



Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Adult Statutory Complaints Report

Improving our Customer Experience

Annual Report 2024/25

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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 2024 to 31 March 2025.
- 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.

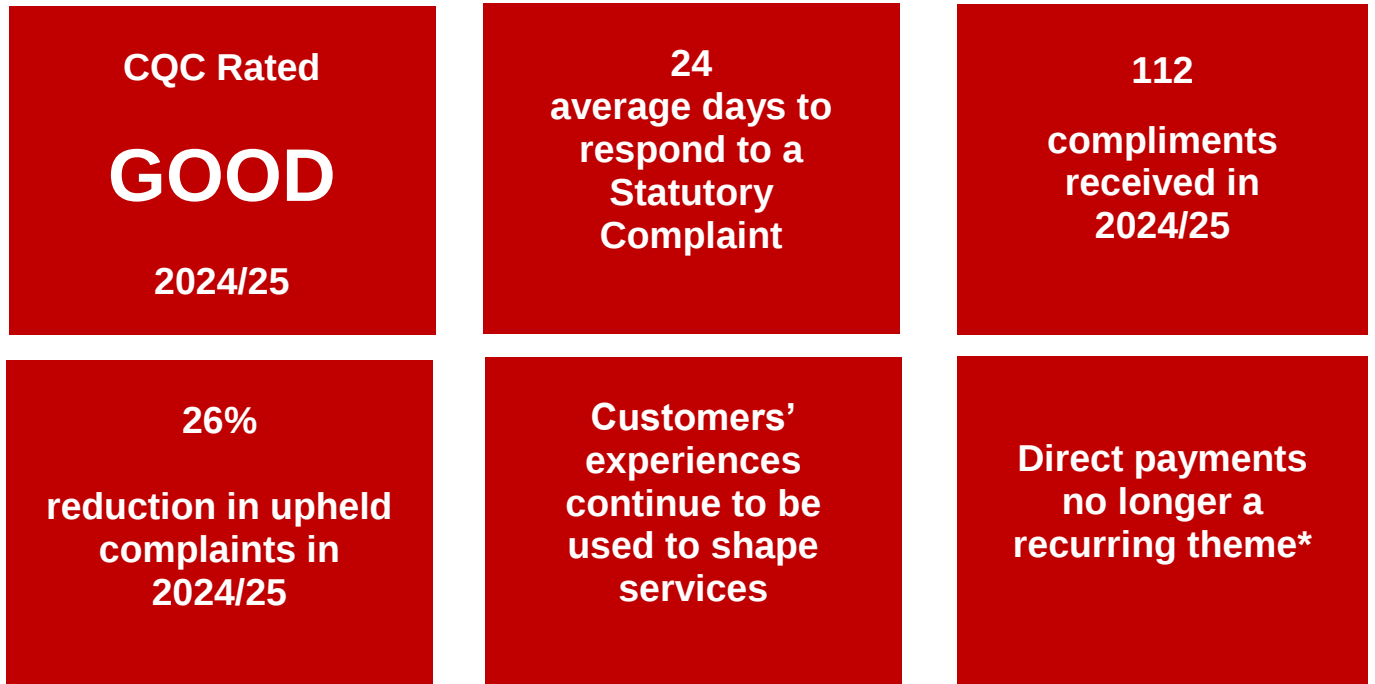
Introduction

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 2024 and 31 March 2025 under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

Highlights 2024/25



*This was key theme in 2023/24 and it is positive that the improvements made following these complaints have made tangible improvement to service for our customers.

Across Adult Social Care we welcome people's views and ideas to improve experiences and outcomes for people with care and support needs in Telford and Wrekin. Feedback received via complaints, compliments and other sources throughout 2024/25 has provided a valuable opportunity to reflect on what we do well and areas we want to improve. Within Telford and Wrekin, like other areas across the country, there is increasing demand, cost pressures, and uncertainty due to national policy reviews. Against this backdrop, it is positive to see an increase in compliments, where individuals took the time to share their experiences, what they valued most about our service and the difference this made to them.

