

AGENDA MANAGEMENT SHEET

Name of Committee **Adult and Community Services Overview & Scrutiny Committee**

Date of Committee **26 July 2005**

Report Title **Performance Report Full Year 2004/05 for Adult Social Services**

Summary

This report considers performance during 2004/05 for Adult Services within Social Services and has been produced as part of the county councils' performance management system . It shows performance under each corporate objective and key performance indicators for adult services including corporate headline indicator and other key performance measures as set out in the Department of Health Performance Assessment Framework (PAF).

The report provides an overview of achievements and also identifies performance areas that are in need of priority attention for the coming year.

For further information please contact:

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Would the recommended decision be contrary to the Budget and Policy Framework? [please identify relevant plan/budget provision]

No

Background papers

Social Services Departmental Performance Report – Half Yearly Performance Report 2004/5
Commission for Social Care Inspection Delivery and Improvement Statement- Spring 2005.

All Our Lives (adults) Progress and Priorities for Adult Services in Warwickshire 2005.

CONSULTATION ALREADY UNDERTAKEN:- Details to be specified

Other Committees

- | | | |
|--------------------------|-------------------------------------|------------------------------------------------------|
| Local Member(s) | <input type="checkbox"/> | |
| Other Elected Members | <input type="checkbox"/> | |
| Cabinet Member | <input checked="" type="checkbox"/> | Cllr Colin Hayfield, Adult Services Portfolio Holder |
| Chief Executive | <input type="checkbox"/> | |
| Legal | <input checked="" type="checkbox"/> | Victoria Gould, Legal Services |
| Finance | <input checked="" type="checkbox"/> | Philip Lumley-Holmes, Financial Services |
| Other Chief Officers | <input type="checkbox"/> | |
| District Councils | <input type="checkbox"/> | |
| Health Authority | <input type="checkbox"/> | |
| Police | <input type="checkbox"/> | |
| Other Bodies/Individuals | <input type="checkbox"/> | |

FINAL DECISION Yes

SUGGESTED NEXT STEPS:

Details to be specified

- | | |
|-----------------------------------------|--------------------------|
| Further consideration by this Committee | <input type="checkbox"/> |
| To Council | <input type="checkbox"/> |
| To Cabinet | <input type="checkbox"/> |
| To an O & S Committee | <input type="checkbox"/> |
| To an Area Committee | <input type="checkbox"/> |
| Further Consultation | <input type="checkbox"/> |

**Adult and Community Services Overview & Scrutiny
Committee**

26th July 2005

**Performance Report Full Year 2004/05 for Adult Social
Services**

Recommendation

The Adult and Community Services O&S Committee is asked to:

- a) Consider [Social Services (Adult) department's performance for the full year 2004/05.
- b) Endorse any proposed remedial actions.
- c) Request any additional information required.
- d) Note the intention to produce a more detailed report for members providing fuller analysis of the implications and cost of lowering FACS criteria.

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CHAPTER ONE – PERFORMANCE RESULTS

1. Introduction

1.1 This report considers performance during 2004/05 for Adult Services within Social Services and has been produced as part of the county councils' performance management system. It shows performance under each corporate objective and key performance indicators for adult services including corporate headline indicator and other key performance measures as set out in the Department of Health Performance assessment Framework (PAF).

1.2 The report provides an overview of achievements and also identifies performance areas that are in need of priority for the coming year.

1.3 2004/05 has been a particularly challenging year for adult social services as we have continued to juggle a number of, sometimes conflicting priorities. One particular tension has been the focus of resources on people in greatest need as agreed by members through the setting of our Fair Access to Care (FACS) eligibility criteria which clashes with the requirements, restated by the recent Green Paper for Adult Social Care 'Independence, Wellbeing and Choice' which emphasises the promotion of independence through the preventative agenda. Warwickshire have set the threshold for FACS at above the "moderate" banding which means that we cater for needs in the top 2 highest categories of need i.e. "critical" and "substantial" needs. "Moderate" or "low" needs are signposted to other agencies such as community and voluntary sector organisations.

1.4 In spite of these challenges which have impacted on some of our key performance indicators, it has been heartening to see that, in many other areas performance has continued to improve. Particularly pleasing is the continuing upward trend in customer satisfaction which shows that the quality of our services continues to improve.

