

Bournemouth Adult Social Care Compliments, Complaints & Customer Feedback Annual Report 2018/2019

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1 INTRODUCTION

- 1.1 This report is produced in accordance with the NHS and Community Care Act 1990 and The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 which require Local Authorities to set up and operate a Social Care complaints procedure including an annual report.
- 1.2 The Annual Report has been prepared by the Complaints Team to provide a mechanism by which Bournemouth Council can be kept informed about the operation of its complaints procedure. This report will be made available to staff, elected members, the general public and inspection bodies. The Annual Report is a key element in ensuring that Adult Social Care is open to challenge when there is dissatisfaction with any of its services. As part of its customer care strategy the service is committed to listening to the service user and thereby driving service improvement.
- 1.3 Should complainants not be satisfied with the outcome of any investigation or feel that the local authority has not dealt with the matter correctly they may take their complaint to the Local Government and Social Care Ombudsman.

2 THE COMPLAINTS PROCESS

- 2.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 does not have a prescriptive procedure for managing complaints but requires that a two-stage process is in place which allows flexibility for the authority in customising complaints investigation and gives recourse to the Local Government Ombudsman should the complainant be dissatisfied with the response.

The removal of set timescales and adherence to a directive process have had a positive effect on complaints handling including

- agreement of realistic timeframes for investigation and response to complaints.
- achievement of greater level of engagement with complainants.
- agreement with the complainant about how the complaint will be investigated.
- swift identification and early resolution of complaints.
- appropriate complaints investigation immediately i.e. local management investigation, independent investigation, mediation, face to face meetings etc.

3 ROLES AND RESPONSIBILITIES

3.1 Complaints Manager and Complaints Officers

The Department of Health Guidance requires local authorities to have a Complaints Manager who is responsible for the management of the procedure, records compliments, registers complaints, monitors their progress and, where necessary, appoints Independent Investigators/People. The Complaints Manager is also responsible for ensuring that Bournemouth has a robust complaints procedure. Training is available to teams and is regularly offered by the Complaints Manager as well as through the Authority's e-learning portal. The Complaints Manager is also available to support and advise staff to ensure that best practice is followed.

In order to contribute effectively to service development, the Complaints Management function for Bournemouth Borough Council was based within the Community Learning and Commissioning business unit, independent of social care operational line management and of direct service providers. This is in line with Department of Health Guidance "Learning from Complaints" (2006).

Bournemouth Borough Council employed 2 full time Complaints Managers, whose roles were to process and manage complaints regarding Adult Social Care, Schools, SEN, Children, Young People and Families Services and Community Learning and Commissioning.

3.2 Operational Managers, Service Managers and Service Directors

Operational Managers and Service Managers are frequently responsible for investigating complaints at local resolution level. Where complaints are moved to independent investigation the Service Director is responsible for responding to the findings of external investigators and where appropriate show how services are improved as a result.

Managers also ensure compliments are valued, communicated effectively and good practice disseminated.

3.3 External Investigators/Independent People

If complaints are not resolved at an early point or require independent investigation (for example, if the complaint is extremely complex or the authority's relationship with the complainant has broken down) an independent investigator will be appointed. In some cases, an independent person may also be appointed. This independent person helps the service user understand the investigation process, assists them with explaining their complaint and ensures their views are taken fully into account. The Complaints Team has a number of people who it commissions to do this work on a sessional basis. All have

considerable experience to enable them to undertake investigations and recommend resolutions. An enhanced DBS check is made for all investigators and independent people.

3.4 Advocacy Services

Bournemouth Adult Social Care continues to contract with a number of local advocacy providers to ensure that any vulnerable person wishing to make a complaint can be appropriately supported

4 ACCESS TO COMMENTS AND COMPLAINTS INFORMATION

- 4.1 Information about how to complain or comment on services is available on the BCP website, in factsheet form (with versions for those requiring Easy Read), large print, Braille, on tape and can be translated into different languages as required. There is a Minicom service to enable service users who have speech or hearing difficulties to communicate about their complaint or compliment. The Council's website includes a facility to email complaints. Complainants may also telephone, write or meet with the Complaints Team to give their complaint or give their complaint directly to their worker or advocate.

