



# **ADULT SOCIAL CARE PEOPLE**

## ***COMPLIMENTS, REPRESENTATIONS AND COMPLAINTS***

***QUARTER 1 2011 - 2012***

**Report to Senior Management**

**SEPTEMBER 2011**

**Recommendations:**

- **Progress to date be noted**
- **Agreement to the report being published on the Customer Services Website.**
- **Approval for report to be sent to CQC.**

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Date: September 2011

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## GLOSSARY OF TERMS

ACS	Adult & Community Services
AD	Assistant Director
ART	Assessment & Review Team
CCT	Complex Care Team
CDP	Care Direct Plus
CHC	Continuing Health Care
CMF	Complaint Monitoring Form
CQC	Care Quality Commission
CSC	Customer Service Centre
CST	Customer Services Team
DOLS	Deprivation of Liberty safeguard
Dom Care	Domiciliary Care
DPS	Devon Provider Services
EDT	Emergency Duty Team
ICT	Information & Communication Technologies
IMCA	Independent Mental Capacity Advocate
LD	Learning Disability Services
LGO	Local Government Ombudsman
MCA	Mental Capacity Act
NFA	No Further Action
OPPD	Older People Physical Disability
OT	Occupational Therapist
PCT	Primary Care trust
PHSO	Parliamentary Health Service Ombudsman
REMAS	Rapid Equipment & Minor Adaptations Service
SA	Safeguarding Adults

## 1. Introduction

1.1 This ACS quarterly report refers to all activity in relation to Compliments, MP Letters, Representations and Complaints for the period 1<sup>st</sup> April to 30<sup>th</sup> June 2011 The Customer Services Team is responsible for receiving and managing all forms of customer feedback, enquiries from Members of Parliament, enquiries from Councillors and all cases involving the Local Government Ombudsman.

1.2 All activity in relation to complaints must comply with the Local Authority Adult Social Services and National Health Service Complaints (England) Regulations 2009

## 2. Areas of Concern and Action Required for Improvement & Learning

2.1 The Local Government Ombudsman (LGO) Annual Review Letter to Devon County Council for the year ending 31<sup>st</sup> March 2011 highlighted a concern that the Council was taking longer than the 28 working days requested to make a full response to complaints. Complaints about Adult Social Care took an average of 67.1 days to respond to. This is against the target of 28 days.

The Complaints Manager has provided a report to Jennie Stephens and Phil Norrey detailing actions that will be taken to bring about the required improvements.

2.1.1 The Customer Services and Complaints Manager has agreed with the Ombudsman Link Officer a timetable for responding to Complaints from the Ombudsman

Day 1	Complaint received by Council
By Day 2	Link Officer sends complaint to Complaints Manager
By Day 3	Complaints team allocate to appropriate team for provision of information required by Ombudsman
By Day 23	all requested information returned to complaints team
By Day 25	full response returned to Link Officer
By Day 28	response returned to Ombudsman

The Complaints Team will monitor progress and send chasers to the responders when there are 5 and 2 days to go as a reminder.

2.1.2 There will now be a case manager within the complaints team for all Ombudsman complaints and in the more complex cases (such as those spanning Social Care & Health organisations) the responses will be compiled by the complaints team as opposed to being allocated to the relevant operational teams.

2.1.3 If the operational team genuinely does not have the capacity to deal with a case then it will be taken on by the Complaints Team or if absolutely necessary one of our pool of externally commissioned investigators.

2.1.4 The Complaints Manager will include a performance scorecard in relation to responses to complaints from the Ombudsman in the Quarterly Performance Report.

2.1.5 With regard to all of the above measures to improve our performance The Customer Services & Complaints Manager is responsible for monitoring the situation. Under performance and breeches of target deadlines for responses will be escalated to the appropriate Head of Service.

2.2 In this first quarter of 2011/12 only 85% of complaints have been responded to within the agreed timescales. This needs to improve especially given that in all cases if the investigator and / or responder realises that they are not going to meet the agreed deadline there is the facility to be able to re-negotiate the deadline with the complainant.

In effect the only reason for a response deadline to be breeched should be if the complainant refuses to agree an extension.

### 3. All Activity Summary

3.1 **Table 1** summarises the Customer Services Activity for the period 1<sup>st</sup> April 2010 – 30<sup>th</sup> June 2011 and provides a trend analysis based on activity over the previous 12 month period.

ACTIVITY TYPE	Qtr 1 10- 11	Qtr 2 10- 11	Qtr 3 10- 11	Qtr 4 10- 11	Total 10- 11	% activity in year	Qtr 1 11- 12	Qtr 2 11- 12	Qtr 3 11- 12	Qtr 4 11- 12	Total 10- 11	% activity in year
Complaints	63	105	98	91	357	30%	74				74	27%
Compliments	226	209	89	151	675	57%	156				156	58%
MP Letters	19	11	12	22	64	5%	17				17	6%
Representations	15	28	26	23	92	8%	25				25	9%
<b>TOTAL</b>	<b>323</b>	<b>353</b>	<b>225</b>	<b>287</b>	<b>1188</b>		<b>272</b>				<b>272</b>	
<b>% overall activity</b>	27%	30%	19%	24%		<b>100%</b>						<b>100%</b>

- 3.1.1 The overall level of activity in Quarter 1 2011-2012 is 15% less than in the same quarter in the previous year.
- 3.1.2 Compliments have fallen from 226 received in the corresponding quarter last year to 156 (a decrease of 31%).
- 3.1.3 The number of complaints received in Qtr 1 11/12 has increased by 18% when compared to Qtr 1 in 10/11 (from 63 complaints received to 74 complaints received).
- 3.1.4 The level of MP letters and other representations received has risen from 34 in Quarter 1 last year to 42 in Quarter 1 this year. This increase is due entirely to a rise in representations from customers rather than an increase in correspondence from MPs. In fact the number of MP letters received has dropped very slightly.

### 4. Compliments

4.1 There have been a total of 156 compliments received across all divisions in the period 1<sup>st</sup> April –30<sup>th</sup> June 2011 (Qtr 1 2011-12).

