



Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Appendix B- Adult Statutory Complaints Report

Improving our Customer Experience

Annual Report 2023/24

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Purpose of the Report

- To report statistical information to Members and Officers detailing Telford and Wrekin Council's Adult Social Care complaints from 1 April 2023 to 31 March 2024.
- To provide an open resource to anyone who wishes to understand feedback about local services.
- To outline the key developments and planned improvements to the complaints processes operated by the Council.
- To consider how the learning from complaints can be used to improve the overall customer experience.

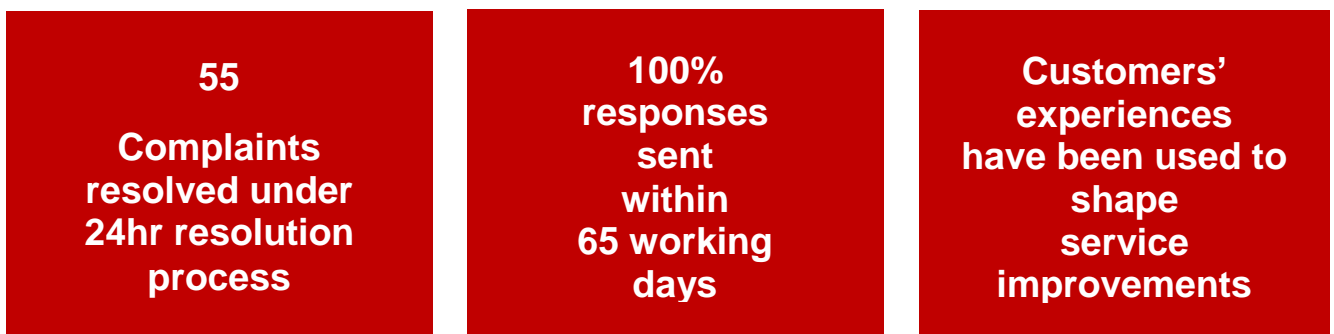
Introduction

This is the Complaints Manager's Annual Report for Adult Social Care. It is a statutory requirement to prepare an Annual Report each year concerning the complaints activity within Adult Social Care that can be made available to anyone on request. This must:

1. Specify the number of complaints received
2. Specify the number of complaints upheld
3. Specify the number of complaints that we have been informed have been referred to the Local Government & Social Care Ombudsman
4. Summarise:
 - a. The subject matter of the complaints received
 - b. Any matters of general importance arising out of these complaints, or the way in which these complaints were handled
 - c. Any matter where action has been, or is to be, taken to improve services as a consequence of these complaints

This report provides information about complaints made between 1 April 2023 and 31 March 2024 under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

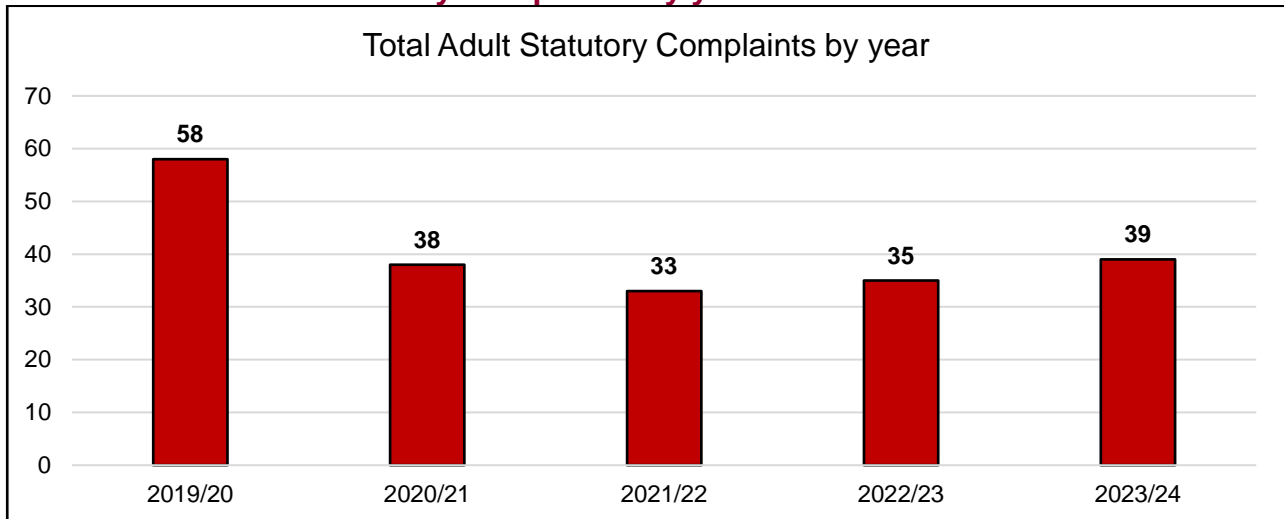
Highlights 2023/24



Adult Statutory Complaints 2023/24

We received 39 Adult Statutory Complaints between 1 April 2023 and 31 March 2024. The chart below compares the number of statutory complaints we have received over the past five years. To provide some context, Adult Social Services have received 8,150 contacts from new people in the year and 2,000 people are receiving long term services. Some cases can be complex and this is recognised in the complaint handling timescales outlined in the regulations.

