#### Adult Social Services

#### Summary of complaints received across service areas 2016-17

#### Older People Localities

14 complaints were received during the year, an increase on previous years. Broadly their themes were about: case management, care and communication issues. They included:

X complained that he hadn't been involved in placing his mother at a registered home (estranged from her at the time of the placement) and therefore did not agree to any top up fees. Although we had correctly applied the charging arrangements, X was not consulted with at the time (it was his mother's partner who was involved at the time). A compromise was reached that the Department would pay the top up fees up to the end of January, thus allowing the family to explore alternative homes or consider paying the top up fees in future. It was our belief it is not in mother's best interests to move her from the home where she has been living for the past few years. Agreement was reached following legal advice that we would pay the top-up fees given the circumstances.

## X complained about contact and communication arrangements between herself, her father's care home and the Social Worker.

Following a review of the case, we explained decisions made in relation to family visits were made with her father's best interests with the agreement of all professionals concerned. All family members were written to by their father's partner when the arrangements were drawn up advising as to the conditions of such visits (because of previous behaviours and concerns).

## X complained as to why we were not making plans to move her grandmother closer to her family in South Wales

We explained grandmother has always considered Flint to be her home, she has a lot of friends who take her out and visit her, and she has an active social life in Flint. The appointment of an Advocate has regrettably taken some time, but grandmother had confirmed she wanted to stay in Flint. A Best Interests Meeting has also been convened.

#### Older People Provider

Four complaints were received, similar to previous years. They included:

## X complained about an error with a member of staff administering her medication.

We apologised for the medication error. Following a recent change in her personal medication, we explained a night-staff member had difficulty reading the Staff Handover Book and gave two tablets instead of just the one. We accepted the night

staff should have sought management advice, but she will receive further medication training as a result. The staff group were reminded that instructions are to be clearly recorded.

## X complained the times of the home care arrangements did not meet his mother's needs under the new Act.

We explained the main objectives of the package were to assist with personal care, medication, meals and support with domestic tasks. We explained to X the principles behind the new Act. Mother was independent prior to her stroke and she wanted to regain this. She had been signposted to other 3rd sector services as well.

## X complained that despite a Council residential home trying over a number of weeks, his friend was still without access to S4C in her room. Welsh is X's first language.

After some deliberations with IT, an external aerial fitter resolved the problem and X now has S4C in her room.

#### Learning Disability

Ten complaints were received, a reduction compared to previous years. Broadly their themes related to: care and support,

#### Family complained they made a safeguarding referral to the Learning Disability Team, but this was not followed up in a timely manner by them. Family also complained of a lack of action as there was damp in their brother's home.

We explained the Social Worker had contacted the provider for them to make a safeguarding referral, but we acknowledged the Social Worker should have made the referral personally. A reminder has been sent to staff to make their own safeguarding referrals when such information is passed to them. Issues of damp have been raised with the landlord and they are in the process of being addressed. During this time, the brother and the other resident have chosen to remain in their home and not move to a temporary residence.

#### X complained of a lack of communication from his cousin's Social Worker re. his cousin's care and accommodation. X wants his cousin to move in with him.

We advised X that his cousin was capable of representing himself with his professional Advocate present. Cousin is free to share information with whoever he wishes and he has chosen not to update X. We also advised that packages of care commissioned by us would be funded only, and not any private arrangement made by X.

## X was unhappy with some aspects of his work placement, including being called names.

The Manager met with X and the other service user concerned to discuss what was happening and mediate. X confirmed after the meeting he was happy and the issues had been resolved.

#### Mental Health and Substance Misuse

One complaint was received this year. Complaints regarding this part of the Service remain consistently low.

## X complained that her concerns were not taken seriously when she contacted the team with concerns about her sister.

We explained to X that her sister had not given consent for the team to discuss her care and treatment. However, we sought to reassure X that staff did listen to her and took on board her views.

#### Physical Disability and Sensory Impairment

Five complaints were received that included:

## X complained that Panel had refused her direct payments when she had previously received them from another LA.

We further explained the rationale behind Panel's decision, adding our focus was on progression outcomes such as meeting new people and forming relationships etc. via natural networks, and not paid care.

## X complained about a range of issues following our involvement with her daughter's care since 2011.

We asked why her concerns weren't raised at the time to avoid unnecessary anxiety. We found carers assessments had been offered but not followed up by X. We also found assessments were regularly completed and reviewed. We believe we have followed due process.

