



# Annual Social Services Complaints, Compliments and Representations Report 2019-20



## 1. Introduction:

- 1.1 It is a statutory requirement for Local Authorities to have in place a representations and complaints procedure for Social Services under the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014 and its associated 2014 guidance.
- 1.2 Each Local Authority is required to produce an annual report concerning the operation of its representation and complaints procedure.
- 1.3 This Annual Report provides information about the operation of the Social Services representation and complaints procedure between 1<sup>st</sup> April 2019 and 31<sup>st</sup> March 2020. The report contains information about the number and type of complaints received and also provides details of the activities undertaken during this period to develop the service.

## 2. Background:

- 2.1 In relation to complaints, our approach is based on "**Getting it right**" first time & if not, then "**Putting it right**" as soon as possible.
- 2.2 An effective complaint handling system is one that provides confidence that complaints are dealt with effectively through the following three steps:
  - 1) Arrangements for enabling people to make complaints are customer focused, visible, accessible and valued, and supported by management.
  - 2) Complaints are responded to promptly, handled objectively, fairly and confidentially. Remedies are provided where complaints are upheld and there is a system for review.
  - 3) There are clear accountabilities for complaint handling and complaints are used to stimulate and mandate (as appropriate) organisational improvements.
- 2.3 Powys County Council Social Services Complaints Procedures seek to empower service users or those eligible to speak on their behalf to voice their concerns in relation to the exercise of Social Services functions.
- 2.4 The Complaints Team are committed to ensuring that concerns raised are listened to and resolved quickly and efficiently. Lessons learned from this process are fed back to relevant teams and used, wherever possible, to improve future service delivery.
- 2.5 Similarly, Social Services in Powys adopts a positive attitude towards complaints and views them as a valuable form of feedback, which assists in the development and improvement of its services.

- 2.6 The aim is to resolve complaints at the earliest opportunity and teams are encouraged to be proactive in achieving this goal.
- 2.7 Where someone has been deemed 'not eligible' to utilise the Social Services Complaints Procedure, in accordance with guidance/legislation, the Complaints Team will endeavour to provide assistance informally in order to provide best service to the complainant. The Complaints Team keep account of these contacts and these are referred to throughout this report as 'enquiries'.
- 2.8 Where a complaint relates to a young person, Looked After Child, a care leaver or vulnerable adult, the Local Authority has a duty to provide information about advocacy services and to offer help, where relevant, in obtaining an advocate to support them through the complaints process and this is actively pursued.
- 2.9 Effective engagement with advocacy services empowers more individuals and groups to make use of the complaints process at the earliest opportunity. There has been an increase in complainants utilising advocacy services over the past 12 months and this is certainly something that the Complaints Team would continue to encourage and support.
- 2.10 Experience indicates that complainants who opt to use the services of an advocate, tend to have more of an understanding of their circumstances, their rights and the Authority's responsibilities. In addition, in the majority of cases individuals are able to reconcile their feelings about the situation through an advocate and resolution is more speedily achieved.

### **3. Changes to the Complaints function and complaints reporting**

- 3.1 Before presenting details of the activity within the year, it is important to advise of some key changes to the capacity within the Complaints team and of the recording of Complaints, Compliments and Comments.
- 3.2 In October 2019, the capacity within the Social Services team was reduced from 2 fte Complaints Officer and 1 fte Complaints Administrator to 1 fte Complaints Officer and 0.5 fte Administrator.
- 3.3 The rationale for this was that the Council was introducing a new Corporate Complaints recording and reporting system, which we were advised, would significantly reduce the workload of the Social Services team and as such service efficiencies and savings could be made as part of the wider corporate transformation plan for 2019/2020.
- 3.4 The corporate system is in place and ICT & BII colleagues have worked closely with the Complaints team and managers to embed the system, address recording and reporting issues as they arise and provide guidance and support to the complaints team and officers assigned complaints to investigate and resolve.

- 3.5 However, the implementation of this system has not been unproblematic and our experience shows that whilst this system does have the real potential to reduce some areas of workload and increase oversight and visibility of complaints and compliments, these benefits have not yet been fully realised.
- 3.6 There is more work needed, aligned with other developments across complaints and in relation to our social services teams which need to be undertaken, before these service efficiencies are achieved.
- 3.7 In light of the issues identified in the points above, we will be undertaking a review of the management and capacity within the Complaints Team during 2020/21. This forms one of the priority areas within our Improvement Plan which is summarised in **Appendix 1**.

