

Adult Social Care Statutory Representations and Complaints Procedure
2010 – 2011
Annual Report



1. Purpose of Report

This is the Annual Report for Worcestershire County Council on the operation of the Representations and Complaints Procedure in respect of Adult Social Care Services from 1 April 2010 to 31 March 2011.

2. Background

The Local Authority Social Services Act 1970, as amended by the National Health Service and Community Care Act 1990, and Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 require the County Council to have a procedure for resolving complaints and representations received by, or on behalf of, adult service users.

A requirement of the procedure is that an annual report is presented to the County Council. This should include information on the movement of compliments, comments and complaints through the year and should provide a mechanism by which the local authority can be kept informed about the operation of its complaints and representations procedure. This report is open to inspection by members of the public under the terms of the Local Government (Access to Information) Act 1985.

A full time officer acts as the designated Complaints Officer for Adult Social Care Services.

3. Purpose of the Complaints Procedure

Individuals accessing Adult Social Care Services, their representatives, or those affected by the decisions of Adult Social Care Services are entitled to challenge the decisions made, or complain about services provided by Adult Social Care in the exercise of their function whether that be a duty or a power.

Complaints have to be fairly and thoroughly investigated, with redress being offered where appropriate. The information collated from complaints is used to monitor quality issues and inform future decisions.

4. Brief Outline of the Procedure

The procedure is a statutory process for those people who want to make representations, i.e. comments, compliments and complaints, about the actions, decisions or apparent failings of the local authority's Adult Social

Care services. All representations are recorded and responded to. The written information available for consumers outlines this.

There is a one year cut off, where complaints made more than a year after the event in question do not need to be considered, unless there is a reason why the complaint was not made sooner and if it can be dealt with effectively and efficiently. Decisions are made on a case by case basis.

The emphasis is on speedy and effective resolution, and innovative ways of dealing with complaints, rather than sticking to a rigid bureaucratic process. The Council has a single opportunity to deal with a complaint, and based on the risk assessment can use a variety of methods to seek resolution including conflict resolution meetings, mediation, or full investigation for the more serious complaints.

When a complaint is received it is risk assessed, as Low, Moderate or High risk; where a complaint is low risk it is usually an easily resolvable issue, and is passed to the relevant Team Manager to deal with. Where a complaint is assessed as Moderate or High Risk, it signifies a more complex issue, or serious matters. These are then either investigated by the Consumer Relations Officer for Adult Social Care Services, or are passed to a relevant manager where appropriate.

There are no specific timescales, but the legislation suggests there should be a maximum of 6 months to complete a complaint. The County Council has also adopted default timescales to ensure that the lack of formal timescales does not negatively impact on the speed of resolution. All formal complaints have to be signed off by the relevant Head of Service. Where a complaint deals with cross boundary issues, there is a duty on the Local Authority to cooperate with our NHS colleagues. The complainant would then be provided in most cases with a joint response, with either organisation taking the investigative lead, depending on the nature of the complaint. Where a complaint has been fully dealt with and the complainant is still dissatisfied, they can then approach the Local Government Ombudsman.

An informal complaints process also operates, which can deal with low level verbal complaints without the need for these to enter the formal process. The expectation is that the complaint can be dealt with swiftly, usually within 24 hours, and that the complaint does not raise matters that should more appropriately be dealt with within the formal process. All informal complaints are logged on a monthly return and the information held by the Consumer Relations Officer.

5. Learning from Complaints

Learning from complaints is an important aspect of the complaints procedure, and there is a requirement that Adult Community Services

evidence how learning from complaints feeds into service delivery and development.

A Post Complaints Learning form (PCLIP) is used to capture the learning and provide an audit trail of its implementation. The information from the PLCIP then feeds into the quarterly reports provided for the Chief Officers Management Board (COMB) and Adult and Community Services Departmental Managers Team (DMT). In this way information derived from complaints can be used as a measure of performance and can contribute to practice development, commissioning and service planning. In many instances outcomes to complaints are specific to the case, and there are no general learning points that would influence policy or procedure.

These are some examples of learning this year:

1. A complaint was made against the Carers Unit regarding the time taken to send out sitting vouchers. As a result the Carers Unit appointed a Carer Development Officer to screen requests, identify those that needed additional information and follow up, and ensure requests were processed in a timely manner.
2. A complaint about the invoicing system led the Exchequer Team to revise the Billing Advice to give clearer information. Work was also carried out to produce a regular statement.
3. Following a complaint about the client charging letter, the letter was reviewed and simplified by the Benefits and Contributions Team.
4. A complaint was made against Older Persons Services following a funding dispute. The outcome was that where cases transferred to the Older Persons Service from other long term teams, such as Physical Disability a transitions protocol was agreed where a joint initial assessment was carried out to ensure information sharing and the transfer of relevant information. The Transition Protocol was also to deal with high cost cases, where agreement was needed for high cost services to ensure the stability of a placement or service.
5. Following a complaint against the Learning Disability Service regarding accompanying an individual to hospital and remaining with them, the Service User Guide for residential care was updated clarifying the role of the home and staff in hospital admissions and that care and support cannot be provided when a Service User is admitted to hospital.
6. A complaint regarding the deduction of backdated client contribution from a Direct Payment resulted in Finance developing a risk based process to ensure backdated charges were only applied to future Direct Payments if the financial affect was minimal. Where there would be significant impact on the Direct Payment available a repayment over a 24 week period would be calculated and agreed with the Service User.

As an outcome of some of the upheld complaints Adult Social Care agreed to write off certain charges, or make ex gratia payments. Payments this year totalled £2010.85 for the Physical Disability Service, £31,997.09 for Older Person's Services and £2150.00 for the Learning Disability Service.

6. Ombudsman Complaints

This is a brief summary of the Local Government Ombudsman complaints for which a decision was made this year:

There were no findings of maladministration and no reports were issued against the Authority. Two complaints were closed at the Ombudsman's discretion, 2 investigations found no maladministration, 3 resulted in a local settlement, and 1 was outside the Ombudsman's jurisdiction. Where there was a finding of Local Settlement the Ombudsman did not require any monetary payments to be made.

7. Statistical Data for Adult Services

There has been an overall increase in complaints this year, specifically in the Low and Informal processes. Complainants dissatisfied after the Council's investigation, and choosing to go on to the Local Government Ombudsman has remained static, with only 6 complaints being registered with the LGO.

