

# ADULT SOCIAL CARE ANNUAL COMPLAINTS REPORT

## 2022-2023



## Table of contents

At a glance	3
About this report	4
About the complaints process	4
Volume of complaints	4
Nature of complaints	5
Complaints activity by team	5
Outcomes	6
Timeliness in responding to complaint	7
Local Government and Social Care Ombudsman activity	7
Member enquiries	8
Compliments	9
Learning from complaints	9
Future development work	12
Team contact details	12



**Volume**  
110 Statutory Complaints received



**Complaints by nature of issue**  
41% of total complaints were about service quality  
21% of total complaints were about communication



**Complaints by Service Area**  
30% of total complaints relate to Care & Assessment Teams  
26% of total complaints relate to Home Care Provision



**Outcomes**  
26% Upheld  
44% Not Upheld  
28% Partially Upheld



**Member Enquiries**  
148 enquiries received this year

**Compliments**  
16 received this year



**Escalations**  
1 Local Government and Social Care Ombudsman Investigation completed

## About this report

This report provides an overview of complaints, compliments and investigations between April 2022 and March 2023. The report highlights how various services within Adult Social Care (ASC) have performed in line with key principles outlined in the Local Authority Social Services and National Health Complaints (England) Regulations 2009 and the complaints process.

## About the complaints process

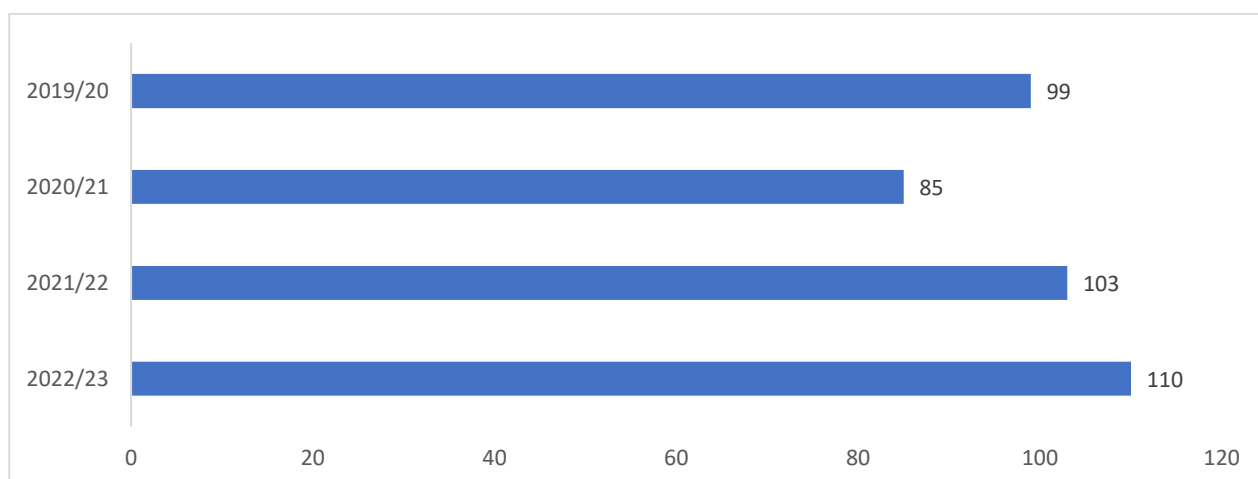
Our one-stage process for statutory complaints is in line with the Department of Health and Social Care's (DHSC) legislation and guidance. All complaints are logged and acknowledged by the Customer Engagement Team (CE Team) within 3 working days. The Council will try to resolve the complaint within 10 working days. If more time is required, this is agreed with the complainant.

Anyone who has received a service, is currently receiving a service, or is seeking a service from the Council can make a statutory complaint. This includes anyone who is affected by decisions the Council might make about social care, including a service provided by an external provider acting on the Council's behalf. The Council will conduct a thorough and fair investigation into the concerns raised and provide a comprehensive written response with clear findings and recommendations. The Council will also outline the complainant's right to escalate to the Local Government and Social Care Ombudsman (LGSCO) should they remain dissatisfied with the Council's response.