1.5 However, it is difficult to see how the authority will be able to significantly improve performance in relation to the number of people helped to live at home and addressing the prevention agenda re-emphasised in the recent Green paper for Adult Social Care (Independence, Wellbeing and Choice) without a change to the FACS eligibility criteria to include "moderate" needs. The financial impact of such a change will clearly need to be modelled. What is clear, however, is that Warwickshire budgeted to spend less per capita (£664) on older people than the average for English Shires (£680) or authorities in its comparator group (£682) in 2004/05.¹ Moreover spend on older people services in 2004/05 (£35.696m) was significantly lower than Formula Spending Share (£52.157m).

1.6 A key recommendation of the Older People Strategic Review is the establishment of an Older People Strategic Partnership Board which will lead and develop the local authority response to Independence Wellbeing and Choice including addressing preventative and wellbeing issues. Without additional investment through the forthcoming budget round it is difficult to see how performance will improve, with negative effects on social services star ratings and

¹ Sources:- Expenditure Data - CIPFA Finance & General Statistics 2004/05

Corporate Performance Assessment and a compromise of our ability to deliver County Council and Central Government prevention and well-being agenda.

1.7 Our performance relates to the corporate objective of promoting the health and welfare of our citizens.

1.8 Medium Term Objectives set for 2004/05 were:-

- Complete the Best Value Review of Older People.
- Invest to further reduce delayed discharges from hospital, by avoiding charges under the new Community Delayed Discharges Bill.
- Manage the commissioning of home care and other community services in order to help more people live at home.
- Increase the capacity of service provision whether residential, day-care or domiciliary and align services to give older people more choice.

1.9 A copy of the very detailed performance report (delivery and Improvement Statement) produced for the Commission for Social Care Inspection is available in members group rooms. A simplified version of that report “All Our Lives (Adults)- Progress and Priorities for Adult Services in Warwickshire” will be sent to members shortly.

2. Summary of Performance for 2004/05

Objectives/Priorities		No. of Objectives / Key Tasks	% of Total	2003/04 % (Comparison)
Green	Achieved by target date	2	40%	40%
Amber	Part met or achievement delayed by less than 6 months of target date	3	60%	60%
Red	Not achieved or delayed by more than 6 months from target date	0	0%	0%
●	Deferred or superseded	0	0%	0%

Key Performance Indicators - Targets		No. of KPIs	% of Total	2003/04 % (Comparison)
Green	Achieved or exceeded target	9	39%	46%
Amber	Missed target by 10% or less	7	30.5%	23%
Red	Missed target by more than 10%	7	30.5%	31%

There are 4 DH Performance Assessment Framework (PAF) indicators which are either new for 2004/05 and therefore targets were not set, or outturn figures are not yet available from health.

Key Performance Indicators - Trends		No. of KPIs	% of Total
Green	Continuous improvement over last 3 years (or 2 if no data) or sustained 'best of class'	11	48%
Amber	Flat (below best in class) or fluctuations above and below target, or some improvements but not yet consistent	2	9%
Red	Reverse trend to the aim of the indicator	10	43%
White	Only current value available	0	0%

Key:

End of Year status against Departmental Objectives/ Priorities	
Amber	Part met or achievement delayed by less than 6 months of target date
Red	Not achieved or delayed by more than 6 months of target date
●	Deferred or superseded

Risk to the delivery of Corporate Priorities	
High	Major potential impact
Medium	Moderate potential impact
Low	Minimal potential impact
Nil	No impact

Departmental and Corporate Objectives

Ref No (if used in Service Plan)	Departmental Objective	Milestone (success measure and date)	Status	Risk to delivery of Corporate Priorities	Remedial Action
DSP 1.1	Complete the best value review of older people	Review to be completed by September 2004	Amber	Low	This is rated as amber as there was slippage in the completion of the review from September 2004 to April 2005. This was due to unforeseen difficulties in collating information from many different sources- It is not thought that this will have a serious detrimental impact on our ability to progress the corporate agenda for older people. A report has been to COMT and is scheduled for Cabinet 16 th June.

DSP 1.3	Manage the commissioning of home care and other community support services in order to help more people live at home.	Re-tendering of home care services by March 2005- and modernisation of in-house services	Amber	Medium	Although we have successfully tendered the specialist dementia service and have conducted a successful evaluation of our in-house fast response pilot which has yielded useful learning to inform roll out. However, re-tendering of the 5 year "maintenance home care service has been postponed due to the complexity and risk of modernising internal home care and tendering external home care simultaneously. In the meantime an interim tendering exercise will be conducted with a view to award of tender by March 2006.
Ref No (if used in Service Plan)	Departmental Objective	Milestone (success measure and date)	Status	Risk to delivery of Corporate Priorities	Remedial Action
DSP 1.4	Increase the capacity of service provision whether residential, day care or domiciliary care and align services to give older people more choice.	Further development of intermediate care, transition and assessment beds detailed in team and unit plans by July 2004 including targets for increases in intermediate care beds and non residential facilities. Increase in number of reviews undertaken to meet target set for PAF D40.	Amber	Medium	Although we have achieved planned increases in intermediate care/transition services there has been some deterioration in the percentage of clients receiving a review due to the increasing complexity of packages to be reviewed. We will be addressing this by further refining our reviewing processes through our current FOCUS process review project.