5 PROGRESS 2018/2019

- 5.1 Having not identified a suitable alternative programme, excel will continue to be used going forward into 2019/20 alongside an electronic filing cabinet. To date, this has provided a cost-effective system that has shown to be more than adequate for the needs of the department. This also enables the complaints office to remain a paperless environment, so promoting confidential and efficient working. However, a new piece of software to manage social care records, (MOSAIC) has been implemented over services. This is providing the Complaints Team with the opportunity to record data directly to service users' records.
- 5.2 The Complaints Team have discussed recruitment and training for external investigators with neighbouring Authorities and this will be continually monitored during 2019/20.
- 5.3 Along with one to one support available to staff, an on-line training module covering the complaints process is available to all ASC staff. This is a bespoke training module, available through i-learn (the on-line training portal for staff.) The module offers a flexible and sustainable approach to training for the future, easily accessible to staff at all levels and with the facility to monitor uptake.
- 5.4 During the current year the Complaints Team has continued to engage with the National and Regional Meetings of the National Complaints Managers Group and the Southern Region Complaints Managers Group to ensure that Bournemouth's policy is in line with that of other authorities. This also allows the Complaints Team to keep up to date with possible changes to procedures.

- 5.5 The National Complaints Managers' Group has developed good practice guidance for officers within the complaints profession and this was published in June 2016. This guidance demonstrates that officers who handle complaints across local authority's social care services are committed to the highest standards and it serves as a benchmark for measuring quality. As such the Complaints Team has used this guidance to document and evidence that best practice is fully adopted within the Authority.
- 5.6 The Complaints Team are located within the North Bournemouth Local Office and continue to share office space with the Compliance Team. This relationship has continued to work well and has provided invaluable liaison between teams.
- 5.7 During 2018/19, despite feedback forms being readily available to all customers making a complaint, feedback by complainants has remained low. The Complaints Team will continue to encourage future feedback which may be used to facilitate service development.

6.0 Compliments

A very positive aspect of the responsibility of the Complaints Manager is the recording and reporting of compliments received by Adults' Social Care Teams.

During the year staff have received a total of **98** compliments (**92** external and **6** internal) and it is rewarding to be able to report these, demonstrating that the hard work of staff and their commitment is valued and appreciated by the people they support.

- 6.1 Compliments received by teams during the reporting period are recorded in the table below. Compliments are recorded by team; if they are internal or external to the Authority and if they are directly from the service user or third party (for example, a family member or professional).

Team	2018/19	Internal	External	Service User	Third party
Bournemouth Enablement Team	4		4	2	2
Community Mental Health Team	1		1	1	
Drug and Alcohol Statutory Team	1		1		1
Finance and Benefits Team	10	1	9	1	9
Hospital Social Work	11	1	10	0	11
Learning Disability	11		11	1	10
Locality	4		4	1	3
Locality Central	19		19	6	13
Locality East	18	2	16	3	15
Locality North	6		6	2	4
Shared Lives	1		1		1
Statutory Services	6	1	5		6

Joint Compliments/Other	6	1	5	2	4
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A sample of the compliments:

For the Bournemouth Enablement Team

"Thank you so much for arranging the care package for my mother, I am absolutely delighted. It is a great weight of my mind to know that someone from outside the family will be going in to the flat on a regular basis to ensure all is well in the morning. Thank you again."

For the Finance and Benefits Team

"Thank you so much for your visit to see us re my husbands' financial assessment. It was very kind of you. Thank you so much for your time and effort in explaining everything to me. It is nice to know these services are there if and when we want them."

