

<b>TITLE</b>	<b>Annual Report on the administration of complaints by the Adults, Health and Wellbeing Department during 2016-2017</b>
<b>PURPOSE</b>	<b>Present an overview of complaints received during 2016-17</b>
<b>AUTHOR</b>	<b>Geraint Wyn Jones Customer Care Officer (Adults) Safeguarding and Quality Unit (Adults)</b>
<b>CABINET MEMBER</b>	<b>Councillor W Gareth Roberts</b>
<b>DATE</b>	<b>May 2017</b>

## **1. Introduction**

- 1.1 In accordance with the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014 which came into force on the 1<sup>st</sup> of August 2014, it is required that the Director of Social Services produces an annual report on the methods used to investigate and address complaints received by the service. The report is produced by the Customer Care Officer on behalf of the Director of Social Services.
- 1.2 The purpose of this report is to provide information on the reasons for and the number of complaints received during the year and also includes the steps taken to resolve those complaints by the Adults, Health and Wellbeing Department. The report also includes a summary of the lessons learned and the steps taken to address those lessons arising from the complaints that were received.

## **2. Context**

- 2.1 Throughout the year, the Customer Care Officer (Adults) within the Customer Care and Information Unit deals with the administration of the complaints procedure. During the final quarter of the year, the Customer Care Officer (Adults) became a member of the new Safeguarding and Quality Unit (Adults).

## **3. Access to the Complaints Process**

- 3.1 When an individual contacts the Customer Care Officer it is usually in connection to being dissatisfied with the service provided by the Department and making an official complaint is often the last resort. The Officer concentrates on ensuring that the Complaints Procedure is easily accessible so that individuals are aware of their right to be heard. In order to achieve this goal, information about the Complaint Procedure is widely shared in a number of formats, such as leaflets, on-line and in an "easy-read" format. All the information is available in both Welsh and English so that the complainant can choose their preferred language when making a

complaint. Facilities such as Braille, other languages and advocacy services are also available to ensure that the Complaints Procedure is accessible to all. The information leaflets are regularly updated by the Information Officer.

<b>Complainant's preferred language used to make a complaint/enquiry during 2016/2017</b>			
	<b>Welsh</b>	<b>English</b>	<b>Number of complaints</b>
Enquiries and Informal Complaints	41	79	<b>120</b>
Stage 1	9	26	<b>35</b>
Stage 2	0	2	<b>2</b>
Ombudsman	0	0	<b>0</b>
Corporate Complaints	1	2	<b>3</b>

#### **4. Matters recorded as Enquiries**

- 4.1 The aim is to respond to each complaint fairly, impartially and respectfully, so that every individual can be confident that their complaint will be treated with professionally in a positive way, rather than in a negative manner. In many cases, where the complainant has chosen not to make an official complaint and follow the Complaints Procedure, the matter is dealt with as an enquiry or informal complaint. An example of this would be a letter from a Member of Parliament or Local Councillor expressing dissatisfaction or asking for an answer to a specific question.
- 4.2 By responding positively at an early stage, a significant number of matters can be resolved without the need to use the Complaints Procedure. Without doubt, resolving these issues quickly provides the best outcome for all concerned.

<b>TABLE 1. Enquiries and Informal Complaints received in 2016-2017</b>							
	<i>Adults</i>	<i>In House Provider</i>	<i>Business</i>	<i>Housing</i>	<i>External Provider</i>	<i>Multi Service</i>	<b>Total</b>
<i>Solicitors</i>	3		1				4
<i>Ombudsman</i>							
<i>Local Members</i>	4	2	1				7
<i>Members of Parliament/Assembly</i>	12	1		1	1		15
<i>Service Users</i>	8	1		1	2	1	13
<i>Relatives</i>	19	22	14		2	2	59
<i>Members of the Public</i>	5	1		1			7
<i>Advocates</i>	3						3

<i>Other Agencies/</i>	4	2	2				8
<i>Disabled Parking Bay Applicants</i>				2			2
<i>Other Local Authorities</i>							
<i>Social Workers</i>	2						2
<i>Older People's Commissioner</i>							
<i>Welsh Language Commissioner</i>							
<i>Information Commissioner</i>							
<i>Provider</i>							
<b>TOTAL</b>	<b>60</b>	<b>29</b>	<b>18</b>	<b>5</b>	<b>5</b>	<b>3</b>	<b>120</b>

## **5. Stage 1 – Social Services Statutory Complaints Procedure – Local Resolution**

- 5.1 Every effort is made to respond to and resolve complaints to the satisfaction of the complainant and the Service. A local resolution of the complaint is obviously the method which provides the best outcome, and this is done by investing time and effort at the early stages of a complaint. However, if the complainant decides to make a formal complaint, contact is made with the complainant and/or their representative, either by telephone, email or face-to-face in order to attempt to resolve the complaint. During the past few years, the Customer Care Officers have fostered a close relationship between themselves and the teams, managers and the legal department within Social Services to facilitate the efficient resolution of complaints. This is reflected in the very small number of complaints which progress to Stage 2 of the Complaint Procedure.

