & Adaptation Services	0	0	1
<b>Totals</b>	<b>391</b>	<b>342</b>	<b>341</b>

## Examples of Compliments received in 2013/14

Service	Compliment
Adult social care	I have been looking after my friend age 86 all the services who helped me were great and made a difficult job easier. I felt like I had won the pools the support was so wonderful.
	I am writing to express my gratitude to all the staff at Adult Services that have been involved with the care offered to my mother. Since my initial phone call we have been met with kindness and understanding and their response has been quick and efficient.
	this is our first experience with SGC and the services of [Home Care Provider] we cannot praise them enough [Social Worker] has a lovely caring manner easy to talk to and giving us the help and info needed to give mum a purposeful life
Occupational Therapy	...helped us more than words could ever say and that says it all so I would like to thank them both once again and wish them the best with their hard work and helping others with disabilities which are life changing - thank you
	[My parents] were treated with a great deal of respect and empathy. Everyone gave dad a real sense of caring and hope in what had been a hopeless situation. All 3 members of staff are a huge credit to you. The equipment has transformed lives and maintained independence
	Since mum has lived with me I have had excellent support from your OT team. They have responded swiftly to any concerns I may have had regarding caring for my mum. This has really helped my confidence in my ability to care for mum at home. Thank you
Day Service	Note to express our thanks and gratitude over the years with regard to mum. Without your care and attention we are certain mum would have been in a care home a long time ago. Once again many thanks
Home Care	She will surely be missed by many, including my Mother, now 97, who has received unbeatable care at her hands. [Carer] came in the dark early mornings, and by some miracle was able to prepare [my mum] for the Day Centre with the utmost dignity and serenity. When snow lay on the ground, [the carer] was there. When the Alzheimers raged unexpectedly, [the carer] seemed to understand her mood and calmed her. She could always make my Mum feel special, always produce a smile. When [my mum] was at her worst, [the carer] was at her best. Even when [the carer] had to bear terrible grief of her own early this year, she still turned up trumps for those in her care. It is hard to imagine anyone more suited to the task of caring for dementia sufferers, or anyone more caring...On behalf of [my mum] I would like to place on record, and hope you will convey, my heartfelt thanks and very best wishes for whatever she does in the future.

Residential Care	<p>The care exceeded our expectations we can not praise [Care Home] highly enough the carers are so caring and treated mum so well in her last few days I can not find words to thank you enough what a care home what a credit to everyone who works there</p>
	<p>Thank you for the care and attention you gave to my Mother. When I first looked round I was impressed by the professional attitude of the staff and warm friendly atmosphere. The first impression was reinforced every time we visited. We were made to feel very welcome and there was always someone to talk to whenever we needed info or support. Mother was well cared for and as comfortable as it was possible for her to be. Thank you for everything that you did for her - we couldn't have done it</p>
Housing services	<p>To [Housing Officer] and all your team who helped me and my family, our new home is great thank you so so so so very much for all your help will never forget you</p>
Early Intervention and Preventative Services	<p>I would like to thank Cadbury Heath Sure Start Centre in Bristol for an outstanding service. I am a mother of two children; one of whom is 3 years old and still not talking. The staff...have gone above and beyond the call of duty for us and have gone out of their way to ensure that we get as much help as possible. They have made excellent suggestions as to the courses that we can attend, they have advised me about resources that I would otherwise never have heard of and have been a friendly, helpful and understanding group. When possible, they have made room for us on Talk Time and Music Therapy groups (to name a few) and they have helped give me lots of ideas that have really made a difference to my child and I am seeing improvements all the time. Thank you very much and I hope that you continue (and if possible, expand) this service so that parents like myself who desperately want to help their child in any way possible, have somewhere to go to help them with this.</p>
Children's Specialist Services	<p>I feel that [Secure Unit staff member] has been very helpful and supportive and he has helped me have a different view towards drug use.</p> <p>I wish to put in a compliment for [Secure Unit staff member] reasons being is she has played a big role in the time we been here and has helped me in certain situations. And I feel she's the person I can talk to when I need calming down she has also worked fantastic I appreciate her help</p> <p>[Member of Secure Unit staff] has been verry supportive and calm throughout the time I have spent here. He is fair not just to me but he's fair to every yp and treats us all the same in a positive way.</p>
Health Improvement	<p>Just want to say how fantastic your walk to health programme is. The team is very helpful and friendly and that includes the volunteers. I only returned to this country in April and suffer with depression, this group have helped keep me buoyant whilst getting me fresh air and knowledge of the local countryside. Well done</p>