#### 4 Summary and analysis of Complaints & Enquiries:

**Table 1 - Social Care Complaints & Enquiries 2017 – 2020:**

| <b>PCC - Social Care</b> | <b>2017/18</b> | <b>2017/18 %</b> | <b>2018/19</b> | <b>2018/19 %</b> | <b>2019/20</b> | <b>2019/20 %</b> |
|--------------------------|----------------|------------------|----------------|------------------|----------------|------------------|
| <b>Complaints</b>        | 191            | 69%              | 143            | 50.3%            | 97             | 40%              |
| <b>Enquiries</b>         | 86             | 31%              | 141            | 49.7%            | 145            | 60%              |
| <b>TOTAL</b>             | 277            | 100%             | 284            | 100%             | 242            | 100%             |

- 4.1 When analysing complaints, it is important to remember that an increase or decrease in the number of complaints does not necessarily reflect a change in the standard of service provided. An increase may indicate the positive view that is taken towards complaints, together with the fact that people are more well-informed about how to make a complaint.
- 4.2 Given the vulnerability of many people accessing services, it would be worrying if people felt they were unable to complain, if in their opinion, they were receiving an unsatisfactory service.
- 4.3 As can be seen from the table above, the balance between formal complaints and informal enquiries continues to grow, with enquiries now being the main ways in which concerns are raised and resolved.

- 4.4 The Complaints Team undertook to deal with incoming concerns as ‘enquiries’ wherever possible in 2019/20 in order to both support individuals, seeking a more immediate recognition of and resolution to their concern.
- 4.5 The team always make it clear to individuals that they can still progress to making a formal complaint (in line with eligibility to do so) if they are not satisfied with the response to, and outcome of, their enquiry.
- 4.6 Responding to enquiries takes up a significant proportion of their time within the Complaints Team, as unlike formal complaints which are passed onto the relevant team/manager to address and resolve, most enquiries are dealt with directly by the complains staff. They to understand and clarify concerns, liaise with relevant teams for information and engage with the “enquirer” directly to respond and informally resolve their concerns.
- 4.7 The success of this approach is evident in the decrease in the number and ratio of official complaints to enquiries made during this period. In addition to the above, the Complaints Team receive further communication which is not recorded and can usually be dealt with by the provision of information/advice or by identifying the right team /officer to respond to them.
- 4.8 The complaints that have been formally submitted in 2019/20 do in general continue to be more complex and involve a number of service areas / themes and as a consequence often take much longer to investigate and resolve.
- 4.9 There has been a 33% decrease in the total number of complaints made in 2019/20 compared to the previous year. across both service areas.

**Table 2: Profile of Complaints by Service:**

| <b>PCC - Social Care</b>     | <b>2018/19</b> | <b>2018/19 %</b> | <b>2019/20</b> | <b>2019/20 %</b> |
|------------------------------|----------------|------------------|----------------|------------------|
| <b>Adult Complaints</b>      | 58             | 40%              | 49             | 50.5%            |
| <b>Children’s Complaints</b> | 77             | 60%              | 48             | 49.5%            |
| <b>TOTAL</b>                 | 143            | 100%             | 97             | 100%             |

- 4.10 As a proportion of all complaints, we can see that in this last year 2019/20, Adults and Children’s services received virtually the same number of formal complaints. Whilst both services saw a reduction in complaints, Children’s have decreased by 38% and Adults by 16%.

4.11 To put these complaints into context, for Adult services, which at 31 March 2020 has 4665 people open to the service, this means a complaint rate of 11 per 1,000 clients and for children who have 1466 children open to them, this means a complaint rate of 33 per 1000 clients.

4.12 Additionally, as previously stated in the annual report last year, these relative figures need to be understood in the context and nature of the statutory duties and responsibilities that Children's Services has in comparison to Adult Services. At its broadest level Children's statutory duties centre around ensuring that children are kept safe and protected from harm and Adult services centre around ensuring that Adults and Older People receive service which are primarily there to enhance their current living situation.