3. Performance Against Key Performance Indicators

Information on 6 “green” Key Performance indicators is shown, with commentary in the appendix to this chapter.

Key:

target status against Key Performance Indicators	
Amber	Missed target by 10% or less
Red	Missed target by more than 10%

trends status against Key Performance Indicators	
Amber	Flat (below best in class) or fluctuations above and below target, or some improvements but not yet consistent
Red	Reverse trend to the aim of the indicator

Key Performance Indicators

Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Risk to the delivery of Corp Priority	Remedial Action or Commentary
People aged 65 or over receiving community based services per 1000 head of population aged 65 or over (PAF C32)	75	77	60.6	80	Red	Red	HIGH	6438 people were helped to live at home on 31 March 2004 compared to 5122 in 2005. Most of this reduction is due to the restatement of DH guidance. In previous years, we have included approximately 1200 people who directly access preventative services to which SSD make a financial contribution. This has been a grey area in terms of the definition before, however the guidance for the indicator has been clarified to that only those people who have had a community care assessment and a care plan or statement of need, can be included. The consequence of this is that Warwickshire along with some other authorities will see a decreased outturn this year. Had the change in definition not have been applied, our outturn would only have decreased to 74.5, which would have reflected our stated policy to give greatest assistance to those most vulnerable and in need of care to enable them to keep their independence at home.

Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Risk to the delivery of Corp Priority	Remedial Action or Commentary
Delayed discharge from hospital of those aged 65 - average delay per week per 100,000 of population over 65 (PAF D41)	68	50	43.35	37.8	Red	Green	HIGH	Although our outturn is a considerable improvement on the previous year and will be rated as band 3 ("acceptable but possible room for improvement") by the Department of Health it fell short of our target by more than 10% (14.7%) .However, it should be noted that this indicator includes delays attributable purely to health services and other reasons such as patients refusing discharge. Social services delays remain at about 25% of all delays. We have introduced a more robust system for monitoring reimbursable delays.
Intensive home care (PAF C28)	5.5	8.5	7.3	8.5	Red	Red	HIGH	Although there has been a decrease in the number of households receiving intensive homecare (as per DoH definition) we have in fact seen an increase in the number of households receiving very intensive homecare packages. The total average hours of service delivered per week has increased by 24% from 2388 on March 2004 to 2965 in March 2005. There has also been a 23% increase in the number of people receiving packages of homecare 14 hours plus and these are the people who are likely to have been diverted from potential care home/ hospital admission. This indicator no longer reflects the totality of intensive community based support services being provided over and above traditional home care. This is illustrated by the increase in intermediate care , day care, short breaks and rollout of assessment and transitional care services.

Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Risk to the delivery of Corp Priority	Remedial Action or Commentary
Intensive home care as a % of intensive homecare and residential care (PAF B11)	16	24	22.3	25	Red	Red	MEDIUM	To prevent permanent admissions and facilitate timely hospital discharge, the numbers of assessment and transitional beds, which actively support service users' independence, have increased. However, we are required to include such activity in PAF residential costs and activity, (even though they assist service users to return to their own homes after an intensive period of support), and this has impacted on our outturn. Similarly, the PAF outturn takes no account of the increased usage of intermediate care. Although the purpose of intermediate care, assessment and transitional beds is to help people to live at home, perversely these innovative services are not included in the definition of helped to live at home or intensive home care indicators.
Clients receiving a review (PAF D40)	60	72	60.6	75	Red	Red	HIGH	We have undertaken significantly more (2,541) reviews (11%) in 2004/05 than in 2003/04, but the reviews have been focused on people with more complex care packages. Therefore fewer people overall have been reviewed. At the same time, the number of people receiving services throughout the year has also increased, particularly in mental health and disabilities. This has increased the denominator for PAF D40, resulting in a reduction in outturn in 2004/05. One example of increased complexity is the number of reviews undertaken as an outcome of the revised protection of vulnerable adults policy for which there has been significant awareness raising.

Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Risk to the delivery of Corp Priority	Remedial Action or Commentary
Assessments of older people leading to provision of service (PAF E50)	71 Definitio n change not compara ble	39	48	39	Red	Green	LOW	The increase in outturn 38.6% in 2003/04 to 47.97% in 2004/05 against plan of 39%, illustrates that we are receiving more appropriate referrals as a consequence of the screening work undertaken by the Customer Contact Centre. As a greater percentage of assessments result in a care plan, this supports the fact that our resources are being targeted towards the most vulnerable. However, any future adjustment to our FACs criteria will seek to take account of the need to more adequately address the preventative agenda.
Assessments of new clients aged 65 and over (PAF E61)		86	61.8	86	Red	Red	LOW	A further positive benefit and efficiency delivered by the Customer Service Centre is increased screening and signposting to information and voluntary sector preventative services. This has resulted in assessments being targeted at the most vulnerable and has reduced the outturn from 86% in 2003/04 to 61.8% in 2004/05. Should Members revise our eligibility criteria to include moderate need, this figure will increase in future years.
Admission of people aged 65 or over to supported permanent residential/nursing care per 10,000 head of population aged 65 or over (PAF C26)	87	77	80.6	75.4	Amber	Amber	HIGH	Although admissions of supported residents has increased, we believe this is probably due to the higher turnover and shorter length of stay of residents. Work undertaken in partnership with independent sector providers, indicates that dependency on admission (particularly into nursing beds) is higher, as a result of people being maintained in the community longer, and that length of stay is reduced. Demand also remains high for EMI admissions and it is hoped that by introducing a specialist dementia homecare service, this will reduce in future.

Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Risk to the delivery of Corp Priority	Remedial Action or Commentary
Acceptable waiting times for care packages (PAF D56)	Introduced 2003/04	94.2	86.7	94.2	Amber	Red	HIGH	Increased complexity of cases has led to increased requirements for coordination of care provision making it difficult, in some cases, to provide the complete care package within 4 weeks. Analysis of over the last 3 years illustrates this point; showing that, although we helped fewer people to live at home there has been a significant increase in the amount of home care, day care and short breaks provided to individual service users. Analysis also illustrates that more service users are receiving packages of care that comprise of a combination of community based services, rather than just one type of care. This is partly a reflection of the introduction of our normal limits policy, which has brought about a more equitable and less discriminatory access to community based services for older people.
Availability of single rooms – the % of single adults and older people going into permanent residential/ nursing care who were allocated single rooms. (PAF D37)	88	88.4	88	88.4	Amber	Amber	MEDIUM	Outturn has reduced marginally from 88.4 % in 2003/04 to 88% in 2004/05 . New land development will increase stock of single rooms at WCC rates.

Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Risk to the delivery of Corp Priority	Remedial Action or Commentary
Adults with physical disabilities helped to live at home per 1000 population aged 18-64 (PAF C29)	2.7	2.6	2.97	3.0	Amber	Green	MEDIUM	Our outturn has increased from 2.57 to 2.87. This is due to the inclusion, for the first time, of people in receipt of equipment that has an ongoing financial commitment. However, this indicator has been affected by similar issues to older people (see PAF C32 above).
Percentage of people receiving a statement of their needs and how they will be met. (PAF D39)	92	94	91.8	96	Amber	Red	MEDIUM	The addition of people in receipt of equipment with an ongoing financial commitment, who have not yet had a statement of need, has impacted on our overall outturn, which has reduced slightly from 95% in 2003/04 to 91.8% in 2004/05. Therefore we will be actively working to provide these people with a statement of need.
Ethnicity of older people receiving a service following an assessment (PAF E48)		0.7	0.98	1.0	Amber	Green	MEDIUM	Outturn has improved from 0.7 in 2003/04 to 0.98 in 2004/05 showing that once assessed older people from BME groups have an equal chance of receiving services. This would illustrate that the Customer service centre is screening out inappropriate referrals and passing on only those which are likely to result in a community care service being provided.

