

Agenda

Adult Care and Well Being Overview and Scrutiny Panel

Wednesday, 28 September 2022, 10.00 am
County Hall, Worcester

All County Councillors are invited to attend and participate

This document can be provided in alternative formats such as Large Print, an audio recording or Braille; it can also be emailed as a Microsoft Word attachment. Please contact Scrutiny on telephone number 01905 844965 or by emailing scrutiny@worcestershire.gov.uk

DISCLOSING INTERESTS

There are now 2 types of interests:
'Disclosable pecuniary interests' and **'other disclosable interests'**

WHAT IS A 'DISCLOSABLE PECUNIARY INTEREST' (DPI)?

- Any **employment**, office, trade or vocation carried on for profit or gain
- **Sponsorship** by a 3rd party of your member or election expenses
- Any **contract** for goods, services or works between the Council and you, a firm where you are a partner/director, or company in which you hold shares
- Interests in **land** in Worcestershire (including licence to occupy for a month or longer)
- **Shares** etc (with either a total nominal value above £25,000 or 1% of the total issued share capital) in companies with a place of business or land in Worcestershire.

NB Your DPIs include the interests of your spouse/partner as well as you

WHAT MUST I DO WITH A DPI?

- **Register** it within 28 days and
- **Declare** it where you have a DPI in a matter at a particular meeting
 - you must **not participate** and you **must withdraw**.

NB It is a criminal offence to participate in matters in which you have a DPI

WHAT ABOUT 'OTHER DISCLOSABLE INTERESTS'?

- No need to register them but
- You must **declare** them at a particular meeting where:
 - You/your family/person or body with whom you are associated have a **pecuniary interest** in or **close connection** with the matter under discussion.

WHAT ABOUT MEMBERSHIP OF ANOTHER AUTHORITY OR PUBLIC BODY?

You will not normally even need to declare this as an interest. The only exception is where the conflict of interest is so significant it is seen as likely to prejudice your judgement of the public interest.

DO I HAVE TO WITHDRAW IF I HAVE A DISCLOSABLE INTEREST WHICH ISN'T A DPI?

Not normally. You must withdraw only if it:

- affects your **pecuniary interests OR** relates to a **planning or regulatory** matter
- **AND** it is seen as likely to **prejudice your judgement** of the public interest.

DON'T FORGET

- If you have a disclosable interest at a meeting you must **disclose both its existence and nature** – 'as noted/recorded' is insufficient
- **Declarations must relate to specific business** on the agenda
 - General scattergun declarations are not needed and achieve little
- Breaches of most of the **DPI provisions** are now **criminal offences** which may be referred to the police which can on conviction by a court lead to fines up to £5,000 and disqualification up to 5 years
- Formal **dispensation** in respect of interests can be sought in appropriate cases.

Adult Care and Well Being Overview and Scrutiny Panel Wednesday, 28 September 2022, 10.00 am, County Hall, Worcester

Membership

Councillors:

Cllr Shirley Webb (Chairman), Cllr Jo Monk (Vice Chairman), Cllr David Chambers, Cllr Lynn Denham, Cllr Andy Fry, Cllr Paul Harrison, Cllr Matt Jenkins, Cllr Adrian Kriss and Cllr James Stanley

Agenda

Item No	Subject	Page No
1	Apologies and Welcome	
2	Declarations of Interest	
3	Public Participation Members of the public wishing to take part should notify the Democratic Governance and Scrutiny Manager, in writing or by email, indicating the nature and content of their proposed participation no later than 9am on the working day before the meeting (in this case 27 September 2022). Enquiries can be made through the telephone number/email address below.	
4	Confirmation of the Minutes of the Previous Meeting Previously circulated	
5	Performance and 2022/23 In-Year Budget Monitoring (Indicative timing: 10.05am – 10.35am)	1 - 14
6	Compliments and Complaints for Adult Services (Indicative timing: 10.35am – 11.20am)	15 - 32
7	Work Programme (Indicative timing: 11.20am – 11.30am)	33 - 36

Agenda produced and published by the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) Legal and Governance, County Hall, Spetchley Road, Worcester WR5 2NP To obtain further information or hard copies of this agenda, please contact Emma James/Jo Weston telephone: 01905 844964 email: scrutiny@worcestershire.gov.uk

All the above reports and supporting information can be accessed via the [Council's Website](#)

Date of Issue: Tuesday, 20 September 2022

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NOTES

Webcasting

Members of the Panel are reminded that meetings of the Adult Care and Wellbeing Overview and Scrutiny Panel are Webcast on the Internet and will be stored electronically and accessible through the Council's Website. Members of the public are informed that if they attend this meeting their images and speech may be captured by the recording equipment used for the Webcast and may also be stored electronically and accessible through the Council's Website.

ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 28 SEPTEMBER 2022

PERFORMANCE AND 2022/23 IN-YEAR BUDGET MONITORING

Summary

1. The Panel will be updated on performance and financial information for services relating to Adult Care and Well Being.
2. The Cabinet Member with Responsibility for Adult Social Care, the Strategic Director for People and the Deputy Chief Finance Officer have been invited to attend the meeting to respond to any queries from Panel Members.

Performance Information

3. Attached at Appendix 1 is a dashboard of performance information relating to Quarter 1 (April to June 2022). It covers the indicators from the Directorate and corporate level and other management information (as appropriate) which relate to services relevant to this Scrutiny Panel's remit.
4. The Scrutiny Panels consider this information on a quarterly basis and then report by exception to the Overview and Scrutiny Performance Board (OSPB) any suggestions for further scrutiny or areas of concern.

Financial Information

5. The Panel also receives in-year budget information. The information provided is for Period 4 and is attached in the form of presentation slides at Appendix 2.

Purpose of the Meeting

6. Following discussion of the information provided, the Scrutiny Panel is asked to determine:
 - any comments to highlight to the Cabinet Member at the meeting and/or to OSPB at its meeting on 29 September 2022
 - whether any further information or scrutiny on a particular topic is required.

Supporting Information

Appendix 1 – Adult Services Performance Information Dashboard
Appendix 2 – Budget Monitoring Information for Period 4 2022/23.

Contact Points

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964/ 844965
Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager), the following are the background papers relating to the subject matter of this report:

- Agenda and Minutes of the Adult Care and Well Being Overview and Scrutiny Panel on 18 July, 15 March and 14 January 2022, 15 November, 29 September, 8 July and 28 January 2021, 18 November, 22 September, 27 July and 27 January 2020, 6 November, 25 September, 11 July, 14 March and 23 January 2019 – available on the website: [Weblink for agendas and minutes](#)
- Agendas and minutes of the Overview and Scrutiny Performance Board on 20 July, 23 March 2022, 17 November, 30 September and 21 July 2021

[All agendas and minutes are available on the Council's website here.](#)

Adult Care and Well-being Scrutiny Panel - Summary Report

Q1: 2022-23

Key Priorities ASC Business Objectives:	
Reduce	the number of older and younger adults whose long term support needs are met by admission to care homes.
Increase	the number of customers whose short term support services enable them to live independently for longer
Increase	the number of older people who stay at home following reablement or rehabilitation
Prevent,	reduce or delay the need for care

1. Admissions to Permanent Care per 100,000 (18-64) 2022-23 Target rate = 16 Worcestershire 18-64 Population = 341,261*

Good Performance = Lower ↓

*estimated

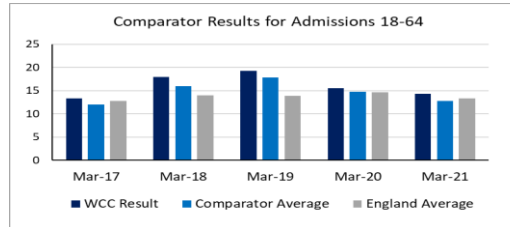
Definition: Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population. (ASCOF 2A(1))

Analysis:

This national indicator looks at planned admissions and as such includes 12 week disregards, so potentially some of those included will eventually become self funders. The data includes people within the age group 18-64 who have physical disabilities, learning disabilities or mental health issues. Controls are in place to ensure that permanent admissions are minimised and are only used where there is no other support available in a community based setting. Work is ongoing to ensure that maximum use is made of services such as supported living, and all options to support young people to remain living independently or with families are considered as a priority.