## **6. Stage 2 – Social Services Statutory Complaints Procedure – Formal Investigation by an Independent Investigator**

- 6.1 By upholding the principal of concentrating on successfully resolving complaints early and efficiently at the local stage (Stage 1), the progression of complaints to Stage 2 (Formal Investigation) in order to resolve the matter in question is a rare occurrence in Gwynedd. In comparison to other Local Authorities in North Wales, the evidence shows that Gwynedd have the fewest number of complaints that have been progressed to Stage 2, which reflects on the emphasis given by the Customer Care Officer on effectively resolving complaints at Stage 1.

During 2016/2017, only two requests were received to progress a complaint

from Stage 1 to Stage 2 of the Social Services Complaints Procedure. One of these requests was resolved before the Stage 2 investigation process had commenced, therefore this complaint was considered to have been resolved at Stage 1. The second complaint was referred to an Independent Investigator in order to conduct an investigation, and the result is expected to be available during the first quarter of 2017/2018.

## 7. Complaints referred to the Public Services Ombudsman

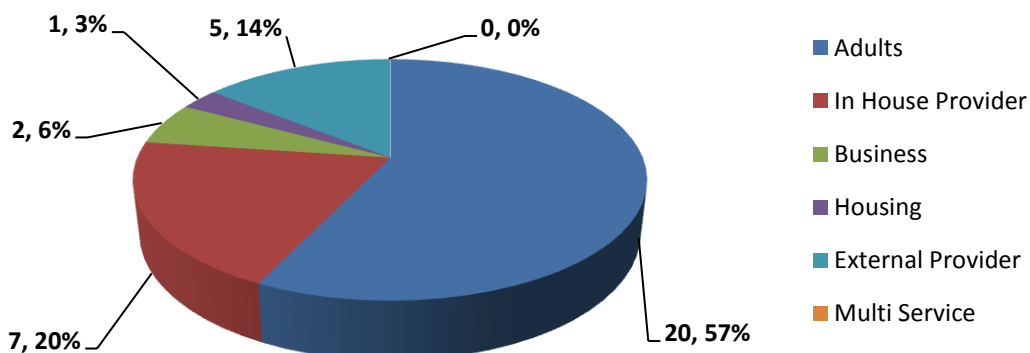
- 7.1 If a complaint has not been resolved to the complainant's satisfaction following an investigation at Stage 2 of the Complaints Procedure, the complainant has a right to escalate the complaint to the Public Services Ombudsman, the Welsh Language Commissioner, or the Commissioner for Equality and Human Rights. The applicable authority depends on the nature of the complaint to be resolved.
- 7.2 No complaints at Stage 2 were escalated to the Ombudsman during 2016/2017.
- 7.3 Please see below a comparison of the number of complaints that followed the Social Services Complaints Procedure during 2015/2016 and 2016/2017.

TABLE 2 Social Services Statutory Complaints Procedure 2015-2016							
	Adults	In House Provider	Business	Housing	External Provider	Multi Service	Total
Stage 1	18	9	4		1	3	34
Stage 2							
Ombudsman	1						1
<b>Total</b>							<b>35</b>

TABLE 2 Social Services Statutory Complaints Procedure 2016-2017							
	Adults	In House Provider	Business	Housing	External Provider	Multi Service	Total
Stage 1	20	7	2	1	5		35
Stage 2	2						2
Ombudsman							
<b>Total</b>							<b>37</b>

### Stage 1 Complaints - 2016/2017



## 8. Adherence to the Timetable for Responding to Complaints under the Statutory Complaints Procedure

- 8.1 The Local Authority has a duty to report on the methods used to investigate and resolve complaints with the timescales laid out in the Guidance and Regulations.