Chart 1: Total Adult Statutory Complaints by year



There has been an increase in the number of complaints received in 2023/24.

There were also 55 further complaints that were resolved under the 24 hour resolution process and therefore were not registered under the statutory procedure in accordance with legislation. These cases are also reviewed, and learning identified, and this feedback is used to inform service improvements.

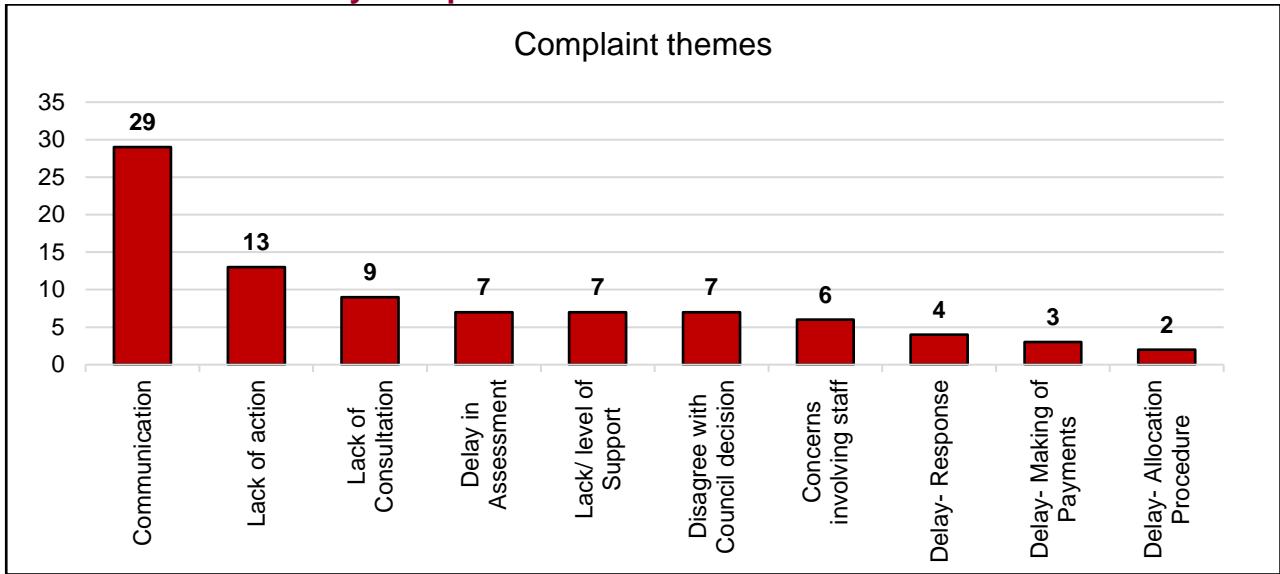
Customer Access Channels and Digital Contact

Complainant channel	Number of complaints
Email	27
Web form	2
Telephone	9
Letter	1
In person	0
Total	39

In 2023/24, 74% of Adult Statutory Complaints were received via a digital access channel, including via our online complaint web form and by email directly to the Customer Relationship team. This is an increase on the 46% received via these channels in 2022/23. Whilst we have seen an increase in customers contacting with us via digital channels we continue to ensure that customers can raise concerns via traditional access channels.