Appendix

Other Key Indicators (DH Performance Assessment Framework)					
Indicator	Target 2004/5	Outturn 2004/5	3 year trend	Commentary	Progress
PAF C27 Admissions of supported residents aged 18-64 to residential/nursing care per 10,000 population aged 18-64.	0.88	1.2	↑	Although admission have increased the Department of Health rate this as an improvement as our previous number of admissions was though to be too low.	Green
PAF D54 % of items of equipment and adaptations delivered within 7 working days	78.2	83	↑	We have exceeded our target for this indicator, with an increase from 78% in 2003/04 to 83% in 2004/05 against the target of 78.2% and expect our new Integrated Equipment Service to deliver even greater efficiencies.	Green
PAF C30 Adults with learning disabilities helped to live at home per 1000 population aged 18-64.	2.3	2.34	→	Our performance has been maintained 2.34 per 1000 adults aged 18-64 in 2003/4 and 2.34 in 2004/05.	Green
PAF C31 Adults with mental health problems helped to live at home per 1000 population aged 18-64.	3.0	5.73	↑	Outturn has increased from 2.08 to 5.73 per 1,000 population aged 18 to 64 partly due to a major data reconciliation exercise carried out jointly between health and social services.	Green
PAF E47 Ethnicity of older people receiving an assessment	1.79	1.57	↑	As an outcome of the Customer Service Centre undertaking screening and sign posting for residents who do not meet out FACs eligibility criteria, outturn has altered from 1.79 in 2003/04 to 1.57 in 2004/05.	Green

Indicator	Target 2004/5	Outturn 2004/5	3 year trend	Commentary	Progress
PAF C51 Adults and older people receiving direct payments at 31 March per 100,000 population aged 18 or over.	45	45	↑	<p>Outturn has increased from 30.8 in 2003/04 to 45.03 in 2004/05 against plan of 45. The number of people receiving direct payments has increased from 123 in 2003/04 to 184 in 2004/05, including 31 older people, 16 younger adults with learning disabilities and 5 mental health clients.</p> <p>In addition to the "traditional" use of direct payments, users with mental health problems are now using both continuing and "one off" direct payments to meet social inclusion needs, and others are using direct payments to create greater flexibility and choice in equipment and minor adaptations.</p> <p>We are increasing the uptake of direct payments by continuing to employ specialist staff to support operational workers and continuing our commitment to training all front line staff (and relevant others) through a major ongoing programme. Our policies and procedures are also kept under review (for example new policies for equipment linked with our development of ICES)</p>	Green
PAF C62 Services for Carers	Not set	3.56		2004/05 first year of indicator	●
PAF A60 Participation in drug treatment programmes	Not set	15.9		2004/05 first year of indicator	●
PAF D59 Practice learning indicator	Not Set	5.4		2004/05 first year of indicator	●
PAF A6 Emergency psychiatric admissions				Data not yet available from PCTs- Interface Indicator with Health	●

● = Progress rating not applicable

4. Customer Results

Target status against Key Performance Indicators	
Amber	Missed target by 10% or less
Red	Missed target by more than 10%
Green	Met or exceeded target

Trend status against Key Performance Indicators	
Amber	Flat (below best in class) or fluctuations above and below target, or some improvements but not yet consistent
Red	Reverse trend to the aim of the indicator
Green	Continuous improvement over last 3 years (or 2 if no data) or sustained 'best of class'

Satisfaction Indicator	Actual 2002/03	Actual 2003/4	Actual 2004/5	Target 2004/5	Target Status	Trend Status	Remedial Action or Commentary
% citizens satisfied with social services	34.4%	29.4%	36%	30%	Green	Green	Citizen satisfaction continues to improve
% citizens who say they use the service satisfied with Social Services	66.7%	69.9%	75.8%	71%	Green	Green	There has been a significant improvement in service users satisfaction. Initiatives described in chapter 2 should lead to further improvement.
% users satisfied with social services (Home Care users)	54.2%	58.1%	61.8%	57%	Green	Green	This indicator measures the % of older people in receipt of home care who are either extremely or very satisfied with the service. Results show an improving rate of satisfaction. Initiatives described in chapter 2 should lead to further improvement.

A mystery shopper exercise carried out in February with results made available in May 2005 assessed the following issues and with the stated results.

<i>Activity</i>	<i>Very satisfied</i>	<i>Fairly satisfied</i>	<i>Neither satisfied nor dissatisfied</i>	<i>Fairly dissatisfied</i>	<i>Very dissatisfied</i>
<i>Visits to offices re application for blue badge</i>	4	3	0	0	0
<i>Visits to primarily children offices with adult enquiry about low level need</i>	4	1	1	0	0
<i>Visit to primarily Adult Offices with Children Enquiry (respite care for disabled child)</i>	5	1	0	0	0
<i>Visit to adult offices with enquiry re information about carers support</i>	3	0	0	0	0
<i>Visits to office re older person potentially eligible for services</i>	1	2	0	2	1 (Reception now closed)
<i>Letters to offices re information about care homes</i>	1	3	0	2	0
<i>Email enquiry via ss web enquiries services about assessment</i>	0	3	0	0	1 (no reply received)
<i>Letter to non-operational Offices</i>	1	1	0	0	1

The department is currently considering these results and will take necessary remedial action which may involve additional customer service training.