<b>TABLE 3 Social Services Complaints Procedure – Resolution and Response Performance 2016/2017</b>						
<b>Stage 1</b>						
<i>Complaints received less than 12 months after the incident occurred</i>	<i>Complaints received more than 12 months after the incident occurred</i>	<i>Complaints acknowledged within 2 working days</i>	<i>Discussion held to resolve the complaint within 10 working days</i>	<i>Decision notified to the complainant within 5 days of the date of discussion</i>	<i>Response time extended</i>	<i>Average number of days extended before providing a response</i>
35	0	35	30	30	5	7
<b>Stage 2</b>						
<i>Number of complaints acknowledged within 5 working days</i>	<i>Number of responses received from the Independent Investigator within 25 working days</i>		<i>Number of responses postponed due to exceptional circumstances</i>		<i>Number of responses completed within 6 months</i>	
1	1		1		1	

## 9. Gwynedd Council Complaints Procedure

- 9.1 Some of the complaints received during the year fell outside the scope of the Social Services Complaints Procedure. These complaints were addressed under the Gwynedd Council Corporate Complaints Policy. Not all complaints received were brought to the attention of the Customer Care Officer as some will have been dealt with directly by the team/service concerned.
- 9.2 Some examples of this type of complaint: a member of the public complaining about a decision made by the Housing Service that they are not entitled to social housing; spelling and grammatical errors in official documents; an owner occupier asking for advice on boiler repairs and central heating.

<b>TABLE 4 Gwynedd Council Corporate Complaints received during 2016-2017</b>							
	<i>Adults</i>	<i>Provider Unit</i>	<i>Business</i>	<i>Housing</i>	<i>External Provider</i>	<i>Multi Service</i>	<b>Total</b>
<i>Stage 1</i>	2			1			<b>3</b>
<i>Stage 2</i>							
<i>Ombudsman</i>							
<b>Total</b>	<b>2</b>			<b>1</b>			<b>3</b>

## 10. Learning Lessons and Identifying Trends within Complaints

- 10.1 A quarterly report is presented to the Adults, Health and Wellbeing Senior Management Team. This presents an opportunity to analyse each complaint and to identify lessons to be learned so that the service that we offer can be continually improved.
- 10.2 The Senior Management Team include the lessons to be learned in their ongoing work plans and any training needs arising are also identified. As recommended in the recent Internal Audit of the complaints handling procedure by the Department, a 'lessons to be learned' log has been created. The Customer Care Officer shares the log with Senior Managers at the end of each quarter in order to notify them of the lessons learned that need to be addressed. The log is updated regularly to include any information on actions taken in connection with the lessons. This recording method will be a more effective way of identifying the lessons to be learned and to monitor the progress made in implementing these improvements.

Please see the Complaints Log in this report for more information (pages 9-12 of this document).

### 10.3 Themes arising from Enquiries and Complaint – Adults, Health and Wellbeing Department

- 10.3a **Concerns about difficulties encountered in arranging home care in rural areas in Gwynedd** – During the first half of 2016/2017, the Customer Care Unit received several enquiries and expressions of concern about the availability of home care services to Service Users in rural areas of Gwynedd. The main problems were concentrated in the South Meirionnydd area and it was also identified that lack of home care provision in the Dwyfor area was also becoming an issue. The Unit received 5 complaints/concerns in connection with this issue during quarter 1 and quarter 2. On a positive note, no complaints or concerns were received about this issue in quarter 3 or quarter 4 of 2016/2017.
- 10.3b **Complaints and Enquiries in relation to payments due from Service Users towards the costs of home care and residential care** – A variety of complaints and enquiries were received about invoices issued to Service Users in connection with their assessed financial contribution towards the costs of their home and/or residential care. Several Service Users complained that the Service had not explained to them clearly that they were due to contribute to the costs of the services that they received. Other Service Users complained that the cost of the service has not been explained to them prior to the commencement of the care package. The complaints were identified as a lesson to be learned in providing more effective communication between Service Users and staff about the costs associated with care packages.

For example: A relative complained on behalf of a Service User that the Service User had not been informed that she was expected to pay a contribution towards the costs of her care once her period receiving care

under the Enablement Scheme had come to an end. As a result, the Service User refused to pay the invoice due.

## **11. Training and Awareness for Staff Members**

- 11.1 An important role of the Customer Care Officer is to provide information and training to other staff on the Complaints Procedure so that they are aware of how the process works and of their role therein. To ensure that this training is offered to as wide a range of staff as possible, the Unit intends to move away from the traditional workshop model of training and towards using e-learning modules. The Unit hopes that this module will be ready to be delivered within the next few months.