8. Total Number of Adult Service Complaints Received

	2009/10	2010/11
Low Risk	101	122
Moderate Risk	71	67
High Risk	8	10
Stage 2	3	0
Informal Complaints	114	181
LGO	6	6
Total	303	386

Details of the informal complaints are to be found in Appendix 2. Most of the complaints related predominantly to day care, residential/respite care and home care.

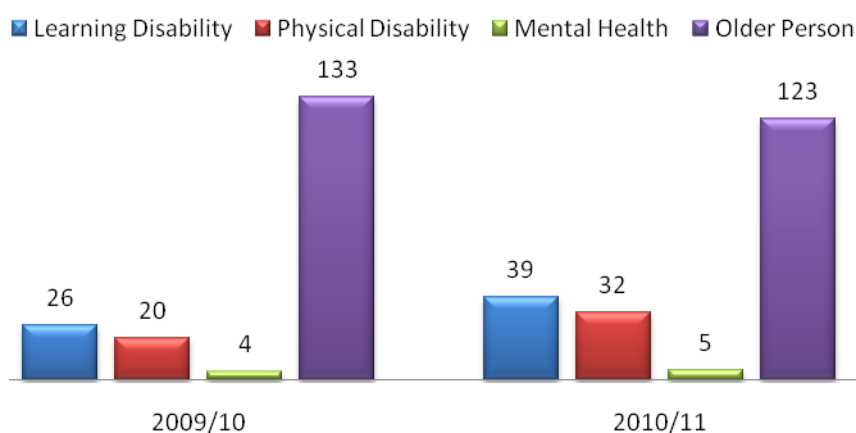
The Stage 2 complaints in 2009/10 were left over from the old complaints procedure, and these investigations are no longer applicable under the new legislation.

9. Service Area

There are currently 4 service areas against which Adult Social Care complaints are recorded, these are the Learning Disability Service, Physical Disability Service, Mental Health Service, and Older Person's Service which includes the Older Adult Mental Health Service.

With the exception of the Older Person's Services, there has been an overall increase in complaints.

Complaints by Service Area



10. Services Being Complained About

Within each service area, the complaints are logged against specific services such as home care, finance, day care etc.

Duty and Assessment remains a high category, and indicates that a high proportion of complaints relate to the initial assessment, budget calculation and service identification process.

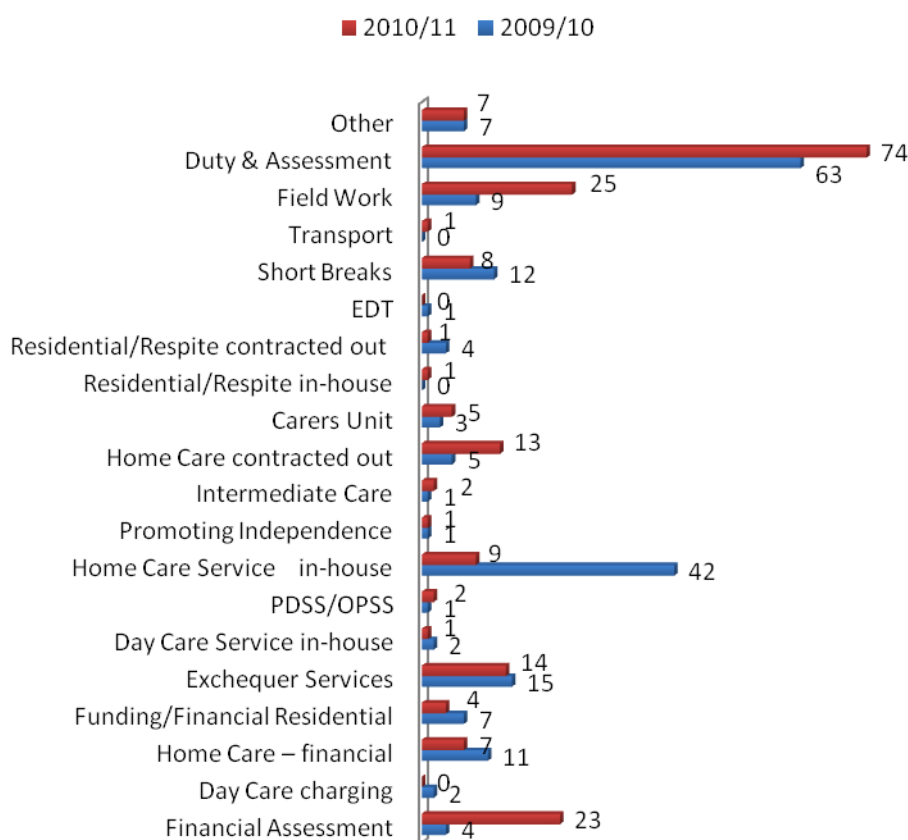
The area of "Financial Assessment" is showing a significant increase, with complaints rising from 4 last year to 23 this year. There has been restructuring in the Benefits and Contributions Team, and there was a period where the team was understaffed impacting on the time taken to carry out assessments. The majority of the complaints related to this issue, with others being about the quality of the assessment, and the standard letters sent out after advising of the charges.

There has been a noticeable decrease in complaints made against the In-house Home Care Service. The In-house Service is reducing capacity,

and concentrating on specialist services such as the Side by Side Dementia Service; very few complaints are received about this service, whilst compliments are high. The majority of standard home care services are now provided by private companies, and it is encouraging that in that area whilst there has been an increase in complaints, it is not considerable. Private Home Care agencies do have their own complaints procedures, and individual's receiving a service from an agency would only access the Council's complaints procedure where they were dissatisfied with the response from the agency.

There has been an increase in complaints regarding "Field Work" in excess of 50%. This relates to ongoing Social Work input after the initial assessment and service identification has been carried out, for instance delays in providing a service, ongoing communication with the Social Worker and resolving concerns with a service or responses to concerns about the level of service.

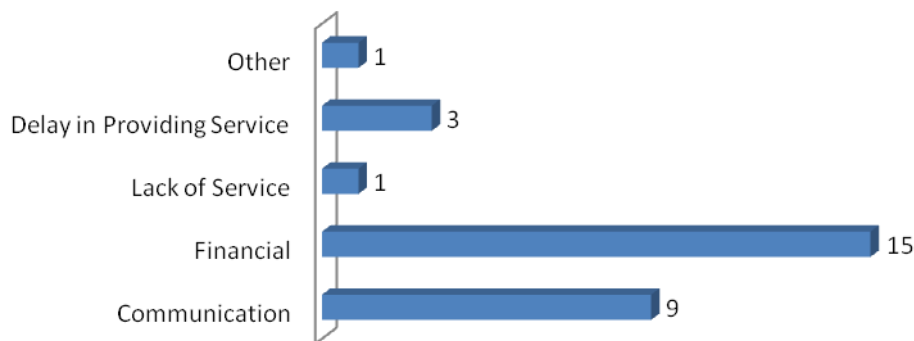
Services



11. Nature of Complaints

The nature of complaint relates to the individual issues of the complaints. So a complaint, once allocated against a service, for example "Financial Assessment", will then be broken down further into the particular issues of concern such as staff attitude, failure to provide adequate or appropriate information and so forth. Following are details of some of the services where complaints have increased considerably since last year, breaking them down into the individual issues of concern.