Complaint Themes

Chart 2: Adult Statutory Complaint themes in 2023/24



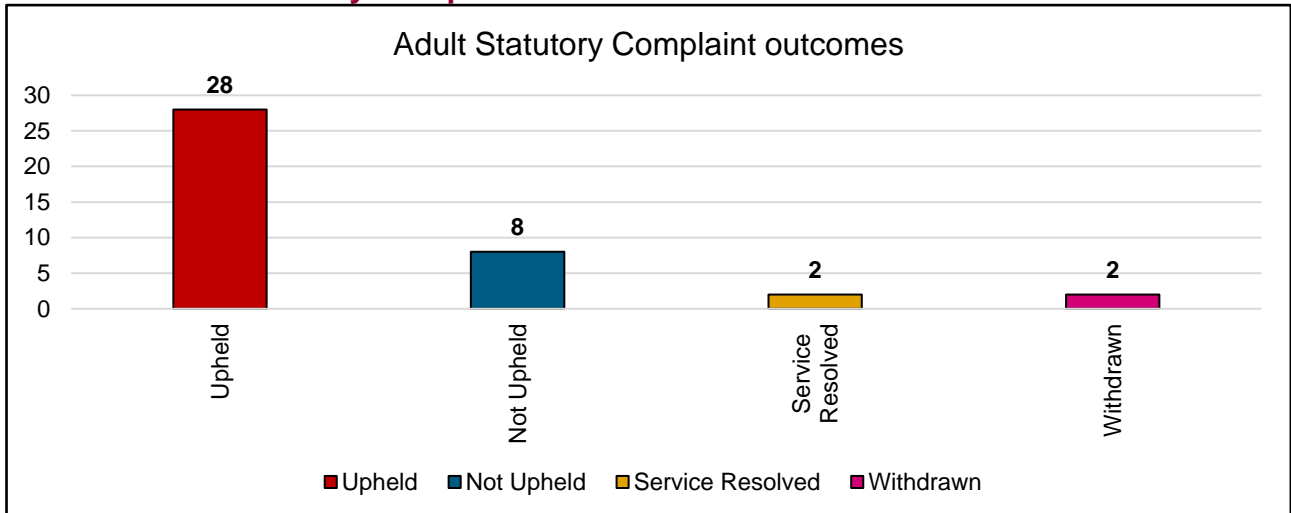
Most of the themes are self-explanatory and give a clear indication of types of concerns raised.

Complaints received

Whilst 39 complaints were received during the year, 40 responses were issued which includes a case received in 2022/23 but responded to in 2023/24.

Of the 40 complaints completed, 70% (28) were upheld, 20% (8) were not upheld and 10% (4) were dealt with via another method as detailed in the below graph.

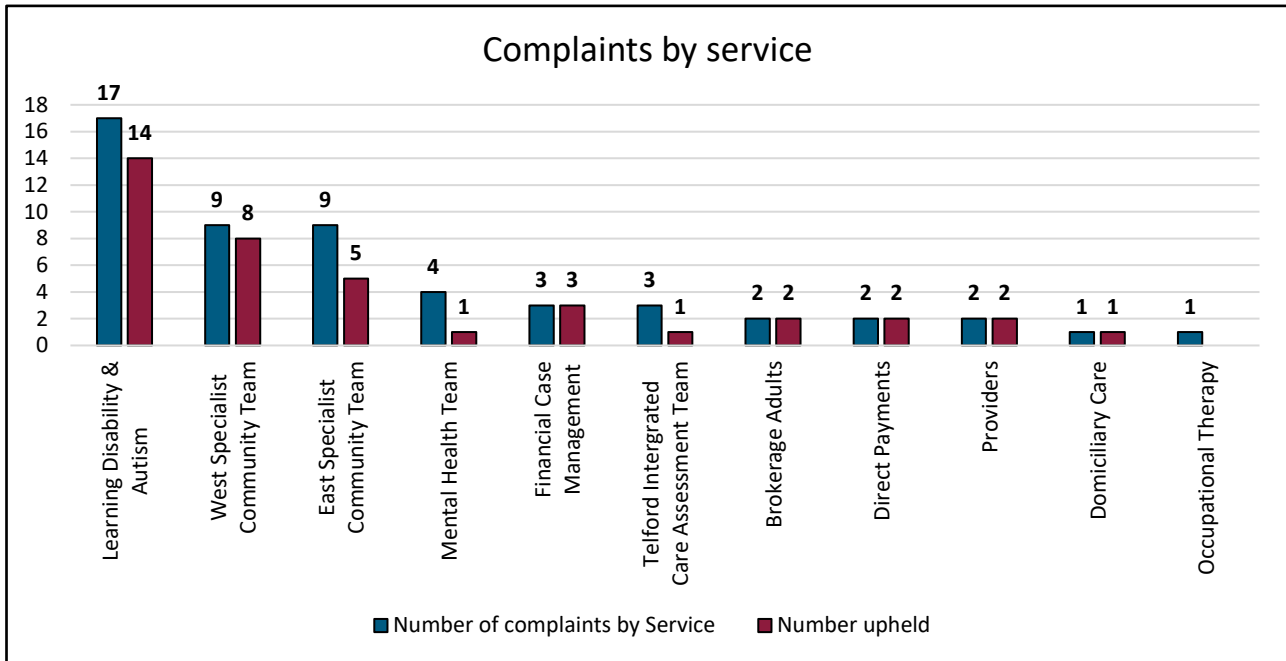
Chart 3: Adult Statutory Complaint outcomes



The chart below includes the number of complaints received by each service. Please note that the number of complaints detailed below is higher than the overall total because

certain complaints had multiple issues raised with different teams. This chart seeks to show all the services against which issues were raised, meaning that an individual complaint may be counted multiple times within it.