## **12. Other Responsibilities**

- 12.1 The Customer Care Officer (Adults) is also a member of the Disabled Parking Bay Panel, who are responsible for coordinating applications from the public for installing Disabled Parking Bays on roads outside their properties. The Panel meets every 3 months to discuss the applications received. The Customer Care Officer is responsible for dealing with all enquiries by telephone, letter and email, and assists the Administration Assistant on the Panel to communicate all decisions made by the Panel to all applicants following each Panel meeting.

## **13. Expressions of Thanks and Appreciation**

- 13.1 It is also very important to record all instances of thanks and appreciation of the Service's work from Service Users and their families. Please see examples of the comments received on pages

<i>Adults</i>	<i>In House Provider</i>	<i>Business</i>	<i>Housing</i>	<i>External Provider</i>	<i>Multi Service</i>	<b>Total</b>
19	55	3	0	1	0	<b>78</b>

## **14. Work Plan for 2017-2018**

- 14.1 Create and deliver an introductory course on the Complaints Procedure to staff on all levels by the use of an e-learning module and continue to offer traditional training methods to those staff who do not use IT systems
- 14.2 Act on the recommendations from the Agreed Work Plan that was drawn up as part of the Internal Audit of the Complaint Procedure in February 2017. To be completed by the end of August 2017.
- 14.3 Develop the IT system used for recording complaints (RESPOND) to improve the way we recognise lessons to be learned and to improve the monitoring of the work done to implement those lessons and improve service delivery.



## Lessons Learned log derived from complaints received during 2016/17

Key:	SU - Service User ; SW - Social Worker								
Date complaint received	Ref No	Short description of the complaint	Lesson identified	Manager/Staff Involved	Responsible Senior Manager	Target Date for Actions	Date discussed by SMT	Management Team comments	Result of Actions Taken
03/05/2016	GC/3106-15	SU complained that it was not possible to report faults with the Telecare equipment during the weekends/out of hours.	Look at extending contact hours for the Telecare service in order to report faults during weekends and out of hours	Kim Warrington (Telecare Manager)	Rhion Glyn (Senior Business Manager)	As soon as possible			
10/06/2016	GC/3206-15	SU complained that the SW had not explained that she needed to contribute financially to the costs of her respite care	SW to provide a full explanation of the costs associated when discussing the possibility of starting respite care	Area Team Managers / Senior Practitioners	Mari Wynne Jones (Senior Enablement Manager)	As soon as possible		An information sheet has been produced (as part of the overall information leaflet about the service) for the SU to sign in order to verify that they understand that they will be required to contribute financially towards the costs of their care	A method has been developed to verify that the need to contribute financially towards the costs has been discussed and agreed with the SU before care begins
13/06/2016	GC/3246-15	SU assessed as needing an increase in his home care package, however the package could not be increased due to a general shortage of carers in the area (South Meirionnydd)	Identified a need for more home care to be made available in the South Meirionnydd area	Commissioning / Business Unit	Rhion Glyn (Senior Business Manager)	As soon as possible			Gwynedd and BCUHB are working on a joint Home Care project to establish a system where individual care providers will be responsible for providing care packages in defined areas of the county. There is also an intention to increase co-working between Social Workers, District Nurses and Occupational Therapists. A pilot project is underway in one area at the moment
21/06/2016	GC/3263-15	An SU's relative complained that she had no information about who to contact if a fault developed with her mother's Telecare equipment. No information provided by the SW	Ensure that all relevant contact details are given to SU's on installation of Telecare equipment	Kim Warrington (Telecare Manager)	Rhion Glyn (Senior Business Manager)	As soon as possible	Not applicable	Telecare Manager to ensure that an information sheet with all contact details is given to every SU when Telecare equipment is installed	Communicate the contact details for the Telecare service in a more efficient manner