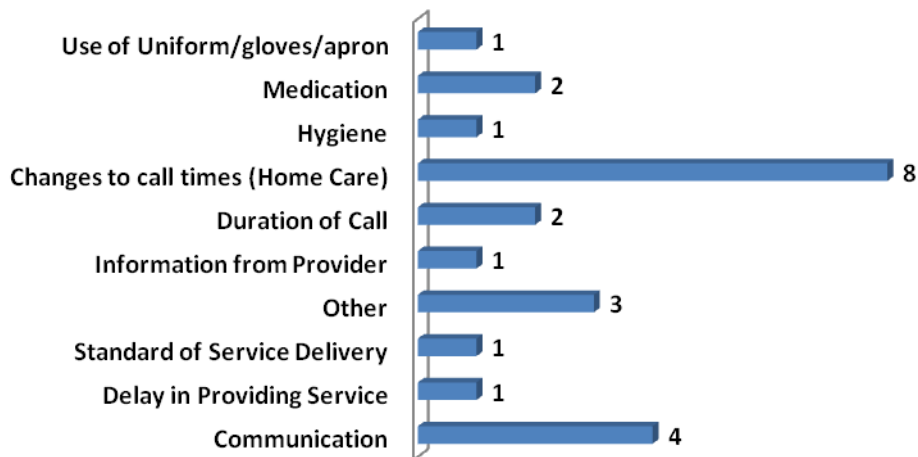
Financial Assessment



The "nature" of complaints about Financial Assessment are mainly around the actual financial assessment process, the outcome of that assessment, and communication. For example individuals were dissatisfied with the Council's policy on charging for non-residential services, and the application of that policy in their case. Another area of dissatisfaction was the policy to charge for services from the receipt date irrespective of the length of time it took to carry out the assessment. Service Users were also dissatisfied with the way in which information was communicated, such as the use of standard letters which some complainants found confusing and unhelpful.

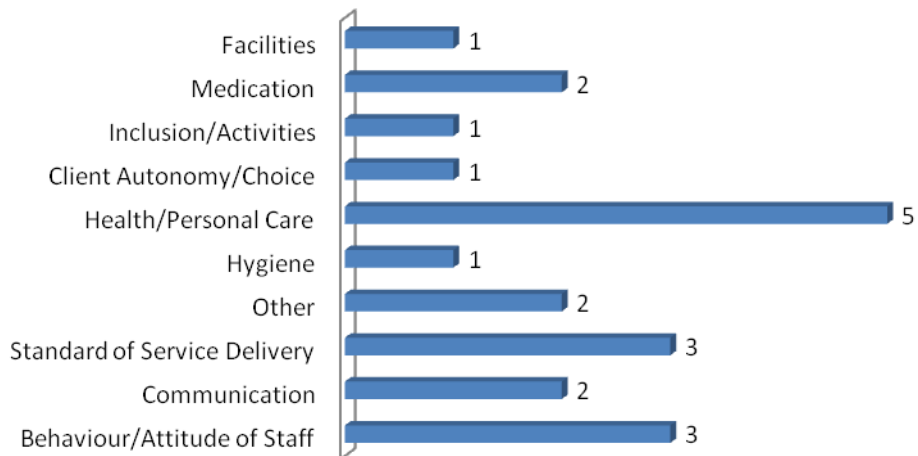
In Contracted- out Home Care, showed an increase in complaints with complaints primarily about changes to call times, and communication. Complaints in this regard were generally that calls were often late or at varying times and not as agreed in the Care Plan when the service started.

Home Care - Contracted Out



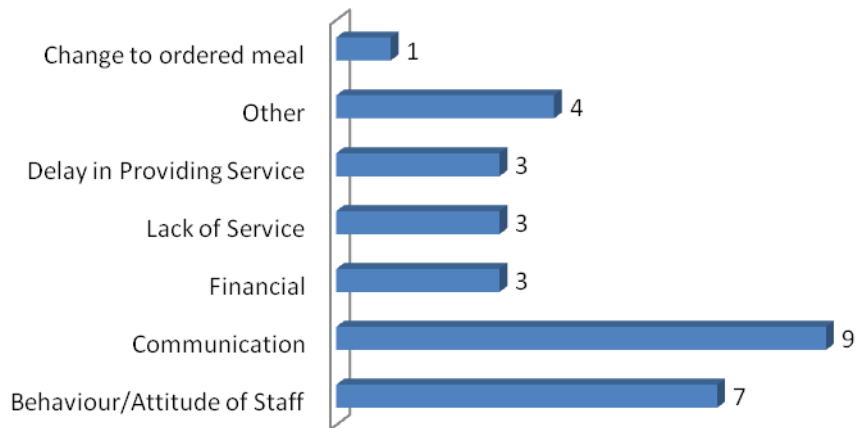
For those receiving residential or respite care provided by private establishments the main concerns were around health and personal care, with the overall standard of care and behaviour of staff following. In regard to complaints about health and personal care and standard of care, these were often made by family or representatives of the individual and contained concerns about service users not being appropriately cleaned and changed after a period in residential care.

Residential/Respite Contracted Out



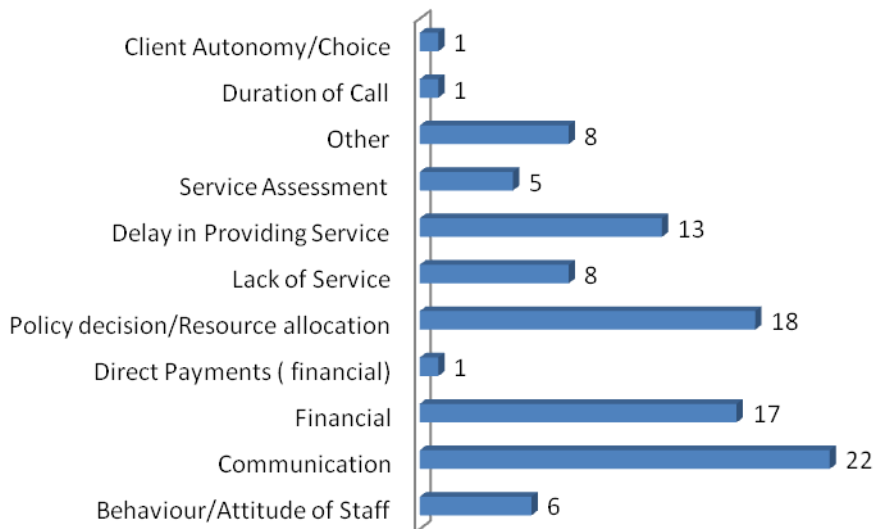
In Field Work the primary issues were the attitude and behaviour of staff, the way staff interact with Service Users or their families and representatives, and communication, for example not returning telephone calls, not providing adequate and understandable information, not responding to concerns and so forth.