**Table 3: Complaints by Stage**

| <b>Complaints received relating to Adults and Children's Services</b> |                |                  |                  |
|---|----------------|------------------|------------------|
|   | <b>2017/18</b> | <b>2018/2019</b> | <b>2019/2020</b> |
| <b>Stage 1</b>  | <b>184</b>     | <b>120</b>       | <b>88</b>        |
| <b>Stage 2</b>  | <b>6</b>       | <b>15</b>        | <b>9</b>         |
| <b>Ombudsman</b>  | <b>1</b>       | <b>**8</b>       | <b>**4</b>       |
| <b>*Total</b>   | <b>191</b>     | <b>143</b>       | <b>97</b>        |

*\*It should be noted that a number of the complaints will be double/triple counted as they are included in each stage of the complaints process that they triggered in the year. However not all complaints at the Ombudsman or at Stage 2 will have been in Stage 1 in this year.*

*\*\* Ombudsman Complaints counts those that were accepted by the Ombudsman in the year being reported upon, not those which may still be ongoing with the Ombudsman from the previous year*

Of the 4 new complaints accepted by the Ombudsman (all Children's services), 2 were concluded by them with no further actions required of Powys County Council. 2 are still open to investigation by the Ombudsman.

## Examples of Complaints:

**Complaint:** *Submitted by husband in relation to Adult Services with assistance from local member*

*The complainant expressed concerns regarding the delayed hospital discharge of his wife to their house. He requested support and involvement from the Complaints Team in this matter.*

**Outcome:**

*In response, efforts made to assist this lady to return home were impacted by the shortage of Domiciliary Care Support in the more remote area where this couple lived and as such made the provision of assistance, more difficult to secure.*

*Working with the hospital, commissioning and our reablement service the Council was able to gain agreement that some domiciliary care staff who lived closer to this area could be released and so that they could provide care to this family. With this agreement in place appropriate arrangements were made and the lady returned home, much to her husband's delight.*

**Complaint:** *Submitted re concerns over lack of support from Children Services.*

*Inappropriate behaviour by social worker towards complainant and partner. Service User was pregnant and felt intimidated and judged by social worker. Requiring support and assistance in preparation for children's birth. Criticism was also made on the condition of their accommodation.*

**Outcome:**

*These concerns were looked into by a Senior Manager who following a review of all relevant plans and records discussed these issues with the Social Worker to explore the family's concerns.*

*An unreserved apology was made to the couple and it was made clear to them that they were not “being judged “and that we were sorry that they were made to feel as if they were, we also recognised and apologised for delay in communication s with them.*

*Complainant very pleased with outcome as a weight off her mind.*

***Complaint: Submitted by daughter unhappy with Care Provider in relation to Adult Services***

*The complainant advised that she was unhappy with the service received from care provider for parent, not getting value for money and not arriving on specified/agreed times which was paramount due to health condition of parent. Requesting change of care provider or use of Domiciliary Care provided directly by Powys County Council.*

***Outcome:***

*As part of the complaint investigation by Contracts and Commissioning a review of the call monitoring system has taken place, and this confirmed that call times vary, and late visits have taken place.*

*Following this investigation, the Care Provider agreed this was not acceptable and apologised that this had happened on a number of occasions. Going forward they agreed to monitor call times to check that agreed call times are adhered to.*

*The Regional Manager met with complainant and mother to apologise and explain how they would monitor call times going forward.*



**Complaint: submitted by service user re lack of communication with Children Services.**

*Service User concerned about the lack of information provided re children being placed on Child Protection Register and unhappy with the actions of two members of staff involved.*

**Outcome:**

*The Service User was visited by a Senior Manager & Complaints Officer to discuss the issues concerned. The outcome of this meeting was extremely positive and meant that more formal proceedings were not required either in relation to this parent or in relation to the 2 staff members.to*

*The complainant was pleased that their concerns were listened to, had been investigated and a letter of apology relating to their involvement with PCC was sent to them and the complainant was satisfied with this outcome.*

- 4.13 There were a number of complainants that on initial contact with the Complaints Team requested their complaints be addressed at Stage 2. However, with the intervention of the Complaints Officer these were able to be resolved without the need for external independent investigation therefore settling issues for individuals more promptly and saving the Authority considerable time and additional expense, in addition to providing service users with a more timely and personal resolution.