For the Hospital Social Work Team

"I just wanted to say how grateful I and my family are for all your hard work in organising mum's placement. I know it hasn't been straightforward, but I do appreciate your persistence."

For the Learning Disability Team

"Just wanted to take this opportunity to thank you so much for all your kindness, support, expertise and information that you have given S, my family and myself over all these months. It really has been an 'experience ' for all of us and your professionalism and empathy has been so very valued. I wish you happiness, health and success for your future."

For the Community Central Team

"I write to express my appreciation of the visiting of my late aunt, by P. I especially appreciate the subsequent care and support plan review document by P. It was so very reassuring, and I wish to make mention of the thoroughness with which she addressed every point to be addressed fulsomely. P didn't stint and fulfilled whatever was required and left one assured that she was satisfied and by listening, so was I. You are fortunate to have her."

For the Community East Team

"These two charming ladies visited our home on Tuesday and reassured me that everything would be done to help me along the way. This is a tremendous relief, I know I am lucky with a wonderful daughter, good friends and neighbours but I do get extremely tired and my husband is hard to deal with. Having gone on about all that, the main reason for this letter is to thank you and all concerned for the excellent work you do for the old people of Bournemouth. We are both in our eighties and we fell that we can ask for help when it is needed. We are indeed very lucky to live in the Bournemouth area."

For the Community North Team

"Everything was dealt with perfectly, whoever I spoke with was kind, helpful and patient with my stutter. I am disabled, and everything was taken into consideration, everybody involved in this job was very thoughtful. I can't thank everyone enough for making my forever home my perfect home."

For the Statutory Services Team

“The family have thanked P for her role in resolving a serious family issue and have complimented her on this positive outcome due to her interventions. P thank you for your good work!”

7 COMPLAINTS RECEIVED BETWEEN 1st APRIL 2018 AND 31st MARCH 2019

- 7.1 **114** complaints were received between 1st April 2018 and 31st March 2019. This figure includes 7 corporate complaints.

There were a further 24 concerns recorded. Concerns included 7 MP enquiries, and 6 safeguarding concerns.

Councillor and MP enquiries are not treated as formal complaints unless the service user authorises the Councillor/MP to act as their representative to formally complain on their behalf, although a response is provided to the enquiry. All service users are now offered the complaints process in the acknowledgement/consent letters sent when an enquiry is received if they have not already complained to us directly.

A further 76 general enquiries were also recorded for this period.

There has been an increase of 2 complaints between 2017/18 and 2018/19, but a decrease of 5 in the number of concerns received.

- 7.2 The Complaint Categories shown in the table below gives the reasons for the complaints:

Complaint Category	2017/ 18	% of Total	2018 /19	% of Total
Standard of service (general rather than specific staff member)	33	30%	33	29%
Staff Attitude / behaviour / standard of service (individual)	21	19%	17	15%
Change of Policy	6	5%	13	11%
External Provider	16	14%	13	11%
Complaint about Charging / Finance	20	17%	12	11%
Delay	3	3%	7	6%
Disputing decision (eligibility / assessment outcome etc)	7	6%	7	6%
Safeguarding	3	3%	2	2%
Application of policy	2	2%	5	4%
Lack of available service			3	3%
Data Protection / Inappropriate information sharing	1	1%	1	1%
Objecting to change or closure			1	1%

Where complaints were substantiated appropriate actions were taken to change process or improve practice. Significant areas to note from the themes of complaint are:

Standard of service (general rather than specific staff member

There has been an 1% decrease in this area year on year although this remains the largest category of complaint. Predominantly communication issues are the main cause of complaint either:

- Ineffective communication between team members.
- Ineffective communication to service users and relatives.

Communication issues will continue to be addressed and improvements made. Learning has been taken forward which has included not only individuals reflecting on their practice but also reviews of procedures relating to staff absences and targeted training.

External providers

There has been a 3% decrease for this area year on year. A significant proportion of the complaints received for this category have been in relation to the quality of care received by the service user. Where fault has been found, work with the care provider, by way of our monitoring service has been undertaken to ensure clients' needs are met.