Field Work



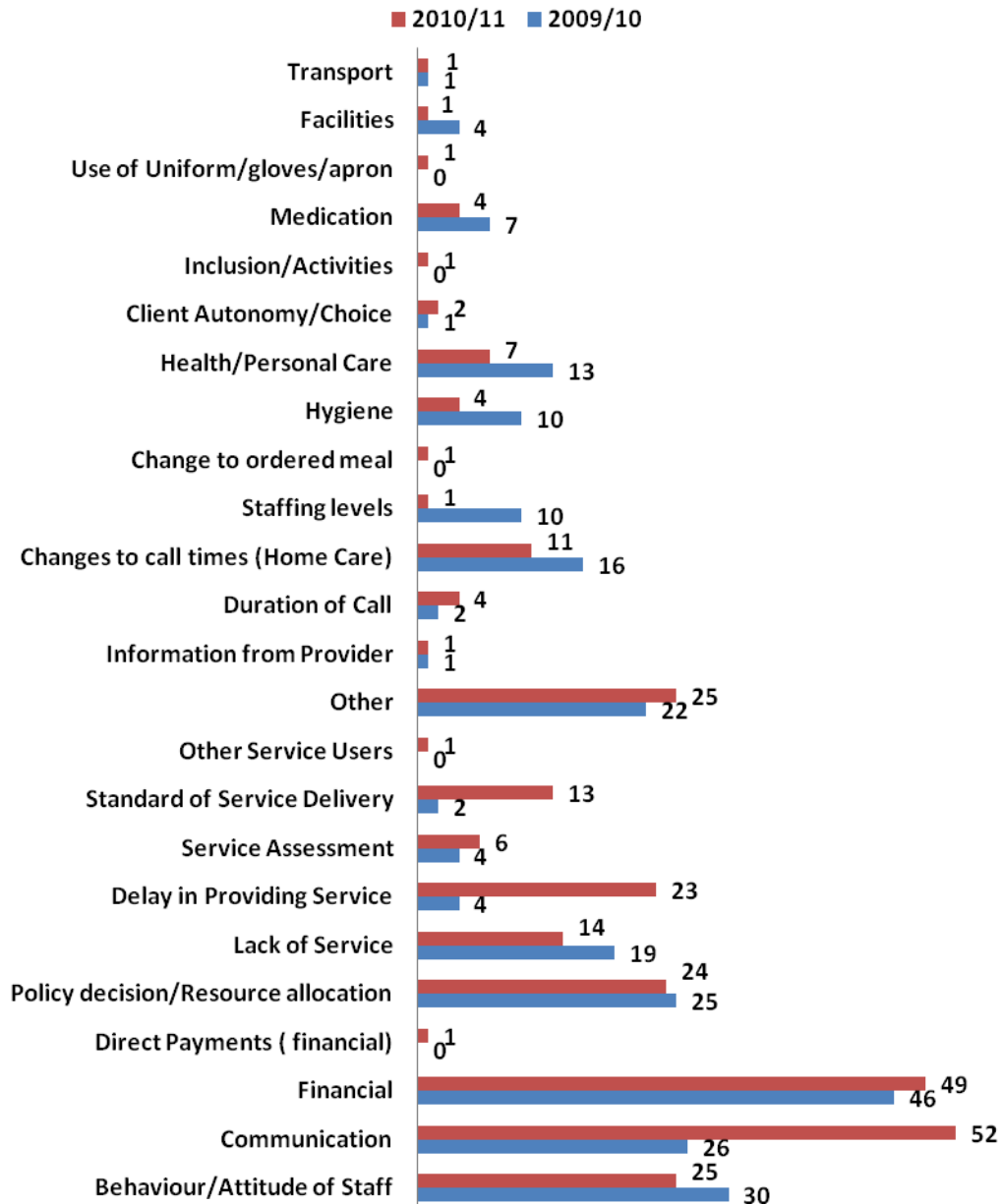
For Duty and Assessment the principle issues are communication, financial and policy decision and resource allocation. These are issues around contact with the Social Worker and provision of information, explaining the possibility that the Service User may have to contribute towards their care, and decisions about provision of service, and allocating funding for the purchase of services.

Duty & Assessment



Issues being complained about across all service areas are as follows:

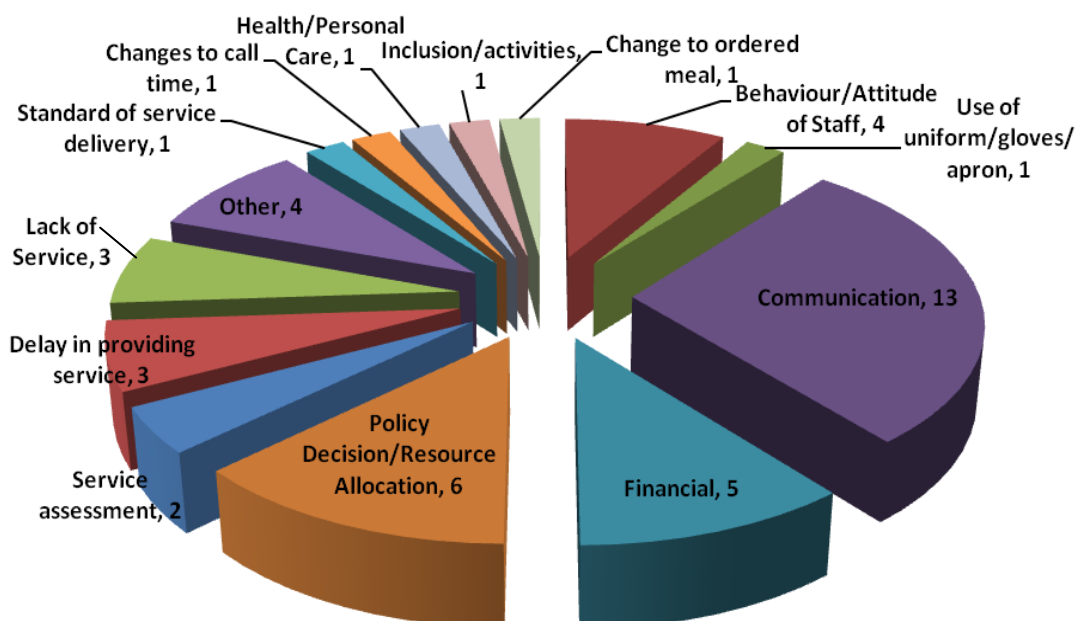
Nature of Complaints



Across all services there have been increases in complaints about "Communication", "Financial" and "Delay in Providing a Service", with "Policy Decision and Resource Allocation" remaining at similar levels. Areas specific to home care services such as "Hygiene", "Staffing Levels" and "Medication" show a drop in complaints, which is to be expected with the overall drop in home care complaints.

For each of the four Service Areas the breakdown of issues being complained about is as follows:

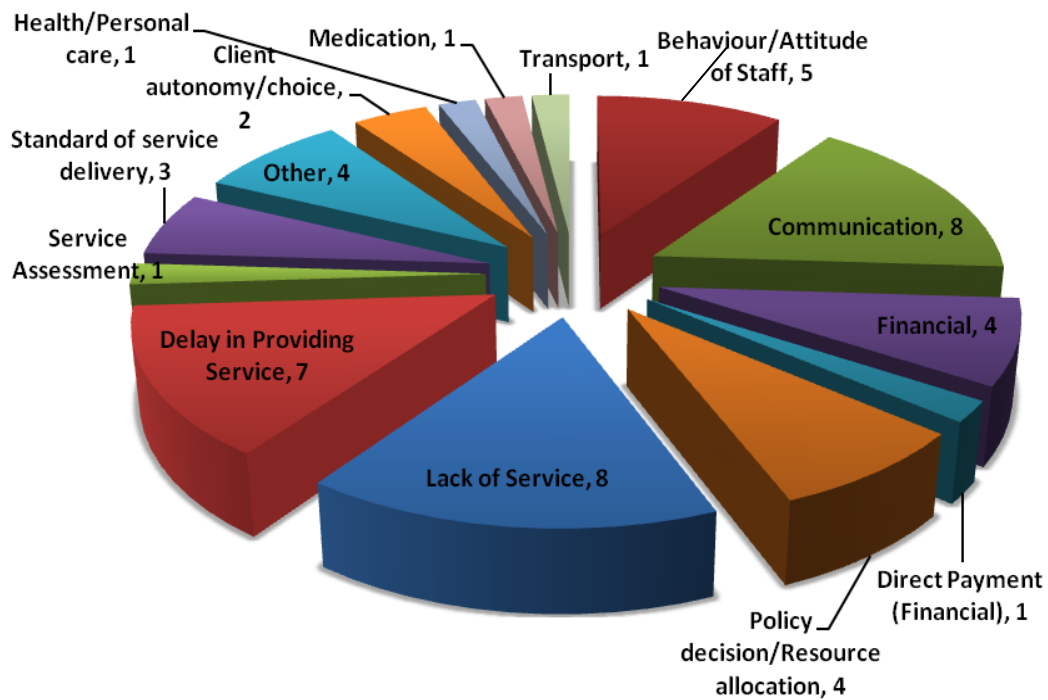
Physical Disability Service



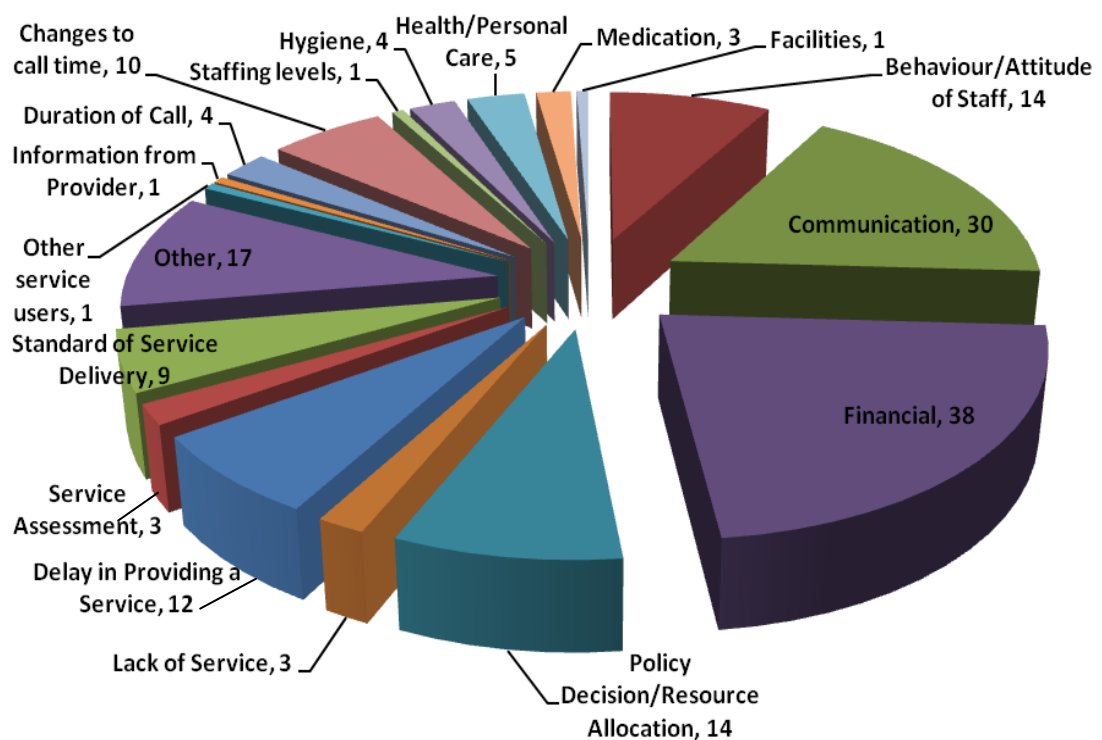
The highest areas are "Communication" and "Policy Decision/Resource Allocation". Most of those regarding policy decision/-resource allocation relate to the type of care or level of funding being offered by the Service to meet an individual's assessed eligible needs.