**Table 4 - Outcome of Complaints**

| <b>Complaints</b>       | <b>2018/2019<br/>%</b> | <b>2019/2020<br/>%</b> |
|-------------------------|------------------------|------------------------|
| <b>Other</b>            | 6%                     | 16%                    |
| <b>Not Upheld</b>       | 18%                    | 30%                    |
| <b>Partially Upheld</b> | 13%                    | 26%                    |
| <b>Upheld</b>           | 63%                    | 28%                    |
| <b>*Total</b>           | <b>143</b>             | <b>97</b>              |

4.14. For 2019/20, we have provided additional analysis by each Service and Stage 1 and Stage 2 Outcomes.

**Table 5 – Outcome of complaints by Service Stage :**

| <b>Outcome Status</b>   | <b>Stage 1 Adults</b> | <b>Stage 1 Children</b> | <b>Stage 2 Adult</b> | <b>Stage 2 Children's</b> |
|-------------------------|-----------------------|-------------------------|----------------------|---------------------------|
| <b>Other</b>            | 12%                   | 18%                     |                      |                           |
| <b>Not Upheld</b>       | 26%                   | 34%                     |                      |                           |
| <b>Partially Upheld</b> | 26%                   | 25%                     | 100%                 | 100%                      |
| <b>Upheld</b>           | 36%                   | 23%                     |                      |                           |
| <b>Total</b>            | <b>100%</b>           | <b>100%</b>             | <b>100%</b>          | <b>100%</b>               |

4.15 Service users have unique and complex individual circumstances for registering their complaint and it is becoming harder to identify one sole theme for each complaint. Complaints can and do include multiple areas of concerns and could fit into several thematic headings which can make categorisation problematic and mis-leading.

4.16 Having said this, the areas of concern/ themes that are most common across both Adult and Children's services are as follows, listed in order of most frequently cited concern when reading these complaints:-

- i) Lack of timely communication / poor communication
- ii) Turn-over of staff / lack of named / identified worker to provide follow-through and consistency.
- iii) Poor standards of care / quality of care concerns
- iv) Lack of support from / attitudes of staff
- v) Concerns with financial assessments
- vi) Decisions about levels of care and support
- vii) Lack of clarity about / failure to follow policies & procedures
- viii) Other areas

- 4.17 Issues with communication is the single most common theme that continues to be identified in complaints submitted across all teams. Service users cite that have felt the need to escalate their concerns as a result of significant delays in communication from teams, no response from teams or inadequate response from teams, together with a failure to act upon agreed actions, resulting in unacceptable delays, with the reasons not being passed on to Service Users.
- 4.18 It should be noted that in relation to the second theme of turnover/lack of staff for continuity, both services, but particularly Children's Services have experienced an unprecedented high level of turn-over (particularly of interim/agency staff), as the services developed and followed through on implementing their service re-designs in line with Welsh Government Inspection findings and recommendations.
- 4.19 The outcome of all of this turn-over and disruption will be managers and staff in substantive roles in their substantive teams, focussed on building up both stability for our clients and families and their confidence in our services and support to them.
- 4.20 It is also important to highlight, particularly in relation to Adults Services, that many of the complaints relate to the actions and practice of the care providers we commission and not just solely to PCC staff in Adult Services.
- 4.21 We have a number of processes in place to address concerns with our commissioned care providers which include contract management oversight and where necessary formal reporting via "Poor Practice" records to the Integrated Multi-Agency Quality Assurance Board, where specific actions are required to assure and evidence improvements.
- 4.22 In addition to the complains that we receive, and which we absolutely must hear, consider, respond to and resolve, we do also receive complaints from a number of people whose approaches to Social Services, can only be described as "**unacceptable**".
- 4.23 Currently there are at least 7 individuals who the Complaints team have identified as coming into this category. They have had a number of formal investigations into their concerns over a number of years, and significant amounts of time and capacity have been spent by PCC in meeting with, writing to and calling these individuals to listen to and resolve their concerns.
- 4.24 However, this is to little sustained effect, and the continued approach of these individuals to our staff causes stress, anxiety and concern across a range of teams. This is unacceptable.
- 4.25 Within Social Care, we are now working with Corporate colleagues who are leading on developing a new "**Unacceptable Customer Conduct Policy and Procedure**", which is now going through formal Council processes. Below is a key extract from this draft policy:-

***“Powys County Council (the Council) is committed to putting customers at the very heart of service delivery but there are occasions when customers/service users can act in a way that we deem undesirable. The Council expects its employees to treat customers in a respectful manner and conversely, customers should treat Council employees with respect. Whilst it is acknowledged that customers can get frustrated, the Council will not tolerate behaviour which is deemed unacceptable, threatening, abusive or unreasonably persistent”***

***“The Council defines undesirable behaviour as that which shows characteristics of discrimination, harassment, bullying, unreasonableness or vexation or a combination of these”***