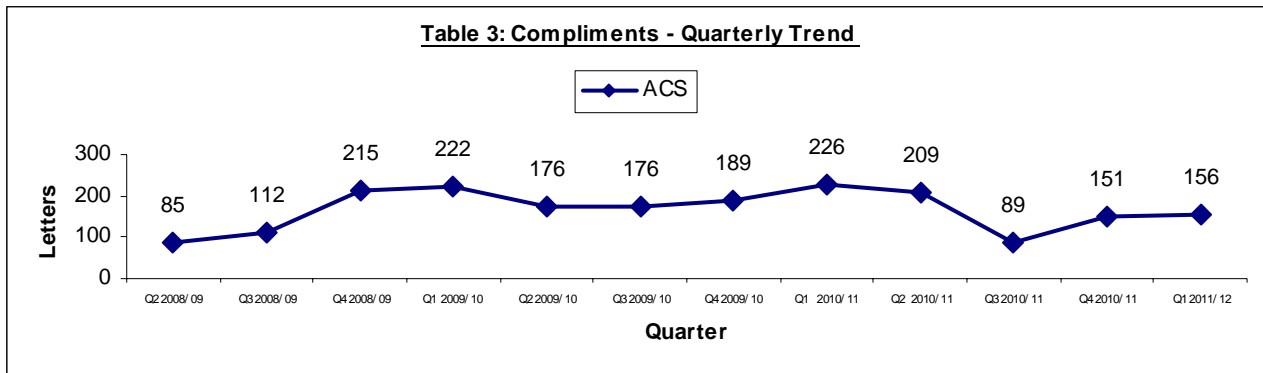
**Table 2** shows the number compliments received by each division of the directorate.

Division	Qtr 1	Qtr 2	Qtr 3	Qtr 4	YTD
OPPD	41				<b>41</b>
Learning Disability	4				<b>4</b>
Strategic & Corporate	15				<b>15</b>
In-House	81				<b>81</b>
External Providers	1				<b>1</b>
Mental Health	14				<b>14</b>
<b>ACS Total</b>	<b>156</b>				<b>156</b>

4.2 The compliments were spread across all divisions with 52% within In-House Services, 26% within Older People Physical Disability Services, 10% being received within the Strategic & Corporate division, 9% regarding Mental Health and 3% within Learning Disability Services

4.3 The 156 compliments received in Qtr 1 represent an increase of 5 compliments on the total number received in Qtr 4.

4.3.1 Table 3 shows the trend in number compliments received over the last 3 reporting years.



4.4 Across all divisions the 5 services that received the most compliments in Qtr 1 were; In-House Residential Care 37 compliments (24% of total received), CCT 20 compliments (13% of total received) In-House Dom Care 17 compliments (11% of total received), CDP 15 compliments (10% of total received and Mental Health Vocational Rehab & Recovery 14 compliments (9% of total compliments received).

4.4.1 Table 4 below provides a breakdown of the compliments received by service areas within each division.

Division	Service Area	Qtr 1	Qtr 2	Qtr 3	Qtr 4	YTD
OPPD	CCT	20				20
	CDP	15				15
	Rapid Response	5				5
	Hospital Discharge Team	1				1
	<b>OPPD Total</b>	<b>41</b>				<b>41</b>
Learning Disability	Commissioning	1				1
	Provider Services	3				3
	<b>LD Total</b>	<b>4</b>				<b>4</b>
Strategic & Corporate	Direct Payments	1				1
	Safeguarding	0				0
	Care Direct	4				4
	Client Finance	1				1
	DOLS/MCA	0				0
	Sensory Team	4				4
	Supporting People	0				0
	Customer Services Team	4				4
	Management Information Team	1				1
	CareFirst Support Team	0				0
	<b>Strategic &amp; Corporate Total</b>	<b>15</b>				<b>15</b>
In-House	Dom Care	17				17
	Residential Care	37				37
	Respite Care	9				9
	Day Care	3				3
	Reablement	12				12
	Intermediate Care	3				3
	<b>In-House Total</b>	<b>81</b>				<b>81</b>
External Providers	Care and Repair	1				1
Mental Health	Vocational Rehab and Recovery	14				14
	<b>Mental Health Total</b>	<b>14</b>				<b>14</b>
<b>All compliments across ACS</b>		<b>156</b>				<b>156</b>

4.5 79% (149 compliments) of the compliments received in Qtr 1 were in relation to the conduct of our staff. In addition we received 36 compliments about the appropriateness of a service provided (19% of total received) and 3 compliments regarding information provided (2% of total received).

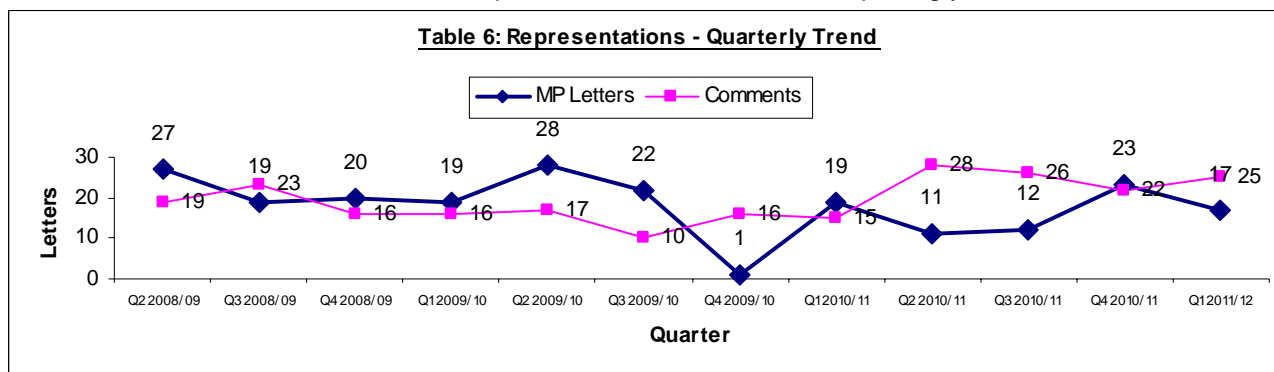
4.5.1 Table 5 below provides a breakdown of the nature of the compliments received across all divisions for the period 1<sup>st</sup> April -30<sup>th</sup> June 2011.

Nature of compliment	Q1	Q2	Q3	Q4	YTD
Information	3				3
Communication	0				0
Staff conduct	149				149
Appropriateness of Service	36				36
Eligibility for Service	0				0
Decisions	0				0
Timeliness	0				0
Funding	0				0
Access to files	0				0
<b>TOTAL</b>	<b>188</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>188</b>

## 5. Representations (Comments & MP Letters)

5.1 In the period 1<sup>st</sup> April – 30<sup>th</sup> June 2011 (Qtr 1) we have received a total of 42 Representations of which 17 were letters from an MP and 25 were other forms of representation. This represents 3 fewer representations than in the previous quarter.