Commissioning, Partnerships & Performance	I would like to say a huge thank you to the people who organised the 'celebration of carers' event. It was obvious that a great deal of hard work and attention to detail had taken place.
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**COMMENTS****Examples of Comments received in 2013/14**

<b>You said (feedback)</b>	<b>We did</b>
People considering having a direct payment told us that opening a separate bank account and providing financial monitoring was time consuming and complicated	We are implementing a payment card service for delivering and managing direct payments
Deaf people told us that information on the council website wasn't accessible to Deaf people who use British Sign Language	We worked with members of the BSL Forum to identify the priority areas in terms of information for Deaf people, and arranged for videos in BSL about council services to be made available on the South Gloucestershire Council internet site.
People with dementia and their families told us they would like benefits information built into the Dementia Roadshow programme	A voluntary sector partner who specialises in benefits information is now part of the programme at the Roadshows.
Carers told us that they really appreciated Celebrating Carers 2012 and they enjoyed the range of information, advice and activities provided in one place	We responded to carers and held Celebrating Carers 2013 and planned the programme on the feedback that people gave us from the 2012 event.
Carers told us that although they value the number of Carers Network groups held in South Gloucestershire they did not meet the need of all carers.	Two new carers groups were set up last year. One for carers from the Chinese community and the other for people who have drug and alcohol dependency.
Carers told us that they wanted more information on employment support for their family member	We held a Presumption of Employability event for family carers of people with learning difficulties. The presentations looked at some of the myths attached to employment and disabled people and ways people can be supported into employment.
Personal Assistants and people considering becoming Personal Assistants told us there was no information on our website.	We have added information to our website on what a personal assistant does and information for employers. We have updated our information on training we offer to Personal Assistants and sent it out to people who employ PAs.
Someone contacted us via Twitter to point out that an error in relation to the diversity questions on our adult social care assessment form. Transgender was included as a category under sexual orientation.	Our assessment form has been updated and checks have been made on other assessment documentation we use to ensure the error is not repeated.
In Children's Centres feedback that parents struggled to find a group to take their babies to at	Set up a Parent run Baby Stay and Play meaning that parents could meet in a safe environment and

the end of Baby and Me groups.	still access support from staff on site when they need to.
In Children's Centres a group of mothers asked to bring partners along to the baby first aid session, but there were limited places.	Organised to split the group into two sessions.
There was a demand for ESOL courses in Filton area	Community Learning and Children's Centres provided '@English in the workplace', Basic English' and 'English in the Community' courses.
Participants in Parenting Courses said that they wanted more information on a certain issue for example ADHD	Facilitators included this in the course.
Young people attending the Children in Care Council meetings told us that young people in care were not clear on what rights and entitlements they had. Young people told us that they would like to access this from their social workers because they also felt that Social Workers weren't clear either.	Information on the 'Us in Care' website has been revised to ensure this clear information is available. A leaflet is being developed and launched so that Social Workers can provide information directly to young people.
Young people from the Children in Care Council suggested to the Corporate Parenting Steering Group that a celebration ceremony be organised. They also suggested that there should be a young person's representative on the Corporate Parenting Steering Group.	Funding is being identified to enable this to happen and young people are working with staff over arrangements for the event. A young person from the children in Care Council now attends the Corporate Parenting Steering Group.
Young people attending the Children in Care Council meeting said they would like to see the Pathway Plan revised so that it includes their views at the start.	The Leaving Care Service and the Corporate Parenting Manager are working with young people to develop a new format for the Pathway Plan.