Comparator Data: (Latest national data available is Mar-21)

Although the WCC rate of admissions for younger people decreased in Mar-21 to 14.4, it was still above the comparator and England average.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	13.3	12.0	12.8
Mar-18	17.9	16.0	14.0
Mar-19	19.3	17.8	13.9
Mar-20	15.5	14.7	14.6
Mar-21	14.4	12.8	13.3
Mar-22	15.8*		

* estimated pending confirmed population

Worcestershire Results

Month	Mar-21	Jun-21	Sep-21	Dec-21	Mar-22	Jun-22
Result and RAG	14.4	17.6	20.5	19.9	15.8	16.4
Numerator	49	60	70	68	54	56
Reporting method	Rolling 12 months (Q1 = July 2021 to June 2022)					

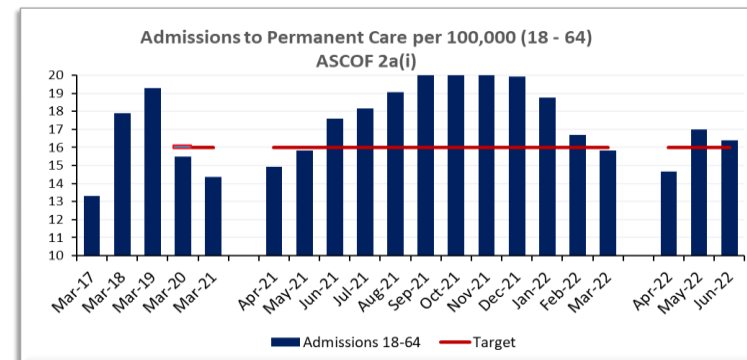
Admissions per month	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Total
No. of Admissions	5	5	8	6	7	2	0	4	8	2	7	2	56

Q1 2022-23 Commentary:

Over the period 2019-21, the rate of admissions for younger people fell. From 19.3 (66 young people) Mar-19 to 15.5 (53 young people) in the year to Mar-20, and to 14.4 (49 young people) in the year to end Mar-21. The Mar-21 figure was particularly low due to the pandemic. Numbers rose during 21-22, declining towards the end of the year but remaining higher than the previous year.

For Q1 2022-23 the rate has increased to 16.4 (56 people) which has resulted with an Amber rating. Please note, the results from Mar-22 are provisional as we are waiting for finalised population figures to be released nationally for the confirmed result.

The action plan to focus on demand and spend is not fully established. All placements are routinely scrutinised and alternatives to admission considered as the preferred option. Additional scrutiny of all funding decisions is currently in place to ensure maximum use of prevent, reduce and delay options to maximise peoples independence wherever possible. Where long term funded services are required, we are using best value principles and identify any themes/improvement actions.



2. Admissions to Permanent Care per 100,000 (65+)

2022-23 Target rate = 604

Worcestershire 65+ Population = 139,817*

*estimated

Good Performance = Lower ↓

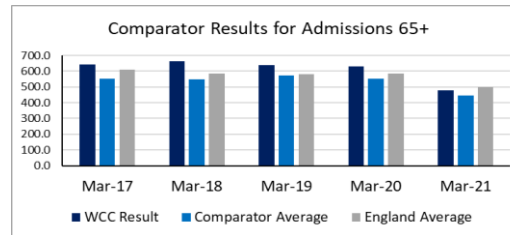
Definition: Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population. (ASCOF 2A(2))

Analysis:

This national indicator looks at planned admissions and as such includes 12-week disregards, so potentially some of those included will eventually become self funders. Permanent admissions for people over the age of 65 are included in this indicator. The aim is to support older people to remain living independently, in their own homes, for as long as possible. Measures are in place to ensure that admissions only occur where there is no other option to meet a person's needs. There are audits of new admissions each month to ensure they are appropriate and to identify any key trends/themes. These are reported to the Assistant Director and to PDLT monthly. As the population ages and has increasingly complex needs the pressure on preventing admissions becomes increasingly challenging. There will be an implication of Covid on people's long-term health and well-being that could impact on the need for 24/7 care.

Comparator Data: (Latest national data available is Mar-21)

The WCC rate of admissions for 65+ dropped significantly in this period and although still above the comparator average (more admissions than other similar authorities) it is below the England average.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	642.0	552.2	610.7
Mar-18	663.9	549.8	585.6
Mar-19	637.9	571.3	579.4
Mar-20	629.1	553.7	584.0
Mar-21	475.8	447.2	498.2
Mar-22	585*		

* estimated pending confirmed population

Worcestershire Results

Month	Mar-21	Jun-21	Sep-21	Dec-21	Mar-22	Jun-22
Result and RAG	475.8	595.2	659.1	639.6	585.0	533.6
Numerator	654	818	906	879	804	746
Reporting method	Rolling 12 months (Q1 = July 2021 to June 2022)					

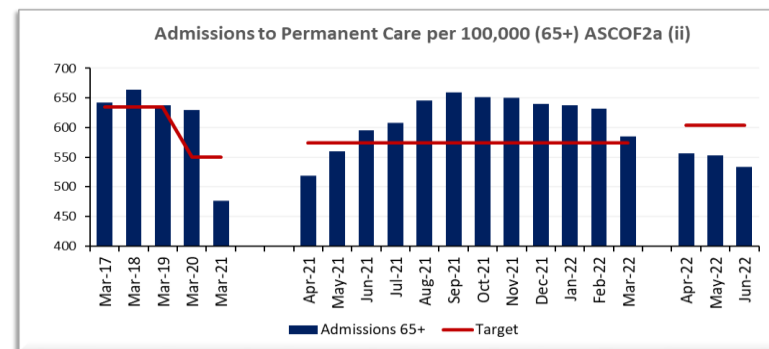
Admissions per month	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Total
No. of Admissions	65	70	69	57	71	60	60	66	71	51	62	44	746

Q1 2022-23 Commentary:

Over the last 4 years, the admission rate for older population has fallen from 663.9 (850 older people) in 2018 to 475.8 (654 older people) in the year to end Mar-21. Admissions have steadily risen since Mar-21, peaking in Sep and now slowly falling. The Mar-22 result, although higher than the previous year has not returned to pre-pandemic levels seen in Mar-20.

For Q1 2022-23 the result has continued to decrease to 533.6 which has resulted with a Green rating. Please note, the results from Mar-22 are provisional as we are waiting for finalised population figures to be released nationally for the confirmed result.

Work streams to address this are ongoing. An action plan has been established to focus on demand and spend. High cost packages, authorisation and actions post review are being scrutinised as part of this. Ongoing work with Commissioners looking at extra care provision, Continuing Health care decisions continues as does the scrutiny of all new placements. Additional scrutiny of all funding decisions is currently in place to ensure maximum use of prevent, reduce and delay options to maximise peoples independence wherever possible. Where long term funded services are required, we are using best value principles and identify any themes/improvement actions.