5. Financial Results

6.1 Although an underspend of £0.461m is shown for Adult Services in Table 1, this is after having recharged the costs of corporate and departmental support services. The outturn based on direct service budgets only was a £0.048m overspend.

Table 1 Major Variations – Adult Services

Major variations	£000
Care management	(1,570)
Residential Care	1,121
Other care Services	38

6.2 The delivery of spend so close to budget by managers was only achieved by deferring a number of key developments, particularly around services for older people that need to be commissioned jointly with NHS colleagues. In particular, the department had to delay a number of intermediate care developments that will be key in reducing delayed transfers of care from hospital wards.

6.3 Deferment of developments was necessary in the main due to the increasing demands for high cost specialist accommodation for people with disabilities and cost pressures for residential care for older people. Both of these cost pressures will need to be addressed within the forthcoming budget cycle.

CHAPTER TWO – CONSULTATION

1. Introduction

The Customer First Team is a small team with a Departmental wide brief. Its main aim is to coordinate the work of service user and carer involvement. The Customer First Team works closely with the Customer First Steering Group, whose membership includes service users and carers. The Department has set out in its Departmental Service Plan a number of initiatives under the heading of ‘Customer First’ to take this key theme forward. A service user and carer involvement strategy and action plan has been endorsed by Directorate and the Customer First Steering Group are monitoring progress. The corporate objective that this relates to is to:

“Promote the health and social care of our citizens”

2. Consultation this Year

Title	Purpose	Start Date	Methodology	Corporate Objective
3 rd Customer First Conference	To empower service users to ‘have their say’	May 2005	Conference	Promote the Health & Social Care of our Citizens
Locality groups for older people	To empower older people, service users to ‘have their say’ with senior managers	On-going	Locality groups	
Service user involvement in Homes for Elderly People	To develop minimum standards in all homes for service user involvement	September 2004	Project group	
Home care Satisfaction	Part of our “Closing the Loop” initiative	October 2004	Questionnaire and interviews	
HEP satisfaction	Part of our “Closing the Loop” initiative	May 2004	Interviews	

3. Messages from Consultation Results

3.1 The feedback from the 3rd Customer First Conference has been again very positive. The progress on the outcomes from last years conference were fed back to the people attending the conference by service users and by a video highlighting the different activities happening around the county, that people said were important.

3.2 Older people have been giving their views on the home care services that they receive. Managers have been listening to what they have to say and also informing them of developments that they are considering and obtaining their views on them.

3.3 Carers from the homes were part of a project group looking at minimum standards for service user involvement at our Homes for Elderly People. They consulted with residents at the homes on the development of these standards.

4. Actions taken in response

4.1 A draft report is currently being produced and the outcomes will be taken to Directorate to develop an Action Plan that will be monitored by the Customer First Steering Group.

4.2 The views of the older people have been fed back to the Older People Service Development and Planning Officers meetings to ensure their views are taken into account, as part of the modernisation of home care services.

4.3 A leaflet has been produced on minimum standards for service user involvement and is being piloted in six of our Homes for Elderly People. The standards will be reviewed during the summer.

4.4 Improvements made in service for residents the county council's own homes.

CHAPTER THREE – COMPLAINTS

1. Introduction

1.1 We must, by law, have an effective Representations and Complaints Procedure. The Children Act 1989, Leaving Care (Children) Act 2000 and the National Health and Community Care Act 1991 all say that service users, or those acting on their behalf, should have the right to express a view concerning services offered, provided, or not provided by Social Services. The procedure should be accessible to all sections of the community and should be robust in meeting timescales and attempting to solve problems as close to where they happened as possible. This section includes headline information about our performance managing complaints. We must, by law, produce a separate full annual report to tell Members about how the representations and complaints procedure has been used – this more detailed report will be presented to Members separately later in the year.

1.2 Representations are any comments made about the availability, delivery and nature of services provided by us to individuals or groups. They are not just criticisms. We seek out and welcome this information – it is important to know when customers are pleased with the services they receive, to look at the suggestions for service improvement they put forward, and to try to resolve any problems they experience.

1.3 We encourage all staff to respond quickly and clearly to any concerns that are raised by individuals or groups. However, it may not always be possible to sort out problems in this way. Sometimes a more detailed investigation may be required. The statistics we have used are based on the information we have been given by teams and units across the department.