28/06/2016	GC/3271-15	SU had been a resident at a Council owned residential home for long than was necessary because there was no SW available to make an assessment before being allowed to go home	Ensure that assessments can be completed in good time to avoid unnecessary periods of residence in residential homes/hospitals	Area Team Managers / Senior Practitioners	Mari Wynne Jones (Senior Enablement Manager)	As soon as possible		Ensure enhanced communication between staff at residential homes and BCUHB to identify individuals who are ready to leave the home/hospital. This would make the prioritising of assessments much easier.	Ensure enhanced communication between staff at residential homes and BCUHB to identify individuals who are ready to leave the home/hospital. This would make the prioritising of assessments much easier.
23/08/2016	GC/3369-15	Member of staff from BCUHB visited Plas Gwilym and asked to use the toilet. Noticed that there was no sink for hand washing or any hand sanitizer as an alternative	Hand washing facilities to always be available in every toilet	Mari Ellis Parker (Manager, Plas Gwilym)	Mari Wynne Jones (Enablement Senior Manager)	As soon as possible	Not applicable	Lesson to be cascaded amongst all Gwynedd residential home managers	Manager reported that hand washing facilities had been installed and hand sanitizer provided where there were no sinks
01/09/2016	GC/3386-15	Concern raised by local GP about the long wait for a reply to telephone calls to the Adults Advice and Assessment Team	SU had reported to the GP that they had to wait for long periods before getting through to the Adults Advice and Assessment Team	Mel Clarke (Adults Advice and Assessment Team Manager)	Mari Wynne Jones (Enablement Senior Manager)	As soon as possible		Senior Enablement Manager to hold discussions with the Senior Business Manager and Team Manager to establish the extent of any problems with staffing the telephone lines of this team	Administrative support now provided to the team. There is an intention to reorganise the contact arrangements with the Service by using the new 5-hub community system
14/09/2016	GC/3422-15	Family of SU complained that the staff had moved the SU to another room within the home without consultation with the family	Identified a need to communicate major changes in the living arrangements of SU's with the family where appropriate	Helen Jones (Manager, Llys Cadfan)	Gwenno Williams (In House Provider Senior Manager)	As soon as possible		Gwenno Williams to notify all Managers and staff for the need to communicate more effectively with families when required	All staff notified about the need to communicate matters that have a profound effect on SU's. Staff to assess when this would be appropriate as every situation is different
27/09/2016	GC/3450-15	A family member complained that the policy on charging interest on deferred charges for residential care fees had not been explained properly. Alleged that interest had been charged on the outstanding charges that would not have been accrued if the rules had been explained to him in full	Need identified to communicate the rules about charging interest on deferred charges clearly. Full information to be provided about deferred charges when the agreement is made to avoid misunderstandings in future	Nia Davies (Manager, Income and Welfare Unit)	Dafydd Tudur Jones (Financial Resources Manager)	As soon as possible		A review to be conducted of the information being provided in letters from the Income and Welfare Unit about the process of deferred charges and the policy on charging interest on these charges	

15/11/2016	GC/3500-16	Carer raised concerns that the residential home where his family member was receiving day care was not giving enough feedback on how she had been coping during her stay - not letting him know if she had refused a bath and no information about how well she had eaten. Also concerned that our recording of meetings were not detailed enough and that a member of CSSIW had not been invited.	Need identified to ensure that day care staff in homes communicate any problems that have arisen during periods in day care or respite care	Tracey Gardner (Manager, Hafod Mawddach)	Gwenno Williams (In House Provider Senior Manager)	As soon as possible		Staff have received explicit instructions to ensure that any problems that have arisen are communicated immediately to family and/or carers on the SU's return home from day care/respite care	Ensure enhanced communication between staff at residential homes and carers.
21/10/2016	GC/3459-15	Nursing home owner expressed concerns about the way a POVA meeting had been conducted. The meeting was chaired by a Gwynedd Council staff member. Owner believed that all the relevant issues had not been allowed to be discussed. He also stated that he did not believe that the proceedings had been fully recorded and complained that a member of CSSIW had not been invited to the meeting.	Need identified to review the arrangements and methods for recording proceedings from POVA meetings. At the present time, the POVA coordinator chairs the meetings and takes the minutes. Identified that there is a danger that some points from the discussion may get lost or mis-recorded. Also acknowledged that a staff member from CSSIW should be invited to every meeting in future.	Manon Williams (POVA Chair / Senior Practitioner)	Mari Wynne Jones (Enablement Senior Manager)	As soon as possible		Complaint was fully responded to in writing at stage 1 of the Complaints Procedure. A meeting was conducted with the complainant and the Enablement Senior Manager to further discuss his complaint. CSSIW have asked the Department to conduct another POVA investigation to cover all the other points that needed to be investigated.	Full consideration to be given to using administrative staff in future POVA meetings to record proceedings and take minutes. This would enable the Chair to concentrate fully on the proceedings. Ensure that CSSIW staff are invited to every relevant POVA meeting from now on

