

**DIRECTORATE OF ADULT COMMUNITY &
HOUSING SERVICES**

**COMPLIMENTS AND COMPLAINTS
ANNUAL REPORT**

April 1st 2005 – 31st March 2006

ADULT SOCIAL CARE SERVICES

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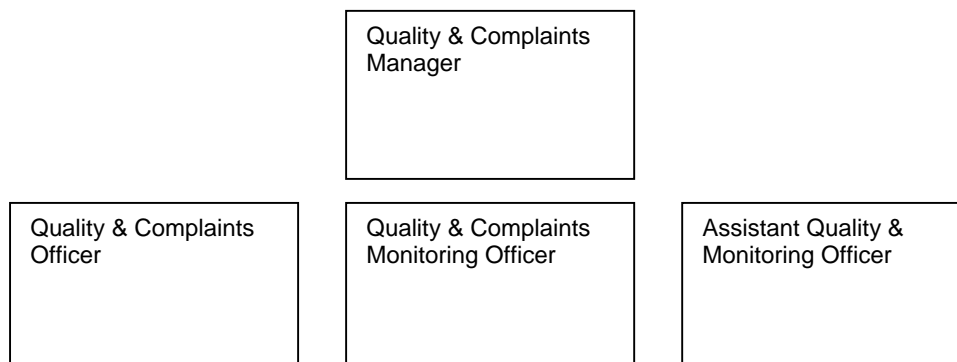
SECTION 1

1. INTRODUCTION

- 1.1 This Report provides information relating to the Adult Social Care Complaints, Comments and Compliments Procedure, during the period 1 April 2005 to 31 March 2006.
- 1.2 The Social Care procedure for Adult's complaints, are determined by legislation, predominantly involving the:-
- NHS & Community Care Act 1990 (section 50)
 - Health & Social Care Act 2000,
 - Local Government Act 2000
- 1.3 Every Local Authority with a responsibility for Social Care Services must provide an annual report into the workings of the Social Care complaints and representations procedures. This requirement is contained in the National Health Service and Community Care Act 1990.
- 1.4 All service users and people who request a service are provided with information on how to complain or make a compliment. Complaint information is displayed in all public reception areas. It is also given out at different stages by staff to all service users. Approx 10,000 complaint & compliments leaflets were provided to service users or their relatives during 2005/06.

2. THE QUALITY AND COMPLAINTS TEAM

- 2.1 The Quality & Complaints Team is part of the Policy & Performance Unit, within the Directorate of Adult Community and Housing Services. The following structure chart shows the Quality & Complaints Team



2.2 Our key objective in the management of all complaints is to achieve appropriate and effective resolutions within the shortest possible timescales. Every effort is made to ensure that each complaint is dealt with close to the point of service delivery. We are committed to a positive and proactive approach to complaints handling. We view complaints as a mechanism for ensuring that we continually improve the quality of our services.

- Enabling the Directorate to learn from complaints and compliments, and to change, review or maintain services accordingly.
- Ensuring that complaints are properly recorded and acted upon, and that where necessary things that have gone wrong are put right promptly.
- Ensuring that staff and service users understand their rights, and responsibilities within the complaints process.

SECTION 2

2 THE COMPLAINT PROCEDURES

2.1 This will be the last annual report before the procedures are changed in line with directives from central government (Department of Health). The new guidance that we are given will introduce new concepts and practices to complaints handling, & will be introduced in September 2006. There will be developments and changes in the new procedures with perhaps the most obvious and immediate impact being a reduction in the time available to offer a resolution to a complaint.

2.2 Despite the anticipated changes the purpose of the Complaints, Comments and Compliments procedures will remain as:

- Providing a way for service users, or a person acting on their behalf, to tell the Directorate what they think of the service.
- Enable the Directorate to learn from complaints and compliments, and to change, review or maintain services accordingly.
- Ensure that complaints are properly recorded and acted upon, and that where necessary things that have gone wrong are put right promptly.
- Ensure that staff and service users understand their rights, and responsibilities within the complaints process.

2.3 The complaints procedure for social care services has 3 stages,

- Stage One. Problem solving and informal resolution.
- Stage Two. Formal Complaint investigation.
- Stage Three. Independently chaired Review Panel

2.4 Stage One

The current statutory timescale for responding to adult complaints at stage 1 is currently 28 days. It offers the Local Authority the opportunity of considering the complaint and responding to it as appropriate; most commonly this involves either apologising for any mistakes made and correcting any resulting disadvantage (upholding the complaint) or finding that the work that was undertaken was correct (not upholding the complaint). Looking into a complaint at Stage 1 should be a relatively short piece of work; however, it is important that the response is informative, accurate, fair and as helpful as it can be.

2.5 Stage Two

Adult services complaints currently allow 28 days at stage 2 for the investigation of the matter by a complaint investigator and the response by the Assistant Director. This timescale for investigation can be extended to three months with the knowledge and approval of the complainant. The role of the investigating person is to look into the complaint matters with thoroughness, fairness and objectivity.

2.6 Stage Three

If the complainant remains dissatisfied after the Stage two process, then he/she can request that matters move to Stage 3. This process requires the Local Authority to establish a Stage 3 Review Panel to hear the complaints. The Review Panel involves one elected Council Member, and two Independent People, one of whom must chair the panel. Also in attendance will be the complainant, the complaint investigator, a senior manager from Social Services, the complaints manager and other officers who support the complaints process.

Essentially the Review Panel considers the management of the complaint and the responses made at stages 1 and 2. The Review Panel after listening to the issues related to the complaints then provides written recommendations to the Director of Adult Community & Housing Services and copied to the complainant in relation to what the Panel considers should be the outcome.

The Director then provides a final written response to the complainant within 28 days following the Review Panel.

If the complainant remains dissatisfied following the stage 3 response he/she can; within twelve months of the panel hearing, approach the Local Government Ombudsman seeking further enquiries or investigation to be carried out into the complaints by that office.

2.7 CORPORATE COMPLAINTS:-

We also have a duty to comply with general complaints which do not fall within the boundaries of the National Health Service and Community Care Act (1990) and the Children Act (1989). Complaints in this category are called Corporate complaints and are dealt with under the Council's own Complaints and Representations procedure.

SECTION 3

3 OVERVIEW - SUMMARY OF COMPLAINTS AND COMPLIMENT ACTIVITY 2005/06

- 3.1 During 2005/06 Dudley Social Services Department as it was, and the Directorate of Adult Community and Housing Services as now, provided a service to 11,424 adult service users.
- 3.2 The total number of adult complaints received for Social Services 2005/06 is **119** this compares to **126** complaints for 2004/05 and **150** for 2003/04.
- 3.3 The complaints are individual areas of complaint; they were made by **118** separate service users or their representatives.
- 3.4 There have been **3** formal Stage Two complaint investigations carried out during 2005/06, compared to **7** for 2004/05 and compared to **5** for 2003/04
- 3.5 **89%** of all complaints were dealt with within the current statutory timetable of 28 days [20 working days] compared to **59%** for the previous year. This is a significant improvement.
- 3.6 **4.6%** of complaints were dealt with between 29 days and 35 days. This delay is acceptable if the complainant is in agreement with the delay and reasons for and kept informed.
- 3.7 **4.6%** of complaints were dealt with within 36 to 42 days. This delay is acceptable if the complainant is in agreement with the delay and reasons for and kept informed.