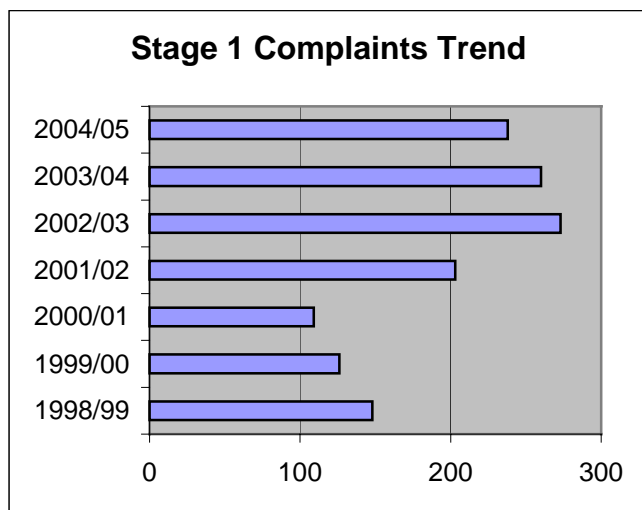
2. Compliments and Complaints Analysis

2.1 Lots of people take the time and trouble to tell us that they are very happy with the services and support they receive. Warwickshire Social Services is rightly proud of its consistent record of receiving high numbers of compliments. This year the number of compliments we were able to register was 547, with 511 of these being about Adult services. The majority of these were about services for older people

NUMBER OF COMPLIMENTS			
APRIL – MAR01/02	APRIL – MAR 02/03	APRIL – MAR 03/04	APRIL – MAR 04/05
224	358	276	547

2.2. Stage 1 Complaints: We aim to resolve most complaints as close as possible to where the problem first arose. Local teams and units are responsible for responding as quickly and clearly as possible to problems. Sometimes, people will go direct to the team or unit to ask for their problem to be looked at. Sometimes they will contact the Customer Relations Team, or a senior manager. We will ask team and unit managers to investigate the concerns and provide a clear explanation of what has happened and why, and what might need to be done to put things right. We aim to answer complaints at this stage within 14 calendar days.

2.3 The graph below shows the trend information for this department on Stage 1 complaints over the past 7 years.

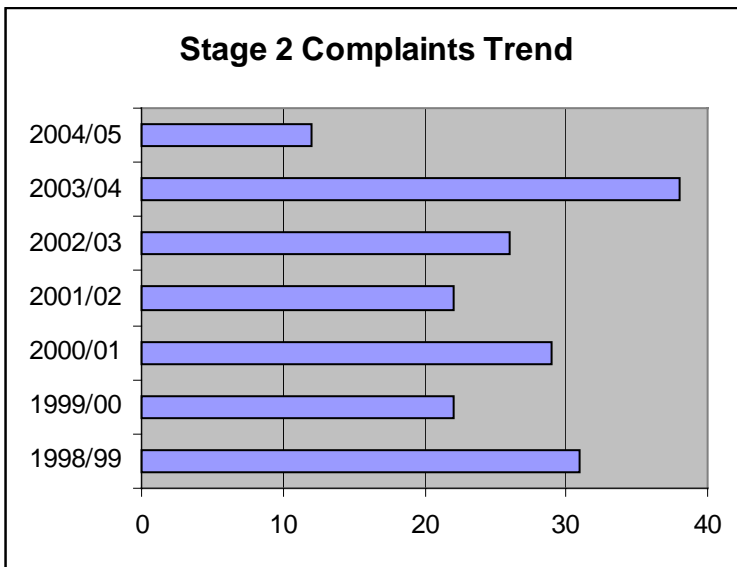


2.4 For 2004/05, 159 of the complaints made were about Adult Services – i.e. 67% of departmental complaints received. 74% of Adult complaints are from or on behalf of older people. 40% of Adult complaints are in respect of domiciliary care, with the majority of the rest of complaints pretty evenly spread across care planning, residential care and social work (16% each). Aids and adaptations received 7% of complaints, as did day care. 54% of complaints were about general service standard issues, with 23% of complaints about the way staff behaved. There were no complaints about discrimination issues.

2.5 Stage 2: If someone is not happy with the outcome at Stage 1 they have the right to ask for their complaint to be formally investigated at Stage 2. People also have the right to request an investigation at Stage 2 without having the matter considered at Stage 1, if they prefer. We might decide that the problems raised are too complex or difficult to deal with at Stage 1, so may recommend that some complaints are looked into at Stage 2 straight away.