Change to Policy

A review of policy was undertaken, and changes made to the eligibility for DRE payments. 13 Complaints were received in relation to this matter. Where appropriate, re-assessments were undertaken to ensure that clients were receiving their full entitlements.

- 7.3 Complaints received by teams during the reporting period are recorded in the table below. Comparisons should not be made between the teams as due to the very different work that they carry out it is evident that some teams will be prone to higher levels of complaint than others.

Team	2017/18	% of Total	2018/19	% of Total
Aspergers	3	3%	1	1%
Bournemouth Enablement Team	10	10%	1	1%
Central Community Team			15	12%
Community Mental Health Team	2	2%	3	3%
Contracts	8	8%	5	4%
Commissioning	2	2%	3	3%
Direct Payments	4	4%	3	3%
Deprivation of Liberty's			3	3%
East Community Team			5	4%
Finance and Benefits	8	8%	23	20%
Hospital Social Work Team	9	9%	10	8%
Learning Disability	10	10%	5	4%

Locality	23	21%	1	1%
Long Term Conditions			1	1%
North Community Team			11	9%
Out of Hours			1	1%
Re-assessment			1	1%
Statutory Services	5	5%	5	4%
Transitions	1	1%		
Tricuro	2	2%		
Joint Complaints				
Central / Direct Payment's			1	1%
Central / Finance and Benefits			2	2%
Continuing Health Care / Health			1	1%
Community Mental Health / Tricuro	1	1%		
Commissioning / Statutory Services	1	1%	1	1%
East Locality / Contracts			3	3%
Hospital Social Work / Commissioning	1	1%		
Hospital Social Work / Safeguarding			1	1%
Learning Disability / Finance and Benefits	1	1%	2	2%
Locality / Care Contracts	1	1%		
Locality / Finance and Benefits	9	9%	1	1%
Locality/ Care Contracts/ Hospital Social Work /Statutory Service	1	1%		
Long Term Conditions / Transport			1	1%
North / Finance and Benefits			1	1%
North / Central			1	1%
North / Statutory Service			1	1%
North / Finance and Benefits / Hospital Social Work / Health			1	1%

8 PERFORMANCE AND MANAGEMENT INFORMATION

8.1 Timescales

Timescales for complaint responses are set by the Complaints Team based on the circumstances of the complaint. The manager investigating will be informed of these timescales and all efforts should be made to adhere to them. During the reporting period, 6 complaints were overdue for response. The delays were between 1 and 4 working days. Whilst managers make every effort to maintain timescales, complaints in this area continue to be complex, requiring a full and thorough investigation. These investigations often require meetings with the parties involved, causing delay to the investigation timeline due to participant availability. Any extensions to timescales occur with the consent of the complainant.

Timely responses are an ongoing area to be improved which will continue to be monitored and addressed during 2019/20.

8.2 Complaints Referred to the Ombudsman

The Local Government and Social Care Ombudsman have an intake team who assess any complaint raised with them. They determine, after initial enquiries, whether they will pursue these complaints further.

During 2018/19, 11 enquiries/investigations were received from the Ombudsman.

Of these 11 enquiries, the Ombudsman assessed that 5 required full investigation whereas 6 were found to require no further action once we had provided the Ombudsman with information, or they had made their initial assessment.

Of the cases investigated, 2 were found as no fault on the Council's part. 1 found the Council fully at fault, and 2 remain under investigation. No remedy or redress payments were made during the year.

8.3 Advocacy

No complaints were recorded as having used the service of an advocate.

8.4 Gender of Complainants

The gender of complainants is shown in the table below. Whilst female complainants remain the majority, there has been a significant decrease of 12% in the volume of complaints received year on year. There was a 15% increase in complaints by males.