5.1.1 Table 6 below shows the trend in representations over the last 3 reporting years.



5.1.2 Table 7 provides details of all MP Letters received in this reporting period

MP NAME	QUARTER 2011-12				2011-12 Total YTD
	Q1	Q2	Q3	Q4	
Bradshaw MP	5				5
Cox QC MP	4				4
Harvey MP	4				4
Morris MP	1				1
Stride MP	1				1
Swire MP	1				1
Wollaston MP	1				1
<b>ACS TOTAL</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>17</b>

5.2 Table 8 provides details of which division's services they were about.

**Table 8**

Comments received by type of service	Q1		Q2		Q3		Q4		total year	
	Comments	MP Letters	Comments	MP Letters	Comments	MP Letters	Comments	MP Letters	Comments	MP Letters
<b>Division</b>										
OPPD	7	11							7	11
Learning Disability	4	3							4	3
Mental Health	0	0							0	0
Strategic & Corporate	3	3							3	3
In-House	7	0							7	0
External Providers	4	0							4	0
<b>ACS Total</b>	<b>25</b>	<b>17</b>							<b>25</b>	<b>17</b>

**5.2.1** In this quarter within OPPD 11 MP Letters & 7 other representations were received. Within LD Services 3 MP letters and 4 other representations were received. Within Strategic & Corporate Services there were 3 MP letters and 3 representations. In-House services received 7 representations in this quarter. There were 4 representations received this quarter regarding External Providers

**5.2.2** There were 4 service areas that received the majority of the representations in Qtr 1 these were the CCTs which were the subject of 33% of the representations received, Commissioning Services within LD which the subject of 17% of the total representations received and CDP and In House Residential Care which were each the subject of 10% of representations received.

**5.2.3** The nature of the majority of the representations received in Qtr 1 (1<sup>st</sup> April – 30<sup>th</sup> June 2011) were regarding Appropriateness of services receiving 18 representations (33%), Information receiving 12 representations (22%) and Decisions & Policy receiving 9 representations (16%).

**5.2.4** Below **Table 10** provides details of the nature of the representations across all divisions. **Table 11** provide detail by division of service areas that received representations in this quarter.

Table 11: Representations by division and nature		Quarter 1											Total YTD												
		Information	Communication	Access to files	Staff Conduct	Delays	Eligibility for Service	Appropriateness of Service	Decisions and Policy	Timeliness	Funding & Charges	Service not Delivered	All issues	Information	Communication	Access to files	Staff Conduct	Delays	Eligibility for Service	Appropriateness of Service	Decisions and Policy	Timeliness	Funding & Charges	Service not Delivered	All issues
OPPD	Comments	3	1	0	1	1	1	3	1	0	0	0	11	3	1	0	1	1	1	3	1	0	0	0	11
	MP Letters	5	0	0	0	1	0	3	1	1	1	0	12	5	0	0	0	1	0	3	1	1	1	0	12
	<b>OPPD Total</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>6</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>23</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>6</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>23</b>
Learning Disability	Comments	0	0	0	0	0	0	2	1	1	1	0	5	0	0	0	0	0	0	2	1	1	1	0	5
	MP Letters	1	0	0	0	0	0	0	2	0	2	0	5	1	0	0	0	0	0	2	0	2	0	0	5
	<b>Learning Disability Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>10</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>10</b>	
Strategic & Corporate	Comments	0	0	0	0	0	0	1	1	0	0	0	2	0	0	0	0	0	0	1	1	0	0	0	2
	MP Letters	2	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0	0	0	0	0	0	0	2
	<b>Strategic &amp; Corporate Total</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	
In-House Services	Comments	1	0	0	0	1	0	5	3	0	0	0	10	1	0	0	0	1	0	5	3	0	0	0	10
	MP Letters	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>In-House Services Total</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>5</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>5</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>10</b>	
External Providers	Comments	0	0	0	2	0	0	4	0	0	0	2	8	0	0	0	2	0	0	4	0	0	0	2	8
	MP Letters	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>External Providers Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>8</b>	
Mental Health	Comments	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	MP Letters	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<b>Mental Health Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
All ACS	Comments	4	1	0	3	2	1	15	6	1	1	2	36	4	1	0	3	2	1	15	6	1	1	2	36
	MP Letters	8	0	0	0	1	0	3	3	1	3	0	19	8	0	0	0	1	0	3	3	1	3	0	19
	<b>ACS Total</b>	<b>12</b>	<b>1</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>18</b>	<b>9</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>55</b>	<b>12</b>	<b>1</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>18</b>	<b>9</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>55</b>

**Table 11: Representations received by division and service area by quarter**

		Q1		Q2		Q3		Q4		YTD	
		Comments	MP Letters	Comments	MP Letters	Comments	MP Letters	Comments	MP Letters	Comments	MP Letters
Division	Service Area										
OPPD	CCT	5	9							5	9
	CDP	2	2							2	2
	Rapid Response	0	0							0	0
	<b>OPPD Total</b>	<b>7</b>	<b>11</b>							<b>7</b>	<b>11</b>
Learning Disability	Commissioning	4	3							4	3
	Provider Services	0	0							0	0
	<b>LD Total</b>	<b>4</b>	<b>3</b>							<b>4</b>	<b>3</b>
Strategic & Corporate	Direct Payments	0	0							0	0
	Safeguarding	0	0							0	0
	Care Direct	1	0							1	0
	Client Finance	0	1							0	1
	ACS Policy	1	1							1	1
	DOLS/MCA	0	0							0	0
	Sensory Team	0	0							0	0
	Supporting People	0	0							0	0
	Finance & Business Support	0	1							0	1
	<b>Strategic &amp; Corporate Total</b>	<b>3</b>	<b>3</b>							<b>3</b>	<b>3</b>
In-House	Dom Care	1	0							1	0
	Residential Care	4	0							4	0
	Respite Care	0	0							0	0
	Day Care	2	0							2	0
	Reablement	0	0							0	0
	Intermediate Care	0	0							0	0
	<b>In-House Total</b>	<b>7</b>	<b>0</b>							<b>7</b>	<b>0</b>
Mental Health	Mental Health Services	0	0							0	0
	<b>Mental Health Total</b>	<b>0</b>	<b>0</b>							<b>0</b>	<b>0</b>
External Providers	Chapter Care	1	0							1	0
	Apetito	1	0							1	0
	South West Homes Ltd	1	0							1	0
	Braunton Mobility Centre	1	0							1	0
	<b>External Providers Total</b>	<b>4</b>	<b>0</b>							<b>4</b>	<b>0</b>
<b>All comments across ACS</b>		<b>25</b>	<b>17</b>							<b>25</b>	<b>17</b>

**5.3** Representations should be responded to in full within 20 working days of first receipt by the Council. Within this report performance is measured against this target. In Qtr 1 94% of MP Letters were responded to within this deadline. However, only 89% of all other representations were responded to within the defined timescale. This falls significantly below the required standard and is an area where improvement is needed.