Chart 4: Number of complaints by service, highlighting those upheld



There were 18 complaints that included issues raised regarding the Community Social Work teams, and 13 of these were upheld (72%). Themes included lack of communication from a Social Worker or the team, delay in assessment, lack of support, and lack of action.

There were 17 complaints received that had an element related to the Learning Disability & Autism Team, 14 of which were upheld (82%). Themes included lack of communication and support, lack of action, and lack of consultation.

There were 4 complaints which involved issues related to the Mental Health Team, one of which was upheld (25%). Themes included inadequate communication, advice and support.

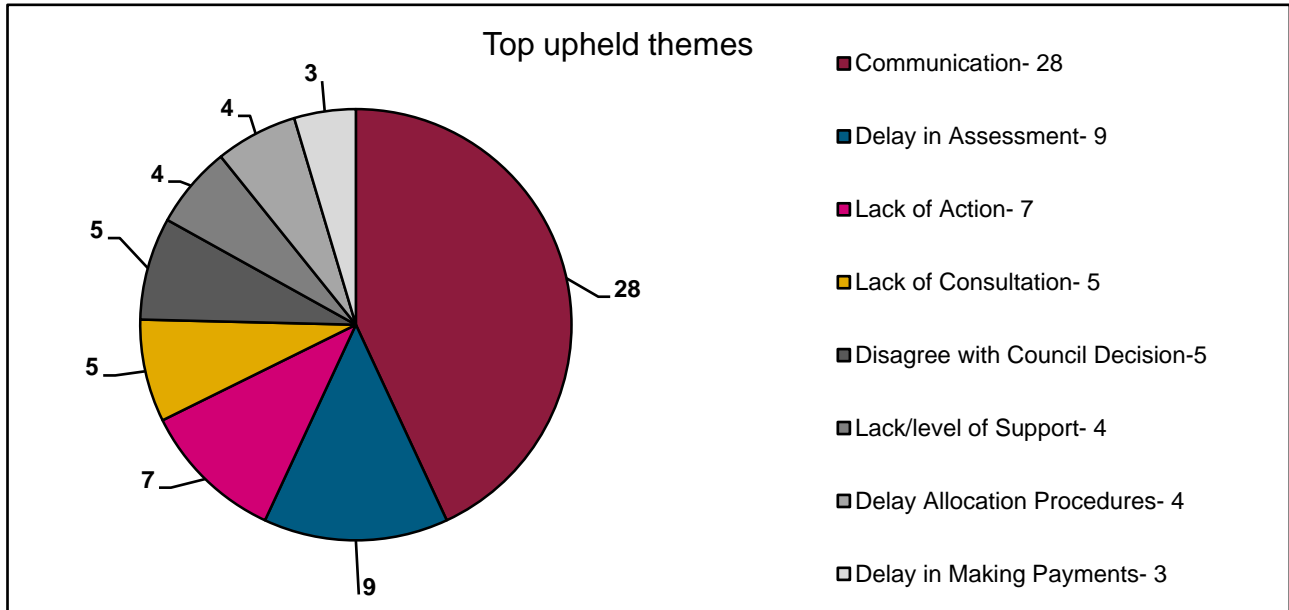
There were 2 complaints that involved providers of supported accommodation and 1 complaint for a domiciliary care provider, all of which were upheld 100%. Themes included delay and communication.

One complaint involved a joint response from Shrewsbury and Telford Hospital, which involved communication around a discharge, this complaint was found to not be upheld for Telford and Wrekin Council.

Themes of upheld complaints

Of the 28 upheld complaints, the top themes raised were as detailed in the chart below.

Chart 5: Upheld themes



The above categories are self-explanatory and give a clear indication of the overall areas of our service or aspects of our work that had the most upheld complaints. Please note that some themes may be counted twice in the chart above as a complaint may have involved multiple teams and multiple themes.

The chart indicates that communication was a key theme in most complaints, accounting for 28 instances across 19 of the upheld complaints 48%. This covers a variety of concerns including a lack of or inadequate communication from social worker, lack of response to emails, failure to respond to requests made or keep the person or their family/ carers updated on progress.

Delay in assessment was a theme in complaints accounting for 9 instances across 7 upheld complaints (18%). Lack of action was also a theme in complaints accounting for 7 instances across 5 upheld complaints (13%)

Lack of consultation was also a key theme in complaints accounting for 5 instances across 5 upheld complaints (13%) which includes missed communication opportunities during the closure of a care home, consultation/communication following a change of respite offer and arrangements for an allocated worker’s absence.