Gender	2017/18	% of Total	2018/19	% of Total
Male	31	27%	48	42%
Female	77	69%	65	57%
Unknown (anonymous complaint)	0	0%	0	0%
Couples	4	4%	1	1%

8.5 Ethnicity of complainant

The ethnicity of our complainants is shown in the table below. There has been a 7% decrease in complaints from the White British group which is reflected in the complaints received from the ethnic groups listed below.

Ethnicity	2017/18	% of Total	2018/19	% of Total	% of Population
Unknown	30	26%	29	25%	
White British	73	65%	67	58%	84.3%
Any Other	1	1%	3	3%	0.9%

White and Asian					0.5%
White Irish	2	2%	7	6%	0.8%
Any Other White	2	2%	3	3%	7.6%
White Gypsy/Traveller					0.1%
Any Other Black	1	1%	3	3%	1.0%
Any Other Asian			1	1%	3.8%
Mixed/Multiple Ethnic Group	3	3%	1	1%	1%

*Ethnicity may not always be divulged and as such a number of unknown are recorded.

8.6 Method of Receipt

Methods of receipt are shown in the table below. There has been an increase in complaints received via telephone, although complaints received via other sources remain consistent with previous years.

Method	2017/18	% of Total	2017/18	% of Total
Councils feedback form	2	2%	2	2%
Email	72	64%	70	61%
Website contact us form	3	3%	1	1%
Letter / card	30	27%	31	27%
In person	-	-	-	-
Telephone	5	4%	10	9%
Other	-	-	-	-

9 LEARNING AND SERVICE IMPROVEMENT

Feedback via complaints and compliments is a direct link to the process of how we quality assure services in Adult Social Care; utilising both quantitative and qualitative information to inform service improvements and responses to feedback. A key element of quality assurance is the mechanisms to ensure learning arising from areas for improvement is disseminated appropriately to individuals, teams and in the context of the wider service.

Developing communication between services in different business areas is key to disseminating learning, in terms of enabling an effective response to issues and complaints. This includes linking practice, policy and procedure development, staff training, and communication of key messages which effect frontline practice, and ultimately, service delivery for the clients and carers we work with.

An overview of the themes and issues arising from complaints is used to inform training, policy and procedure and audit themes. Individual issues are fed back appropriately to operational teams, however, where

there is opportunity for learning to be of benefit to other teams in the business unit, or where themes occur, there are forums where this information can be shared more generically to improve practice, advise of changes in procedure, and improve service delivery.

- **Staff Advisory Group** has representatives of each team and is a forum for key messages to be communicated. This group meets monthly.
- **Extended Management Team** - management team meet and receive communications affecting the business unit, which can include learning from complaints.
- **Practice Management Forum** – forum which meets bi-monthly to discuss themes arising in practice and communicate any key messages affecting operational service delivery.

9.1 Learning

The Department of Health Guidance asks local authorities to ensure that they report the learning and service improvements implemented as a result of complaints. Some learning was pertinent to individual workers and led to advice and training. Some learning was shared in reminders to staff regarding good practice and some learning led to a review of services and process, this included:

A reminder was made to managers that when requesting evidence for supporting a client's care needs at home that this request should be made on a case by case basis.

A complaint was received relating to delays to a carers assessment. The operational team responsible was addressed to ensure they were aware of how delays impact on both carers and service users. This included a review of the process undertaken by an individual to avoid a recurrence of the issues raised in the complaint. Additionally, changes were made to the process of progressing referrals in the CRM system. This ensures that assessments are carried out in a timely manner in order to avoid unnecessary delays

A review of procedure relating to how the covering of staff during absences is managed, and the how the information is shared with effected service users.

A change of process has been made when accepting new transport requests. This ensures that appropriate transport is available when required.

In a case where complaint was raised relating to incorrect invoicing for third party services, the provider was reminded of their responsibilities to provide information in a timely manner to ensure that invoicing is raised correctly. To date, this has been implemented successfully and no reoccurrences highlighted.