- 3.8 **1.5%** of complaints took over 42 days. This delay can be acceptable if the complainant is in agreement with the delay and reasons for and kept informed.
- 3.9 There were **267** registered compliments for 2005/06 compared to **241** for 2004/05 & **197** for 2003/04.
- 3.10 **Local Government Ombudsman:-** There have been **no** findings of Maladministration by the Ombudsman concerning Dudley Social Care Services complaint matters for 2005/06.

SECTION 4

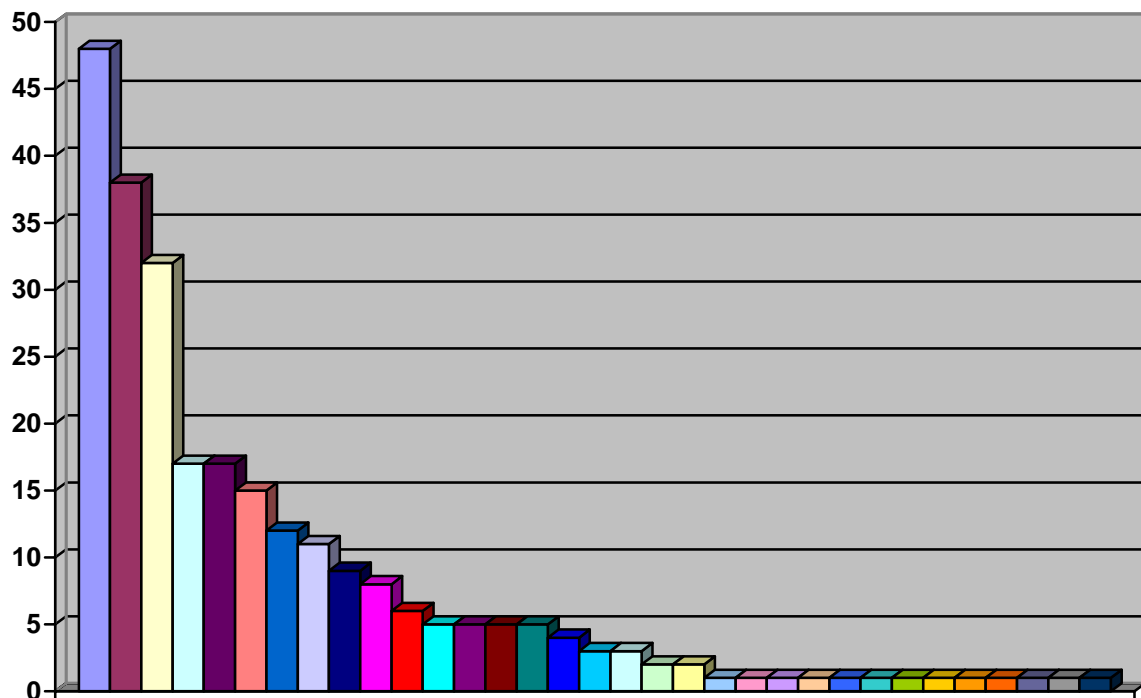
4. EXAMPLES OF DEVELOPMENTS AND ACHIEVEMENTS 2005/06

- 4.1 The Quality & Complaints Team returned to full complement in April 2005 which has meant increased support and assistance being offered to operational managers which may account for the improvement in the numbers of complaints being resolved within timescale.
- 4.2 **98** of all complaints were responded to within the statutory timescale.
- 4.3 The use of Mediation, conciliation meetings with complainants increased. Four specific complaints which could not initially be resolved at Stage One were resolved through mediation with the complainants, thus early resolution to the satisfaction of the complainant and preventing the need for unnecessary recourse to formal investigations.
- 4.4 The creation of a complaints form specifically for people with a learning disability.
- 4.5 Training for Managers, Social Workers and other relevant groups was increased during 2005/06 with **81** managers, assistant managers, senior practitioners, social workers and others responsible for responding to complaints attending arranged complaint handling training courses.
- 4.6 The Quality & Complaints Team also carried out planned 'overview training' to **45** members of the Dudley Council Plus service.
- 4.7 Development of working agreements or protocols with agencies such as Mental Health services within the Primary Care Trust.
- 4.8 Visits to over 20 establishments, district offices to raise awareness of the complaint process, provide advice and information to staff.
- 4.9 The aim for 2006/07 will be to increase the training opportunities for staff in terms of awareness training and formally responding to

complaints in light of new complaint legislation and Department of Health guidance.

SECTION 5

5 COMPLIMENTS DATA 2005/06



Occupational Therapy (48)	New Swinford Hall (38)
Pathways Team (32)	Disabled Living Centre (17)
Wallbrook (17)	Stourbridge District Office (15)
Hospital Social Work Team (12)	Community Services Bri Hill, Dud & Sedgley (11)
Vision Support Services (9)	Netherton District Office (8)
Brierley Hill District Office (6)	Sedgley District Office (5)
Short Term Assessment Team (5)	Arcal Lodge (5)
Tiled House Lane (5)	Shenstone (4)
Halesowen District Office (3)	Commissioning (3)
Lower Gornal Centre (2)	Community Services H'Owen & S'bridge (2)
Social Care Transport (1)	Woodside Day Centre (1)
Community Equipment Stores (1)	Moving and Handling Team (1)
Reablement Team (1)	Brettell Lane Day Centre (1)
Queens Cross Day Centre (1)	New Bradley Hall (1)
Dudley CTLD (1)	Glebelands (1)
Finance (1)	Human Resources (1)
Policy and Performance (1)	

- 5.1 It should be recognised that complaints and compliments are often the result of difficult and sometimes traumatic events for people, complaints are often driven by a desire to effect change and prevent a repeat of a mistake being made, a compliment can be equally powerful in its message and just as we must learn from complaints we can also learn from compliments.
- 5.2 There were **267** registered compliments for 2005/06 compared to **241** for 2004/05 & **197** for 2003/04. The continued gradual increase in compliments is welcomed and goes some way to evidencing the high standard of the services provided to local people and the quality in the delivery of those services by Social Care staff throughout Dudley
- 5.3 Many of the compliments received comment on the kind and caring attitude of staff, as well as the positive difference that the service has made.