15/11/2016	GC/3540-16	An SU who is subject to a DOLS restriction order complained that forms and reports issued to her by the DOLS Coordinator had the wrong name on them and that the Senior Manager had not signed the forms in the correct place	Need identified to ensure that all DOLS documents are filled in correctly and are also grammatically correct before they are issued to families/carers	Kevin Griffiths (DOLS Coordinator)	Ceryl Davies (Learning Disabilities Senior Manager)	As soon as possible	Not applicable	Senior Manager has agreed a system whereby two members of staff will check all documents for errors before they are issued. Service Improvement Officer was also informed of this action.	System in place to verify the contents of documents by two members of staff before they are sent to the recipient
15/03/2017	GC/3734-16	SU complained that he had waited for a long period before a suitable shower seat had been installed at his home. There was a delay in ordering the seat and several types of seat were provided before the correct one was finally installed	Ensure that all orders for OT equipment are closely tracked to minimise delays in their installation	Area Team Managers / Senior Practitioners	Mari Wynne Jones (Enablement Senior Manager)	As soon as possible			
24/03/2017	GC/3811-16	A relative of a deceased SU complained that she had been given the wrong information about the extent of the estate's debt to Gwynedd Council	Ensure that the correct information is always available to answer financial queries of this nature in future	Huw Whyte (Client Assets Management Officer)	Dafydd Tudur Jones (Financial Resources Manager)	As soon as possible			
24/03/2017	GC/3811-16	A relative of a deceased SU complained that there were errors in invoices for residential care and that the invoices had been raised late	Ensure that all financial assessments are completed correctly and that all invoices are raised on time in order to aid the recovery of fees from SU's/	Nia Davies (Manager, Income and Welfare Unit)	Dafydd Tudur Jones (Financial Resources Manager)	As soon as possible			

## **INTERNAL AUDITOR'S REPORT – 2016/2017**

### **SOCIAL SERVICES COMPLAINTS PROCEDURES ADULTS, HEALTH AND WELLBEING DEPARTMENT**

#### **1. Background**

1.1 Following a recommendation submitted to the Cabinet by the Head of Adults, Health and Wellbeing Department, the complaints procedures of Social Services have been divided to coincide with the Children and Adults structure; a number of the audit findings apply to both departments. Welsh Government has published comprehensive guidance to enable Welsh councils to respond to these complaints. Additionally, listening to users' complaints coincides with Ffordd Gwynedd principles, namely to identify the needs of the users in order to shape and improve working arrangements and the service provided to the people of Gwynedd.

#### **2. Purpose and Scope of Audit**

2.1 The purpose of the audit was to ensure that appropriate arrangements are in place for the Council to be able to deal with complaints effectively in a way which complies with the regulations and also by giving consideration to the implications of the procedure in terms of appointing independent investigators and securely maintaining the computer system.

#### **3. Main Findings**

3.1 The Department succeeds in investigating complaints effectively, and avoiding the need for the vast majority of investigations to escalate to 'step 2' investigation. However, it appears that they do not follow Welsh Government guidelines, and therefore are not taking advantage of opportunities to improve. By listening to the people of Gwynedd, a fundamental change can be made to the way the Department operates and the service can be improved from lessons learned.

3.1.1 It appears that a substantial number of enquiries reach the service that could have been discussed directly with the Unit manager to give them the opportunity to deal with the matters and learn from them. This does not mean that complaints would be turned away, rather it would change practice and culture between the services and the users.

3.1.2 Although there is some information available on the Council website regarding making a complaint and the procedure, there is the opportunity here to promote the new culture of Units using complaints to improve their service. Some of the information was also dated.

3.1.3 Contrary to Welsh Government guidelines, there is no evidence that complaints are discussed with the users at meetings or in formal telephone conversations before closing the complaint. Following investigations, meetings are arranged to discuss the way forward after closing the complaint. It was seen that the content of telephone conversations are confirmed in the formal letter which closes complaints.

3.1.4 Formal letters are being used to explain why the Council is not at fault rather than acknowledging and apologising for misconduct or a mistake. Similarly, no solutions are offered in relation to the users' dissatisfaction with the service. When a complaint is made about any action that is in accordance with policies, no consideration has been given to investigating the suitability of the policies, in order to improve the service for the user.