3. Outcomes of Short-term Services

2022-23 Target = 83.5%

Good Performance = Higher ↑

Definition: Proportion of people with no ongoing social care needs following a reablement service - sequel to short term services to maximize independence (ASCOF 2d)

Analysis:

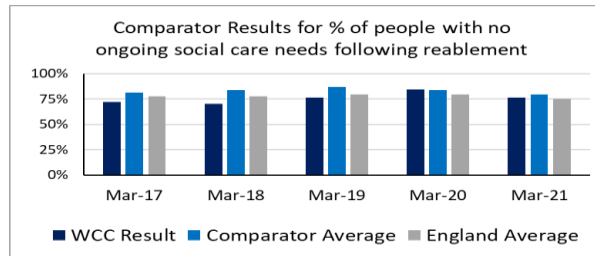
This is a national ASCOF indicator which measures rehabilitation success rates for people (all ages 18+) , in terms of the percentage who do not require ongoing services following a reablement service. In Worcestershire this has related solely to services provided by the Urgent Promoting Independence Team (UPI) (focusing on hospital discharge) but from Oct-21 the new community reablement service is also included. The community team have assisted with hospital discharges at various stages within the pandemic.

COVID-19 has significantly impacted the cohort of people using these services, particularly for those discharged from hospital where the focus has needed to be on system flow. New hospital discharge models were in place from the start of Covid-19 and have meant that more complex people are being given the opportunity for reablement and leaving hospital via Pathway 1 with the UPI team.

Comparator Data:

The latest comparator data available is 2020-21.

The result for WCC was 76% - which is higher than the England average but below comparators.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	71.7%	81.2%	77.8%
Mar-18	70.1%	83.5%	77.8%
Mar-19	76.6%	86.7%	79.6%
Mar-20	84.2%	83.9%	79.5%
Mar-21	76.0%	79.1%	74.9%
Mar-22	78.4%		

Worcestershire Results

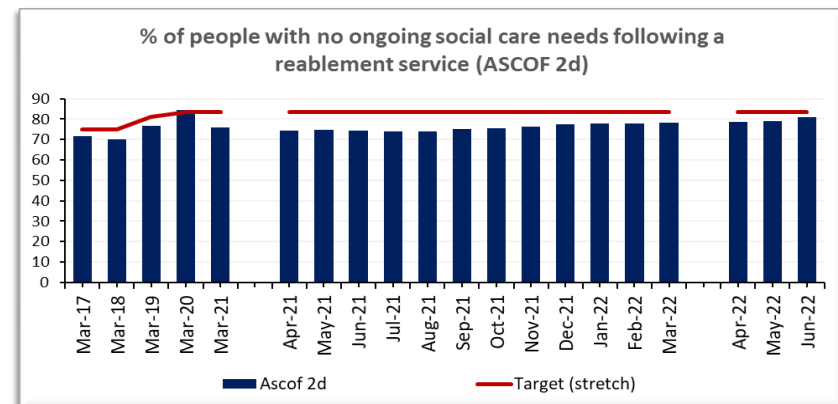
Month	Mar-22	Apr-22	May-22	Jun-22
Result and RAG	78.4%	78.6%	78.9%	80.8%
Numerator	1135	110	220	341
Reporting method	Year to date (Q1 = April 2022 to June 2022), monthly data, cumulative			

Q1 2022-23 Commentary:

For 2020-21 the result was 76% compared with 84.2% in the previous year. This decrease is linked to pressures during the pandemic meaning people with more complex needs were discharged from hospital through pathway one to facilitate hospital discharge and flow across the whole system.

In 2021-22 the result has gradually increased to 78.4% at Mar-22. There continues to be pressures across the system, so any increase shows how well the service are doing.

For Q2 2022-23 the monthly results are still increasing from 78.6% in April to 80.8% in June.



4. People aged 65+ at home following Rehabilitation

2022-23 Target = 82.0%

Good Performance = Higher ↑

Definition: : Older people remaining at home following hospital discharge and a reablement service - Proportion of 65+ who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. (ASCOF 2b)

Analysis:

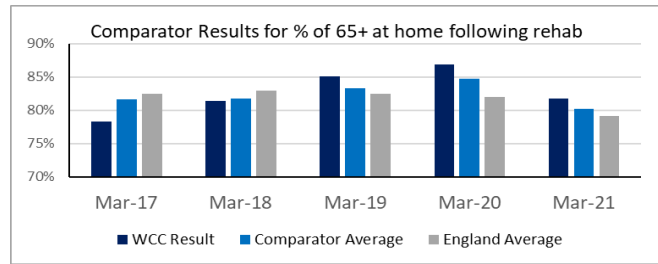
This is a national indicator that measures the percentage of older people who have completed a reablement program on discharge from hospital and are still at home 91 days later, on a quarterly basis. Reablement services include some that are health led.

The acute hospitals are under increasing pressure, and there continues to be higher acuity in patients discharged to reablement services. These services support people being discharged to remain independent for as long as possible, and it becomes increasingly challenging to ensure that they are at home after 91 days as the needs of people using these services become more complex. As before, COVID-19 has significantly impacted this cohort of people.

Comparator Data:

The latest comparator data available is 2020-21.

The result for WCC was 81.8% - above both the national and comparator averages.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	78.3%	81.6%	82.5%
Mar-18	81.4%	81.8%	82.9%
Mar-19	85.1%	83.3%	82.4%
Mar-20	86.9%	84.7%	82.0%
Mar-21	81.8%	80.2%	79.1%
Mar-22	80.8%		

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Worcestershire Results

Month	Mar-22	Apr-22	May-22	Jun-22
Result and RAG	80.8%	81.2%	81.3%	82.4%
Numerator	497	558	548	546
Reporting method	3 months running total (Q1 = April to June 2022)			

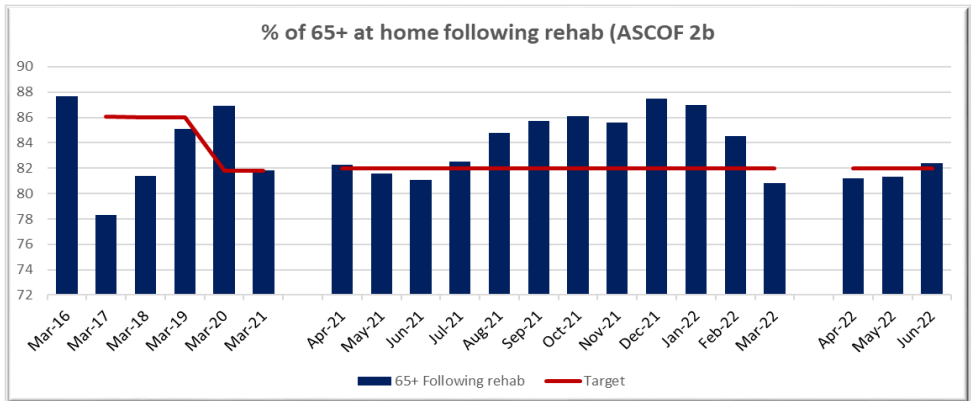
Q1 2022-23 Commentary:

Despite the pressures across the health and social care system due to Covid, performance on this measure for 2021-22 was 80.8%. This was lower than the pre-pandemic level in Mar-20 of 86.9% but a good result considering pressures on the system and acuity of need.

For 2021-22 the monthly results have varied considerably and been impacted by levels of COVID and hospital system pressures.

There has been a historic trend for results to fall through the winter months as the focus needs to be on hospital flow to alleviate pressures across the system. From January to March 2022 there were less positive returns from nearly all teams which made the result for year-end decrease to 80.8%.