Other key themes identified by Adult Social Care through complaints and 24hr resolved cases during 2023/24 include;

- Communication with people with care and support needs, family members and unpaid carers – in particular, keeping people updated and informed; ease of contact, knowing who to contact and explaining roles and responsibilities
- Assessment and support planning – in particular, timeliness, and working with families and legal representatives
- Direct Payments – including communication, explanation and processes
- Charging for care – including explaining policy, process and potential charge
- Providing care and support – including sourcing care and accommodation
- Experience of care and support – including quality
- Other themes include the level of involvement, relationships with social workers; discharge planning and enablement; information and advice.

Timescales for responses

The 2009 regulations set a benchmark for all Adult Statutory Complaints to be investigated within six months. When an Adult Statutory Complaint is received we negotiate a timescale with the complainants, depending on the complexity of the case, this is typically 35 working days. We aim to respond to all Adult Statutory Complaints within a maximum of 65 working days.

In 2023/24, the average number of working days to respond to an Adult Statutory Complaint across all portfolios was 29 days. This is an increase on the average of 25 working days achieved in 2022/23 but remains lower than in the two previous years and lower than the typical 35 working days negotiated for a response.

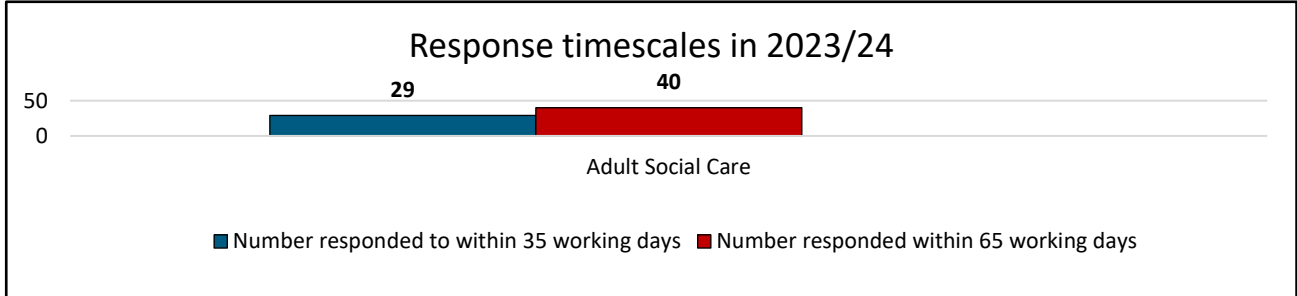
Adult Social Care continue to work to maintain good response timescales, there have been a number of complex cases during 2023/24 which have impacted timescales which is reflected in the average number of days.

Timescales remain significantly lower than past years due to the changes that have been made to the complaint procedure in 2021, which saw the introduction of a negotiated timescale with customers which seeks to better manage customer's expectations. This has also resulted in fewer complaints exceeding the agreed timescale. Additional steps have also been taken at service level to encourage timeliness of responses.

A key function within Adult Social Care is the Assurance Team, within which the Quality and Complaints Officer supports the complaints management and monitoring processes,

alongside the Customer Relationship Team. Complaints are rated based on timescales and allocated to Service Delivery Managers. Performance against timescales continues to be discussed on monthly basis at Leadership Team Meetings. For a breakdown, see the chart below.

Chart 6: Response timescales at Stage One



40 complaints have been responded to in year, 29 responses were sent within 35 working days (73%) and all responses were sent within 65 working days and none exceeded 65 working days.

No complaints received in 2023/24 exceeded the six month timescale.

Learning and outcomes from Adult Statutory Complaints

Complaints are a valuable source of information that can help to identify recurring or underlying problems and potential improvements. We know that numbers alone do not tell us everything about attitudes towards complaints and how they are responded to locally. Arguably, it is of greater importance to understand the impact that complaints have had on people and to learn the lessons from them to improve the experience of others.

Lessons can usually be learned from complaints that were upheld, but also in some instances where no fault was found, the Council recognises that improvements to services can still be made.