3.1.5 The management team discusses an overview of the complaints meaning that some complaints are overlooked while only the matters which come up more than once receive attention. Once a discussion is held on the matters arising, there is no follow-up on progress at the next meeting, and therefore there is no full assurance that the agreed actions have been implemented.

#### **4. Audit Opinion**

**(B) Partial assurance can be expressed of the propriety of the Social Services Complaints Procedure as there are controls in place, but there are aspects where some arrangements could be tightened. The Customer Care Unit is committed to implementing the following steps to mitigate the risks highlighted:**

- ☐ Meet as appropriate as each case demands.
- ☐ Look at the wording of letters and consider the reader.
- ☐ Create a Lessons Learnt Log and administer it continuously.
- ☐ Propose suggestions in the complaints form to managers, and also mention them in the e-mail sent.
- ☐ Include every complaint in the quarterly report to the Department Management Team.
- ☐ Regularly provide a summary of enquiries to relevant managers and senior managers.
- ☐ Include a follow up to the lessons log at the meetings of the Department Management Team to confirm that action is being implemented.
- ☐ Encourage managers to come up with different options with the support of the Department's Management Team.

## Examples of Thanks and Appreciation received during 2016/2017

Ref	Short description	Category	Unit / Team
GC/3142-15	"As a professional it give me reassurance that I can rely on your team to always provide the highest standard of service, therefore I would like to thank you all for your dedication and wonderful care you provide."	Thanks	Learning Disability Team (Arfon)
GC/3231-15	"I would just like to thank the Dolgellau Adult Social Services team who provided supportive, friendly and professional service/advice to both me and my father over the final few years of his life. In particular Tesni Rowlands and Nia Owen were outstanding in the way they helped maintain and support my father's home care and in tackling the very difficult interaction with NHS Continuing Care. Please could this thanks be passed on to them and acknowledged by their managers as I know the department has been operating under very difficult financial conditions and they did an outstanding job for my father. I was most impressed with all they did and all interactions I had with them"	Thanks	Elderly Adults Team (Meirionnydd)
GC/3245-15	I have received a telephone call from Mrs XX who reports that she is now independent and happy for the care package to come to an end. She wished to thank all the staff for the care she had received and praised the carers for their work with her.	Thanks	In-House Provider Unit
GC/3266-15	I wanted to thank you for your help with the changes to my bathroom and for the handrail and lever taps. The changes to the bathroom especially have made such a difference for me. It is wonderful to be able to shower whenever I want to, no matter how I am feeling or how much pain I am in. There is also more room in there now which also makes it much easier when I am in more pain. The handrail being on the right hand side of the stairs now makes it much easier for me to get up and down. Being able to use both handrails when I am having a particulary bad day really helps	Thanks	Occupational Therapy Service
GC/3390-15	The Enablement service for Mrs XX has now come to an end following the recent visit. Mrs XX wished for me to pass on her thanks for the service that she had received and wanted to state that all the carers had been very kind to her.	Thanks	In-House Provider Unit
GC/3458-15	"He has phoned up to thank you for all the hard work and support you have provided for his family and especially his father. He wanted you to be recognised for the "good work" that you do and wanted me to highlight how pleased he is with the care his dad is receiving. He wanted me to pass this on to you and your managers"	Thanks	In-House Provider Unit
GC/3519-16	"I will never forget the exceptional care that my aunt received from your team of carers. Thank you very much"	Thanks	In-House Provider Unit
GC/3529-16	"...thank you very much for all the support that I have received from you. The help that you have given me has been exceptional. You are always ready to help me. You are kind, thoughtful and work very hard. Thanks to you, I have tried to increase my confidence in the buddi system which has helped me very much. It was excellent that your carers took the time to lead me through the process of using it without any complaints when I asked questions. "	Thanks	Telecare