Learning Disability

For the Learning Disability Service the highest areas of concern are "Communication", "Lack of Service" and "Delay in Providing a Service". The lack of service might relate to issues such as those with higher functioning Autism, where the individual has vulnerability but would not meet the eligibility criteria for services. Delay in providing a service might relate to such issues as when an individual has been assessed as eligible for a service, but due to complex needs, that service might not be readily available. This is often the case with respite care, where units able to provide respite for those with profound and complex learning disabilities are limited.



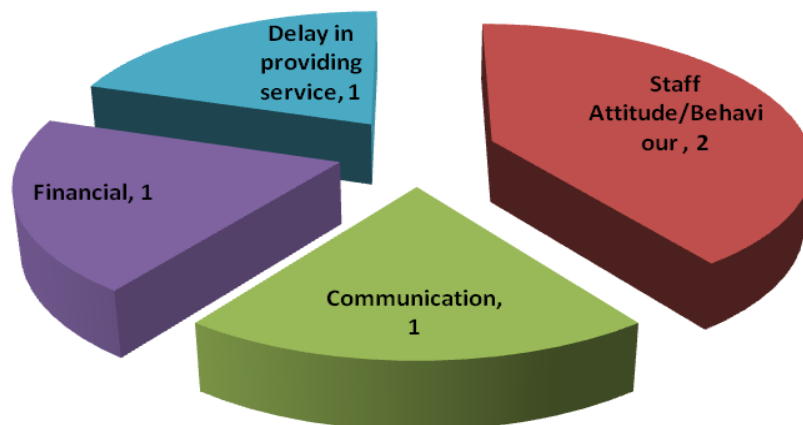
Older People



"Communication" and "Financial" remain the highest areas for Older Person's Services, which is consistent with last years figures. The two also remain linked with concerns being raised about individual's not being told that a charge is applicable in most cases for services. Adult Social Care

Services has done a lot of work in this area to improve information available to service users about charges for services; however, it would appear that there is still some work to do to ensure that service users and their representatives understand clearly that services they receive will be charged for.

Mental Health



Mental Health complaints remain low, as they are predominantly dealt with by the Worcestershire Mental Health Partnership Trust. As with previous years, the concern expressed in complaints made to the Council has been around interaction with staff.

12. Outcomes to Complaints

Low Risk

Outcome	2009/10	2010/11
Upheld	37	39
Partially Upheld	25	30
Not Upheld	25	33
Redirected	1	3
Discontinued	12	14
Suspended	0	3
Ongoing	1	0

Low Risk complaints are those complaints which are relatively straight forward and relate to a single or a few issues that can be readily resolved. 69 were upheld or partially upheld, with 33 considered unfounded. A number of complaints were discontinued and this relates to the individual withdrawing their complaint, the complaint being resolved without needing to go through the full formal process, the complaint being ruled out of time,

or individual's not supplying requested information to enable their complaint to be dealt with effectively

Moderate Risk

	2009/10	2010/11
Complaint Fully Upheld	18	10
Complaint Partially Upheld	17	29
Complaint Not Upheld	19	11
Discontinued	12	10
Suspended	2	4
Ongoing	3	3

Moderate Risk complaints are generally those that deal with a number of issues, or a number of teams and cross organisational issues. These are either dealt with by a relevant Social Care manager or the Investigating Officer for Adult Social Care. 39 of these complaints were fully or partially upheld with 11 being not upheld. Reasons for discontinuing a complaint are similar to those of the low level complaints. There have also been some suspended complaints, and in a few cases this is where it has been considered appropriate for Adult Safeguarding to follow up the concerns expressed in the complaint.

High Risk

	2009/10	2010/11
Complaint Fully Upheld	1	1
Complaint Partially Upheld	1	3
Complaint Not Upheld	0	4
Resolved without report	0	1
Discontinued	1	1
Re-directed	1	0
Ongoing	4	0

High Risk complaints involve serious issues, and are dealt with by the Council's Investigating Officer. There have been 4 complaints fully or partially upheld, and 4 not upheld.

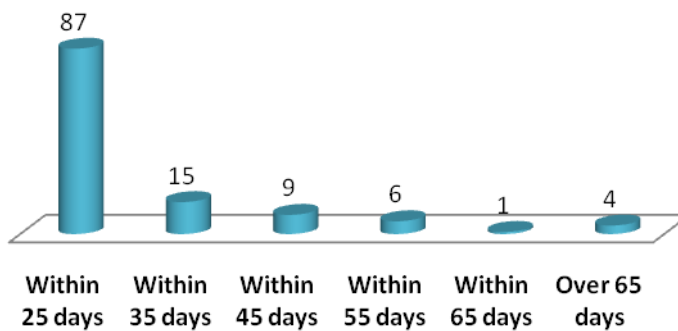
Upheld or Partially Upheld complaints often result in learning points being identified, along with agreed outcomes to resolve the issues. Outcomes are to provide restitution, whereas learning identifies areas in process, resource allocation, staff or quality issues that need to be addressed on a service wide basis to lead to improvements in service delivery. Areas of learning resulting from complaints have been dealt with earlier in this report.

13. Time Limits

There are no prescribed time limits for dealing with complaints, although the legislation suggests a maximum of 6 months. The expectation is that reasonable time scales are negotiated and agreed with the complainant. Adult Social Care have set default time limits of 25 working days for a Low Risk complaint and 65 working days for a Moderate or High Risk complaint. This is to ensure that complaints are not negatively affected by the lack of statutory timescales.

Low Risk Complaints

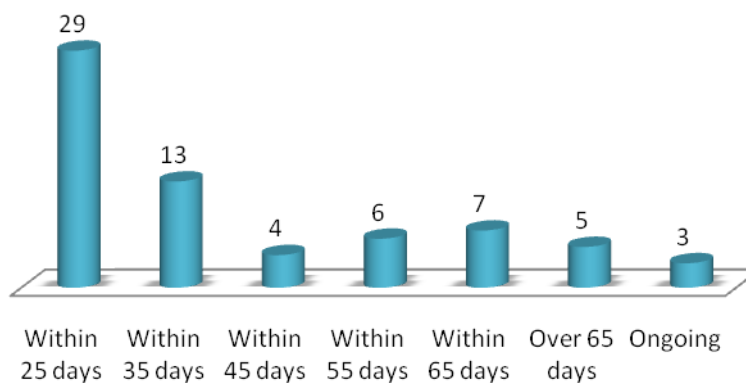
Low Risk Time Taken



For most Low Risk complaints the default timescale of 25 working days was achieved, with 72% of complaints being dealt with within that timescale. Of the negotiated timescales, 23 exceeded the agreed timescales by varying degrees. The average time taken to complete Low Risk complaints was 22 working days.