5.4 **EXAMPLES OF COMPLIMENTS RECEIVED:-**

- *I would like to say how pleased I am with the excellent service provided by the carers who come into help look after my mother. They are friendly and supportive and worth their weight in gold.*
- *May I through your department, convey the thanks of my family to the Tiled House Residential Home for the care, compassion and love shown to my late mother in law during the last 3 years of her life. At all times staff were professional and the standard of care excellent.*
- *In March this year I suffered a stroke, after several weeks in hospital I returned home needing a wheel chair. I was most impressed with the speed and efficiency I was supplied with stair handrails and other appliances needed to assist me to get back my independence. Thank you for an excellent service well done to all concerned.*
- *To everyone at New Swinford Hall for helping me on the road to recovery and for all your support. Special thanks to night staff when the pain was unbearable, their care was very much appreciated. You all do a wonderful job. Thank you.*
- *I was very impressed with the speed in which the Visual Impairment Team dealt with my call. Mrs T W visited me to enquire what my problem was and being told I had been diagnosed with AMD she was able to help me a great deal. TW was very efficient at getting certain items that I needed which has helped me a lot. When I need*

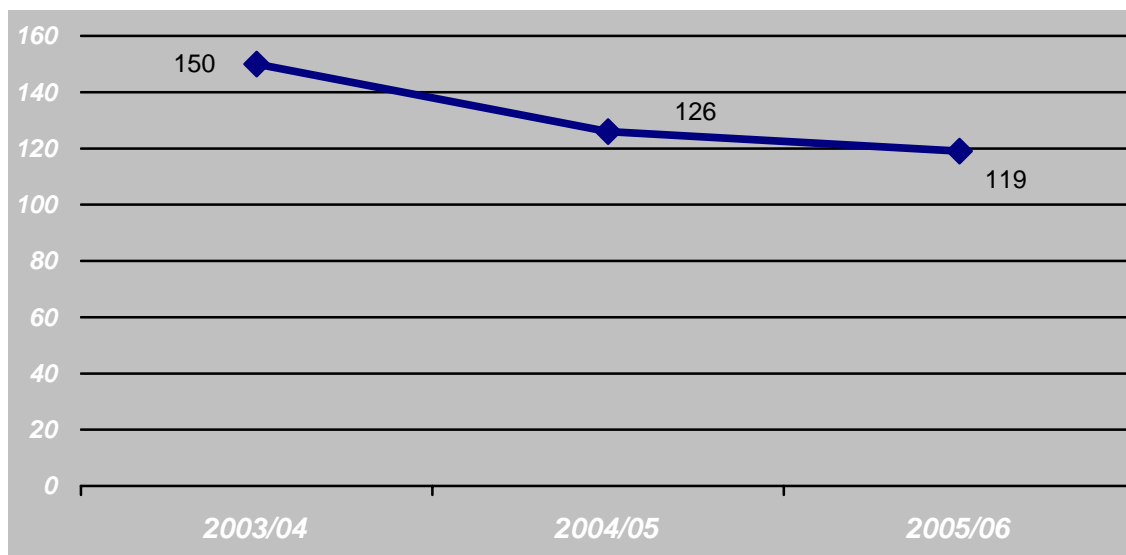
any more advice I shall have no hesitation in getting in touch with TW

- *I would like to thank you most sincerely for your help with my relatives blue badge, it is so nice to meet someone who is prepared to help you. "It doesn't happen often". If I need anymore help I shall certainly get in touch with you.*
- *I want to thank you for recognising me for being a carer to my mother. It has not been an easy task and at times it has been a lonely road, but I feel that I do my best in keeping mom well cared for. Over the years the thank - you's have been very rare. Your gift to me will enable me to still have time to do the hobbies I enjoy, to give me my own space if only for a few hours. So thank you very much for thanking me. It means a lot.*

SECTION 6

6.1 COMPLAINT DATA 2005/06

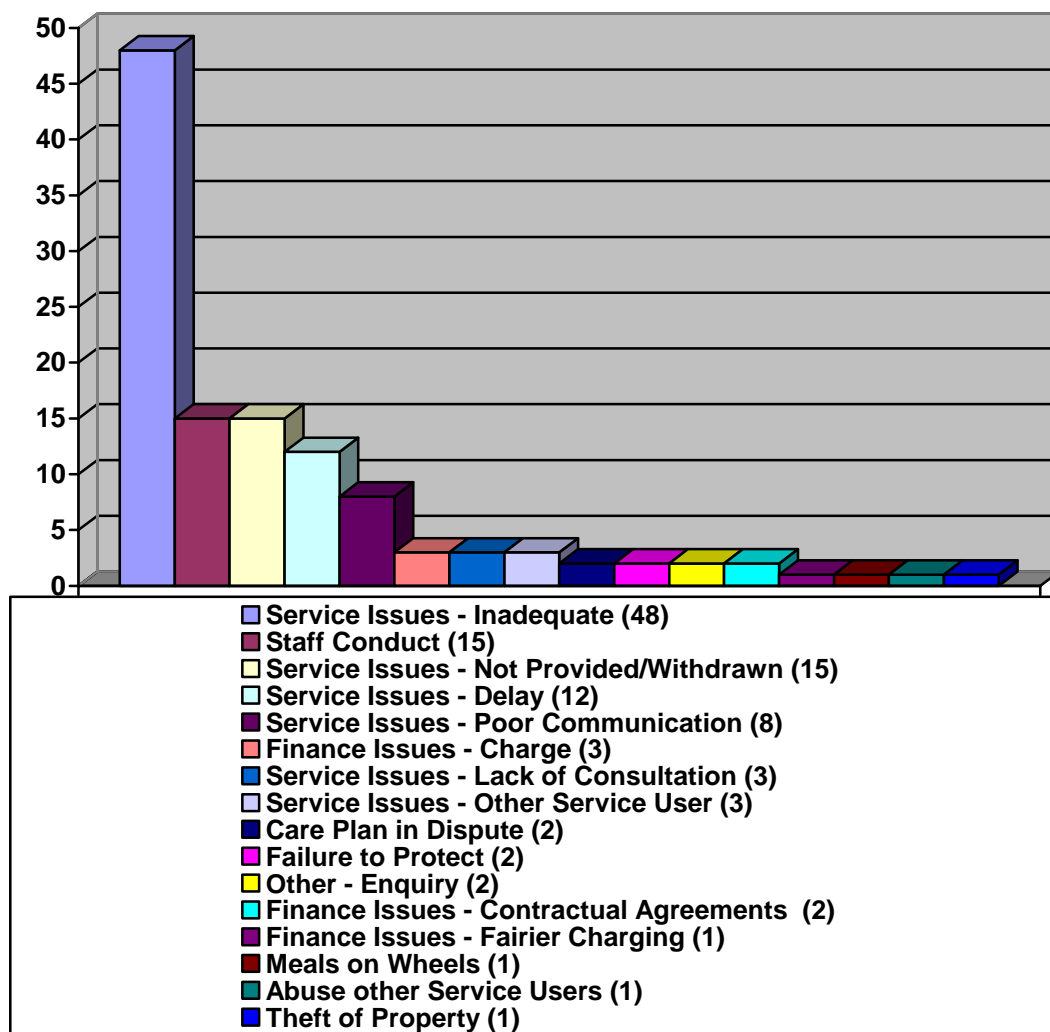
- 6.1.1 2005/06 saw a slight decrease in the complaints received; **119** complaints were registered during this year, compared to **126** for the previous year [2004/05] and **150** for [2003/04] Complaints activity is monitored throughout the year, and there does not appear to be a single factor or reason for the decrease. A reduction in the numbers of complaint could indicate that the public has greater satisfaction with the services available to them, and this must be welcomed. However, the Quality and Complaints Team are equally mindful of the positive aspects of service users making complaints and therefore the ongoing need to ensure that service users have knowledge, awareness and confidence in the process. We will continue to raise awareness of the complaint process, and will increase the training provided to staff.
- 6.1.2 The Directorate of Adult Community and Housing provided a Social Care service to 11,242 Adults during 2005/06. From that figure we see that 119 people raised complaints, in percentage terms this amounts to 1.06% of all service users who felt dissatisfied with the service they received. This statistic in no way diminishes the importance of each complaint or the impact incidents of poor practice or inadequate services had on each of the people who complained. We also recognise that it is not easy or straightforward for people to complain, particularly people who feel vulnerable, or fearful about complaining. We will be seeking to continually raise awareness of the complaint process and improve access to it.