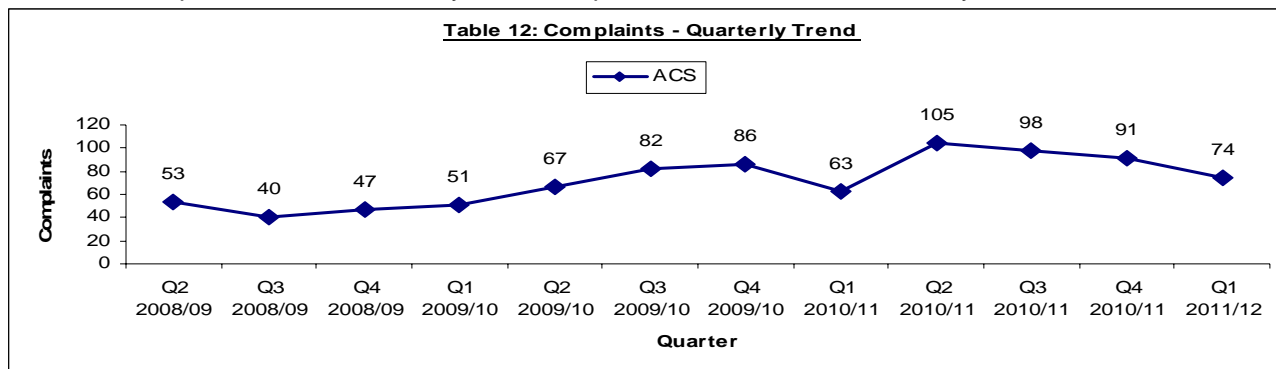
**5.3.1** Table 12 below provides these details for the period 1<sup>st</sup> April – 30<sup>th</sup> June 2011

<b>Table 12: Representations responded to within 20 working days</b>						
	QUARTER 2011-12				Total Year	
	Q1	Q2	Q3	Q4		
Comments exc MP Letters	89%				<b>89%</b>	
MP Letters	94%				<b>94%</b>	
<b>Total</b>	<b>91%</b>				<b>91%</b>	

## 6. Complaints

6.1 A total of 74 complaints were received in Qtr 1 (1<sup>st</sup> April – 30<sup>th</sup> June 2011) this represents a decrease of 17 complaints from the previous last quarter

6.1.2 Table 13 provides the trend analysis for complaints received over the last 3 years.



6.1.3 Within Qtr 1 10 of these 74 complaints were subsequently recorded as NFA for various legitimate reasons and the remaining 64 complaints progressed to be investigated and responded to via one of the agreed options A – E.

6.1.4 Therefore, as well as the number of complaints received falling by 7 from the previous quarter the number that actually required a full investigation also fell from 78 last quarter to 64 in this quarter.

Table 14 below details the reasons for the NFA's in this quarter.

Reason for NFA	Q1	Q2	Q3	Q4	YTD
Not Eligible	0				0
Passed to other agency	0				0
Withdrawn by Complainant	4				4
Passed to External Provider	1				1
Moved to other process e.g SA	5				5
<b>Total NFAs</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>10</b>

6.2. Table 15 below provides a summary of complaints that we have received regarding Independent Providers in this quarter (1<sup>st</sup> April– 30<sup>th</sup> June 2011)

Each issue within a complaint is listed separately where there is more than one.

	Quarter 1												Year to Date 2011-12																		
	Information	Communication	Access to files	Staff Conduct	Delays	Eligibility for Service	Appropriateness of Service	Decisions and Policy	Timeliness	Funding & Charges	Service not Delivered	Total no. of issues	No. complaints investigated by EXP	No. complaints investigated by ACS	Total no. of complaints	Information	Communication	Access to files	Staff Conduct	Delays	Eligibility for Service	Appropriateness of Service	Decisions and Policy	Timeliness	Funding & Charges	Service not Delivered	Total issues YTD	Investigated by EXP	Investigated by ACS	Total complaints YTD	
<b>External Provider</b>																															
Care Time	0	0	0	1	0	0	1	1	0	0	0	3	1	1	2	0	0	0	1	0	0	1	1	0	0	0	3	1	1	2	
Carrington Care	0	0	0	1	0	0	0	0	0	0	0	1	0	1	1	0	0	0	1	0	0	0	0	0	0	0	1	0	1	1	
New Care Devon	0	0	0	3	0	0	2	0	0	0	0	5	0	1	1	0	0	0	3	0	0	2	0	0	0	5	0	1	1		
<b>All External Providers</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>9</b>	<b>1</b>	<b>3</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>9</b>	<b>1</b>	<b>3</b>	<b>4</b>		

- 6.3 Of the 64 complaints that we have registered and investigated in Qtr 1 (1<sup>st</sup> April – 30<sup>th</sup> June 2011) 29 were about OPPD services, 9 about LD Services, 5 about Strategic & Corporate services, 18 about In House Services and 3 about External Providers.

Table 16 provides details.

Division	Q1	Q2	Q3	Q4	YTD
OPPD	29				29
Learning Disability	9				9
Strategic & Corporate	5				5
In-House	18				18
External Providers	3				3
Mental Health	0				0
<b>ACS Total</b>	<b>64</b>				<b>64</b>

- 6.3.2 In quarter 1 (1<sup>st</sup> April – 30<sup>th</sup> June 2011) 24 complaints were received with regard to functions within the CCTs a decrease of 3 complaints from the previous quarter. There have been 5 complaints in regard to CDP in this quarter whereas in quarter 3 there were only 7.

- 6.3.3 Within Learning Disability services in quarter 1 there were 5 complaints about commissioned services, as opposed to 9 in the previous quarter. The other 4 complaints were about provider services, an increase off 100% from quarter 4.

- 6.3.4 Within Strategic & Corporate Services there have been 5 complaints in Qtr 1 as opposed to 9 in Qtr 4.

- 6.3.7 Within In-House Provider Services 18 complaints were received in quarter 1 this is 2 more than in the previous quarter and accounted for almost entirely by complaints about residential care.