A complaint was received regarding delays and the appropriateness of equipment provided. This resulted in a review of process changing how information regarding sizes of aids are displayed and cascaded to ensure that full information is available as needed and

ensuring that appropriate equipment is provided where needed.

A complainant raised concerns relating to a placement for residential care outside of the Borough. A review of our accreditation procedure has been undertaken and the need to take a flexible approach when care homes are in Christchurch or Poole.

9.2 Complaints Outcome

The following table shows the outcomes of complaints completed during the respective years. There is minimal variance with 2017/18 and the figures remain consistent with previous years.

Outcome	2017/18	% of Total	2018/19	% of Total
Justified	23	20%	22	19%
Not justified	64	58%	64	56%
Partly justified	24	21%	26	23%
Unclear	1	1%	2	2%

The Complaints Manager would like to take this opportunity to thank all complainants for their time and effort in making complaints thus allowing the authority to identify issues and improve services.

10 PLANNED COMPLAINT MANAGEMENT CHANGES AND IMPROVEMENTS 2019/20

- 10.1 Bournemouth Borough Council becomes part of a new Unitary Authority on 1st April 2019. The team will continue to liaise with the other local authorities involved in the process in order to combine best practice and provide a seamless service transition and to align practice.
- 10.2 Part of the service transition includes the management of complaints for the Christchurch area. This will be passed to the Bournemouth team to manage until such time that the Adults Complaints team become a single unit.
- 10.3 The team will continue to review and align its practices with the good practice guidance produced by the National Complaints Managers Group.
- 10.4 The team will continue to liaise with local health providers to further develop and strengthen joint complaint processes.
- 10.5 The team will continue to improve the dissemination of learning improving practices across the Service. This includes working with colleagues within Quality and Complaints across the new Authority to strengthen the embedding of any learning arising from complaints.

- 10.6 Whilst electronic training is readily available for all staff, additional face to face training is to be developed to target specific key areas of complaint.

Customer and community feedback

NHS Digital Adult Social Care User Survey

In January 2019, local authorities with adult social care responsibilities took part in the national annual survey that asks users of adult social care services about their quality of life and how services they receive impact on this.

The survey was sent to all adults in receipt of long-term support services funded or managed by the Council on the date chosen to extract the data. 378 people completed the questionnaire, a 44.7% response rate. The survey informs seven performance measures in the Adult Social Care Outcomes Framework (ASCOF).

Adult Social Care Outcomes Framework (ASCOF) indicators (subject to ratification):

1A – Social care related quality of life

This indicator gives an overarching view of the quality of life (QOL) of service users, out of a maximum score of 24. The measure is an average, composite score based on the responses to eight questions around control, keeping clean/presentable, nutrition, accommodation, safety, social contact, spending their time as they want, and feelings about how they are helped and treated.

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
QOL score	19.3	19.4	↓	19.2 (2017/18 19.0)	19.4 (2017/18 20.1)	TBC	TBC

1B – The proportion of people who use services who have control over their daily life

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
I have as much control over my daily life as I want	81.7%	81.3%	↑	78.8% (2017/18 79.5%)	78.9% (2017/18 81.2%)	TBC	TBC

1I1 – The proportion of service users who report that they have as much social contact as they would like

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
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I have as much social contact as I want with people I like	46.9%	44.7%	↑	42.3% (2017/18 43.8%)	46.5% (2017/18 55.1%)	TBC	TBC
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3A – Overall satisfaction of people who use services with their care and support

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
I am extremely/very satisfied with the care and support services I receive	63.1%	69.8%	↓	60.3% (2017/18 60.2%)	69.8% (2017/18 70.1%)	TBC	TBC

3D1 – The proportion of service users who find it easy to find information about services

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
In the past year, I have generally found it very easy to find information and advice about support, services or benefits	72.4%	78.5%	↓	78.4% (2017/18 75.6%)	71.2% (2017/18 72.7%)	TBC	TBC