6.1.3 The Quality & Complaints Team are anticipating an increase in complaint activity for 2006/07 due to the following reasons:-

- **Revised Complaint procedure:-** the Department of Health is about to publicise its new Social Care complaint regulations & guidance to be implemented by Councils in September 2006. The new legislation and guidance has widened the scope of the procedures in terms of who can complain and the matters which can be complained about.
- In order to comply with the new regulations and guidance the Quality & Complaints Team will implement revised new complaint procedures together with new leaflets, posters and information on both intranet and internet sites. This could lead to greater awareness and therefore take up of the procedures.
- **The Commission for Social Care and Inspection [CSCI]** has in recent years had a high profile in terms of receiving and dealing with a number of complaints around regulated services, this role has been reviewed and CSCI will not be involved with complaints to the degree it has been before – therefore Councils are likely to receive more direct contact from the public or to be referred to the Council by CSCI.

6.2 COMPLAINT ISSUES



6.2.1 There is a broad range of issues complained about; however the highest and most consistent area of complaint throughout the year remains 'inadequate service', together with 'staff conduct'. Concerns around behaviour or poor attitude must quite rightly be addressed and challenged.

6.2.2 The complaints received generally refer to matters affecting the individual, rather than several adults complaining about the same issue or a specific service at the same time. The exception this year refers to a number of complaints regarding the quality of food provided at a Day Service establishment. Fourteen complaints were received within the same period regarding the quality of food; this resulted in a change of supplier. Each person who raised the complaint received an apology and an explanation. The Quality & Complaints Team followed this matter up with each complainant in order to check that they were satisfied with the response they received. In a small way this

demonstrates the importance of service users raising complaints and evidences that direct action does take place as a result to rectify matters.

6.2.3 Examples of inadequate service include:-

- A dispute as to whether a shower or bath would meet service users needs.
- Waiting time for equipment to be provided.
- Missing items of clothing.
- Dispute regarding the service being offered.
- Quality of Food
- Transport arrangements

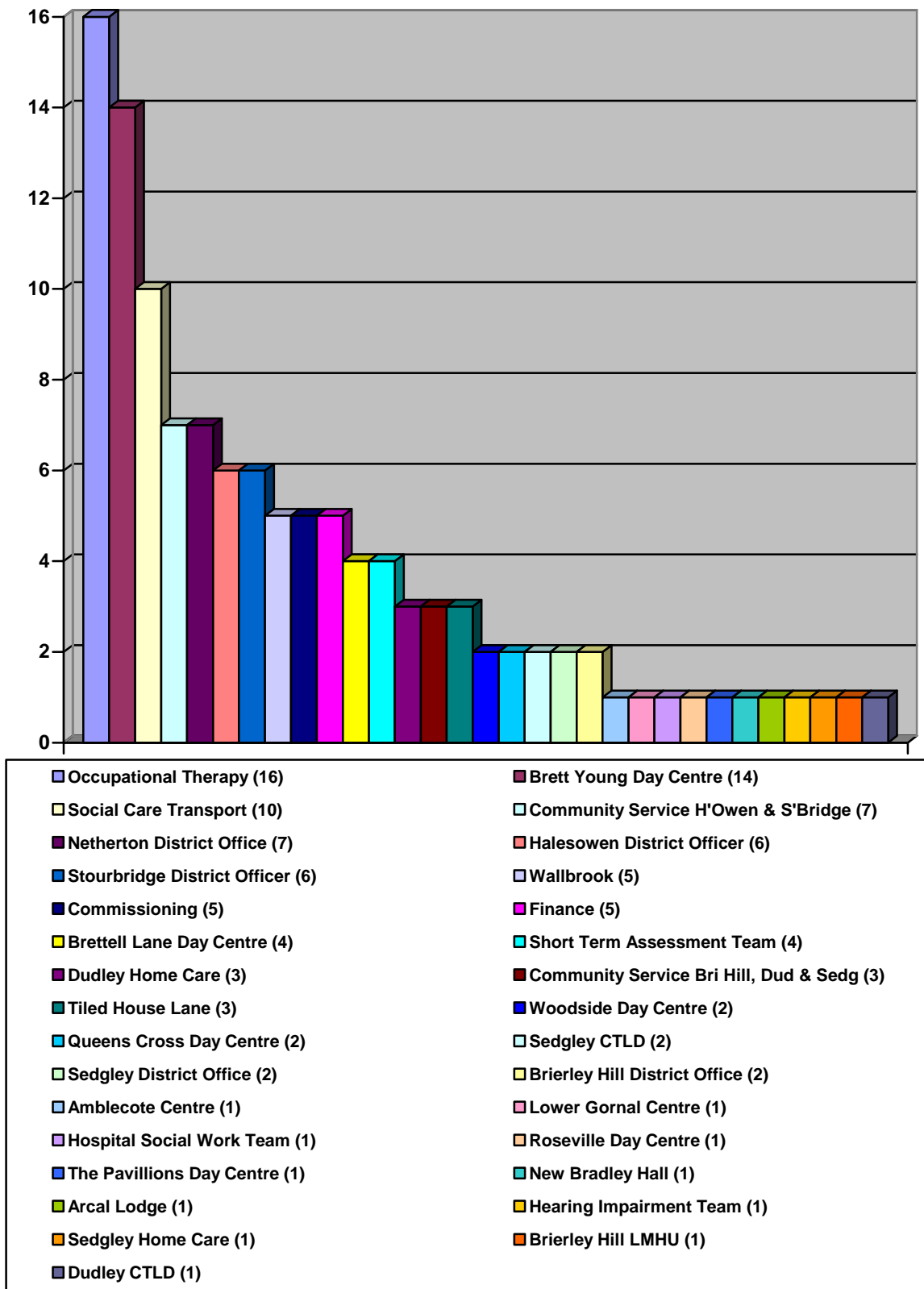
6.2.4 Complaints relating to Staff conduct refer to:

- Allegation of poor attitude and rudeness from a carer
- Service user unhappy about being denied access to a computer
- Dispute over decision to carry out a re-assessment of need

6.2.5 Managers in some cases concluded that members of staff needed advice, or training to address short falls in practice.