## Volume of complaints

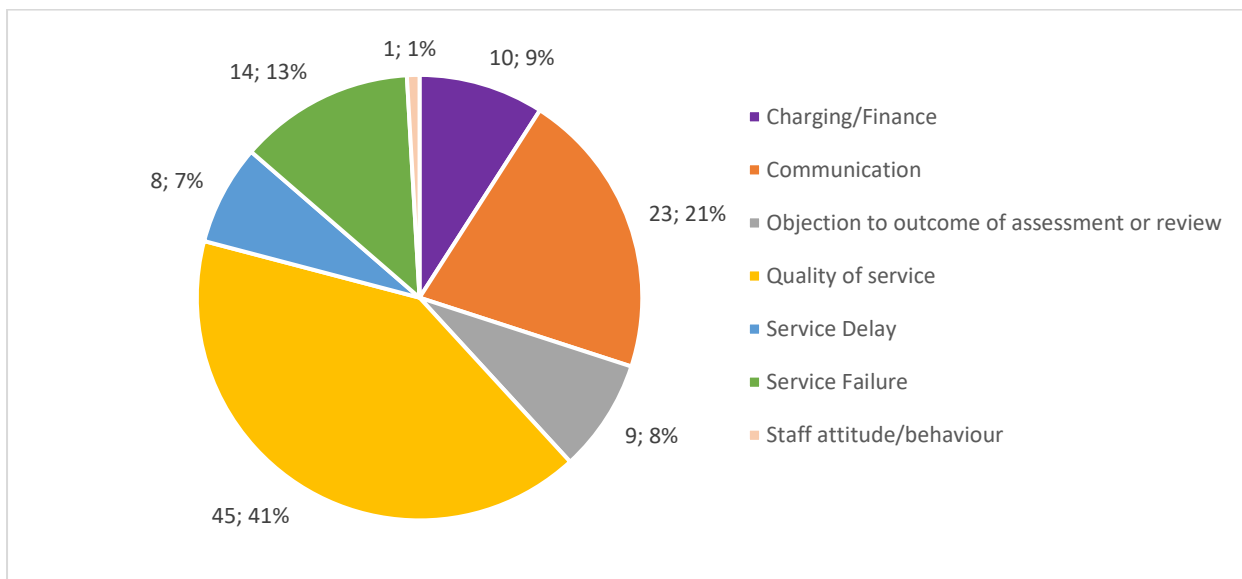
Between April 2022 and March 2023, 2,749 people were supported with a long-term package of care. In this same period, the CE Team recorded and investigated 110 complaints from 99 individuals (about 3.6%) in this same cohort. This number is 7% higher than the complaints received in 2021/22. Figure 1 demonstrates this trend. The breakdown of the reasons for why complaints were made in 2022/23 is shown in Figure 2 using actual figures and percentages. In 2020/21, we believe the number of complaints was lower because of the COVID-19 pandemic's impact and that the increase shown reflects numbers returning to pre-pandemic levels.

**Figure 1 – Number of complaints received, 2019/20 – 2022/23**



## Nature of complaints

**Figure 2 – Complaints by nature of issue for 2022/23 (actual figures and percentages)**



The category with the most complaints was “Quality of service.” This is a broad category that could include (but is not limited to) lack of cleanliness for home care, inconsistency in carers not completing care tasks and/or not completing them to a good standard, or loss/breakage of items. Of the total complaints, 21% were focussed on the communications residents received, and 8% were related to an assessment or its outcome not being implemented.

## Complaints activity by team

As shown in Table 1, the majority of the complaints (57%) in 2022/23 were about assessment and care services.

This year 27% of complaints were about homecare services. Most homecare complaints have been about the quality of service or service failure. The CE Team is committed to working with providers and the Contract Monitoring Team to ensure issues are identified and dealt with in line with contractual arrangements and the LGSCO’s guidelines.

The complaints that are made to the Council are investigated and resolved in line with statutory guidance. These are separate to the complaints received directly by the provider and resolved under a Care Quality Commission (CQC) complaint process. The LGSCO advises that it is the responsibility of the Council to ensure there is oversight on such complaints as well as those made directly to us. The Council works in partnership with the providers to investigate these complaints and ensure that action is taken to resolve the complaint and prevent the issue from happening again.