#### Other (including Business Support Services)

Three complaints were received which is consistent with previous years. They included:

## X challenged the Department's decision as to how it had applied Deprivation of Assets in her family's case.

We reviewed the family's supporting evidence but stood by the original decision. We believed at the time Power of Attorney was sought, X could have sought legal advice about making her parents as beneficial interests in the property. Her Solicitor should

also advised her of this. In addition and at the time of the disposal of assets, one parent had an assessed need and received a reablement package, implying future care needs.

## X complained about the charges levied at the young person she cares for. She submitted full financial details but Waiver Panel turned down her request.

We met with X who was able to give a more detailed picture about her personal circumstances, particularly the reasons around her rent fees and her high fuel costs. The original decision was overturned based on this new information.

#### Safeguarding

Three complaints were made in relation the Adult Social Services aspect of Safeguarding, including:

## X complained that concerns about his brother's placement raised with Safeguarding had not been investigated properly.

The home concerned investigated the allegation at the time and provided a full and robust response. Safeguarding concurred that relevant processes had been followed and that communication from them to X had been appropriate and timely.

#### X complained she had not been properly involved in the DoLS concerning her mother that the Social Workers involved had not been professional and the assessment paperwork used to inform our decision was flawed.

We explained in detail the DoLS process and sought to reassure X that we were acting in her mother's best interests and adhering to legislation.

#### North East Wales Emergency Duty Team (N.E.W.E.D.T.)

Despite, no complaints in the past few year, two complaints were made in the same quarter, including:

# X's father suffered a heart attack on a Saturday. Her father is the primary carer for her step-mother. As X's father was in hospital, X asked N.E.W.E.D.T. to explore what support could be provided for her step-mother whilst her father was in hospital. She was dissatisfied with the response.

NEWEDT reviewed what happened on the day. They explained their purpose was a strict crisis response and staff at the time prioritised their work appropriately. There was no intention to keep X waiting longer than necessary. Provisional arrangements were explored with local care homes with a view to an emergency placement if needed, but X had found alternative arrangements in the meantime that meant no further action was necessary.

#### X complained of a 'chaotic' response following an incident whereby his mother, who has mental health issues, was in an agitated and confused state at home. He was also told he "should not be ringing this number".

We explained we had to seek medical input given his mother's mental state at the time. N.E.W.E.D.T. arranged for the out of hours G.P. to visit X's mother at home, after which the G.P. arranged for hospital admission. The phone call has been reviewed (all calls are recorded) and staff were professional throughout.

#### Registered Provider (Residential)

Five complaints were made regarding registered residential providers that included:

# X raised concerns following her grandmother's admittance to hospital. She was admitted with a pressure area on her rear and found a darkened area on her heel. Hospital did not raise any safeguarding concerns.

The home explained grandmother's redness (and not sores) were reported to District Nurses and procedures were followed. This was backed up by documentary evidence of repositioning etc. She was left on a stretcher for a period of time on a stretcher when an ambulance was called prior to her admission and this *may* have caused the soreness. Health Safeguarding agreed to review with A & E separately.

## X's mother was refused cot sides to her bed and her pressure mat did not prevent a fall and injury.

The home explained they are not allowed to place cot sides on beds which they had explained to the family previously. They followed the advice of the District Nurses following their assessment as they concluded it would be more of a danger to have them in place.

#### Registered Provider (Domiciliary)

Eight complaints were made regarding registered domiciliary providers that included:

## X complained about a range of issues relating to her estranged husband's care, many of which were historic and had already been dealt with previously.

Following a meeting with the agency concerned and District Nurses, we confirmed husband's convene was being administered in an appropriate manner and that carers were meeting his needs. Husband himself has reported he is happy with his carers. Contracts Team drew up a protocol between husband, his family and carers to protect his dignity.

#### X complained as to the number of different carers supporting her, carers sometimes not showing up and other times duplicating each other's duties by arriving within half an hour of each other.

The agency explained X had a close relationship with her former carer who, for personal reasons, was no longer able to support X. Since then, there have been a number of carers to maintain X's support. Problems were experienced in the past with the computer system and rotas, but these have been rectified. The agency explained carers prioritise incontinent or very poorly clients in the mornings and may sometimes run late.

#### Complaints Relating to Dignity

A family complained about their father sleeping on his bedroom floor one evening. The registered home explained this was due to the risk of him falling as his condition had deteriorated so rapidly after admission to the home. A review by Social Services concluded the gentleman should not have been discharged by the hospital back to the home without a full reassessment of his needs. The home should not have accepted the gentleman back and instead should have arranged for him to be readmitted to hospital. Whilst the home struggled to meet the gentleman's needs, it was recognised they did not hesitate to report this and requested assistance. The home did what they could for the gentleman and the family during a difficult time.