**COMPLAINTS****Complaints received year on year by service / team**

<b>Breakdown by Service / Teams</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
<b><i>Adult Social Care</i></b>			
Care Management inc Hospital social work	39	57	52
Learning Difficulties	6	0	0
Mental Health	9	2	2
OT (including adaptations)	3	4	4
Home Choice	9	4	5
<b><i>Business Support</i></b>			
Finance	32	10	12
Other inc Traded Services	3	1	2
<b><i>Commissioning, Partnerships &amp; Performance</i></b>			
Safeguarding, Quality, Audit and Review	1	0	0
Direct Payments support	0	0	2
<b><i>Education, Learning &amp; Skills</i></b>			
Admissions	2	3	2
Early Years	1	3	1
Education Welfare		2	0
<b><i>Health &amp; Wellbeing</i></b>			
Drug & Alcohol Services			2
Health Improvement			2
<b><i>Integrated Children's Services</i></b>			
Early Intervention and Preventative Services		1	0
Children's Social Care	15	18	11
Specialist Services	101	73	74
<b><i>Service Providers</i></b>			
Day Services & Supported Living	12	6	5
Home Care inc care & support in Extra Care	126	73	55
Residential Care	18	8	5
Supporting People	3	0	0
<b>Totals</b>	<b>383</b>	<b>266</b>	<b>236</b>

## Examples of Learning from Concerns and Complaints in 2013/14

	Issue	Service Improvement
<b>Adult Social Care</b>		
Adult Social Care	Concerns were raised about the Direct Payment process	Process to be streamlined. Staff reminded to ensure all pages of a document are included before sending.
	Concerns that the service user and family have been passed from one social worker to another when accessing services. This has left them without enough support and inconsistent information provided.	Discussed with relevant team to ensure better communication between social workers when cases are handed over. Social workers reminded of the importance of leaving accurate contact information to allow families and service users to be able to contact relevant people and services.
	Clear, written information is not being provided to service users upon discharge from hospital regarding costs and charges of services. Especially around the free re-ablement service and the chargeable homecare service.	Staff reminded of the importance of providing written information about charges and services and to record that this has been given.
	Miscommunication and conflicting information provided regarding service users discharge from hospital, delay with social work team involvement.	Reminder to team about the requirement to keep families and carers updated with all discharge planning arrangements to avoid any confusion.
Safeguarding	There were concerns that a safeguarding adults investigation was not thorough in considering all of the issues and took an unreasonable time to complete	Staff resources within the team increased slightly to ensure the team can meet the demands of the service.  The Senior Social Worker who chaired the safeguarding strategy discussion will check that agreed actions have been implemented and this is now also followed up in supervision by the line manager of the investigating Social Worker.
<b>Service Providers</b>		
Home Care	Missed visit alerts not monitored and picked up	Electronic monitoring alerts to be handled at a local level rather than provider HQ. This will improve the responsiveness of the service due to local knowledge in the event of a delay or potential missed visit. Alerts now set to go off after 15 rather than 30 mins. Out of hours support instructed to phone the service user

		when the alert sounds.
	Concerns that family member does not know which carer is providing visit and that they may not be aware of service user's requirements.	Co-ordinators instructed to ensure rota is sent on a weekly basis. This will improve communication and meet expectations.
	Charges being received for visits when they should have been waived.	When invoices are generated, the system reads that there was a visit logged by the office but it does not read the additional notes. Council's Contracts staff to provide training to the agency on how to log these visits to ensure the customer is not unduly charged where appropriate.
Supported Living	Service user concerned that support worker was using mobile phone whilst driving	Specific instance dealt with, but message re-affirmed to all support workers about the policy on the non-use of mobile phones whilst driving and that it was illegal.
Residential Care	Lack of effective communication with relatives when service user is in residential care	Provider to improve mechanisms for communication s the communication book was not always completed and included.
<b><i>Business Support</i></b>		
Finance	Delay in invoices being received	Moving current clients to new process of invoicing three weeks after charging period, this will need to be communicated to current clients but new clients will be started on new billing arrangement.
	Concerns that there is no indication as to the cost of services before the service commences	Letters to service users to be amended to include a clear reference to the 'Money Matters' leaflet. A telephone number is included in the letters which allows service users or their families to phone for an estimated charge for their service. The self assessment form now makes clear that there will be a charge for the service above a specific financial threshold. Template letters have been updated to include the number to call to get an estimate of the cost.
	Concerns that there was a delay in receiving a backdated invoice and that this was then for incorrect amount	Social workers reminded of the process that they should be following when alerting finance of a new placement. This should be a joined up process between teams allowing correct amounts to be billed to service users.