## 5. Summary of Compliments:

| <b>Social Care Compliments</b> |                |                |
|--------------------------------|----------------|----------------|
|                                | <b>2018/19</b> | <b>2019/20</b> |
| <b>Children’s Services</b>     | 14 – 11%       | 14 – 10%       |
| <b>Adult Services</b>          | 126 – 89%      | 130 - 90%      |

- 5.1 There has been virtually no change in the number and proportion of compliments in total and between the 2 service areas from last year to this.
- 5.2 When considered overall, as with previous years, Adult Services continue to be in receipt of the majority of compliments in 2018/19. The higher percentage of compliments received by Adult Services over that of Children’s Services would seem to be attributable to the overarching nature of the services that Children’s Services provide (which as identified earlier are much more interventionist and statutory to assure the safety and wellbeing of children).
- 5.3 Adult Services are often seen as a provider of supportive services such as home care, aides and adaptations. These are all viewed as helpful, enabling people to live their lives as independently as possible and easing the strain, again a good reason for submitting a compliment.
- 5.4 Children’s Services on the other hand are perceived as fulfilling a more regulatory function, initiating care proceedings, undertaking child protection functions, removing children from the family home and placing them in care and by their very nature are perceived as more intrusive, monitoring and enforcing, thus less likely to generate compliments.
- 5.5 However, both services have statutory safeguarding duties and can become involved with individuals and their families at times of crisis, when things have gone wrong or reached a critical point, giving rise to the need for intervention or safeguarding.

- 5.6 Not with-standing these points, it is clear that the individuals who have taken the time to submit formal compliments are very clear about the value, and really positive impact that our individual staff, team and services have had on them and their loved ones, as so clearly highlighted in the sample of compliments presented below:

**Please note that the names of staff, service users and family members have all been replaced with a 😊**

#### **Adult Services – OT South**

*I just want to thank you properly, and for your managers to know, for being extremely helpful this afternoon when dealing with the hoist collection/ delivery situation. And also, for your help in facilitating equipment for use in single handed care training.*

*Both situations are out of the ordinary, requiring some creative out-of-the-box thinking, and a helpful can-do attitude, both of which have been very forthcoming from you.*

#### **Adult Services – Adult with Disabilities**

*I would be very grateful if you could pass on my thanks to everyone at Castell Y Dail (employees and service users) for all the hard work they have put into making the HSE Inspectors visit to the base today a success. In particular 😊 who gave the Inspector a guided tour around the facility, which she seemed to enjoy especially with the health and safety commentary 😊 gave on the way round.*

*It was evident that over the last few months employees (in particular 😊) have put a lot of hard work in to ensuring suitable systems and procedures are implemented to prevent employees and service users being exposed to excessive levels of vibration while using tools and equipment. The Inspector indicated today she was happy with the documentation, procedures and control measures that have been implemented and was recommending no further action was to be taken by the HSE in relation to HAVS at CYD at this time, which is a good result.*

*As noted during my HSE pre-visit checks, there were quite a few areas that required attention around the facility, to ensure the facility was viewed in a good light by the Inspector. I have to say that both staff and service users have excelled themselves in the work that has been done over the last week or so and have demonstrated to the Inspector that this is a safe facility, while still allowing service users to learn life skills. This was demonstrated when the Inspector only noted one small issue during her walk around the facility.*

*Well done everyone but remember we mustn't rest on our laurels and we must keep up the good work.*

### **Adults Services - Domiciliary Care**

*I've just spoken to a gentleman from Rhayader area who is absolutely bowled over with the kindness and generosity of the community around him. He was in tears as he explained that thanks to Rhayader Home Support and local businesses rallying around, not only will his shopping be dropped off by the local store abut now the local fish and chip shop are doing home deliveries to elderly and vulnerable people. Well done the community.*

### **Adults Services - Contracts & Commissioning**

*As we near the 2nd transition date, I just wanted to acknowledge the hard work and support of the Brokerage Team in providing and answering my many queries these past few weeks, and express my thanks, it has been greatly appreciated.*

### Adults – Reablement North

*I wish to say a huge thank you to you all for your care and kindness to me, your friendliness was outstanding. God Bless.*