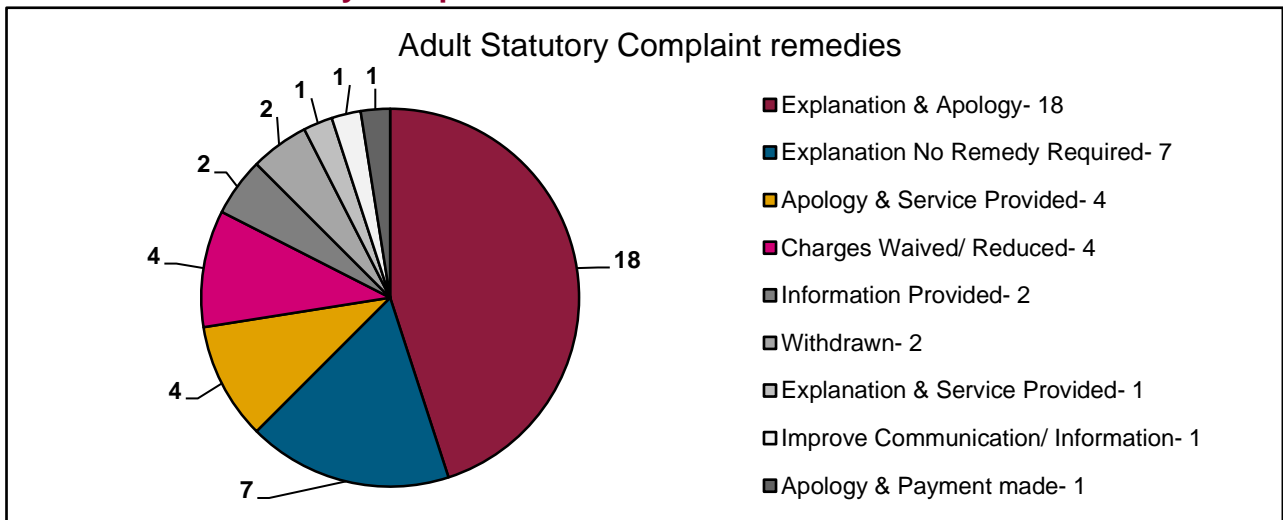
Occasionally, during the course of an investigation, issues will be identified that need to be addressed over and above the original complaint. The Customer Relationship team will then work with Adult Social Care Services to ensure that they see the “bigger picture” so that residents receive the best possible service. Working alongside Adult Social Care’s Quality and Complaints Officer, the Customer Relationship team will continue to provide daily advice and support to managers around complaints management and resolution, and with responding to representations.

In Adult Social Care, we are committed to achieving improved outcomes through continuous learning and improvement, where people are at the heart of everything we do and have the opportunity to influence and shape the services they receive. A key area of quality assurance is using feedback from people who use our services, their carers and families to understand experiences and shape improvements. We are committed to learning from all feedback, regardless of source, format or process.

Adult Social Care follows an intelligence-led approach of reviewing, reflecting, changing and sharing, ensuring we connect with the right people, learning as we go, and evaluating the difference/impact we have made.

A monthly Adult Social Care ‘Learning from People’s Experiences’ report is prepared, shared and discussed at the ASC Quality Assurance Delivery Group and subsequently at the monthly ASC Finance, Performance and Quality meetings. This includes issues identified, areas for reflection and improvement and learning outcomes from complaints, concerns resolved at service level and enquiries.

Chart 7: Adult Statutory Complaint remedies in 2023/24



Of the remedies recorded against Adult Statutory Complaints in 2023/24:

- 45% were to provide an explanation and apology
- 18% were to provide an explanation
- 15% were to provide further information or reduce charges
- 13% were to provide an explanation or apology and provide a service

Positive Improvements

Throughout the year, we record the learning identified from each complaint in order to build up a picture of common themes or trends. Learning from corporate complaints and other feedback about people’s experiences is considered alongside that from statutory complaints as part of Adult Social Care quality assurance activities.

Below are examples of positive changes that have resulted from learning from complaints. A range of individual remedies were also completed concerning support plans and assessments, for example, or identifying the best ways of working together and staying in touch.

Communication with people with care and support needs, family members and unpaid carers

- People on the waiting list are contacted regularly, cases triaged, and different completion offers discussed (e.g. hub appointments, urgent home visit, etc). Risk assessment tool has been reviewed and applied to all new contacts.
- *Working Together* and *Keeping in Touch* documents have been developed (co-produced) and embedded.
- Measures in place so when a worker is on leave (planned or unexpected) the individual and family/carers are contacted and updated.
- Improvements to the booking system for hub appointments to ensure automatic messages include contact numbers and emails contain correct information.
- *Knowing Where to Go* document developed by the Making it Real Board and communications campaign in place for 2024.
- Sight loss accessibility issues for various contact methods used by Wellbeing Independence Partnership were shared with the leads and new approaches are being reviewed.
- Reminder to teams to ensure people understand what is being said to them, ask the best way to do this and share in writing what is discussed in meetings.

Assessment and support planning

- Case Summaries have been introduced on the person's electronic records to provide an overview of their current situation and identify any ongoing work.
- Processes for when a worker is absent have been reviewed and a worker's cases are now reviewed by the senior in that team to progress any necessary actions in the worker's absence.

- All frontline staff were reminded about handing over cases and receiving new cases, to manage risk and ensure people are not having to repeat information unnecessarily.
- Support plan processes were reviewed to minimise any delays in progression.
- Draft All-Age Carers Strategy includes the need for a holistic approach to support unpaid carers.
- Financial Case Management processes were reviewed to ensure timely financial assessment processes.
- Criteria for funding streams applicable for house clean-ups were shared with staff across the service.
- Deprivation of Liberties escalation and management of risk processes were reviewed.