Moderate Risk Complaints

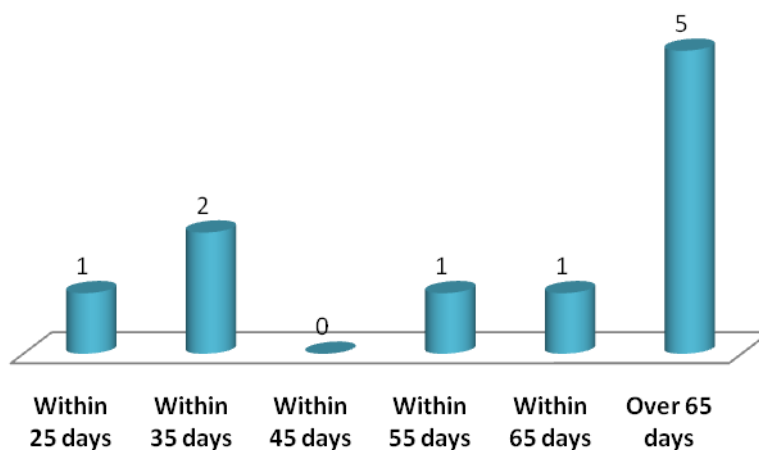
Moderate Risk Time Taken



The default timescale for Moderate Risk complaint is 65 working days, and all but 5 complaints were dealt with within that timescale, with a high proportion still being achieved within 25 working days. Of the negotiated timescales 3 exceeded the agreed timescale by a few days. The average time taken to complete Moderate Risk complaints was 31 working days.

High Risk

High Risk Time Taken



Last year all High Risk complaints were dealt with within the 65 working day default timescale, however this year 5 were completed within that timescale, and 5 exceeded the 65 working days, with an average time taken to complete of 66 working days. 2 complaints exceeded the agreed timescales by a few days, in all other instances timescales agreed with the complainant were achieved. In some instances the length of time taken is indicative of the seriousness, depth and complexity of the complaints.

14. Advocacy

Those who want assistance when accessing the complaints procedure can have an advocate to support them. Advocacy can be provided by friends or relations, Advocacy groups, professional Advocates or Solicitors.

Onside Advocacy is commissioned by the Council to provide advocacy across Worcestershire, and all the complaints literature contains details of how to make contact with this service. Complainants who may require assistance are offered the opportunity of having an Advocate when first entering the complaints procedure.

There have been 5 complaints this year where Advocacy support has been provided, in all instances Onside Advocacy provided the Advocate. Of those complaints 2 were with the Physical Disability Service, 1 with the Older Person's Service and 2 with the Learning Disability Service.

15. Ethnicity, Age, Gender and Disability

The guidance suggesting the format for the annual report requests that the Authority reports on the ethnicity, gender, disability and sexual orientation of complainants.

Following the completion of a complaint, a customer feedback form is sent out to all complainants ascertaining their satisfaction with the complaints process as a whole. Attached to this is a form to capture information regarding the ethnicity etc of those accessing the procedure, although the forms do not request a complainant's sexual orientation. These forms are anonymous and voluntary, and not all fields are completed.

144 Ethnicity forms were sent out for this year and 64 were returned, a 44% return rate. Whilst 64 were returned, not all parts of the form were completed. (See Appendix 1 for full details)

Age	No. of responses
16-24	0
25 - 59	22
60+	29

Ethnic Group	No. of responses
White British	60
White Irish	4

Disability	No. of responses
Difficulty getting around	23
Difficulty hearing	2
Difficulty seeing	1
Learning Disability	0
Mental Health	1
Other	4

16. Feedback forms

There has been a 53% return on the feedback forms, which is an improvement on last year. The Feedback form was re-designed to make it simpler and less onerous to complete. Questions were reduced from 10 to 8, with tick boxes for satisfied, neither satisfied nor dissatisfied, and not satisfied.

Areas of the complaints procedure which performed particularly well were ease to access and use the complaints procedure, the courtesy shown by staff during the process, and the ease of following the process. Areas that rated less favourably were the time taken to respond to a complaint, being kept informed of how the complaint was progressing, and support offered during the complaints process. In these areas those ticking the "neither satisfied nor dissatisfied" category or the "dissatisfied" category, were fairly equal to, or exceeded the number ticking the "satisfied" category.

Of particular concern is the response to the question about receiving support through the process, especially when weighed against the low amount of complainants supported to access the procedure by advocacy groups. It highlights that those members of staff receiving a complaint or aware that an individual wishes to pursue a complaint need to ensure that the individual is appropriately supported with advice about Advocacy. (See Appendix 1 for full details).

17. Comments Relating to Adult Services

	Older Person	Physical Disability	Learning Disability	Mental Health
Exchequer Services	3	0	0	0
Financial Assessment	1	0	0	0
In House Home Care	1	0	0	0
Contracted Out Home Care	1	0	0	0
In House Day Care	0	1	0	0
Field Work	0	0	1	0
Other	1	0	0	1

Comments have never formed a major part of the procedure, however, when received they are recorded, and responded to by the relevant manager within 20 working days.

18. Compliments Relating to Adult Services

Compliments are logged and the members of staff involved congratulated on their good practice. Statistics regarding compliments are also supplied in a quarterly report to DMT, thus ensuring that the service is not only learning from complaints, but also learning from compliments.

Service Area about which Adult Service Compliments were received

	2009/10	2010/11
Older Person	175	165
Learning Disability	3	9
Physical Disability	27	26
Mental Health	3	1

Nature of Compliments

	2009/10	2010/11
Behaviour/Attitude of Staff	201	138
Staff Training/Qualifications	1	0
Communication	1	27
Standard of Service Delivery	39	31
Financial	1	1
Facilities	0	2
Other	1	1
Service Assessment	5	4
Policy decision/resource allocation	0	4
Quality of meals	0	6
Inclusion/Activities	0	6

Across the four services, the compliments are grouped as follows:

	2009/10	2010/11
Home Care in house	57	61
Side by Side Service	1	22
Home Care contracted out	1	0
Field Work	49	24
In House Residential Care/Respite/Rehab	1	1
In House Day Care	2	2
Other	5	0
Duty and Assessment	6	5
Short Breaks	1	1
PDSS	52	18
OPSS		30

Intermediate Care	37	23
Carers Unit	3	3
Financial Assessment	2	2
Promoting Independence	1	7
EDT	1	0
Access Centre	0	2
Shared Lives	0	1

Some examples of compliments received by the Service are as follows:

Compliment for a Social Worker:

"Yesterday my wife and I had a visit from a Social Worker..... He was everything one would expect, very kind, helpful, and considerate. He took time and care to explain the care services we could expect, and answered everything we wanted to know. He made a great impression on my wife and myself."