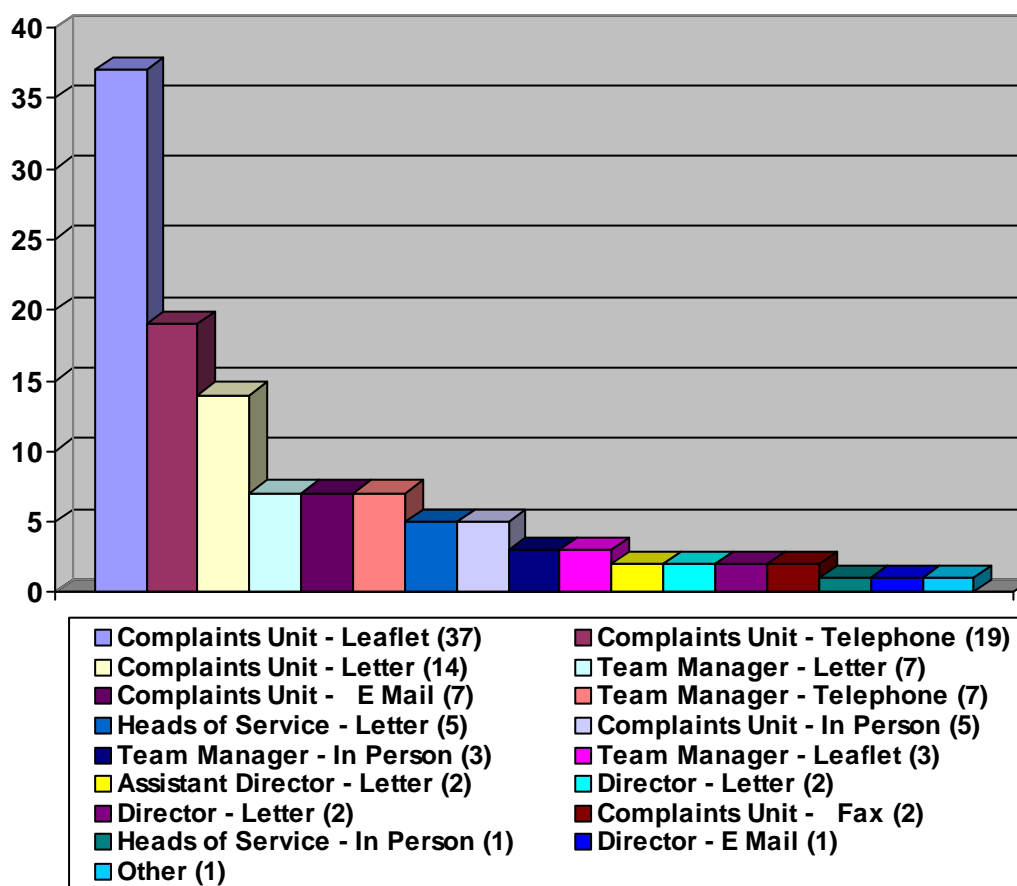
6.2.6 Further details explaining where action was taken and lessons learned is contained in section 8 of this report

6.3 SOCIAL CARE COMPLAINTS RECEIVED ACCORDING TO SERVICE AREA



- 6.3.1 The Occupational Therapy service received the most complaints with **16** for the year, however this is a decrease in complaints i.e. down from **20** on the previous year. The main area of complaint regarding the Occupational Therapy service involves waiting times for carrying out an assessment, disagreement with an assessment outcome and or delivery of services. It should also be noted that this service received 7361 contacts from members of the public during 2005/06, it carried out 4227 assessments and took on 2563 new referrals. It should also be noted that the same service also recorded the most compliments of any service with a figure of **43**.
- 6.3.2 The figure relating to the Brett Young Day centre concerns a single issue – raised by fourteen separate service users, namely the quality of potatoes. As a result of the complaints the supplier was changed and no further complaints have been received.
- 6.3.3 The complaints relating to transport involves service users unhappy at a reduced time for a planned activity which was reduced to take account of revised transport arrangements. This matter was reviewed, and a short term resolution was agreed with the intention of seeking a long term solution in consultation with service users.
- 6.3.4 Further details explaining where action was taken and lessons learned is contained in section 8 of this report.

6.4 HOW ARE COMPLAINTS RECEIVED



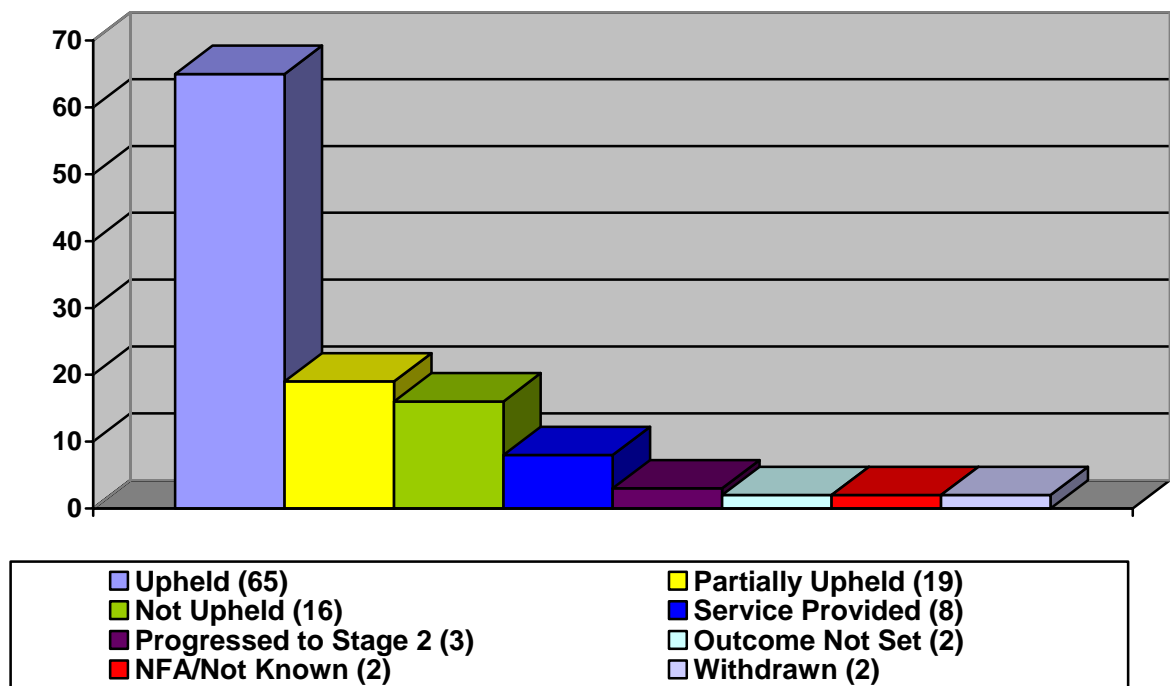
6.4.1 As in previous years a complaint leaflet remains the most used method of sending in a complaint with **37** being received. In 2005/06 we distributed approximately 10,000 complaint leaflets directly to service users or to reception areas across Dudley Council.