In line with the LGSCO’s categorisation, the CE Team has tabulated all the complaints it received in 2022/23 in the table below.

**Table 1 – Number complaints by the LGSCO breakdown in 2022/23**

	Area	Total no of complaints	% of total complaints	Number of cases fully or partly upheld	LGSCO cases
<b>Arranging Social Care</b>	Assessment & care planning** (Complex Social Work Teams)	62 (24)	57% (22%)	26 (6)	1*
	(Learning & Disability Partnership Team)	(5)	(5%)	(3)	
	(Information and Advice)	(6)	(6%)	(2)	
	(Review Team)	(5)	(5%)	(1)	
	Charging/Finance	8	7%	5	0
	Hospital Social Work Team	2	2%	1	0
	Older People’s MH	1	1%	1	0
	Occupational Therapy	6	5%	4	0
<b>Providing Social Care</b>	Homecare	30	27%	22	1*
	Reablement & Community Independence Service (CIS)	1	1%	1	0

\*same case

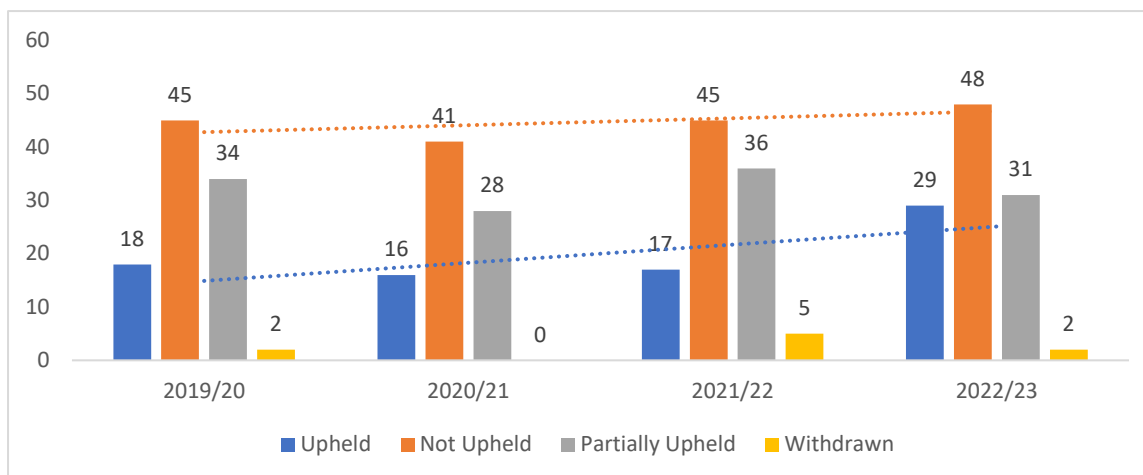
\*\* There were 22 other complaints over 10 areas, but the top four areas are shown here

## Outcomes

In 2022/23, twenty-nine complaints were fully upheld and thirty-one were partly upheld. Where the complaint has been upheld, the Council (or its commissioned partners) have offered an apology where appropriate, made commitments to improve the service, clearly explained reasons for delays, and addressed ineffective communication if that was identified as an issue.

Figure 3 below shows the outcomes of all complaints made to ASC since 2019/20. In 2022/23, there was a small increase in the number of complaints not upheld, following a consistently flat trend. There was also a marginal increase in the number of cases upheld, but the four-year trend is relatively consistent. However, as a proportion, the number of complaints that have not been upheld remain steady at 44% compared with last year when 44% of complaints were not upheld. This is similar for complaints partially upheld. For complaints upheld, this proportion increased from 17% in 2021/22 to 26% in 2022/23; however, the overall numbers remain relatively low.