4A – The proportion of people who use services who feel safe

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
I feel as safe as I want	69.4%	72.4%	↓	71.1% (2017/18 70.6%)	73.9% (2017/18 78.4%)	TBC	TBC

4B – The proportion of people who use services who say that those services have made them feel safe and secure

Response	2018/19	2017/18	Performance	Poole	Dorset	South West average	England average
Care and support services help me in	83.6%	86.7%	↓	90.8% (2017/18 86.6%)	84.1% (2017/18 88.5%)	TBC	TBC

feeling safe							
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NHS Digital Carers Survey 2018/19

In November 2018 Local Authorities with Adult Social Care responsibilities were invited to take part in a national survey. The aim of the survey is to find out carers' perceptions of the support they receive to perform their caring role. The survey results are used by Adult Social Care and NHS Digital to look at ways to improve service delivery.

The Carers Survey is biennial and informs five performance measures in the Adult Social Care Outcomes Framework (ASCOF).

1D – Carer reported quality of life

This indicator gives an overarching view of the quality of life (QOL) of carers. The measure is an average QOL score which is a composite score based on the responses to six questions relating to occupation, personal care, safety, social participation and encouragement and support.

Response	2018/19	2016/17	Performance	Poole	Dorset	South West average	England average
QOL score	7.1	7.4	↓	7.9 (2016/17: 8.3)	7.7 (2016/17: 7.8)	7.3	7.5

The following are the scores for the individual questions that make up the composite score for 1D:

Response	2018/19	2016/17	Performance
I don't do anything I value or enjoy with my time	17.9% (66/368)	16.6% (65/391)	↓
I have some control over my daily life but not enough	62.6% (231/369)	62.3% (245/393)	↓
I have no control over my daily life	17.9% (66/369)	17.8% (70/393)	↓
Sometimes I can't look after myself well enough	30.4% (114/374)	30.5% (120/394)	↑
I feel I am neglecting myself	17.9% (67/374)	17.3% (68/394)	↓

Response	2018/19	2016/17	Performance
I have no worries about my personal safety	79.2% (297/375)	81.8% (323/395)	↓
I am extremely worried about my personal safety	1.3% (5/375)	2.3% (9/395)	↑
I have some social contact with people but not enough	53.1% (197/371)	50.1% (196/391)	↓
I have little social contact with people and feel socially isolated	22.4% (83/371)	20.7% (81/391)	↓
I feel I have no encouragement and support (in my caring role)	25.6% (94/366)	19.9% (77/387)	↓

112 – Proportion of people who use services and their carers, who reported that they had as much social contact as they would like.

This question was asked in the previous survey but this is the first time it has been a performance indicator.

Response	2018/19	2016/17	Performance	Poole	Dorset	South West average	England average
I have as much social contact as I want with people I like	24.5%	29.2%	↓	35.3% (2016/17 41.6%)	32.7% (2016/17 35.4%)	28.9%	31.2%

3B – Overall satisfaction of carers with social services

Response	2018/19	2016/17	Performance	Poole	Dorset	South West average	England average
I am extremely satisfied/ I am very satisfied	39.4%	41.1%	↓	38.1% (2016/17 45.2%)	41.5% (2016/17 45.9%)	38.2%	38.6%

3C – The proportion of carers who report they have been included or consulted in discussions about the person they care for

Response	2018/19	2016/17	Performance	Poole	Dorset	South West average	England average
I always felt involved or consulted/ I usually felt involved or consulted	62.5%	69.7%	↓	73.4% (2016/17 77.8%)	72.0% (2016/17 75.4%)	69.3%	69.5%

3D2 – The proportion of people who use services and their carers who find it easy to find information about services

Response	2018/19	2016/17	Performance	Poole	Dorset	South West average	England average
Very easy to find/ Fairly easy to find	64.0%	66.8%	↓	75.6% (2016/17 80.7%)	69.6% (2016/17 67.9%)	64.7%	62.6%