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***Integrated Children Service***

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Ineffective communication leading to relationship breakdown between social work team and family

Demonstrated a need for a communication protocol to be implemented.

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***Health and Wellbeing***

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Concerns that a service included a BMI 'ceiling' limit and that this was discriminatory.

BMI ceiling will be raised and policy to be reviewed when NICE guidance is issued.

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## EQUALITY & DIVERSITY

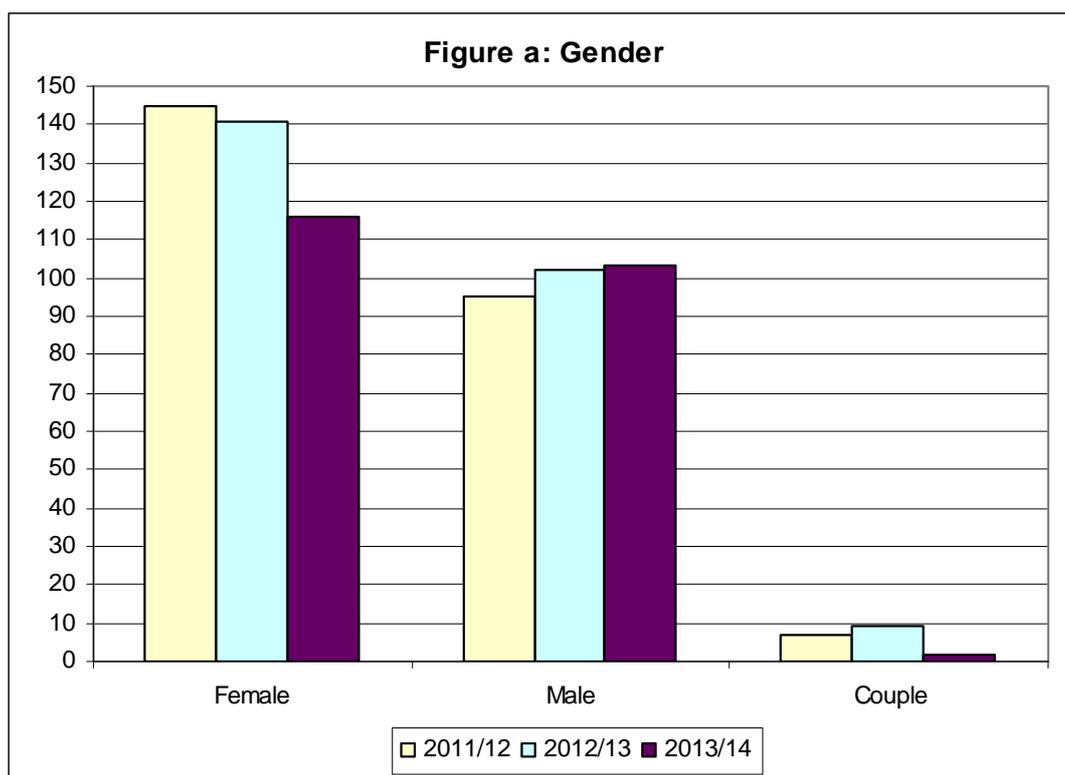


Figure a above shows the former Community Care & Housing department data for 2011/12 and a combined total for the Children, Adults & Health Department for 2012/13 and 2013/14.