Direct Payments

- Direct Payments Board has been set up to provide a place for co-production of direct payments processes, support and develop appropriate communications campaigns and provide governance around the improvement plans.
- Direct Payment policy is being updated and champions in each ASC team are members of the Direct Payment Board to shape developments moving forward and share information with their teams. A senior direct payment officer has been recruited to lead the service. Work continues with experts by their experience and the Board to support process improvements.
- Arrangements were made for any direct payments managed outside the usual payment run. Workers ensure each stage is completed and provide confirmed payment timescales to people/families.
- Reflective discussions held with workers about effective investigations, direct payments challenges and how to support staff who are progressing into more senior roles.

Charging for care

- Online Financial Assessment piloted in West Specialist Community team. This was successful and has been rolled out across Adult Social Care.

- Refresher training for the Learning Disability and Autism Team to improve knowledge and understanding. Seniors and Team Leaders quality check individual cases with their supervision groups to ensure the process is being followed.

Providing care and support

- Learning Outcomes meeting held with all workers involved in the closure of a care home. This led to a process map being completed for any future home closures.
- Mechanisms have been put in place to support accommodation planning, including workers capturing the correct details at the beginning of a person's journey to ensure appropriate referrals to meet needs.
- Adult Social Care Quality Assurance Delivery Group has been established and supports further join up between operations, provider quality and commissioning.

Experience of care and support

- Follow up via Provider Quality Assurance and other processes, supporting providers to implement and embed changes.
- Review of processes by an equipment provider to improve appointment booking and communication.
- Reflective discussions with workers about the importance of clear communication and timescales when addressing concerns raised about care and support.

Other

- Live Well Telford services have been reminded about the importance of keeping information up to date and further training offered to their administrators. Further training has been provided for the Council's Healthy Lifestyle Advisors, so they are able to update information in a timely way.
- Information on all platforms was updated to accurately reflect the nature of accommodation provided at a complex.

Complaints made to the Local Government & Social Care Ombudsman

The Local Government & Social Care Ombudsman (LGSCO) has the authority to investigate complaints when it appears that our own process has not resolved them. Complainants can refer their complaint to the LGSCO at any time, although the Ombudsman will generally refer them back to us if they have not been through our process first. In exceptional circumstances, the Ombudsman will look at things earlier; this usually being dependant on the vulnerability of the person concerned.

Two cases were escalated to the LGSCO in 2023/24. All cases have been determined in the year. One case was upheld, and the other was not investigated by the LGSCO.

The Council fully complied with the recommendations made by the LGSCO, and further learning will be taken forward to improve practices in relation to making and recording decisions in relation to altering home care packages, staff were reminded about exploring and dealing with possible conflicts of interest in a timely way, and the wording within the complaints procedure has been reviewed and amended to ensure its intention is clear.

Concluding Comments

This annual report shows that the number of Adult Statutory Complaints received in 2023/24 increased slightly from 35 in the previous year to 39. Our Adult Social Care services continue to receive a low number of complaints at a time when there have been major reductions in government funding for local authority service provision. Despite this financial backdrop, the Council continues to manage complaints well and is committed to putting right anything that has gone wrong.

The report also shows that the Council seeks to resolve complaints at the earliest opportunity, and this is demonstrated in the number of complaints that have been resolved by Adult Social Care via 24hr resolution procedures (55). It also demonstrates that all feedback is welcomed and used to identify lessons learnt and inform service improvement.

The number of Adult Statutory complaints upheld was high in comparison to the total number received (70%), however, this is a reduction from 2022/23 (76%).

Adult Social Care welcomes all complaints as a key part of quality assurance, using feedback from people who use our services, their carers and families to understand experiences and shape improvements. The service is committed to reflecting on what could have been better and feedback from complaints contributed to a range of improvements in 2023/24.

Timescales for responding to complaints have increased from 25 days in 2022/23 to 29 days during the last 12 months. The increase can be attributed to increased complexity for a number of complaints during the year. However, the changes to local procedures and our complaints policy, has continued to impact by reducing timescales by 45% since 2020/21.

Oversight and support provided

The Customer Relationship team continues to support service areas to both manage and learn from complaints. The key services they offer are:

1. Complaints advice and support
2. Quality assurance of statutory complaint responses
3. Act as a critical friend to challenge service practice
4. Support with persistent and unreasonable complainants
5. Assistance in drafting comprehensive responses to complaint investigations
6. Continue to escalate overdue complaints to Directors

The Quality and Complaints Officer supports the complaints management and monitoring processes within Adult Social Care and works with the service to use feedback from complaints to improve services as part of the Adult Social Care's Quality Assurance Framework.