- 6.3.8 In Qtr 1 ACS investigated 3 complaints about external providers who we commission services from. This is a significant decrease from 10 in the previous quarter.

- 6.3.9 Table 17 below provides details of complaints received within each service area of each division.

Division	Service Area	Q1	Q2	Q3	Q4	total year
OPPD	CCT	24				24
	CDP	5				5
	Rapid Response	0				0
	<b>OPPD Total</b>	<b>29</b>				<b>29</b>
Learning Disability	Commissioning	5				5
	Provider Services	4				4
	<b>LD Total</b>	<b>9</b>				<b>9</b>
Strategic & Corporate	Direct Payments	1				1
	Safeguarding	0				0
	Care Direct	4				4
	Client Finance	0				0
	Supporting People	0				0
	<b>Strategic &amp; Corporate Total</b>	<b>5</b>				<b>5</b>
In-House	Dom Care	1	0	0	0	1
	Residential Care	14	0	0	0	14
	Respite Care	2	0	0	0	2
	Day Care	1	0	0	0	1
	Reablement	0	0	0	0	0
	<b>In-House Total</b>	<b>18</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18</b>
External Providers	Dom Care	3				3
	<b>External Providers Total</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>
	<b>Mental Health Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>All complaints across ACS</b>		<b>64</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>64</b>

**6.3.10 Appendix 1** provides a breakdown of complaints received by each division by service area and type of service complained about.

**6.4.** There is an increasing trend for each complaint received to be more complex than in previous years and this is a trend that has come to the notice of the Customer Services & Complaints team. It is becoming less likely that a complaint is only about one issue and most complaints now “tell a story” with points within that story where, in the complainants view, errors have been made which often lead to further errors or delays. The impact of this is that the more complex a complaint is the more staff time and resource is needed to investigate thoroughly and provide an appropriate response. This in turn is likely to lead to a greater number and more detailed actions being required.

**6.4.1** The most frequently complained about issues in this quarter are; Appropriateness of services 41% of issues complained about, Communication 18%, Staff Conduct 14.5% and Delays 6.5% of issues complained about.

**6.4.2 Table 18** below provides a full breakdown of the issues complained about in this quarter.

Nature of complaint	Q1	Q2	Q3	Q4	YTD
Access to files	0				0
Appropriateness of Service	96				96
Communication	43				43
Decisions	10				10
Delays	15				15
Discrimination	1				1
Eligibility for Service	8				8
Funding	9				9
Honesty & Integrity	1				1
Information	11				11
MCA/DOLS/IMCA	0				0
Service not delivered	6				6
Staff conduct	34				34
Timeliness	0				0
<b>TOTAL</b>	<b>234</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>234</b>

**6.5** In this quarter (1<sup>st</sup> April – 30<sup>th</sup> June 2011) 64 complaints have progressed to being investigated under one of our options A – E.

**6.5.1 Table 19** below provides information on how many complaints were investigated under each of the options available.

		Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total YTD
<b>Option A Same day</b>	Received in Quarter	11				11
	Responded to in Quarter	11				11
	No. of agreed extended time scales	0				0
	Responded to within agreed time scales	11				11
	Responded to out of time	0				0
	% within time	100%				100%
	Average days to respond	1				1
<b>Option B 10 days</b>	Received in Quarter	24				24
	Responded to in Quarter	25				25
	No. of agreed extended time scales	2				2
	Responded to within agreed time scales	22				22
	Responded to out of time	3				3
	% within time	88%				88%
	Average days to respond	11				11

<b>Option C 20 days</b>	Received in Quarter	25				<b>25</b>
	Responded to in Quarter	28				<b>28</b>
	No. of agreed extended time scales	13				<b>13</b>
	Responded to within agreed time scales	23				<b>23</b>
	Responded to out of time	5				<b>5</b>
	% within time	82%				<b>82%</b>
	Average days to respond	25				<b>25</b>
<b>Option D 1-3 months</b>	Received in Quarter	3				<b>3</b>
	Responded to in Quarter	5				<b>5</b>
	No. of agreed extended time scales	2				<b>2</b>
	Responded to within agreed time scales	4				<b>4</b>
	Responded to out of time	1				<b>1</b>
	% within time	80%				<b>80%</b>
	Average days to respond	52				<b>52</b>
<b>Option E 2-6 months</b>	Received in Quarter	1				<b>1</b>
	Responded to in Quarter	1				<b>1</b>
	No. of agreed extended time scales	1				<b>1</b>
	Responded to within agreed time scales	0				<b>0</b>
	Responded to out of time	1				<b>1</b>
	% within time	0%				<b>0%</b>
	Average days to respond	116				<b>116</b>
<b>All Options</b>	Received in Quarter	64	0	0	0	<b>64</b>
	Responded to in Quarter	70	0	0	0	<b>70</b>
	No. of agreed extended time scales	18	0	0	0	<b>18</b>
	Responded to within agreed time scales	60	0	0	0	<b>60</b>
	Responded to out of time	10	0	0	0	<b>10</b>
	% within time	86%				<b>86%</b>

**6.5.2** A total of 70 complaints have been responded to within the quarter, 60 of them within the prescribed timescales (86% within timescale agreed with complainant). This included 18 where an extended timescale was successfully negotiated with the complainant.

**6.5.3** However there were still 10 complaints that were responded to “out of time” meaning that either the member of staff responsible did not seek to negotiate an extension with the complaint or even when an extension was agreed we breached that extended timescale.

**6.6 Table 20** below shows the response times for complaints responded to by division.

	Quarter 1				Total Year			
	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale
<b>Division</b>								
OPPD	30	5	35	86%	<b>30</b>	<b>5</b>	<b>35</b>	<b>86%</b>
Learning Disability	5	2	7	71%	<b>5</b>	<b>2</b>	<b>7</b>	<b>71%</b>
Strategic & Corporate	5	2	7	100%	<b>5</b>	<b>2</b>	<b>7</b>	<b>71%</b>
In-House	15	2	17	88%	<b>15</b>	<b>2</b>	<b>17</b>	<b>88%</b>
Mental Health	0	0	0	n/a	<b>0</b>	<b>0</b>	<b>0</b>	<b>n/a</b>
External Providers	6	0	6	100%	<b>6</b>	<b>0</b>	<b>6</b>	<b>100%</b>
<b>ACS Total</b>	<b>61</b>	<b>11</b>	<b>72</b>	<b>85%</b>	<b>61</b>	<b>11</b>	<b>72</b>	<b>85%</b>

**Appendix 2** provides this information by division and service area within each division.  
**Appendix 3** provides response times for each cluster within CCTs.