**Figure 3 – Complaint outcomes, 2019/20 – 2022/23**



**Timeliness in responding to complaint**

The DHSC’s statutory complaints regulations stipulate that the method and time frame for response must be commensurate to the seriousness of the complaint and completed within 6 months. The CE Team always seeks to resolve the complaint as soon as possible. In the absence of a prescribed timescale, it uses an internal ambitious timescale of 10 working days, in consultation with the complainant. Of the complaints received this year, 64% were responded to within 10 working days. A further 25% needed an additional 10 working days, and only 11% took more than 20 working days to complete. This is in line with last year.

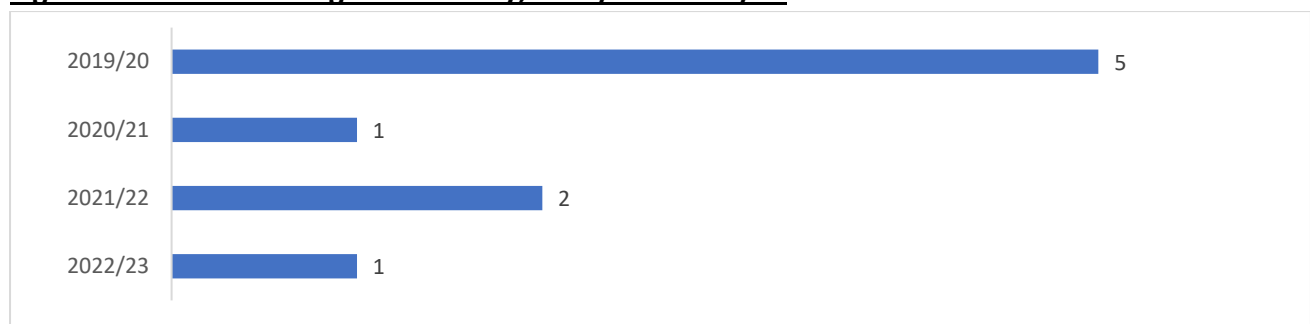
Some delays are unavoidable and the reasons for this are listed below. When it has not been possible to meet the 10 working day timescale, the complainant is kept up to date with the progress of the investigation and advised of revised timescales.

- Complexity of the case.
- Co-managed cases, such as those with Health partners or commissioned providers.
- Provision of a supplementary/ additional response.
- Availability of key staff to participate in the investigation.

**Local Government and Social Care Ombudsman (LGSCO) activity**

One LGSCO investigation occurred this year, which was focussed on homecare provision, record keeping and a carer’s assessment. The complaint was partially upheld and the LGSCO made a number of recommendations, all of which have been completed.