6.4.2 All complaints however they may be received, are acknowledged, before a Manager is allocated to carry out the response to the complaint matters.

6.4.3 Complaint and compliment publicity material will be revised this year to take account of new legislation and guidance, every effort will be made to increase the accessibility to the complaint process, not least by email, intranet and via the Dudley Council Plus service.

6.5 OUTCOMES IN TERMS OF FINDINGS

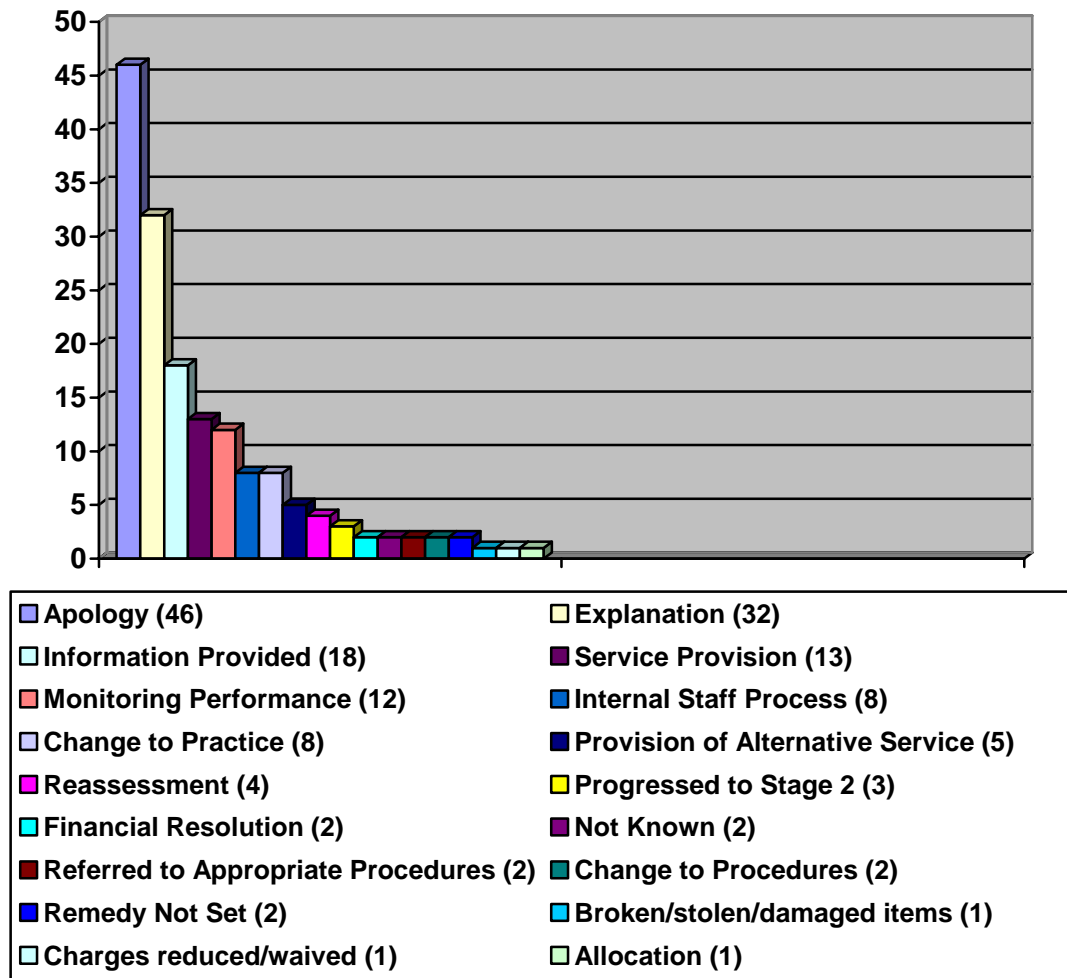
6.5.1 The majority of complaints result in a finding, this might for example be a finding of 'Upheld' and therefore the view is that the complaint is justified. There are occasions where a complaint is resolved at a very early point through discussion and agreement; in those situations a finding is not always possible or practicable.



6.5.2 It can be seen that the finding of "Upheld" figured highest in the outcome, indeed it is higher than all other findings as a total. This indicates a degree of fairness and objectivity in the enquiries carried out into the complaint matters. Along with a recognition that mistakes are made and need to be rectified.