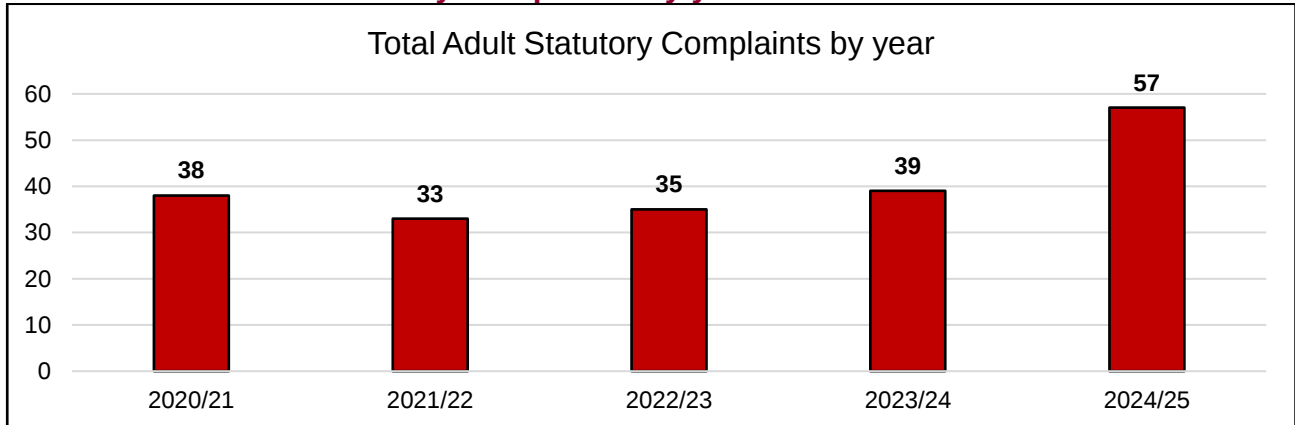
In addition, the Care Quality Commission (CQC) has rated Telford & Wrekin Council as GOOD, in relation to how well we are meeting our statutory responsibilities to ensure people have access to adult social care and support. The CQC report highlighted many key strengths within the Adult Social Care service, including our innovative approach to co-production, engagement, and inclusion, as well as promoting independence, which places community participation at the heart of strategy and service development.

Of the complaints received in 2024/25, fewer were upheld compared to the previous year. The experiences shared have led to a range of positive improvements to our processes and practice as well personal remedies for the individuals involved.

Adult Statutory Complaints 2024/25

We received 57 Adult Statutory Complaints between 1 April 2024 and 31 March 2025. 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 8,500 contacts from new people in the year and 2,085 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 that were formally logged under the statutory complaints process in 2024/25. In 2023/24 39 complaints were received in writing, and therefore formally logged, and a further 55 concerns were resolved under the 24hr resolution process representing 94 concerns/ complaints in total.

In 2024/25 fewer customers raised complaints orally which resulted in more complaints being formally logged rather than resolved under the 24-hour resolution process.

There were 24 oral concerns resolved under the 24-hour resolution process during 2024/25 and therefore were not registered under the statutory procedure in accordance with legislation. This demonstrates an overall reduction in the number of concerns raised during 2024/25, 81 complaints were raised during the year when compared to the 94 received the previous year. The cases resolved within 24hours are also reviewed, and learning identified, and this feedback is used to inform service improvements.

Customer Access Channels and Digital Contact

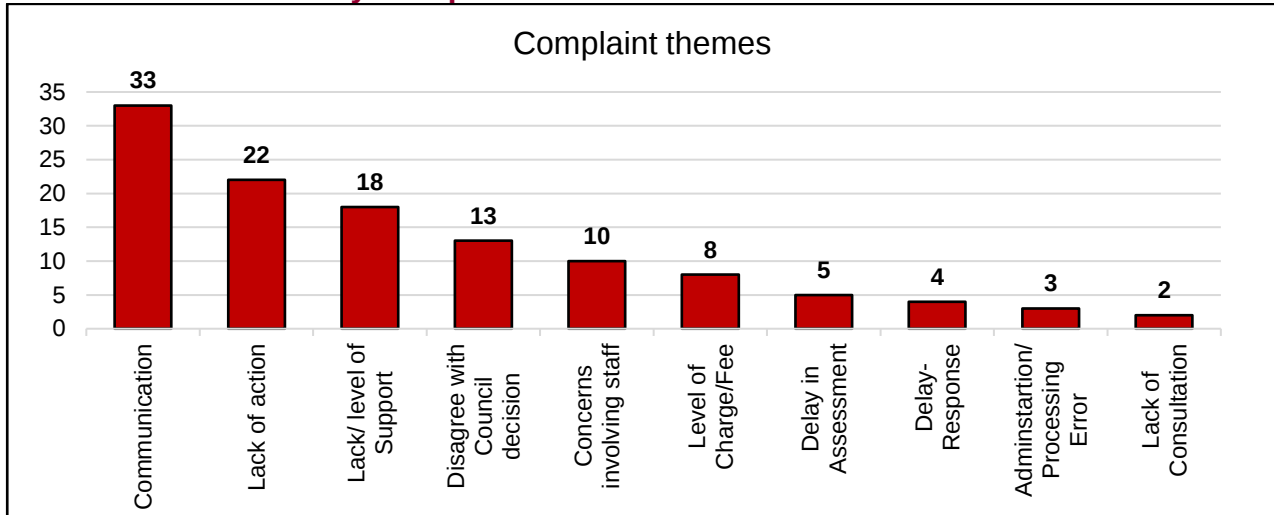
Complainant channel	Number of complaints
Email	30
Web form	15
Telephone	12
Total	57