### Children - Integrated Disability Team

*Just preparing documents for Court on ☺. Having read the ☺'s Final Analysis can you make sure that whoever should know is made aware of what the ☺ has said about ☺ (Social Worker) and the foster carer. The comment is, "... exemplary care and support, over and above that which would be expected of a foster carer. I note additionally that the social worker in this case has shown significant commitment to ☺ and his role within the case is an example of best practice in corporate parenting." I have rarely seen such high praise from a guardian, and it is wholly merited – Social Worker has been exceptional, and I have no doubt ☺ has assisted as Team Manager. ☺ had, on at least one occasion, stayed overnight at hospital such was ☺'s ill health. It seems a pretty thankless task being a social worker at the best of times. He is an absolute credit to the Local Authority.*

### Children's Services – Integrated Disability Team

*Just to let you know, ☺ (Social Worker) is a breath of fresh air, she is supportive and keeps in touch, if I ring, she rings me back, if I email she answers. ☺ is certainly at the forefront of her mind, and sorting this out is paramount to her. She is smiley and empathetic; I wish she had been her SW from the beginning. Just thought you would like to know.*

## Children's Services – Brecon

*Just wanted you to be aware out of all the social worker I have had you were the best one! You were very consistent within your work, when I needed answers. Although your videos were weird, they made me laugh, making realise and understand the message you were giving me after a while! Also, you were very easy to get on with. P.S. 😊 wanted to say this: **You very reliable, consistent, and approachable. As well as you always being good, you always carried out what you said you would do. Thank you, all the best!***

5.7 The individual staff members have been made aware of the compliments concerning them, and their Team Manager, Senior Manager and Head of Service has also been advised.

5.8 As well as these formally submitted compliments, we know that many service users and their families, do thank our staff on a daily basis.

### **6: Our approach to continued learning from Complaints and Compliments and further improving our Customer Care:**

- 6.1 The Complaints Team and Quality Assurance Officers continue to work closely together, to monitor complaints, identify themes and any areas of concern, which are fed into an overarching Quality Assurance Audit plan and Panel, alongside embedding the “*Best Practice*” we see highlighted by individuals in their compliments to us.
- 6.2 This link has led to a better understanding of the importance of complaints and by extension the role improved communication can play in reducing stress and upset, which in turn should improve the way in which the Authority is perceived.
- 6.3 By reporting to the Quality Assurance Panel, which is attended by Senior Members of staff including the Heads of Service, it is keeping lessons learnt from complaints at the fore of service agendas.
- 6.4 Learning from complaints, compliments and other areas of customer feedback are also an important feature of reflective practice sessions across all teams.
- 6.5 In the past 3 years the Complaints Team have not had any calls where someone wants to speak in Welsh, but they have received 2 complaints/emails in Welsh over the last 3 years and they both wanted to know how many complaints we had received in the Welsh Language. Whenever required both conversations and letters would be take place in Welsh if that was the person's choice.



## 7. Conclusion:

- 7.1 There has been a substantial decrease in the number of Stage 1 Complaints received within 2019/20 whilst Enquiries have remained constant identifying that people remain happy to resolve their concerns with us without feeling the need to make a formal complaint.
- 7.2 The number of formal compliments received during this year are virtually identical to last year.
- 7.3 We have identified important areas of development and improvement to further enhance our Customer Care in 2020/2021, with a number of these areas already in place or being actively progressed, and these areas are set out in our focussed Improvement Plan in **Appendix 1**.
- 7.4 We are confident that governance, oversight and assurance in relation to ensuring we are "**Getting it right**" first time & if not, then "**Putting it right**" as soon as possible is in place and working more effectively this year than last, and next year will improve further.