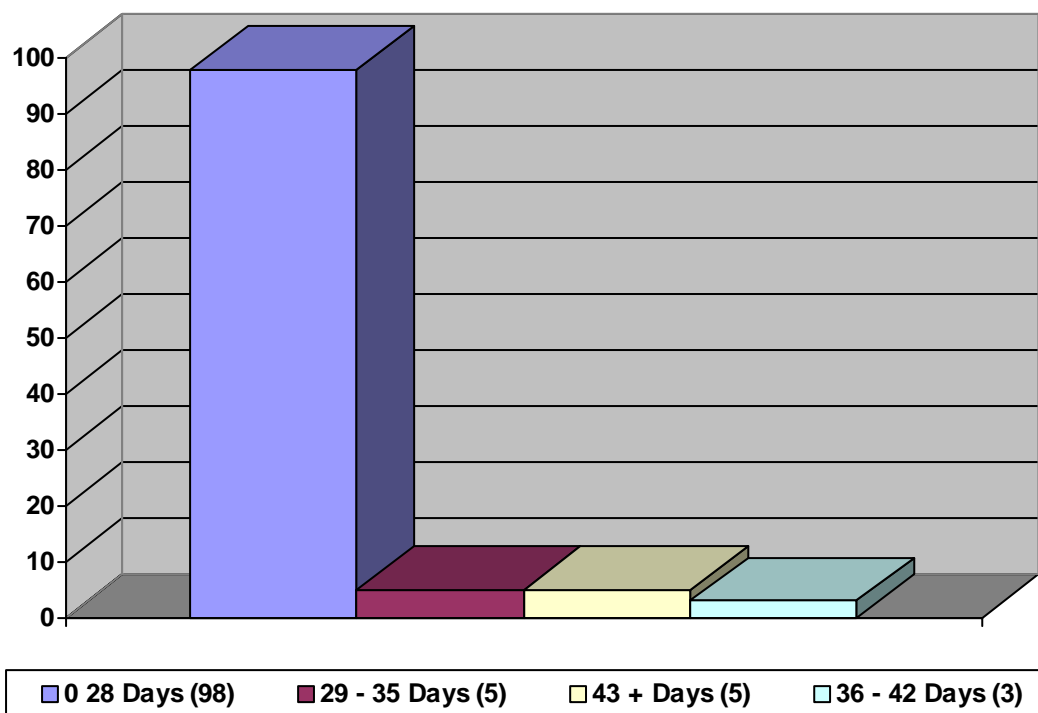
6.5.3 Service users have the right to raise several areas of complaint at one time; this can result in several different findings. The vast majority of all complaints are resolved at stage 1 –problem solving stage and it is not always possible to determine a 'finding' in all complaints. This is particularly so where matters are resolved face to face through discussion and mediation.

6.6 HOW ARE COMPLAINTS RESOLVED



6.6.1 A finding of Upheld leads to an apology or explanation or both. It also leads to information about the corrective action to be taken to resolve the complaint. A positive culture has and is developing whereby Managers and staff at an early stage of the complaint process feel empowered to apologise and explain where things have gone wrong. Often the explanation will be detailed and will have required a thorough examination of records and discussions with relevant members of staff. Explanations are often provided even where it is felt that the complaint is not upheld. A number of complainants receive several outcomes for example an explanation together with an apology and where required new service provision.

6.7 TIMESCALES



6.7.1 This chart refers to complaints responded to and closed at stage 1 of the complaint process. They do not refer to complaints withdrawn or complaints which moved to stage 2 of the process.

6.7.2 Timescales for responding to adult complaints are statutory; at present up to 28 days is allowed to acknowledge and then address the complaint to a conclusion. The proposed new Government guidance due to be implemented on September 1st 2006 will reduce the time allowed to 10 days at stage 1 [but up to 20 days with the agreement of the complainant]

6.7.3 **98** out of the 111 complaints registered were dealt with in the timescale allowed. That is **89%**. In 2004/05 the figure from an almost identical number of complaints was **59%**.

6.7.4 **13** complaints fell outside the timescale with **3** going beyond 42 days.

6.7.5 The longest complaint to conclude took **66** days, this referred to a finance issue which was resolved, the complaint was partially upheld.

6.7.6 These figures could be described as satisfactory and would compare favourably with other Local Authorities timescale compliance. However,

care will be taken to monitor timescale compliance, particularly in light of the proposed new reduced timescales.

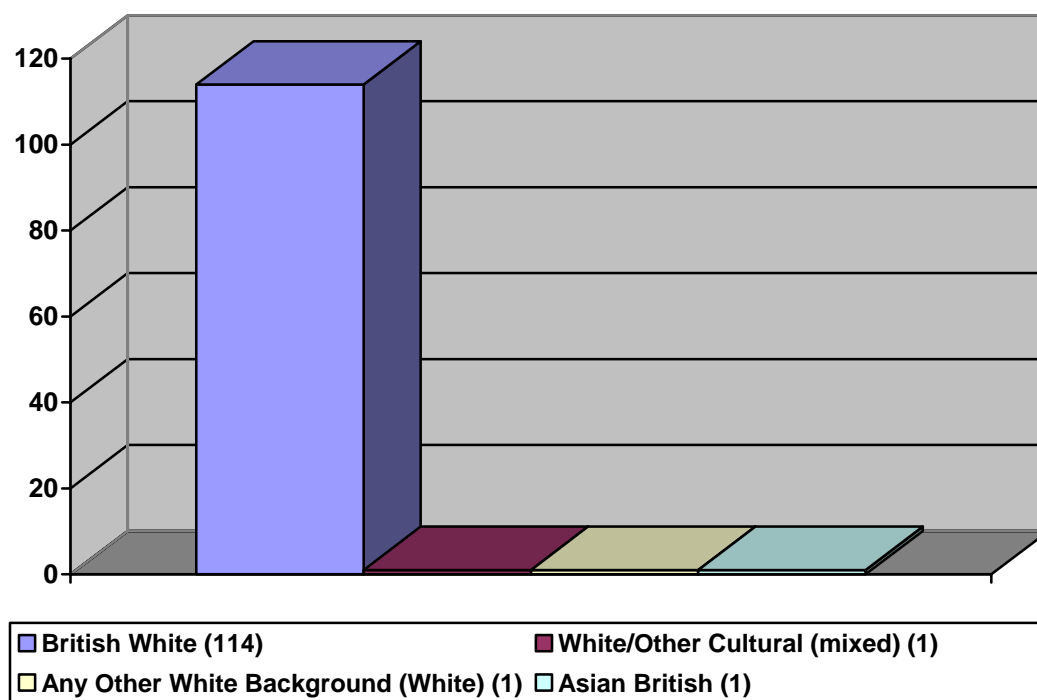
6.7.7 A complaint investigated at stage 2 of the process is allowed to take up to three months to conclude as long as we have the knowledge and agreement of the complainant. The proposed new Government guidance will maintain this timescale but will demand evidence that the complainant has agreed to the delay. The new process will also allow the complainant to take their complaint to the Local Government Ombudsman if the complaint has not been concluded within 65 days.

6.7.8 **Reasons for Delays:-** The following are not put forward as justification for delay instead they are presented as part and parcel of the difficulties in concluding all complaints in good time. Complaints where delay occurred during 2005/06 involved:-

- Delay whilst establishing facts
- Seeking response from managers
- Difficulties in obtaining contact from service user
- Seeking outcomes from other agencies tasked with providing the response to the complaint.

6.8 ETHNICITY

6.8.1 Service Users ethnicity is recorded. The recorded figures for 2005/06 are as follows:-



6.8.2 As can be seen the majority of people who currently access the complaint process are a British/White. Further detailed work will be carried out in the coming year to raise awareness and improve accessibility to the complaint process for all Adults in receipt of a service.