For Q1 2022-23 the result from April to June has improved to 82.4%



5. Annual Care Package Reviews Completed

2022-2023 Target = 95%

Good Performance = Higher ↑

Definition: Percentage of people in services for twelve months who had a review completed in those twelve months or whose review is in progress at that point

Analysis:

This is a local measure that looks at people who have been in receipt of services for a year or more and checks that they have been reviewed in that period.

Worcestershire Results

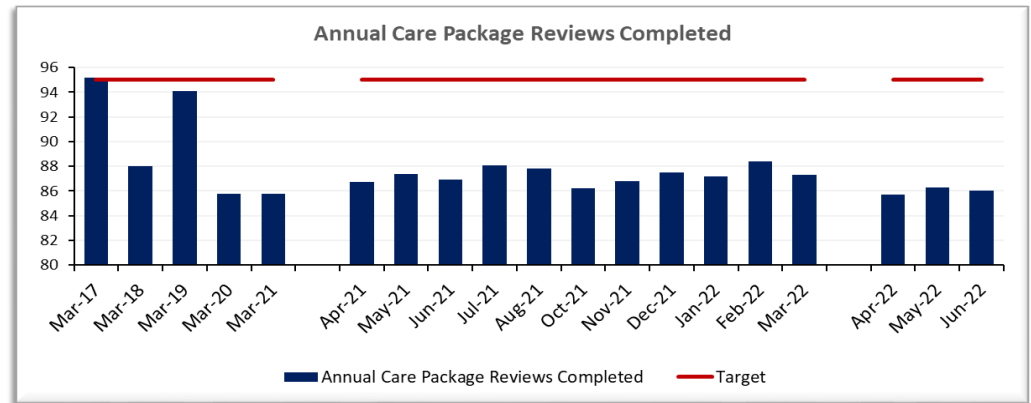
Month	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22
Result and RAG	88.1%	87.8%	87.2%	86.2%	86.8%	87.5%	87.2%	88.4%	87.3%	85.7%	86.3%	86.0%
Numerator	4181	4184	4172	4128	4154	4156	4143	4222	4184	4109	4149	4149
Reporting method	Rolling 12 months (Q1 = July 2021 to June 2022)											

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Q1 2022-23 Commentary:

Performance for Q2 2022-23 is 86% with small variances over the last 12 months. Mental health teams have improved performance significantly and are now GREEN at 95.6% - improving from 78% when they returned to WCC in Apr-21.

An external provider is now set up to support completion of reviews for Learning Disability teams, with further consideration across other teams where resource allows.



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Adult Care and Wellbeing Scrutiny Panel

21 September 2022

Forecast Outturn 2022/23
As at Period 4 (July)

P4 Forecast Financial Position – Adults

Adults Revenue Forecast	2022-23 Gross Budget P4	2022-23 Net Budget P4	2022-23 Forecast Outturn P4	2022-23 Actual Variance P4
	£'000	£'000	£'000	£'000
Older People	106,724	71,948	73,932	1,984
Learning Disabilities	77,135	65,701	68,936	3,235
Physical Disability	20,900	16,418	18,306	1,888
Mental Health	27,941	19,150	21,073	1,923
Adults Commissioning Unit	16,159	1,342	1,265	-77
Central Services (incl iBCF and Social Care Grant)	1,629	-34,732	-37,186	-2,454
Provider Services	16,369	9,645	9,645	0
TOTAL ADULTS	266,857	149,472	155,971	6,499

Key Headlines – Adults

- Continuation of underlying overspend from 21/22 which was £6.1m offset by one-off mitigation
- Additional activity and increased unit costs are causing pressures on all placement budgets
- Already 2% growth since end of March (104 clients)
- Forecast to be 4% by year end
- Gross overspend of £13.6m partially offset by £7.1m of one-off mitigation = £6.5m net overspend
- Offset in year by underspends in budget allocated for Liberty Protection Safeguards, one-off income, use of reserves and temporary savings relating to vacant posts
- Contribution of £2.7m towards corporate savings target

Key Forecast Variances – Adults

Older People

- £4.8m overspend
- 3% increase in client numbers and increase in unit costs
- Residential care – 95 additional clients since 1 April and 6% increase in unit costs (£39 / client / week)
- Nursing Care – 6% increase in unit costs (£47 / person / week)
- Direct Payments – 6% increase in unit costs (£25 / person / week)

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Learning Disability

- £4m overspend due to unit cost increases
- Residential placements increasing by 7% (£112 / person / week)
- Domiciliary care costs increasing by 20% (£65 / person / week)
- Supported living costs increasing by 6% (£71 / person / week)

Key Forecast Variances – Adults (continued)

Mental Health

- £2.8m overspend
- Unit cost increases mainly relating to clients supported under s117 of Mental Health Act
- An average nursing placement is 27% greater than this time last year

Physical Disability

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- £1.9m overspend
- Increase in client numbers and unit costs
- Residential average weekly costs have increased by 7% since budget setting (£84 / person / week) with client numbers increasing by 14%

Support services - underspend due to additional one-off Direct Payment and CHC income recovery

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ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 28 SEPTEMBER 2022

COMPLIMENTS AND COMPLAINTS FOR ADULT SERVICES

Summary

1. The Adult Care and Well Being Overview and Scrutiny Panel (the Panel) will receive a report on compliments and complaints relating to Adult Social Care Services, which is an annual update provided to this Panel.
2. The Strategic Director for People and the Cabinet Member with Responsibility for Adult Social Care have been invited to the meeting.

Background

3. The information in this report includes the formal complaint and compliments process, data on the types of complaints, time taken to resolve and how many are upheld, those dealt with by the People Directorate and those dealt with by the Consumer Relations Unit (CRU), which is part of the Directorate of Commercial and Change. The report also includes an overview of numbers and themes.
4. The Council is required to produce an annual report of compliments, complaints and comments received concerning adult social care services, which is published on the Council's website [web-link](#). A copy of the latest report is attached at Appendix 1.
5. The Adult Social Care complaints process has been produced in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
6. A complaint is an expression of dissatisfaction, however made, about the standard of service, actions, or lack of actions by Adult Social Care, the discharge of, or failure to discharge, a Social Services function. If an expression of dissatisfaction is more than an observation and requires either action or a response, then it is deemed to be a complaint.
7. If the Authority has done all it can to resolve the complaint, and the complainant is not satisfied, they are directed to the Local Government & Social Care Ombudsman.
8. The Manager dealing with the complaint should consider whether there is any learning. There are 3 types of learning:
 - Team/Staff specific – for instance where there is a local issue with staff or a team not following or understanding procedures, policies, legislation, or best practice. Training issues.
 - Improvements/actions/innovations – where it is identified that improvements to procedures or practices either locally or directorate-wide would be

beneficial. Where there are service improvement issues, where action needs to be taken to restore the adult to the service they should be receiving.

- General learning/reminders – where issues identified are service-wide and a reminder needs to be issued to staff.

9. Where a complaint is received, and it is entirely a matter for the relevant NHS body, then within 3 working days the complainant is contacted to ask if they want their complaint redirected and consent obtained (General Data Protection Regulation). If the complainant agrees, then the complaint is forwarded immediately to the relevant NHS complaints manager, and an acknowledgement sent to the complainant detailing where and to whom their complaint has been sent.

10. Where a complaint is about a commissioned service then in the first instance the complainant is directed to the provider. Where the complainant is adamant that they do not want to approach the provider, or the issue is serious, then they can access the complaints procedure straight away. Where the provider responds but the complainant remains dissatisfied, they can then enter the complaints process. If the complaint is accepted, then in most instances the Consumer Relations Officer will investigate.

11. Where findings are made against a provider, the outcomes will be shared with the Care Quality Team for follow up action.