**6.6.1** Within the new complaints regulations the only prescribed timescale is that of a requirement to acknowledge a complaint within 3 working days of receipt. As can be seen from the table below (**Table 21**) we have acknowledged 93% of complaints received in Qtr 1 (1<sup>st</sup> April – 30<sup>th</sup> June 2011) within 3 working days.

The majority of complaints are received by the customer services and complaints team and as such the main responsibility for this target is theirs. The problem arises when complaints are initially received elsewhere in the Directorate and are forwarded to the Customer Services Team but not acknowledged where received. By the time they reach the Customer Services Team they are often outside of the 3 working days.

Table 21	Quarter 1				Total YTD			
Acknowledgements	<=3 working days	>3 working days	Total acknowledged	% within 3 working days	<=3 working days	>3 working days	Total acknowledged	% within 3 working days
Division								
Customer Services	42	3	45	93%	42	3	45	93%
Director/CEX	1	0	1	100%	1	0	1	100%
OPPD	4	0	4	100%	4	0	4	100%
Learning Disability	3	1	4	75%	3	1	4	75%
Strategic & Corporate	5	0	5	100%	5	0	5	100%
In-House	14	1	15	n/a	14	1	15	n/a
Mental Health	0	0	0	n/a	0	0	0	n/a
<b>ACS Total</b>	<b>69</b>	<b>5</b>	<b>74</b>	<b>93%</b>	<b>69</b>	<b>5</b>	<b>74</b>	<b>93%</b>

**6.7** The next section in this report provides tables showing details for Qtr 1  
 Where complaints are received within the directorate (**Table 22**) - In what format we receive complaints (**Table 23**) - Who makes the complaints (**Table 24**)

Table 22:					
Complaint Received By	Quarter Complaint Received				2011-12
	Q1	Q2	Q3	Q4	
Customer Services	26				26
Customer Service Centre	11				11
Care Direct Plus	1				1
Within Clusters/Localities	30				30
Director	3				3
Chief Executive	2				2
Finance	1				1
<b>ACS TOTAL</b>	<b>74</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>74</b>

Table 23					
Format of Complaint	Quarter Complaint Received				2011-12 Total
	Q1	Q2	Q3	Q4	
Complaint Form	8				8
DCC Web form	4				4
E-Mail	8				8
In Person	6				6
Letter	25				25
Telephone	23				23
<b>ACS TOTAL</b>	<b>74</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>74</b>

Who Made Complaint	Quarter Complaint Received				2011-12 Total
	Q1	Q2	Q3	Q4	
Carer	0				0
Family Member	49				49
Friend/Neighbour	0				0
Legal Representative/Guardian	1				1
Spouse	2				2
Other Professional Agency	5				5
Service User	16				16
Member of the public	1				1
<b>ACS TOTAL</b>	<b>74</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>74</b>

**6.7.1** From these tables it can be seen that in Qtr 1 the majority of complaints were received from a family member (66%) or the service user (22%). Either by Letter (34%) or by telephone (31% each). 40.5% of these complaints were received within clusters or localities, 35% direct to the customer services team and a further 15% to customer services team via the CSC.

## **7. Complaint Outcomes**

**7.1** For each complaint that is investigated one of the first things we determine is what the complainant's desired outcomes from the complaint are. If a desired outcome is not possible for clearly defined reasons then this will be established at the triage stage and then explained to the complainant when discussing & agreeing the Complaint Resolution Plan.

**7.1.2** From **Table 25** below it can be seen that complainant's desired outcomes are varied and in this quarter the most requested were for us to change / improve a service requested in 30% of complaints, provide an explanation was stated in 15% of complaints, ensure it does not happen again or to send required information which were both requested in 11% of complaints.

Desired Outcome of Complainant	Quarter Complaint Received				2011-12 Total
	Q1	Q2	Q3	Q4	
Address Confidentiality	1				1
Alter Records	1				1
Apology	1				1
Change/Improve the Service	30				30
Ensure that this does not happen again	11				11
Explain A Process/Delay/Decision	15				15
Financial redress	0				0
Funding Issues	7				7
Improve Communication	7				7
Improve Information	0				0
Not Stated/Blank	0				0
Provide a Service	1				1
Send Required Information	11				11
Staff Conduct	8				8
Provide assessment	6				6
<b>ACS TOTAL</b>	<b>99</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>99</b>

**7.1.3.** The 70 complaints responded to in the quarter have generated a total of 300 complaint issues to be investigated. Of these 124 (49%) were fully or partially upheld, in 24 issues there was no finding able to be made (9%) and 106 (42%) were not upheld.

<b>Table 26: Outcomes of Complaints</b>					
<b>Individual issues Upheld/Justified?</b>	<b>Quarter Complaint Resolved</b>				<b>2011-12 Total</b>
	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	
No - Not Upheld	106				106
Yes - Upheld	72				72
Partially Upheld	52				52
No finding	24				24
Blank issues (CMF not received)	32				32
Closed / NFA	14				14
<b>ACS TOTAL</b>	<b>300</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>300</b>

## 8. Learning from Complaints

**8.1** The DH Regulations and our regulators CQC require us to be able to demonstrate and evidence that we learn from the feedback we receive from our customers and that we use the outcome of complaints to implement actions that contribute to improvement in our services and inform future commissioning intentions. Furthermore that we inform complaints and more widely publicise the results of actions we take and the improvements we make.

**8.2** Within the Customer Services Team we are working with colleagues within divisions to ensure that the actions that arise from complaints are appropriate, relevant, implemented and that wider organisational learning is promoted where necessary.

**8.3** In this quarter (1<sup>st</sup> April – 30<sup>th</sup> June 2011) as a result of complaints we have

- Waived the fee for 2 nights respite at Beech House - £171.24
- Waived the fee for 2 weeks respite at Alphin House - £1198.68
- Refund of respite fees at Arthur Roberts House - £191.81
- Waived a fee for Dom Care amounting to £42.84 as the Service User was not informed correctly about the eligibility for Reablement and had to have Dom Care in the interim on discharge from hospital

**8.3.2** One complaint has resulted in consideration being given to reviewing the information provided to service users & their families regarding the different reviews undertaken within residential units and by care management, ensuring that the scope, timeframes and limits of all types of reviews are explained clearly in order that the expectations of service users and their families are managed appropriately.

