

Written evidence submitted by the Public Services Ombudsman for Wales in response to the Parliamentary Review of Health and Social Care

I welcome the opportunity to respond to the Welsh Government's Parliamentary Review of Health and Social Care. As Public Services Ombudsman for Wales (PSOW), I investigate complaints made by members of the public that they have suffered hardship or injustice through maladministration or service failure on the part of a body in my jurisdiction. As such, I have a unique perspective on the provision of public services in Wales, driven from the views of members of the public who have been dissatisfied with the service they have received.

I can only respond to a review based on evidence from my investigations. It is in this context, therefore, that I am responding to the consultation and my comments on various aspects of the Parliamentary Review of Health and Social Care are set out below.

1. Complaint procedures need to be better aligned. The current social services procedure states that local authorities should coordinate their investigations and responses with other public bodies involved unless there is a good reason not to. The Health Board's procedure 'Putting Things Right' is currently silent on this. I believe the process needs to be better coordinated, for example to include a requirement for both sides to inform each other when a complaint is received, and to jointly agree on who will lead on the complaint response.

If the Assembly passes the new draft Ombudsman Bill this year it will give me the power to act as a Complaints Standards Authority which would facilitate public bodies standardising their complaints procedures. This will also allow the gathering and reporting of consistent and comparable data across public services and, subsequently, areas of improvement to be identified.

- 2. Fairness in access In respect of independent care providers e.g. care homes, there is a different process in place depending on whether health or social services is involved. If I receive a complaint about care funded via social services I cannot look directly at the care home itself, just at the council that funds the care. In the case of care funded via the NHS I can look directly at the care home which means the service I can provide is inequitable.
- 3. Evidence from my office's caseload suggests that greater coordination between health and social care might contribute to improving issues around hospital flow and address delayed transfer of care. Cases include a failure to move patients from emergency departments due to lack of available hospital beds.
- 4. I currently see a very small volume of social care complaints. With the introduction of the Social Services and Wellbeing (Wales) Act 2014 I was given additional powers to consider complaints from self-funding residents in care homes and those in receipt of domiciliary care, yet I still haven't seen a significant increase in complaints in this sector. The own initiative powers I have requested under the new draft Bill would help me identify if there are systemic failings in the social care sector even if service users themselves are not raising complaints.

5.	In my recent thematic report on out of hours care in hospital, I proposed a number of
	areas for considerations by the NHS in Wales including electronic handovers and an
	improved culture of escalation, as well as a peer review of out of hours care which
	I'm pleased that the Welsh Government is undertaking this year. However I am of the
	view that improved coordination with social services is also essential to ensuring
	consistent, around-the-clock care is available to people in Wales.

6.	The outcomes of many of my investigations support the need for closer joint working
	and joint planning of services. Some of the cases I have seen suggest that integrate
	services and pooled funding could support more timely and appropriate care
	packages.

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Public Services Ombudsman for Wales