"I am so sorry to be losing you as my Social Worker..... You gave me back my independence. I do so hope that all your team appreciate the very special work that you do with people like me, because you actually deliver the goods, you practice and believe in what you preach. May God bless you for the rest of your life."

PDSS Service:

(The Support Workers) have both become great friends... and I cannot speak highly enough of them. The service they have provided has been superb and we value their help and friendship."

OPSS Service

"In the last few years I found it difficult to cope with anything but when (the Support Worker) started visiting me she had no sooner picked up on what needed doing but she was on the telephone and sorting everything out. She was the best thing that has happened to me for years."

Carers Unit:

"I recently underwent a Carers assessment As a result of this assessment I have been allocated funds towards a holiday and access to counselling sessions if required. My assessment was conducted with a combination of warmth and professionalism. I would like to take the opportunity to express my appreciation of the prompt attention I received...I would like to extend this appreciation to the team in general."

Connect Worcester

"I want to praise (the Support Worker) She is such a genuinely caring person that has helped change my life around. I am so glad I have had the chance to meet her, as she is a rare breed, and a valuable asset to our community."

Howbury:

"The day centre gave Mum many hours of happiness, even at a time when she was painfully aware of her deteriorating mental state. ... I have long appreciated the range of activities you provide, which are unequalled anywhere that I have seen. There is no doubt that this mental stimulus was greatly beneficial to Mum. You and your staff at the day centre as well as the respite team do a phenomenal invaluable job – no praise is too high."

Timberdine:

"My wife was recently a patient at the Timberdine... (we) were very impressed at the care and consideration she received. The staff without exception were efficient, considerate and sympathetic and I am sure that their efforts contributed greatly to her recovery."

Learning Disability Service

"We just wanted to drop you a line to thank (the Social Worker) and the Learning Disability Team for the excellent service.... from the moment I met (the Social Worker) I felt quite positive that we would receive all the help required in our decision to find the right placement.....(the Social Worker) took the time and effort to make us feel confident that she always had bet interest at heart, which helped us through a difficult process."

Learning Disability – Worth Crescent

"Thank you very much having me. I really enjoyed be here with you all, and taking me out and about. I care for you all that is how I feel, as you care for me. Thank you."

Home Care

"Thank you to you and all the team who have provided home care for our father... We cannot speak highly enough of the outstanding quality of care, kindness and humanity that Dad received. We hope that all the carers past and present already know how much we appreciate the very special work they do"

Promoting Independent Team

"I would like to express my gratitude for the work of the team. As I become more mobile it allows me to tackle more tasks within the house, the Promoting Independence team has given me the chance to improve my quality of life. I am very grateful for your efforts."

Side by Side Service

"The family would like to express our sincere thanks for the way in which..... the Side by Side Dementia Team care for.... They always carried out their duties with the utmost care, kindness and professionalism and would always have a smile and a joke with him.... Towards the end, as he deteriorated, they maintained the highest standard of care... it is difficult to put into words the gratitude that the family has to these ladies"

Sensory Impairment Team:

"..to say how much we appreciate the assistance given to us by the Sensory Impairment Team. (The Social Worker) has been outstandingly efficient, patient and thoughtful, but all members with whom we have had dealings have shown the same qualities."

Comments on this report are welcomed and requests for further information, should be directed to:-

Bridget Stockwell, Consumer Relations Officer (Adult Social Care Services)

Telephone: 01905 766365

bstockwell@worcestershire.gov.uk

Consumer Relations Unit
County Hall
Worcester
WR5 2NP

This document can be made available in other languages and alternative formats (large print, audio tape, computer disc and Braille) by contacting the Consumer Relations Unit on telephone number 01905 766368.

Appendix 1

Adult Services Feedback

Feedback forms April 2010 – March 2011
(Feedback forms sent 144, returned 65)

	☺	☹	☹
How easy was it to find out about the complaints procedure?	36	16	13
How easy was it to make your complaint?	37	12	8
How satisfied were you with the time taken to respond to your complaint?	31	14	20
Were you kept informed of the progress of your complaint?	28	16	16
Were you satisfied with the support offered to help you make a complaint?	31	19	13
Was the procedure easy to follow?	38	21	5
Were you treated with courtesy throughout the complaints process?	47	5	12
Overall how satisfied were you with the way your complaint was handled?	26	21	16

Adult Services Ethnicity Form

Number of ethnicity forms sent out: 144
Number returned: 64
Percentage: 44%

1. Ethnic Group.

White British	60
White Irish	4
Any other white background	0
Indian	0
Pakistani	0
Bangladeshi	0
Any other Asian background	0
Chinese	0
Caribbean	0
African	0
Any other Black background	0
White and Black Caribbean	0
White and Black African	0
White and Asian	0

Any other mixed background	0
Any other group	0
Unknown	0

2. Gender

Male	19
Female	36

3. Age

Under 16	
16 – 24	0
25 – 59	22
60+	29

4. Do you have a disability

Yes	23
No	31

5. What is the nature of your disability?

Difficulty getting around	23
Learning disability	0
Difficulty seeing	1
Difficulty hearing	2
Mental Health problems	1
Other	4

6. How did you find out about the County Council's representations procedure?

County Councillor	0
Council Officer	16
Citizens Advice Bureau	2
Advocacy Group	4
Solicitor	1
Library	0
Friend or Relative	4
County Council Internet Website	8
Local Government Ombudsman	0
Representations leaflet	10

Appendix 2

Informal Complaints

Service	Total
Day Care – Support Service	115
Residential Care - Respite	14
OPT Home Care	26
Short Breaks	2
Carers Unit	5
Finance	1
Central Reviewing Team	7
Physical Disability	1
Learning Disability	9
SIT & Telecare	1
Total informal complaints	181

Nature of Complaints	Number
Hygiene	11
Health/Personal care	22
Standard of Service	23
Finance	6
Policy/resource allocation	10
Medication	5
Staff attitude/behaviour	18
Communication	25
Inclusion/Activities	15
Lack of Service	10
Client Autonomy/Choice	3
Transport	9
Facilities	1
Assessment/review	6
Other Service Users	16
Change to Ordered Meal	2
Other	31

* Some complaints fell under more than one heading.