6.8.3 There is no complacency regarding this matter, public information regarding complaints will be reviewed, access to community groups to raise awareness of the complaint process will be increased. We will monitor the number of complaints received from service users against population figures in terms of ethnicity, age, and gender

6.9 HOW DO WE ENSURE THAT COMPLAINTS ARE GENUINELY RESOLVED?

6.9.1 The Stage 1 response letter invites complainants to seek further assistance from the Quality and Complaints Team, if they are still dissatisfied.

- 6.9.2 In addition, the Quality and Complaints Team is able to undertake a monitoring role with regard to complainant satisfaction. This involves direct communication with the complainant on occasion, to ensure that they are, indeed, satisfied with the response that they have received.
- 6.9.3 The Quality & Complaints Team sends out a customer satisfaction questionnaire to all complainants six weeks after the complaint is concluded. Alternatively the complainant will receive a phone call from a member of the Quality & Complaints Team in order to go through the questionnaire. The complainant will be invited to comment on their satisfaction with the complaint process and how they felt their complaint matters were handled. It provides an opportunity to confirm that the complaint was withdrawn and the reasons for that decision – or for matters to be re-opened.

SECTION 7

7 AREAS OF DEVELOPMENT FOR THE COMPLAINT & COMPLIMENT PROCESS 2006/07

- 7.1 Review and revise the current procedures, ensuring that they are then made widely available to staff and service users.
- 7.2 Introduction of a new stage 1 complaint monitoring form. This will capture greater details about the actions taken to resolve complaints, together with evidence of lessons learned.
- 7.3 Clear guidance to staff about how to respond positively and helpfully to comments made by service users and carers will continue to be provided.
- 7.4 Increased monitoring of timescales/response by Managers
- 7.5 Increased awareness training for front line staff. Training for Managers/Seniors in responding to stage 1 complaints.
- 7.6 Training for Managers and Senior Managers in addressing stage 2 and 3 complaints.
- 7.7 Training for Elected Members
- 7.8 To undertake consultation with independent groups and partner agencies about levels of satisfaction with the complaint and compliment service.
- 7.9 Revise complaint leaflets and other publicity material in light of new legislation and Guidance.

- 7.10 Put in place a robust system to audit-trail the implementation of recommendations arising out of complaints.
- 7.11 To provide increasingly informative analysis of performance to management teams.
- 7.12 Develop and implement a staff survey in order to gather views and reflections from staff concerning their experience of the process.
- 7.13 Develop and put in place complaint handling protocols with agencies such as Housing, Health and others.
- 7.14 Carry out an audit across all establishments/reception areas to ascertain availability of publicity material for the public and staff
- 7.15 Mediation:- Greater emphasis will be placed on mediation. This could be an effective tool in resolving complaints early or indeed at any point in the complaint process at Stage 1, 2 or 3. It is intended that the Quality & Complaints Team will lead on mediation with the opportunity to recruit the skills of a trained independent mediator to assist if required.

SECTION 8

8.1 EVIDENCE LEARNING FROM COMPLAINTS:- EXAMPLES 2005/06

- 8.1.1 Local authorities have complaints procedures for a number of reasons; in addition to being the mechanism by which service users can ensure that they receive the services to which they are entitled and that any dissatisfaction is addressed the complaints that are received can offer invaluable customer feedback on the services that are provided.
- 8.1.2 Outcomes to many complaints are implemented at a local level, all should result in an apology, where appropriate but it can be difficult from these to establish the wider learning for the Directorate. Some complaints, however, have a wider relevance to the Directorate identifying the need for procedures to be changed or clarified, or the creation of new training or services. As can be seen below Adult's Services have been able to learn in this manner from a number of complaints over the last year:
- 8.1.3 Complaints cover a wide number of issues, some result in changes for the service as whole or solely for the individual. The following indicates the types of complaint received and the 'lessons learned and action taken.
 - Complaint regarding the opening times of a duty service, this led to consultation with a wide group of service users to listen to their views and current satisfaction.

Action - A review of opening times has since been initiated by the manager providing the service.

- Complaint about elderly parents having to live apart due to different individual needs.
Action – this was an individual case where an elderly person wished to move to residential care in the same home as their spouse, however the two people had vastly different needs which could not be met by the home concerned. The situation was reviewed, and the couple now happily reside together in Residential Care. The focus is always on trying to assist people to be together where they wish to this to happen.
- Missed call to service users home due to carer being on leave.
Action - The complainant was advised that as a direct result of their complaint, major changes were made to how the system of office & leave cover is operated, & how in future leave and cover arrangements will be monitored and signed off by Managers.
- Relative of a service user who was not collected for Day Care –this occurred during poor weather – the driver could not access the street due to poor weather.
Action - instructions were issued to all drivers where the conditions prevent access to people’s homes to inform the office and where possible the service users immediately in order to keep the service user properly informed.
- Service user arriving for respite had not been expected.
Action - internal procedures reviewed, by service managers, and amended to ensure that the situation could not arise again.
- Day Service user in need of daily intake of fluid to be administered by a visiting Nurse – service user missed her intake of fluid due to a mix up with Health staff and staff at the Day Services.
Action - This led to full review of external activities where services are provided by a number of agencies, with day services.
- Carer collecting her husband following a short respite stay at a care unit, unhappy that the unit did not provide her with a written record or diary account of his stay.
Action - consultation took place with the carer concerned, and it was agreed procedures would be amended in order to provide all carers with a written record of their relatives short respite stays on the day they are collected.

- Complaint from service user who could not access a mini bus –the bus was being used temporarily whilst the main ones were being serviced... the internal fleet of vehicles was already under review and being planned for.
Action - a decision for 'pool vehicles' to be designed to the same standards as the fleet vehicles in order to meet the needs of service users.
- Complaint from relative whose father suffered a fall answering the door to carers – the carers did not know a key was available to them via a secure key safe at the property –an extensive response was provided to the relatives.
Action - managers reviewed the process for referring new cases and sharing of information, as a result, changes were made to practice and procedure.
- Complaint regarding a respite bed being double booked.
Action - new systems were put into place to ensure that double booking of rooms in respect of respite does not occur again.

SECTION 9

9.1 ELECTED MEMBERS VISITS TO SOCIAL CARE ESTABLISHMENTS

- 9.1.1 Each year Elected Members are nominated by their Area Committees to carry out required visits to Dudley MBC Social Care establishments. Members are provided with a schedule of visits covering all social care establishments, together with feedback forms to complete during their visits.
- 9.1.2 Service users, and staff are provided with the opportunity to put forward any thoughts or comments to Members who then clearly take full and proper account of this in their feedback.
- 9.1.3 The feedback forms, once completed are sent to the relevant Assistant Director. This provides the opportunity for Members to put forward immediate and valuable information, observations and comments regarding their visits, together with specific requests for action or a response to any issues arising out of the visit. Any action taken as a result of the feedback from Members is monitored to ensure it takes place. Clearly, this is a valuable and vital tool in our ongoing aim of continually learning and developing our services for all people using services.