Figure b: Disability by client category (CCH)	2012/13				2013/14			
	Complaints		Department*		Complaints		Department*	
<b>Physical disability, frailty and sensory impairment (total)</b>	<b>104</b>	<b>74.3%</b>	<b>4208</b>	<b>70.25%</b>	<b>84</b>	<b>66%</b>	<b>2,789</b>	<b>59%</b>
Of which: Physical disability, frailty					52	50%	35	0.7%
Hearing impairment			57	1%			21	0.4%
Visual impairment			64	1%	2	2%	40	0.9%
Dual sensory loss			12	0.2%	1	1%	14	0.3%
<b>Mental Health including Dementia *</b>	<b>27</b>	<b>19.3%</b>	<b>960</b>	<b>16%</b>	<b>30</b>	<b>24%</b>	<b>1,152</b>	<b>24%</b>
<b>Learning Disability</b>	<b>9</b>	<b>6.4%</b>	<b>788</b>	<b>13.2%</b>	<b>13</b>	<b>10%</b>	<b>418</b>	<b>17%</b>
<b>Substance Misuse</b>			<b>13</b>	<b>0.2%</b>			<b>1</b>	<b>0%</b>
<b>Vulnerable People</b>			<b>21</b>	<b>0.35%</b>			<b>0</b>	<b>0%</b>
<b>Total of above</b>	<b>140</b>	<b>100%</b>	<b>5990</b>	<b>100%</b>	<b>127</b>	<b>100%</b>	<b>4,733</b>	<b>100%</b>

\* 5% of mental health service users are receiving support from Avon & Wiltshire Partnership NHS Trust (AWP). Approximately 2-3% of complaints received in 2013/14 were from those people accessing support via mental health services provided through AWP. There is therefore more work to do to ensure that people of a working age using mental health services are able to access the complaints process.

Fig c: Ethnicity (adults)		2012/13				2013/14			
		Complaints		Census		Complaints		Census	
Asian or Asian British	Bangladeshi			238			238	5%	
	Indian			2,699	5		2,699		
	Pakistani	1		698	1		698		
	Chinese			1,312	1		1,312		
	Other			1,493			1,493		
Black or Black British	African	1		987	1		987		
	Caribbean			980			980		
	Other	3	5%	251	1	7.4%	251		
Mixed / Multiple Ethnic Groups	White & Asian	2		1,016	2		1,016		
	White & Black African			396			396		
	White & Black Caribbean	6		1,516	1		1,516		
	Other			739			739		
Other Ethnic Group	Arab			366			366		
	Other			502			502		
White	English/Welsh/Scottish/ Northern Irish/British	212		241,611	141		241,611		
	Irish	2	88%	1,223		88.3%	1,223		
	Gypsy or Irish Traveller			271			271		
	Other	5		6,469	2		6,469		
Not specified		18	7%	0	0%	7	4.3%	0	0%
<b>Total</b>		<b>250</b>	<b>100%</b>	<b>262,767</b>	<b>100%</b>	<b>162</b>	<b>100%</b>	<b>262,767</b>	<b>100%</b>

Figure d: Age	Complaints		Department	
<b>0-12</b>	13	6%		
<b>13-17</b>	70	32%		
<b>18-64</b>	39	18%	1,607	
<b>65-84</b>	54	24%	1,594	
<b>85+</b>	45	20%	1,532	
<b>Totals</b>	<b>221</b>	<b>100%</b>		

Figure e: Who is making complaint?	Service User	Family Member	Other	Totals
<b>0-12</b>		13		<b>13</b>
<b>*13-17</b>	60	10		<b>70</b>
<b>**18-64</b>	25	14		<b>39</b>
<b>65-84</b>	13	41		<b>54</b>
<b>85+</b>	2	41	2	<b>45</b>
<b>Totals</b>	<b>100</b>	<b>119</b>	<b>2</b>	<b>221</b>

\* includes 59 service users of the Secure Unit

\*\* includes one care leaver who made the complaint in their own right

Figure f: Who is making children's service complaints?	Complaints data		Departmental data	
<b>Children in care</b>	16	44%	168	17%
<b>Children in need</b>	20	56%	809	83%
<b>Totals</b>	<b>36</b>	<b>100%</b>	<b>977</b>	<b>100%</b>

Of the 16 complaints relating to children in care services two young people made these directly (one was a care leaver). In addition, two Foster Carers made complaints on behalf of children in their care and clearly represented the views of those young people. All other complaints were made by parents or other adults about their own involvement in children in care services. This means that 2% (4/168) of children in care accessed the complaints procedure with support.

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