2.6 Stage 2 complaints are investigated by Investigating Officers, independent of the team or unit where the problem arose, who might also be independent of the Council. We aim to send a report of the investigation to the complainant within 28 days, or agree a different completion date with them if necessary. The appropriate Service Manager within the Department is responsible for responding to the complainant, outlining what action, if any, will be taken in relation to the recommendations.

2.7 The decrease in Stage 2 complaints registered is due to a proactive approach aiming to mediate and resolve complaints before they escalate.



2.8 For 2004/05, Adult Services received 8 Stage 2 complaints. 4 of these were in respect of older people, 2 in relation to people with physical disabilities, and 1 in relation to learning disabilities. The issues raised were about service standards, staff conduct and service costs. The service areas complained about were domiciliary care, residential care, aids and adaptations and care planning.

2.9 Stage 3: If a Complainant remains dissatisfied with the outcome and recommendations at Stage 2 they have the right to request an Independent Review Panel. They will be invited to make a submission to the Panel, which consists of two County Councillors and an Independent Person who is in the Chair. The Panel will consider the complaint, whether it has been properly investigated, and why the complainant is dissatisfied with the outcome. The Panel will then make recommendations for resolution to the Director of Social Services. The Director then has the responsibility of responding to the complainant.

2.10 During 2004/05 2 complaints about Adult services went to Stage 3. The issues raised were about social work support and aids and adaptations, and the concerns were in relation to service standards.

2.11 161 complaints investigations about Adult Services were completed during 2004/05. Of these 47 were not upheld, 33 were partially upheld, 67 were fully upheld, and 14 were withdrawn.

2.12 41% of Adult Stage 1 complaints were completed within the 14 day timescale, and 65% of all complaints were dealt with within 28 days. 50% of Stage 2 complaints were dealt with within 3 calendar months.

3. Improvements Made

Below are a small selection of compliments which illustrate the range of activity undertaken and the level of customer satisfaction.

- **Mr B**– Learning Disabilities, North
“The department was helpful and professional in dealing with a difficult situation.”

- **Ms S** – Disabilities Team, North
“During the year, I am now supported in exactly the way I would wish.”
- **Mrs D** – Disabilities Team, South
“What a wonderful difference the lift has made, *getting upstairs* with no exertion at all and arrives with enough breath to enable her to perform the tasks that are required.”
- **Mrs S** – Mental Health Services
“In the short time you have achieved so much.”
- **Ms G** – Adult Mental Health Team
“Thank you for your help and understanding, it’s never too late, BUT I wish this help was available 28 years ago.”
- **Mrs M** – Financial Assessment Visiting Team
Grateful for help to re-assess circumstances and will take her husband out for a meal with reimbursement.
- **Mrs J** – Financial Assessment Visiting Team
The visiting officer was “very, very helpful.”
- **Mrs P** – Promoting Independence, South
“She (social worker) gave me the benefit of the expert knowledge and experience.”
- **Mr & Mrs R** - Day Care – ‘The Limes’
“Day care once a week has released the daily pressures and given us some desperately needed peace of mind.”
- **Ms N & J N** – Older People Community Care, North
“What has mattered the most is the compassion and care with which you have responded to our family’s needs. We have always felt listened to and understood, we appreciate the effort you have put in to finding solutions.”
- **Mr S** – Older People’s Team, North (Aids & Adaptations)
“I would not have thought it possible for a rail to make such a difference to climbing the stairs.”
- **Ms N** – Older People’s Team, South (Care Planning)
“Generous help you gave us at all times and in so many ways. Especially we appreciated your setting up the package for the equipment etc.”
- **Mrs T** – Home Care Kenilworth/Warwick (fast response)
“We could not exist without the kindness received.”
- **Mr S** – Home Care North Warks
“The support allowed Mrs Taylor to remain in her own home longer than expected.”
- **Mr M** – Home Care Stratford-Upon-Avon

“The carers, who at first seemed strangers, soon became friends and their kindness, warmth, understanding and affection far exceeded anything.”

- **Mr R** – Home Care Rugby
“The service my wife receives from your carers is excellent and very professional.”
- **Ms H** – Older People Residential Care, North (Respite)
“Thoroughly enjoyed recent stay at Abbotsbury, the standard of care is very good.”
- **Mrs D** – Older People Residential Care, North
“We are grateful for the care you have taken of my mother these past couple of years, it’s the staff who make the difference.”
- **Mr and Mrs H** – Older People Residential Care, South
“We are eternally indebted to you and all your staff that makes it such a lovely establishment to be associated with.”