Priorities for 2024/25

During 2024/25, the Customer Relationship team and the Adult Social Care will focus on a number of key priorities:

- Continuing to improve the Council's record of timely complaint responses
- Continuing to improve and add to the resources available to managers when responding to complaints and other correspondence, while encouraging self-help
- Providing complaint data to senior management monthly, as part of corporate monitoring
- Ensuring recommendations are implemented and learning embedded
- Continuing to provide a quarterly and monthly reporting dashboard of performance data to senior management so that improvement can be driven forward continuously during the year
- Further development of the digital complaints system to further improve efficiencies in complaint handling, recording of data and performance monitoring
- Working alongside ASC to review the ASC Complaint Processes to ensure they are fit for purpose and roles and responsibilities are clear
- Reviewing local response procedure and documentation to support best practice, ensure a personalised approach and maximise learning
- Ensuring our complaints processes are adhering to the ASC Accessibility Information Standards and that responses are provided in a way that meets the individual's needs

Appendix

Legislation

Section 5 of the Regulations (2009) requires local authorities to consider complaints made by anyone who:

- Is receiving, or has received, services from the Council
- Is affected, or is likely to be affected, by the action, omission or decision of the Council

A person is eligible to make a complaint where the local authority has a power or duty to provide, or to secure the provision of, a service for someone.

The 2009 regulations set a benchmark for all complaints to be investigated within six months. If the investigation is going to exceed this timescale, the local authority should write to the complainant to advise them of this and explain the reasons why.

The Corporate complaints process is used for anyone else who makes a complaint.

What is a complaint?

A complaint is generally defined as an expression of dissatisfaction or disquiet about actions, decisions or apparent failings of a local authority's Adult Social Care provision that requires a response. We will always try to resolve problems or concerns before they escalate into complaints. If it is possible to resolve a matter immediately (or within 24 hours), there may be no need to engage in the formal complaints process.

The purpose of a complaints process is to resolve concerns raised by service users and their representatives, to deliver outcomes that are appropriate and proportionate to the seriousness of the issues, and to ensure that changes are made in response to any failings that are identified.

To achieve this, the approach to handling complaints must incorporate the following elements:

- Engagement with the complainant or representative throughout the process
- Agreement with them about how the complaint will be handled
- A planned, risk-based and transparent approach
- Commitment to prompt and focussed action to achieve the desired outcome
- Commitment to improvement and the incorporation of learning from all complaints

A complaint must be made no later than 12 months after:

- The date on which the matter that is the subject of the complaint occurred, or

- If later, the date on which the matter that is the subject of the complaint came to the notice of the complainant

The time limit will not apply if the Complaints Manager is satisfied that:

- The complainant had good reasons for not making the complaint within the time limit, and
- Notwithstanding the delay, it is possible to investigate the complaint effectively and fairly

Who can make a complaint?

A complaint may be made by a relative, carer or someone who is acting on behalf of a person who has died, or is unable to make the complaint themselves because of:

- Physical incapacity, or
- Lack of capacity within the meaning of the Mental Capacity Act 2005, or
- Has requested that the representative act on their behalf

Complaints may be received through a variety of media (phone, letter, email, feedback form, personal visit, etc.) and at various points within the Council (to staff members, via respective web addresses, direct to the Customer Relationship team, etc.).

The Adult Statutory Complaints Procedure of Telford and Wrekin Council

When a complaint is first received, the Customer Relationship team will conduct an initial assessment of it to determine its issues, severity and potential impact, and to identify any other organisations that maybe involved.

When someone contacts the Customer Relationship team to make a complaint, they will acknowledge it within three working days. They will also offer a meeting to the complainant to discuss the matter and establish their desired outcome. Agreement is sought on the following points:

- The detailed account of the complaint
- The complainant's view of the impact it has had on them
- Specific reference to any aspect that requires immediate action within the adult safeguarding/protection procedures
- Details of the outcome(s) that will resolve the matter from the complainant's perspective
- Whether the subject of the complaint could relate, entirely or partly, to another body (e.g. an NHS body or an independent care provider) and therefore a joint approach may be needed

- How the complaint will be investigated and by whom
- How long it should reasonably take to investigate the matter and provide the complainant with the Council's formal response
- How often, and by what means, the complainant will be updated on the progress of the investigation
- Whether an advocacy, translation or other support service is required
- Whether the involvement of an impartial mediator might contribute to a satisfactory resolution of the complaint

When an Adult statutory complaint is received we negotiate a timescale with complainants, depending on the complexity of the case. We aim to respond to all Adult Statutory Complaints within a maximum of 65 working days.

The Quality and Complaints Officer supports the complaints management and monitoring processes. When the investigation is complete, the appropriate manager will write a letter explaining what they have found and what they will do to put things right.

If the complainant is not happy with the final decision or how we have dealt with their complaint, they can refer the matter to the Local Government & Social Care Ombudsman (LGSCO).