**8.3.3** There have been several actions relating to the need for training / re-training for staff – including

- Ensuring staff in the Exmouth & Budleigh CCT are up to date with conflict resolution training
- Retraining for staff in basic customer care / communication
- Ensure that all managers are aware of the expected process & procedures in relation to safeguarding and that staff complete safeguarding training
- Staff at Davey Court Residential home to retrain in understanding care plans and their use
- Staff at Daw Vale Residential home to receive training in awareness of presentation of UTI, to undertake medication training and those already trained to be reviewed

**8.3.4** There have been several complaints about delays in undertaking assessments and as a result the following actions were required:

- Apologies for non communication to people as to fact they are on a waiting list
- Explanations for delays
- CCT staff reminded to pass requests for financial assessments to CFS in a timely manner
- Reminder to Practice Managers that waiting list letter must be sent if a delay of over 28 days is anticipated.

## **9. Local Government Ombudsman Investigations**

**9.1** In Qtr 1 (1<sup>st</sup> April – 30<sup>th</sup> June 2011) There have been 4 complaints registered with the Local Government Ombudsman about Adult Social Care.

**9.1.2** 1 of these has been closed by the Ombudsman following a discussion with us about the case and recorded as premature.

**9.1.3** 3 have moved to a full investigation and the council has responded to the Ombudsman request for information – decisions are outstanding on both of these.

- Mrs R has complained about the outcome of a safeguarding investigation not being concluded upon the death of her mother & as such she never found out if the allegations against her were substantiated. In addition that the Best Interest and safeguarding meetings were confused with each other & invites / minutes not circulated appropriately
- Mrs W complaining about support / reviews / monitoring provided by the Council for her son in a Learning Disability Residential Home – especially as she had raised concerns and safeguarding alerts
- Mr DM has complained about the safeguarding procedure in relation to him and the inaccuracy of the minutes that were issued and the effect this has had on how other organisations are treating him.

**9.2** The complaint from Mr G has been concluded and the Council agreed to refund 50% of the 3<sup>rd</sup> Party contributions for a period of time – This amounted to £3187.01 and has been paid in full & final settlement

**9.3** The complaints received in quarter 3 09/10 by; Mr B regarding the discharge process for his mother and the appropriateness of the care placement has been concluded and there was no maladministration on the part of the Council

**9.4** The complaint from quarter 2 09/10 by Mr & Mrs H is still under investigation by both the LGO and the PHSO.

**Carol Hayman**  
**Customer Services Manager**  
**September 2011**

**APPENDIX 1 – COMPLAINTS BY SERVICE AREA & TYPE**

Division	Service Area	Type of service	Q1	Q2	Q3	Q4	Yr Total	
OPPD	CCT	Assessment	8				8	
		Review	0				0	
		Financial support/advice	3				3	
		Hospital discharge support	0				0	
		Placement support/advice	2				2	
		Placement funding	0				0	
		Workload management	0				0	
		Liaising with other teams/agencies	0				0	
		Equipment support/advice	0				0	
		Safeguarding	1				1	
		Service support/advice	9				9	
		Panel	1				1	
		<b>Total CCT</b>	<b>24</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>24</b>
		CDP	Assessment	4				4
	Review		0				0	
	Signposting		0				0	
	Equipment support/advice		0				0	
	Direct Payments		0				0	
	Liaising with other teams/agencies		0				0	
	Financial support/advice		1				1	
	<b>Total CDP</b>		<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>
	Rapid Response	Personal care	0				0	
		Sit-in services	0				0	
		Provision of Meals on Wheels	0				0	
Provision of aids/equipment		0				0		
Supervised tasks by Nurse/OT		0				0		
<b>Total Rapid Response</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>Total OPPD</b>			<b>29</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>29</b>	

Division	Service Area	Type of service	Q1	Q2	Q3	Q4	YTD
External Providers	Care Time	Dom care	1				1
	New Care Devon	Dom care	1				1
	Carrington Care	Dom care	1				1
	<b>Total External Providers</b>			<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>

**APPENDIX 1 – COMPLAINTS BY SERVICE AREA & TYPE**

Division	Service Area	Type of service	Q1	Q2	Q3	Q4	Yr Total
Learning Disability	Commissioning	Employment	0				0
		Day Services	0				0
		Residential	0				0
		Nursing	0				0
		Supported Living	0				0
		Assessment	1				1
		Review	0				0
		Direct Payments	0				0
		Carer's Services	0				0
		Advocacy	0				0
		Funding appeals process	2				2
		Support/advice	1				1
		Care management support	1				1
		<b>Total Commissioning</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>
	Provider Services	Short Breaks Services	1				1
		Fulfilling Lives	3				3
		Independent Living Units	0				0
		Transport Services	0				0
		<b>Total Provider Services</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>
<b>Total Learning Disability</b>			<b>9</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>9</b>

Division	Service Area	Type of service	Q1	Q2	Q3	Q4	Yr Total	
		Personal Care	1				1	
		Domestic Tasks	0				0	
		<b>Total Dom care</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	
	Residential Care	Homes in Eastern Devon	7				7	
		Homes in Northern Devon	4				4	
		Homes in Southern Devon	3				3	
		<b>Total Residential Care</b>	<b>14</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>14</b>	
	Respite Care	Homes in Eastern Devon	1				1	
		Homes in Northern Devon	1				1	
		Homes in Southern Devon	0				0	
		<b>Total Respite Care</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	
	Day Care	Homes in Eastern Devon	0				0	
		Homes in Northern Devon	1				1	
		Homes in Southern Devon	0				0	
		<b>Total Day Care</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	
	Reablement	Eastern Devon	0				0	
		Northern Devon	0				0	
		Southern Devon	0				0	
		Countywide	0				0	
		<b>Total Reablement</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
	<b>Total In-House Services</b>			<b>18</b>				<b>18</b>