In 2024/25, 79% 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 74% received via these channels in 2024/25, whilst we have seen an increase in customers making contact 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 2024/25



Themes are self-explanatory and give a clear indication of types of concerns raised.

Complaints received

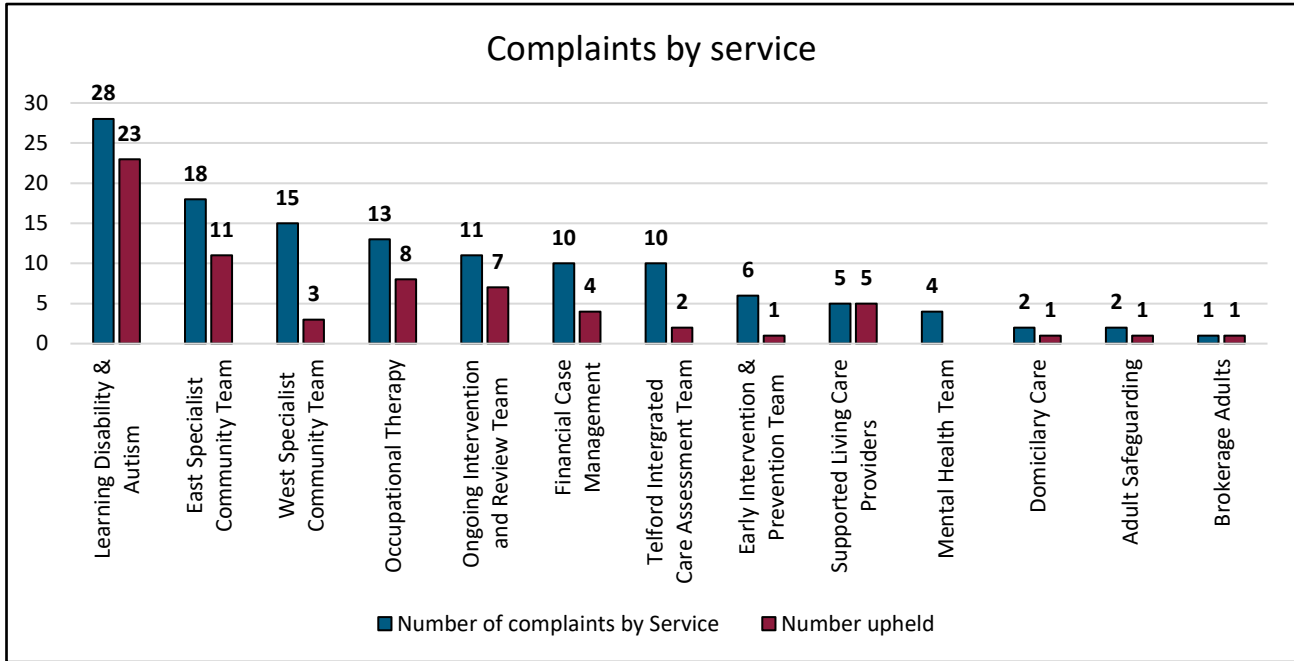
Whilst 57 complaints were received during the year, 57 responses were issued. Of the 57 complaints completed,

- 44% (25) were upheld,
- 44% (25) were not upheld,
- 12% (7) were dealt with via another method.

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 some 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.

During the year there was also a realignment of the locality teams which saw the East and West Specialist Community Teams transition into two new teams, the Early Intervention & Prevention Team and Ongoing Intervention and Review Team.