Ref	Short Description	Category	Stage	Unit / Team	Outcome
<b>Adults, Health and Wellbeing – Examples of Complaints and Enquiries received during 2016/2017</b>					
GC/3106-15	A Service User's relative contacted the Department to complain that there is no emergency service for out of hours periods in order to resolve urgent problems with Telecare Equipment. An installed fire alarm had been ringing throughout the weekend with no way to switch it off.	Service Quality	Stage 1 Complaint	Telecare (Care and Repair)	Explained to the complainant that the Telecare service currently is only available during office hours, but that a review of the service was due very soon. The issue was passed on to the appropriate Manager for further consideration and logged as a lesson to be learned.
GC/3119-15	Service User wished to complain that he had not been assigned a new Social Worker after he had requested that his current worker be replaced.	Staff Performance	Stage 1 Complaint	Mental Health Team	The Mental Health Team contacted the Service User to confirm that a new Social Worker would be appointed to his case by the end of the week.
GC/3150-15	Service User's daughter complained that staff members had not informed her that a pre-planned meeting with her mother's Social Worker had been cancelled as the Social Worker was unwell and unable to attend. A complaint about the lack of communication.	Lack of communication Staff Performance	Stage 1 Complaint	Elderly Adults Team	Senior Practitioner had telephoned the Service User earlier that day to notify her of the cancellation and had received a positive response. The Service User had forgotten that she had received the telephone call and had not informed her daughter that the meeting had been postponed. An important lesson learned from this case was the need to contact family members (where appropriate) to cancel meetings if the Service User is suffering from memory problems.
GC/3156-15	Service User's relative complained of the lack of day care places available for elderly people in the Bangor area. The family had not been able to arrange regular day care for her mother.	Access to Services	Enquiry	Elderly Adults Team	An apology was given for the relatively small number of day care places available in the Bangor area at that time, and assurance was given that the Department would continue to assist the family to source regular day care.
GC/3178-15	Service User's daughter complained about a decision by a Residential Home to ask her to move to another home due to inappropriate behaviour towards the other residents. There was evidence of anti-social behaviour by the Service User.	Service Provision	Stage 1 Complaint	In-House Provision Elderly Adults Team	Several multi-disciplinary meetings were held with the family over a 3-month period to attempt to resolve the situation. This was a particularly complex case as the Service User was an especially vulnerable adult and the families of other Service Users had also complained to the Department about her behaviour towards their relatives. Measures were put in place to protect the Service User and other residents, which eventually resolved the complaint to the complainant's satisfaction.
GC/3181-1	Service User's relative asked not to be asked to pay an invoice for their contribution towards the costs of care at a Nursing Home due to accusations of mis-treatment having been made. A POVA	Control of Financial Resources	Enquiry	Income and Welfare Unit	A decision on this enquiry was made at the conclusion of the POVA investigation, which found that there was no evidence of mis-treatment by the Nursing Home staff. Subsequently, it was decided that the invoice for the costs would still be payable by the Service User.



	investigation was ongoing at the time.				
GC/3204-15	Carer complained that a lack of service provision by the Department for his step-son was having a negative effect on his own life	Service Provision	Stage 1 Complaint	Learning Disabilities Team	This complaint was addressed by offering the carer and his step-son a full assessment of their needs so that an appropriate service could then be implemented. All offers were rejected by the carer and step-son after lengthy and detailed discussions. The case is still open to the Learning Disabilities Team.
GC/3206-15	A Service User's relative asked not to be liable to pay an invoice for respite care. The relative stated that the Social Worker had informed the family that the Service User would not be charged for respite care and had accepted the offer of respite care on this understanding.	Lack of communication	Enquiry	Elderly Adults Team	The investigation into the complaint concluded that not all the relevant information had been given to the complainant about the possible costs associated with respite care. The invoice for £1994.18 was waived. It was identified that this case presented an important lesson to be learned, which was the need to communicate costs associated to particular services clearly to the Service User and their families before the care commences.
GC/3213-15	A complaint by a Service User that there was no home care available to give assistance to him in the mornings.	Service Provision	Stage 1 Complaint	Elderly Adults Team	Explanation and apology given, along with assurances that efforts were constantly being made to source a care provider to start the service. Also explained that there is a shortage of carers available in his area of the county.
GC/3215-15	A relative complained on behalf of a Service User that she had not been informed of the requirement to pay for home care at the end of a period of Enablement. Not willing to pay for the service.	Lack of communication	Stage 1 Complaint	Elderly Adults Team Income and Welfare Unit	Evidence exists of communication from the Social Worker and the Income and Welfare Unit with the family to explain that the service would be chargeable once the period of Enablement care had come to an end. Request to cancel the invoice refused by letter to the complainant.
GC/3246-15	Service User from South Meirionnydd complained that the planned increase in her home care package was unable to be implemented due to a shortage of available staff/care providers in the area.	Service Provision	Stage 1 Complaint	Elderly Adults Team Commissioning	Letter written to the Service User by the Senior Business Manager to explain that there is a shortage of available home care provision in the area. Apologies given for this and assurances that the Department are treating her case as a priority. Shortly after the complaint was received, extra hours had been sourced so that the hours provided could be increased.