12. A comment is a general observation about a service, or a service improvement suggestion and comments are logged with the CRU. Where a comment is received, an acknowledgement is sent within 3 working days. The comment will then be responded to by the relevant manager within 35 working days. A copy of the comment and response must be sent to the CRU.

13. A compliment is an expression of gratitude or satisfaction which is more than a simple thank you and should identify the area of good practice. Compliments should be forwarded to the CRU with the name and address of the adult with care and support needs. If the compliment is received by CRU, the People Directorate will acknowledge the compliment and send details to the staff member's manager if they are not already aware of it.

Points to Note

14. Less than 6% of the total number of complaints received in 2021/22 were escalated to the Local Government & Social Care Ombudsman.

15. The number of complaints increased in Adult Social Care from 123 in 2020/21 to 233 in 2021/22.

16. 67 complaints of the 208 responses in this period (some of the complaints will fall into the next year when responded to) were either upheld or partially upheld, 49 were not upheld and 79 were discontinued.

17. The primary areas of complaint are in assessment, support planning and resource allocation, which is the core business of Social Work. Within this area, the largest areas of complaint are around communication and staff attitude and behaviour.

18. The other main area is contracted residential care and domiciliary care and financial assessments. There has been an increase in complaints regarding externally commissioned home care, and an increase in complaints regarding services that fall under Adult Safeguarding.

19. Financial Assessments and Direct Payments is an area that has also seen an increase in complaint numbers.

20. There has been an increase in the number of complaints that relate to the standard of service received in the complainant's view. 58% of complaints received in 2021/22 (compared to 38% in 2020/21) were related to standard of service and reflect an increase of 20%. Standard of Services includes service delivery, assessment of eligibility for services and timeliness in receiving services. Not all adults will be eligible for services from Adult Social Care following assessment. This can inevitably result in challenge and disagreement on how individual needs can be met. These are often emotive and challenging situations which can stimulate complaints where people do not agree with the practitioner's views or level of service received. Delays may also be incurred due to sourcing the right support, again leading to a complaint. Concerns may also be raised regarding a lack of empathy and compassion shown to service users, the standard of care received on domiciliary visits, i.e. not staying for the full time allotted and the amount of attention given to residents, not wearing the necessary Personal Protective Equipment.

21. It is recognised that the pandemic has impacted on the delivery of Adult Social Care both by Worcestershire County Council and external care providers, for example recruitment and retention impacting on staffing levels.

Purpose of the Meeting

22. Members are invited to consider and comment on the information within this report and agree:

- whether any further information or scrutiny work is required at this time
- arrangements and frequency of future reports
- whether there are any comments to highlight to Cabinet Member.

Supporting Information

Appendix 1 – Adult Social Care Statutory Representations and Complaints Procedure Annual Report 2021-2022

Contact Points

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964/844965
Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager), the following are the background papers relating to the subject matter of this report:

[Agenda for Adult Care and Well Being Overview and Scrutiny Panel on Monday, 15th November, 2021, 2.00pm](#)

All agendas and minutes are available on the Council's website here.

**Adult Social Care Statutory Representations and Complaints
Procedure
Annual Report
2021-2022**

Adult Social Care Services



**Compliments
Comments
Complaints**

Make your views known

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1. Purpose of Report

1.1 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 2021 to 31 March 2022.

2. Background

2.1 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.

2.2 A requirement of the procedure is that an annual report is presented to the County Council about compliments, comments and complaints received through the year. This report is open to inspection by members of the public under the terms of the Local Government (Access to Information) Act 1985.

3. Overview of complaints

3.1 Number of complaints received

3.1.1 The number of complaints increased in Adult Social Care, increasing from 123 in 2020/21 to 233 in 2021/22. There were 14 informal complaints reported this year. (See appendix 1 for full data).

3.1.2 Some Social Care complaints, which do not relate to individuals or the services they receive, are dealt with through the Corporate process. This year 13 complaints were dealt with through the Corporate complaints procedure, mainly in regard to the standard of service received.

3.2 Ombudsman Complaints

3.2.1 This is a brief summary of the Local Government Ombudsman (LGO) complaints received, and those where decisions were made this year:

- 13 complaints were received, and 11 were determined.
- Of the determined, 3 were upheld, and were found maladministration with injustice. 3 were closed after initial inquiries with no further action, 1 was upheld no further action, 2 were not upheld no maladministration and 2 were not upheld no further action.
- The 3 upheld decisions and fault found were complainants who were dissatisfied with the response they had received to their complaint from Worcestershire County Council.

3.2.2 For the purposes of this annual report we have used the Council's figures. The LGO has published a report, but accepted that their figures would not match the data collected by Local Authorities due to the timescale of decisions being reported.

3.3 What is being complained about?

3.3.1 The primary areas of complaint are as follows (See appendix 1 for full data):

a) Assessment, support planning and resource allocation

3.3.2 The core business of Social Work includes assessment, support planning and resource allocation, which receives the highest level of complaints. Within this area, the largest areas of complaint are around communication and standard of service received from staff.

b) Other areas: Contracted residential care and domiciliary care and financial assessments

3.3.3 There has been an increase in complaints regarding externally commissioned care providers, and this has in the main been around covid protocols. These figures only show the complaints being dealt with through the Council's formal process, and do not include complaints received directly by the services or dealt with via the Council's quality assurance processes.

Finance is an area that has also seen an increase in complaint numbers.

3.3.4 There was an increase in the number of complaints that related to the standard of service received in the complainant's view. 58% of complaints received in 2021/22 (as compared to 38% in 2020/21) were related to standard of service and reflect an increase of 20%. Standard of Services includes service delivery, assessment of eligibility for services and timeliness in receiving services. Not all adults will be eligible for services from Adult Social Care following assessment. This can inevitably result in challenge and disagreement on how individual needs can be met. These are often emotive and challenging situations which can stimulate complaints where people do not agree with the practitioner's views or level of service received. Delays may also be incurred due to sourcing the right support, again leading to a complaint. Concerns raised regarding a lack of empathy and compassion shown to service users, the standard of care received on domiciliary visits i.e. not staying for the full time allotted and the amount of attention given to residents, not wearing the necessary Personal Protective Equipment.

A breakdown of the service areas are shown in Appendix 1.

3.4 Upheld Complaints

3.4.1 For those complaints either fully or partially upheld, one of the main issues was around standard of service and communication.

3.5 Learning from Complaints

3.5.1 Learning from complaints is an important aspect of the complaint procedure, and there is a requirement that Adult Social Care evidence how learning from complaints feeds into service delivery and development.

3.5.2 A Key Learning Form is used to capture the learning and provide an audit trail of its implementation. The information from the Key Learning Form then feeds into the quarterly reports provided for the Senior Management Team meetings. 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.

3.5.3 Key Learning Forms are also discussed in the Operational Manager's meetings, where specific elements of learning are discussed, and actions agreed. Individual issues about specific teams are dealt with through supervision with the area managers and team meetings.

3.5.4 These are some examples of learning this year:

What people have complained about	What action has been taken as a result
Not received sufficient information in order for an appropriate package of care being put in place.	In house provider managers addressed the issues with their front-line staff. Reiterating importance of completing 'ither information' that will alert new providers to any areas of concerns so these may be discussed.
Misinformation given regarding how long would receive a service form the Reablement Team ranging from 72 hours to six weeks.	A review of care needs should always take place before a conclusion is made regarding long term support. The Manager of the service discussed the discharge home to assess model with all assessors. The Manager of the service will raise this complaint as a concern wit the Hospital Team.
SU went into care in 2019 but invoices were not issued until 2021. SU passed away but invoices continued to be issued. The Home was unaware that funding had commenced. Council had been contacted on numerous occasions, but this matter was not resolved.	As a result of the findings, action has been taken to ensure that once funding has been agreed an automatic referral is sent from the Social Worker to the Care Contribution Assessment Team. The lack of response with the appropriate teams and individuals across the service has been addressed and Officers are fully aware of the consequences of the poor service provided and the need to correctly follow process in the future.