**Ali Bulman**  
**Corporate Director**  
**Social Services**  
**Powys County Council**

**24th June 2020**

## Appendix 1:

### Customer Care: Improving the management and oversight of Social Care complaints and the Complaints function:

| Complaint Area   | Improvement / Outcome   |
|--|---|
| <b>Customer Care Charter</b>   | <ol style="list-style-type: none"> <li>1. Customer Care Charter which has been developed through co-production with key stakeholder groups including service users, carers, partners and officers of Powys Social Care.</li> <li>2. The Charter clearly identifies and sets out for individual clients, their families and residents in Powys what they should expect from their contact and engagement with Powys Social Care.</li> <li>3. The Charter provides staff with a clear, consistent and comprehensive framework for engaging positively with individual clients, their families and residents in Powys. The Charter will be the overarching framework which contains relevant policies, leaflets, training, guidance and other resources to support our practitioners, managers and business partners improve our engagement and responsiveness when providing social care services and support.</li> </ol> |
| <b>PCC - Social Care Complaints Policy:</b>                          | <ol style="list-style-type: none"> <li>1. Clear Policy for Clients and Powys residents with Easy Read and Child focussed versions.</li> <li>2. Clear Policy and Guidance for Powys officers.</li> </ol>   |
| <b>Social Care Complaints Leaflet</b>                                | <ol style="list-style-type: none"> <li>1. Clear Leaflet for Clients and Powys residents with Easy Read and Child focussed versions.</li> <li>2. Clear Leaflet and Guidance for Powys officers.</li> </ol>   |
| <b>Social Care individual complaint file recording and templates</b> | <ol style="list-style-type: none"> <li>1. Clear log and timeline of contact/correspondence.</li> <li>2. Set of letter templates to ensure consistency of responses.</li> <li>3. Aide-Memoire to ensure all steps/stages are followed in a systematic way.</li> </ol>  |
| <b>Corporate Undesirable Customers Conduct Policy</b>                | <ol style="list-style-type: none"> <li>1. Clear Policy for Clients and Powys residents</li> <li>2. Clear Policy and Guidance for Powys officers.</li> <li>3. Clear communication to Powys residents and PCC staff so we are all clear about expectation of behaviour and conduct from and to each other.</li> </ol>   |

|  |  |
|--|--|
| <p><b>Policy into Practice workshops</b></p>                                 | <p>1.Social Care Managers and staff will be clear, competent and confident in discussing these Policies with clients and their families and in ensuring our practice adheres to these standards and requirements.</p> <p>2.These workshops will include: Complaints response writing, Having Difficult Conversations &amp; Managing Expectations.</p> <p>3.An “Aide Memoir/Check list” is being developed for discussion at these learning events to ensure that staff are clear about key standards and stages they need to adhere to and evidence in order to undertake a transparent, thorough and timely investigation to manage and respond to complaints on behalf of the Local Authority.</p>                           |
| <p><b>GOSS – Corporate Complaints recording &amp; performance system</b></p> | <p>1.Improve information, flow, content of the 3 views in GOSS:</p> <ul style="list-style-type: none"> <li>i) Members of the Public making complaints, compliments and comments</li> <li>ii) Complaints Administrators</li> <li>iii) Officers assigned to investigate complaints.</li> </ul> <p>2.Improved oversight, alert and management of complaint responses including key stages and sign offs required for Stage 2 and Ombudsman compliance</p> <p>3. Improve Performance and alert of areas of poor/ not completed actions.</p> <p>4.Improve reporting through inclusion of Action Plan requirements for any complaints Stage to enable oversight, monitoring /reporting of completion and alert if not completed.</p> |
| <p><b>Weekly Management of Complaints mtg</b></p>                            | <p>1. Improved oversight and management of complaints function including scrutiny of adherence to Welsh legislation and PCC Policies.</p> <p>2. Improved oversight and management of all complaint stages, steps and actions via internal working tracker.</p> <p>3. Improved co-ordination between officers with responsibility for complaints.</p> <p>4.Improved and timely resolution of barriers to complaints responses and escalation as required.</p> <p>5. Assuring customer focus in engagement with and responses to people making complaints.</p>   |

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| <p><b>Quarterly Complaints summary/highlight for Senior Managers</b></p> | <p>1.Senior management oversight of activity, issues and responsiveness to complaints.</p> <p>2.Senior management holding services and ourselves to account.</p> <p>3.Ensuring Quality Assurance cycle in services, polices and practice</p>   |
| <p><b>Management of Stage 2 Investigations</b></p>                       | <p>1.Ensuring eligibility to instigate Stage 2 Complaint.</p> <p>2.Current CVs of all Independent Investigators.</p> <p>3.Recruitment of extended network of Investigators.</p> <p>4.Clear process for matching complexity of complaint with subject expert knowledge and experience of Investigators.</p> <p>5.Management /tracking of budget and expenditure on Stage 2 Investigations.</p> <p>6.Allocation of named senior officer to ensure delivery of any/all required actions agreed, following the completion of Stage 2 process, working in liaison with the Complaints Team.</p> |
| <p><b>Review of resources and capacity</b></p>                           | <p>1.Ensuring that we have the right level of dedicated management capacity to drive and delivery these improvements.</p> <p>2.Ensuring we have the right resource to embed customer care across all service areas which strengthens the cohesion, consistency and impact of the individual functions already working on customer care.</p>  |