APPENDIX 1 – COMPLAINTS BY SERVICE AREA & TYPE

Division	Service Area	Type of service	Q1	Q2	Q3	Q4	YTD
Strategic & Corporate	Direct Payments	Admin/set up	1				1
		Monitoring	0				0
		<b>Total Direct Payments</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>
	Safeguarding	<b>Process</b>	<b>0</b>				<b>0</b>
	Care Direct	Blue Badge	1				1
		Service provided	3				3
		<b>Total Care Direct</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>
	Client Finance	Financial Assessment	0				0
		Client visiting service	0				0
		Income collection/invoicing	0				0
		Court of Protection team	0				0
		<b>Total Client Finance Services</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	ACS Policy	<b>Process</b>	<b>0</b>				<b>0</b>
	DOLS/MCA	<b>Process</b>	<b>0</b>				<b>0</b>
	Sensory Team	Service advice	0				0
		Assessment	0				0
		Skills training	0				0
		Counselling services	0				0
		Advocacy services	0				0
		Provision of aids	0				0
		Carer support	0				0
		<b>Total Sensory team</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	EDT	Liaising with teams/agencies	0				0
		Risk assessment	0				0
		Property/pet safety	0				0
		Welfare checks	0				0
		Care needs assessment	0				0
		Identification of care package	0				0
		Mental Health Act assessment	0				0
		Support/advice	0				0
		Appropriate Adult process	0				0
		<b>Total EDT</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Supporting People	<b>Process</b>	<b>0</b>				<b>0</b>	
Management Info	<b>Service provided</b>	<b>0</b>				<b>0</b>	
ACS admin	<b>Service provided</b>	<b>0</b>				<b>0</b>	
Public info team	<b>Service provided</b>	<b>0</b>				<b>0</b>	
Customer Services	<b>Service provided</b>	<b>0</b>				<b>0</b>	
<b>Total Strategic &amp; Corporate</b>			<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>

APPENDIX 2 – RESPONSES TIMES

RESPONSE TIMES	Quarter 1				Quarter 2				Quarter 3				Quarter 4				Total Year			
	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale
<b>OPPD</b>																				
CCT	26	5	31	84%													26	5	31	84%
CDP	4	0	4	100%													4	0	4	100%
<b>OPPD Total</b>	<b>30</b>	<b>5</b>	<b>35</b>	<b>86%</b>													<b>30</b>	<b>5</b>	<b>35</b>	<b>86%</b>
<b>Learning Disability</b>																				
Commissioning	2	2	4	50%													2	2	4	50%
Provider Services	3	0	3	100%													3	0	3	100%
<b>LD Total</b>	<b>5</b>	<b>2</b>	<b>7</b>	<b>71%</b>													<b>5</b>	<b>2</b>	<b>7</b>	<b>71%</b>
<b>Strategic &amp; Corporate</b>																				
Direct Payments	0	1	1	0%													0	1	1	0%
Safeguarding	0	1	1	0%													0	1	1	0%
Care Direct	4	0	4	100%													4	0	4	100%
Client Finance	1	0	1	100%													1	0	1	100%
DOLS/MCA	0	0	0	n/a													0	0	0	n/a
Supporting People	0	0	0	n/a													0	0	0	n/a
Management Info	0	0	0	n/a													0	0	0	n/a
<b>Total</b>	<b>5</b>	<b>2</b>	<b>7</b>	<b>71%</b>													<b>5</b>	<b>2</b>	<b>7</b>	<b>71%</b>
<b>In House</b>																				
Dom Care	1	0	1	100%													1	0	1	100%
Residential Care	11	2	13	85%													11	2	13	85%
Respite Care	2	0	2	100%													2	0	2	100%
Day Care	1	0	1	1													1	0	1	100%
Reablement	0	0	0	n/a													0	0	0	n/a
Intermediate Care	0	0	0	n/a													0	0	0	n/a
<b>In-House Total</b>	<b>15</b>	<b>2</b>	<b>17</b>	<b>88%</b>													<b>15</b>	<b>2</b>	<b>17</b>	<b>88%</b>
<b>External Providers</b>																				
Care Time	2	0	2	100%													2	0	2	100%
Bickleigh Down	1	0	1	100%													1	0	1	100%
HFT	1	0	1	100%													1	0	1	100%
New Care Devon	1	0	1	100%													1	0	1	100%
Carrington Care	1	0	1	100%													1	0	1	100%
<b>Ext Providers Total</b>	<b>6</b>	<b>0</b>	<b>6</b>	<b>100%</b>													<b>6</b>	<b>0</b>	<b>6</b>	<b>100%</b>
<b>Mental Health</b>																				
Exeter & East	0	0	0	n/a													0	0	0	n/a
<b>Mental Health Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>n/a</b>													<b>0</b>	<b>0</b>	<b>0</b>	<b>n/a</b>
	<b>61</b>	<b>11</b>	<b>72</b>	<b>85%</b>													<b>61</b>	<b>11</b>	<b>72</b>	<b>85%</b>

### Appendix 3

Appendix 6: Response times by Cluster

Area	Cluster	Quarter 1				Quarter 2				Quarter 3				Quarter 4				Total YTD							
		Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale	Within timescale	Outside timescale	Total responded to	% within timescale				
Northern	Axe Valley, Seaton, Sidmouth	2	0	2	100%																	2	0	2	100%
	Crediton, Cullompton & Okehampton	1	0	1	100%																	1	0	1	100%
	Exeter St Edmunds	4	1	5	80%																	4	1	5	80%
	Exeter Sycamores	2	0	2	100%																	2	0	2	100%
	Exmouth & Budleigh	2	0	2	100%																	2	0	2	100%
	Honiton & Ottery St Mary	0	0	0	n/a																	0	0	0	n/a
	Tiverton	0	1	1	0%																	0	1	1	0%
	Barnstaple	3	0	3	100%																	3	0	3	100%
	Braunton area	2	0	2	100%																	2	0	2	100%
	Torrige	2	1	3	67%																	2	1	3	67%
	<b>Total Northern Devon</b>	<b>18</b>	<b>3</b>	<b>21</b>	<b>86%</b>	<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>18</b>	<b>3</b>	<b>21</b>	<b>86%</b>
Southern	Dawlish & Teignmouth	2	0	2	100%																	2	0	2	100%
	Newton Abbot	2	0	2	100%																	2	0	2	100%
	Ivybridge & Kingsbridge	1	0	1	100%																	1	0	1	100%
	Tavistock	1	1	2	50%																	1	1	2	50%
	Teign Valley & S Dartmoor	0	0	0	n/a																	0	0	0	n/a
	Totnes & Dartmouth	2	1	3	67%																	2	1	3	67%
	<b>Total Southern Devon</b>	<b>8</b>	<b>2</b>	<b>10</b>	<b>80%</b>	<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>8</b>	<b>2</b>	<b>10</b>	<b>80%</b>
<b>Total for all Clusters</b>	<b>26</b>	<b>5</b>	<b>31</b>	<b>84%</b>	<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>		<b>26</b>	<b>5</b>	<b>31</b>	<b>84%</b>	