3.6 Financial Redress

3.6.1 As an outcome of some of the upheld or partially upheld complaints Adult Social Care agreed to write off certain charges or make ex gratia payments. Payments this year totalled £2,144.03.

3.7 Time Limits

3.7.1 There are no prescribed time limits for dealing with complaints, although the legislation suggests a maximum of 6 months. The expectation is that reasonable timescales are negotiated and agreed with the complainant. Adult Social Care has set default time limits of 35 working days for the completion of complaints, although it is possible to extend the timescales for more complex complaints.

3.7.2. Of the Low-Risk complaints responded to, 79% were responded to within timescale; for Moderate Risk complaints 58% were responded to within timescales.

However moderate complaints tend to be more complex and cover more than one service.

3.8 Advocacy

3.8.1 There were 4 complaints this year supported by an advocate.

3.9 Compliments and Comments

Detailed information is contained in Appendix 4

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

The Consumer Relations Officer, (Adult Social Care Services)

Telephone: 01905 846365

Email: representations@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 846365.

Appendix 1

Formal Complaints Process

Complaints are grouped according to the area of service provision, which are:

Numbers of Adult Service complaints received

Level	2020-21	2021-22
Low Risk	95	190
Moderate /High Risk	28	43
Informal	22	14
LGO	7	13
Total	152	260

Complaints by Service Area

Service Area	2020 -21	% share 20-21	2021-22	% share 21-22
Central Services	19	16%	57	20%
Commissioning	6	5%	7	2%
Mental Health & Learning Disabilities	7	6%	42	15%
Area Social Work Teams	39	32%	78	27%
Provider Services	30	25%	74	26%
Quality, Safeguarding, DOLS & Prisons	19	16%	17	6%
Urgent Care	-	-	12	4%
Total	123	100%	287	100%

N.B These totals are for those complaints entering the formal process, excluding those received via the LGO.

Service Being Complained About

(N.B Totals may differ as some complaints cover more than one service)

Service	2020 to 2021	2021 to 2022
Access & Patient Flow Centre	2	-
Brokerage Process	4	1
CHC	2	2
Complaint Process not followed	-	1
Contracted out (Day Care)	-	2
Decision Making	6	34
Discrimination	-	1
Duty, Care and Support Planning	46	39
Financial Assessment/Direct Payment	33	25
Financial (home care)	8	-
Finance	14	22
Externally Commissioned Home Care	13	29

Externally Commissioned Respite	1	1
Externally Commissioned Res/Nursing	7	4
Supported Living	-	2
Other	-	1
LD	2	2
MCA	-	4
Promoting Independence	16	14
Safeguarding Processes	12	5
Shared Lives	2	-
Staff	11	11
Standard of Service	118	176
Total	297	376

Nature of Complaints

(N.B Totals may vary as some complaints have various natures)

Across all the Service Areas the issues being complained about are:

	2020-21	2021-22
Adult Safeguarding	13	2
Breach of Confidentiality	10	5
Care Plan Assessment	1	1
Changes to call Times	1	2
CHC	-	1
Delay in Providing Service	11	2
Delay/Failure to Keep Informed	-	1
Direct Payments	4	8
Discrimination	-	1
Financial	45	14
General lack of Communication	46	35
Inaccurate Information	3	2
Info from Provider	1	1
Lack of or delay in providing assessment	-	1
Lack of Service	9	5
Medication	-	2
Mental Capacity Assessment	-	3
No return of telephone calls	4	6
Other	2	1
Outcome of Decision/Assessment	3	5
Practice non-compliant with leg/process	-	2
Process dec/Res Alloc	2	4
Staff Attitude/Behaviour	34	16
Staff/Training/Qualifications	-	1
Standard of Service Delivery	118	176
Support Planning	6	4
Total	313	301

The majority of the nature of complaints is regarding the standard of service delivery. 41 of these related to area social work teams assessment or 24 related to Provider standards of service.

Break down by Service area

2021/22	Central Services	Commissioning	Mental Health & Learning	Area Social Work Teams	Provider Services	Quality, Safeguarding, DOLS & Prisons	Urgent Care
Adult Safeguarding	-	-	-	-	-	2	-
Breach of Confidentiality	1	-	2	1	-	1	-
Care Plan Assessment	-	-	-	1	-	-	-
Changes to call Times	-	-	-	-	2	-	-
CHC	-	-	-	1	-	-	-
Delay in Providing Service	-	-	-	1	1	-	-
Delay/Failure to Keep Informed	-	-	-	1	-	-	-
Direct Payments	6	1	-	1	-	-	-
Discrimination	1	-	-	-	-	-	-
Financial	13	-	-	1	-	-	-
General lack of Communication	14	-	10	6	4	-	1
Inaccurate Information	-	-	-	-	1	1	-
Info from Provider	-	1	-	-	-	-	-
Lack of or delay in providing assessment	-	-	-	1	-	-	-
Lack of Service	1	-	3	-	1	-	-
Medication	-	-	-	1	1	-	-
Mental Capacity Assessment	-	-	1	2	-	-	-
No return of telephone calls	1	-	4	-	1	-	-
Other	-	-	-	1	-	-	-
Outcome of Decision/Assessment	-	-	-	4	-	1	-
Practice non-compliant with leg/process	-	-	-	1	1	-	-
Process dec/Res Alloc	-	-	1	-	2	1	-
Staff Attitude/Behaviour	1	-	4	6	4	1	-
Staff/Training/Qualifications	-	1	-	-	-	-	-
Standard of Service Delivery	35	1	25	42	57	8	8
Support Planning	-	-	2	2	-	-	-
Total	73	4	52	73	75	15	9

25 complaints were received relating to external care providers and 32 complaints were received relating to internal providers.

Appendix 2: Outcomes of Formal Complaints

Low Risk Complaints	2020-21	% share 20-21	2021-22	% share 21-22
Upheld	21	20%	26	15%

Low Risk Complaints	2020-21	% share 20-21	2021-22	% share 21-22
Partially Upheld	22	20%	30	17%
Not Upheld	20	19%	45	26%
Re-directed	6	6%	3	2%
Discontinued (includes referred to Safeguarding)	37	34%	62	36%
Permission Required	1	1%	-	-
Withdrawn	-	-	6	4%
Total	107	100%	172	100%

Low Risk complaints are relatively straight forward and relate to a single or a few issues that can be readily resolved. Some complaints were redirected, such as to other partner organisations or to the provider's own complaints process. Complaints can be discontinued due to consent not being received when required or no further contact received when further clarification is required.

Moderate Risk Complaints	2020-21	% share 20-21	2021-22	% share 20-21
Upheld	4	21%	3	8%
Partially Upheld	8	42%	8	22%
Not Upheld	2	11%	4	11%
Discontinued	4	21%	17	47%
Redirected	1	5%	2	6%
Withdrawn	-	-	2	6%
Total	19	100%	36	100%

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 Advanced Social Work Practitioner or the Investigating Officer for Adult Social Care.

High Risk Complaints

There were no High Risk complaint this year.

Appendix 3: Time Limit

There are no prescribed time limits for dealing with complaints, although the legislation suggests a maximum of 6 months. The expectation is that reasonable timescales are negotiated and agreed with the complainant. Adult Social Care have set default time limits of 35 working days for the completion of complaints, although it is possible that such timescales are extended for more complex complaints.