**Figure 4 – LGSCO investigation activity, 2019/20 – 2022/23**

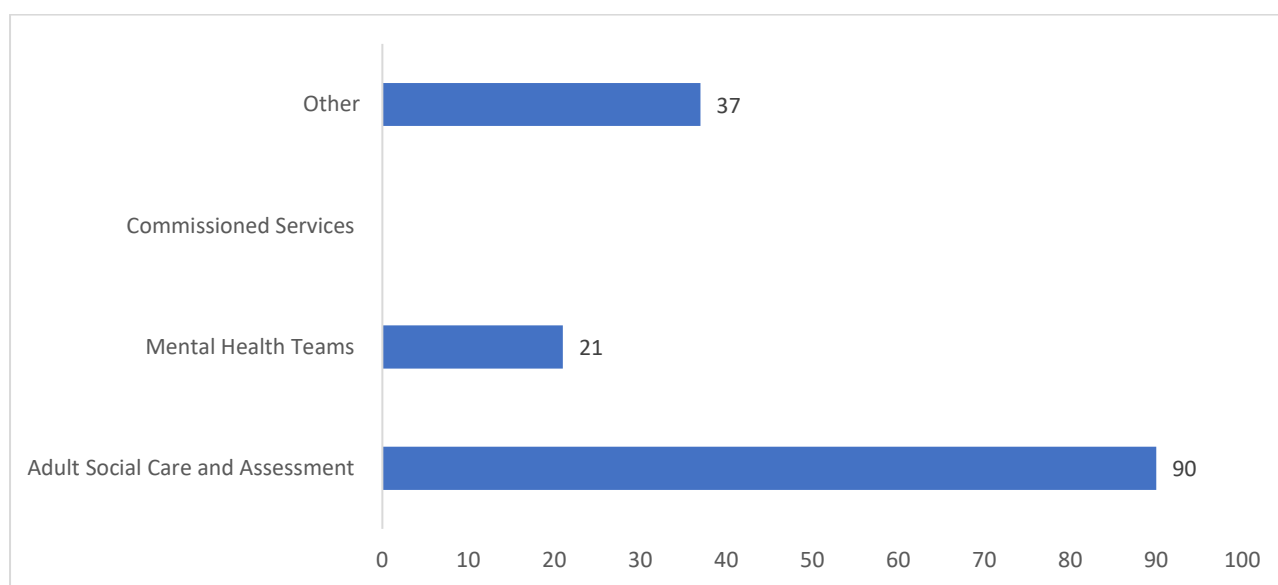


As shown in Figure 4, the number of cases escalated to and investigated by the LGSCO continues to be low compared to previous years. All complainants are informed of their right to escalate their complaint if they remain dissatisfied. It is likely that these figures remain low due to the team’s proactive approach in trying to provide a resolution to complaints.

### Member enquiries

Member enquiries are defined as enquiries received from Elected Members of the Council or Members of Parliament acting on behalf of their constituents. The CE Team facilitated 148 Member Enquiries in 2022/23. 75% of the enquiries have been on behalf of constituents and in relation to either a request for care and support or about existing arrangements within Adult Social Care and Mental Health Teams. Of these 148, 9.5% were received from Members of Parliament. Figure 5 shows these enquiries by service area.

**Figure 5 – The distribution of enquiries**



Of the enquiries received, 76% were responded to within the agreed Council-wide 5 working day timescale. This is lower compared to last year. In some cases, where the issue being raised is complex, requires consent or involves input from a different Council department, the response may take longer to complete. When this happens, elected members are advised of the delay and provided an expected date for response. The teams are committed to working together to provide one cohesive response for the resident and to share updates where possible.

### Compliments

Customers and their representatives are encouraged to tell the Council if they are happy with their care or to highlight a good service. They can complete a feedback form as well as contact the relevant social care team to express this. There were 16 compliments recorded this year for WCC. 7 were related to “Care and Assessment”, 7 were related to “Commissioned and Provider Services”, and 2 were related to “Community Independence Service.”



Below are a few examples of what our service users and/or their relatives have shared with us in terms of their positive experience about the service they receive.

**From a service user who received a service from the WCC Learning Disability Partnership Team;**

‘My son was transferred to the Adult Social Services support team in 2021. During the transition period, I was a little bit stressed and overwhelmed, thinking that I need to go all over again to introduce my son and his needs. Luckily our key worker was extremely professional and very helpful. She did everything on time to gather all the information needed to minimise my stress. Overall I am very pleased with the adult support team, as everyone is so professional and helpful. Many thanks to the team for the help and support.’

**From a service user’s daughter about Ashbourne Care;**

‘Daughter of SU explained that she was very happy with the carers from Ashbourne and happy that the carers are Gujarati speaking. She explained that the carers have given her and her family confidence that their mother will be cared for properly.’

**From the daughter of a service user about their carer;**

‘Please note that Mr YY 's daughter and NOK has emailed VCP today to notify of how pleased and reassured she has been of late when reading on the birdie app, how her father is being actively encouraged to eat & drink by his regular carers. For this, she says, ' A big thank you to you'.’

**From a service user about Community Independence Service;**

‘She was absolutely overjoyed and so happy with her RR chair. She was able to get from sit to stand independently without asking her daughters or grandson for support. Ms X is very grateful for the chair and thanks the service for supporting her independence. Upon the initial assessment she was very tearful and yesterday was beaming with smiles.’