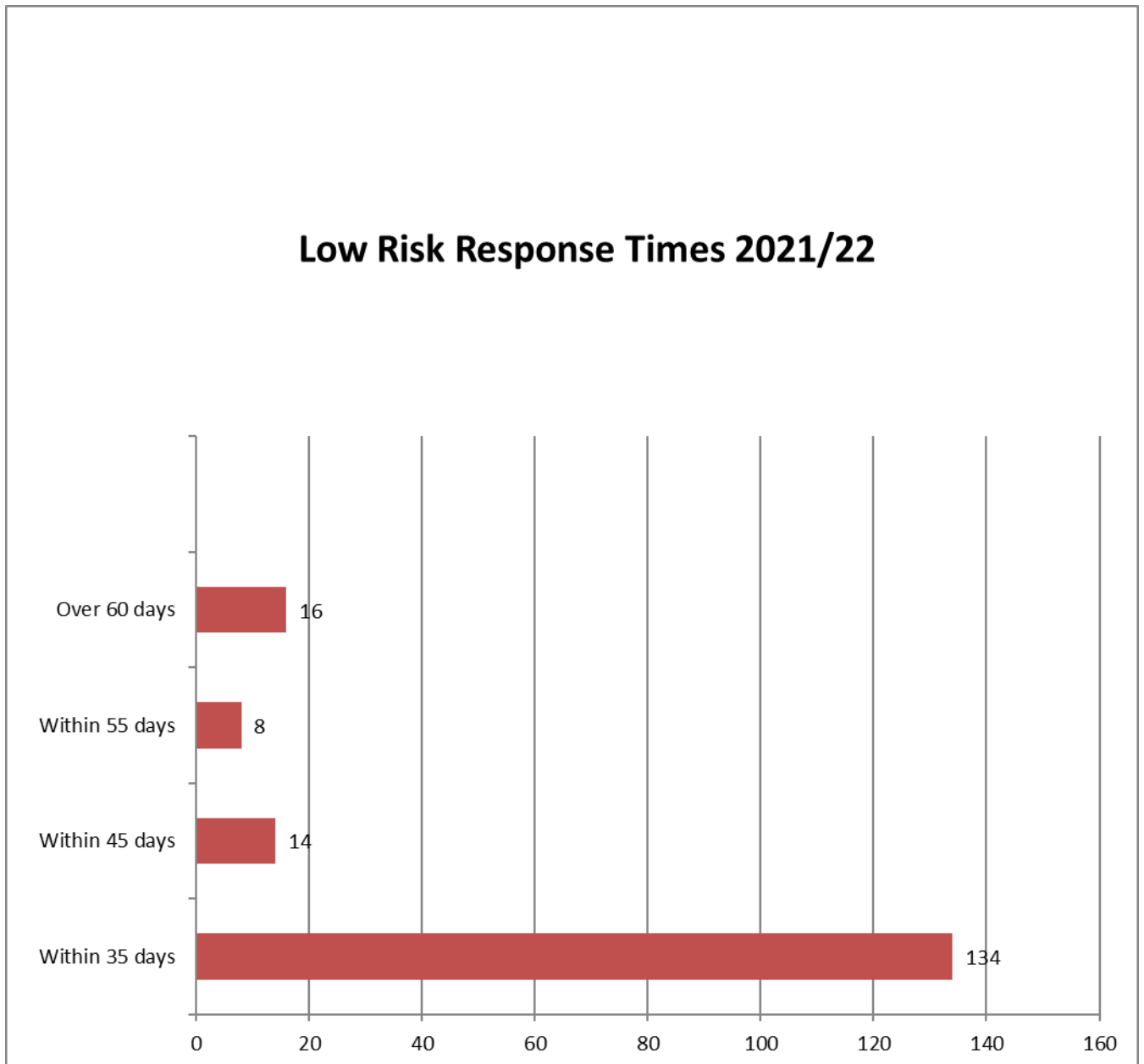
Overdue complaints are those not completed within the default timescale, or that have gone beyond the agreed timescale with the complainant.

Low Risk Timescale

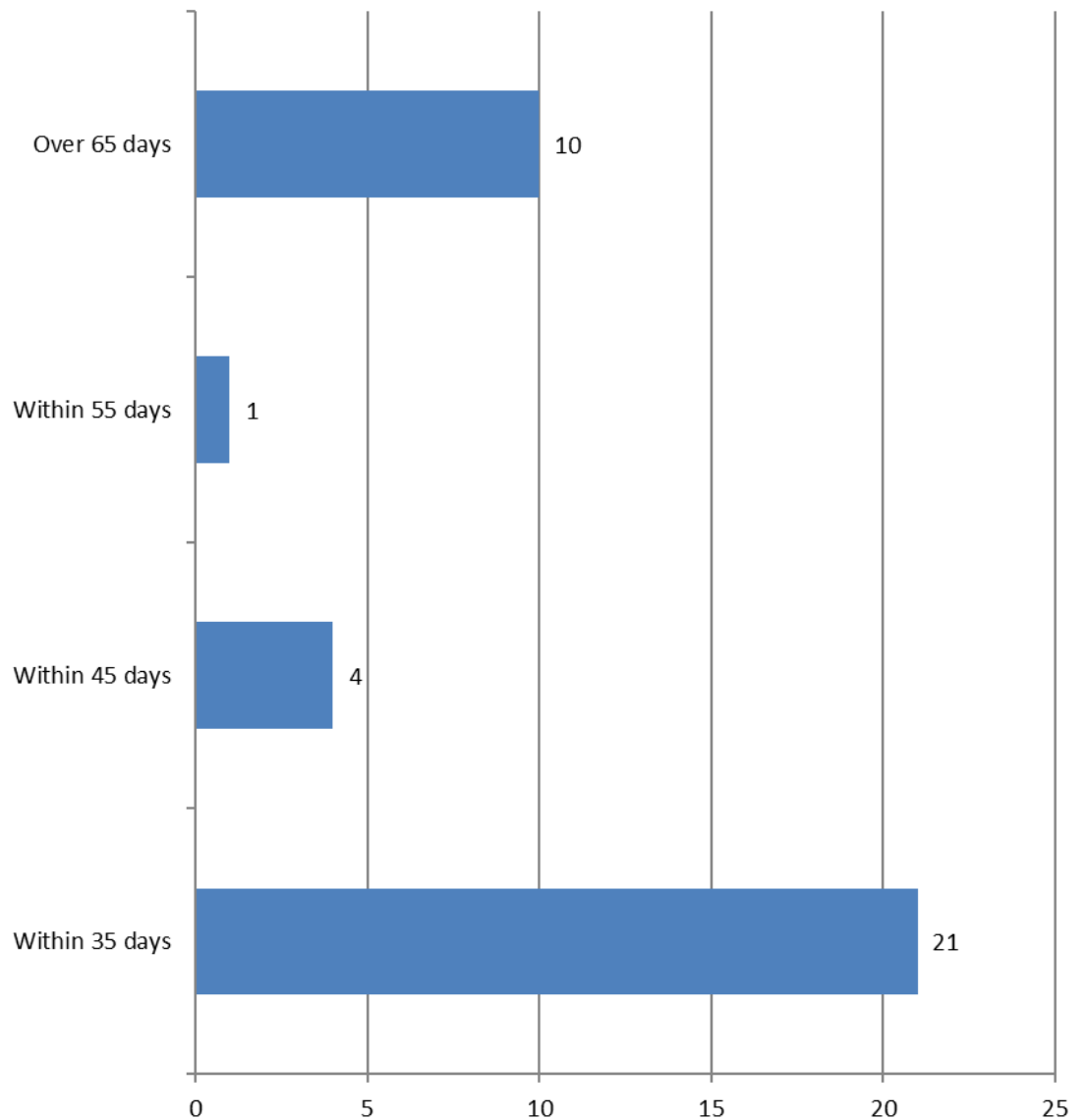
Of the Low-Risk complaints, the majority were responded to within timescale.

Moderate Risk Timescales

Of the Moderate Risk complaints responded to within the year just over a quarter were responded to within timescales. As moderate risk complaints are generally more complex, it is not unusual for them to extend beyond the 35 working days, and complainants are generally kept updated as to progress. There were a few however, which were considerably overdue.



Moderate Risk Response Times 2021/22



All overdue complaints are pursued with the relevant managers. The Consumer Relations Unit issues alerts as a complaint approaches timescale, and then thereafter, until it is responded to.

Appendix 4: Compliments and Comments

The process also reports on Comments and Compliments received by Adult Social Care.

Comments

There were 26 comments received this year.

Service Area about which compliments were received

	2020/21	2021/22
Central Services	15	10
Commissioning	-	1

	2020/21	2021/22
Mental Health & Learning Disabilities	11	39
Operations & Intergration	133	68
Provider Services	93	92
Quality, Safeguarding, DOLS & Prisons	1	3
Urgent Care	14	9
Total	267	222

The majority of compliments are regarding exemplary assistance from staff, and the standard of service provided. There has been a decrease of 17% from 2020/21.

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 and SMT, thus ensuring that the service is not only learning from complaints, but also learning from compliments.

A compliment logged under this process must be more than a thank you and should demonstrate exceptional service. Some compliments received therefore, although always shared with the individual worker are not logged under this process.

In addition to the compliments logged under this process there have also been

Examples of compliments received

From a service user about a Social Worker:

“I have to acknowledge the allocated SW’s commitment and engagement with the process, providing information and responding to requests for action. This has really supported the complex abuse investigation.

From a relative of a service user about a Social Worker:

“Thank you for all you have done for Mum and Dad in the time you have been their social worker. I have found you to be fantastically supportive, reactive, and effective in all our dealings. Everything would have been so much harder without your involvement. “

From a service user about a Social Worker:

“Thank you for everything you have managed to get done. You have been exceptional in your kindness. It has been much appreciated.”

From a relative of a service user about a Social Worker:

“From the minute you became Mom’s caseworker you went over and above to make sure everything was done in a timely manner. Nothing was too much trouble, you never made me feel as if I was a nuisance. You explained everything and put me at ease. Your actions mean more than I or my family can say, thank you.”

From a service user about a Social Worker:

“Thank you’ for everything you did. At a really difficult time you showed real compassion and I felt you were doing everything you could to turn a horrid situation into a really positive one. The time you turned it all around was incredible and the relief we both felt can’t really be explained. I know the restraints you are all under and that’s why it is so important to tell you what a great job you did for us. You never rushed me and listened, that goes a long way these days. Thank you so much again and even when you are having a rubbish day just know you are fab at what you do.” (by e-mail).

From a relative of a service user about a Social Worker:

“Thanks for listening and supporting me as a daughter regarding her mom in a care home and the DOLS assessment. It was so lovely to speak to you and so insightful in so many ways! I really appreciate you taking so much time to listen at what has been and continues to be a very stressful time for me. “(by email)

From a relative of a service user about a Social Worker:

“I just wanted to thank you for dealing with us in a sensitive way during the illness and keeping us very well-informed about his care situation.”

ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 28 SEPTEMBER 2022

WORK PROGRAMME

Summary

1. From time to time the Adult Care and Well Being Overview and Scrutiny Panel (the Panel) will review its work programme and consider which issues should be investigated as a priority.

Background

2. Worcestershire County Council has a rolling annual Work Programme for Overview and Scrutiny. The 2022/23 Work Programme has been developed by taking into account issues still to be completed from 2021/22, the views of Overview and Scrutiny Members and other stakeholders and the findings of the budget scrutiny process.
3. Suggested issues have been prioritised using scrutiny feasibility criteria in order to ensure that topics are selected subjectively and the 'added value' of a review is considered right from the beginning.
4. The Adult Care and Well Being Overview and Scrutiny Panel is responsible for scrutiny of:
 - Adult Social Care
 - Health and Well-being
5. The overall scrutiny work programme was discussed by the Overview and Scrutiny Performance Board on 29 June and agreed by Council on 14 July 2022.

Dates of 2022 Meetings

- 7 November at 2pm

Purpose of the Meeting

6. The Panel is asked to consider the 2022/23 Work Programme and agree whether it would like to make any amendments. The Panel will wish to retain the flexibility to take into account any urgent issues which may arise.

Supporting Information

Appendix 1 – Adult Care and Well Being Overview and Scrutiny Panel Work Programme 2022/23

Contact Points

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965
Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager), the following are the background papers relating to the subject matter of this report:

[Agenda for Overview and Scrutiny Performance Board 29 June 2022](#)

[Agenda for Council on 14 July 2022.](#)

SCRUTINY WORK PROGRAMME 2022/23

Adult Care and Well Being Overview and Scrutiny Panel

Date of Meeting	Issue for Scrutiny	Date of Last Report	Notes/Follow-up Action
28 September 2022	Compliments and Complaints for Adult Services	15 November 2021	
	Performance (Q1 April to June) and In-Year Budget Monitoring		
7 November 2022 (Exact Agenda to be confirmed)	Intermediate Care		Directorate Suggestion May 2022
	The Role of Adult Social Care in Complex Hospital Patient Discharges	18 July 2022	
	Liberty Protection Safeguards		Panel member suggestion March 2022
	Better Care Fund		Added at the 20 May 2022 Meeting
	Update on Learning Disability Services following implementation of outcomes from Review	15 November 2021	Discussed at the 14 January 2022 meeting
	Day Opportunities for Adults with Learning Disabilities	15 November 2021	Agenda Planning 30 August 2022
	Update on People and Communities Strategy and Workstreams		Added at 15 March 2021 Meeting
	The Council's Adult Services Replacement Care Offer		
	Performance (Q2 July to September) and In-Year Budget Monitoring		
January 2023	Scrutiny of 2023/24 Budget		
March 2023	Performance (Q3 October- December) and In-Year Budget Monitoring		
Possible Future Items			
March 2023 onwards	Independence Focussed Domiciliary Care Service in Worcestershire		Directorate Suggestion February 2022

June/July 2023	All Age Disability (0-25) Service (ongoing Scrutiny of the transformation of the Service)	11 January 2021	Jointly with Children and Families O&S Panel – to provide feedback on consultation, timeline, KPI's
TBC	Continuing Health Care (including any funding implications)		Directorate Suggestion July 2022
TBC	How the Council works with Carers		Panel suggestion 8 July 2021
2023 TBC	The role and cost benefit of Assistive Technology in Care Planning		Discussed at the 14 January 2022 meeting
TBC	Update on Direct Payments		Added at the 20 May 2022 Meeting
TBC	Fair Cost of Care		Directorate/CMR suggestion May 2022
TBC	Update on Adult Social Care Reforms	18 July 2022	
Standing Items			
Annual	Safeguarding Adults Annual Update	28 January 2021 15 March 2022	Annual Update from Worcestershire Safeguarding Adults Board
Annual	Compliments and Complaints for Adult Services	15 November 2021 28 September 2022	Annual Report
Quarterly	Performance and In-Year Budget Monitoring		