## Learning from complaints

Learning from complaints provides valuable opportunities to adapt services based on customers’ experiences. Staff and managers who respond to complaints are required to identify lessons learned that can lead to service improvement, and Learning Outcome Action plans are completed for the more complex complaints received. Lessons learned, actions and the themes drawn from complaints are presented regularly for discussion and challenge at meetings with Heads of Service and Operational Teams to improve the quality of social care practice. Some general learning actions are listed below:

- Teams have been reminded that all complaints, especially those made verbally, must be logged with the CE Team to ensure due processes are followed and complaints are not escalated.
- Working with homecare providers to ensure all complaints handled under their own CQC compliant processes are also reported to the ASC CE Team to ensure a satisfactory resolution is achieved. This should also be done in line with the LGSCO’s directive that the Council is aware of what actions have been taken that relate to its service users.
- To work with the Quality Assurance Team to improve services in the care provider sector.

- The Complaints lead has advised Heads of Service to ensure for complex multi-disciplinary complaints a meeting must take place early on to ensure a good investigation plan is implemented and we can also prevent escalation to Ombudsman investigations.

Case studies of how lessons learned from complaints have been taken forward are included below:

**You complained:** About the lack of financial support put in place for your family members who have various physical and mental needs following the relevant assessments being carried out and the lack of follow through and clear communication.

**We:** Investigated this carefully and upheld the complaint. The communication with the allocated team and the information required from it was not transparently outlined. It was confirmed that an increase to care hours had been assessed and agreed, and it was explained that the implementation of direct payments could be introduced once the service user had been discharged from hospital.

**You complained:** That carers often do not arrive on time or stay for the full duration of care calls, and do not complete all tasks as outlined in your care plan. You said you are never informed when the carer is running late and do not receive an explanation when they arrive.

**We:** Worked with the care provider to establish the facts and find out why the care was not being provided as expected. The provider acknowledged the complaints and apologised for the timeliness of the care worker. The provider also assured you that it would reiterate the importance of communication with all care workers in instances where they may be running late for care calls. The provider advised that you should contact them if you have any further issues.

**You complained:** About the delay in receiving care assistance which has been promised since last year. You said you have had three assessments and were advised you qualified for support. However, after repeated telephone conversations and emails, you had not received a response. This lasted for over a year. You were also advised you could not receive last year's allowance.

**We:** Accepted your complaint and apologised for the delay in completing the assessment for the carer's allowance and communicating the outcome to the complainant. We also confirmed the assessment was completed and that £600 would be awarded.

**You complained:** About a few points such as not being promptly being provided with a care plan, carers not arriving on time, carers failing to use key safe, inadequate, inappropriate and incompetent care, and poor communication.

**We:** Acknowledged and apologised for the concerns you raised, and we explained that the allocated worker asked the care agency arrange to provide you with a physical copy but that this was not completed. We confirmed that care plans should be readily available to service users at all times. We also clarified that a meeting was scheduled to to address concerns raised with the allocated worker's line manager and ensure this situation does not re-occur. The care agency advised that there had not been a delay to the care state date, and that it had not cancelled calls. We advised you that the key safe and timeliness issues would be addressed in a separate apology letter.

**You complained:** About a carer rushing you and not staying the entire length of the sitting visits. You also complained about your wife's contact with the office and being told to go elsewhere if she was not happy.

**We:** Apologised for the carer rushing and not staying the entire length of the visit. We also apologised that you felt office staff did not investigate the incident with the carer. We did not uphold the claim that your wife had been told to go elsewhere, as we said should could not have your preferred carer allocated to your package of care since he works in a different post code.

## Future development work for 23/24

In 23/24, the CE Team will be making further developments in the following areas:

- Continuing to develop work with our partner providers through contract monitoring meetings and provider forums to ensure their complaints are handled effectively and in line with the LGSCO's guidance on third party complaints.
- Continue to work with Social Care Managers and Market Managers to improve the following: service users' access to the complaints process, complaints investigations and responses, and consistent implementation of learning outcomes.
- Continue to develop the CE Team's relationship with the Quality Assurance Team to improve services in the care provider sector.
- Continue to undertake service user consultation activity on behalf of the Department where services are being transformed.
- Working with the Principal Social Worker and Learning and Development Team to develop and provide effective training on complaints resolution and managing difficult situations.

## Team contact details

The CE Team can be contacted using the details below if there are any questions or suggestions about this report.

E-mail: [ASCCustomerfeedback@westminster.gov.uk](mailto:ASCCustomerfeedback@westminster.gov.uk)

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