Chart 3: Number of complaints by service, highlighting those upheld



There were 28 complaints that included issues raised regarding the Learning Disability & Autism Team and of these 23 of these were upheld (82%). Themes included lack of communication from a Social Worker or the team, lack/level of support, lack of action, Level of charge/fee, Delays in assessment and response.

There were 18 complaints received that had an element related to the East Specialist Community Team, 11 of which were upheld (61%). Themes included lack of communication, concerns involving staff, level of support, lack of action, and Administration/ processing error.

There were 13 complaints received that had an element related to the Occupational Therapy Team, 8 of which were upheld (61%). Themes included lack of communication, lack of consultation, issue with equipment and equipment assessments.

There were 11 complaints received that had an element related to the Ongoing Intervention and Review Team, 8 of which were upheld (61%). Themes included delay in making payments, and allocation procedure, disagreements with council decisions, lack of action and concerns involving staff.

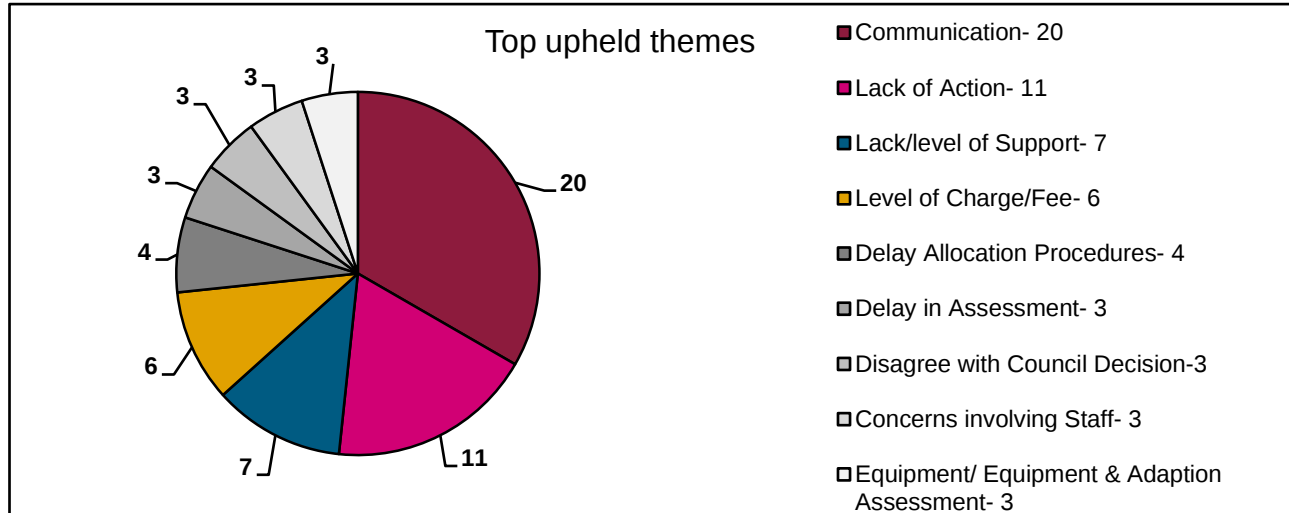
There were 5 complaints that involved care providers of supported accommodation and 2 complaints for a domiciliary care provider, all of which 86% were upheld. Themes included communication, Lack of action, and level of support.

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

Themes of upheld complaints

Of the 25 upheld complaints, the top themes raised were as detailed in the chart below.

Chart 4: 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 20 instances across 17 of the upheld complaints 68%. This covers a variety of concerns including a lack of or inadequate communication from a worker, lack of response to emails, failure to respond to requests made or keep the person or their family/ carers updated on progress.

Lack of Action was a theme in complaints accounting for 11 instances across 9 upheld complaints (36%).

Lack/level of support was a theme in complaints accounting for 7 incidents across 4 upheld complaints (16%)

Charging for Care was also a key theme in complaints accounting for 6 instances across 5 upheld complaints (20%) which includes incorrect invoices being sent, delays in confirming that there would be a financial assessment and that a contribution to fund care would be required and contributions calculation incorrect.

In contrast to the year 2023/24, when Direct Payments (including communication, explanation and processes) had been identified as a theme from complaints and a focus for improvements, no issues arose from complaints received during 2024/25.

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.

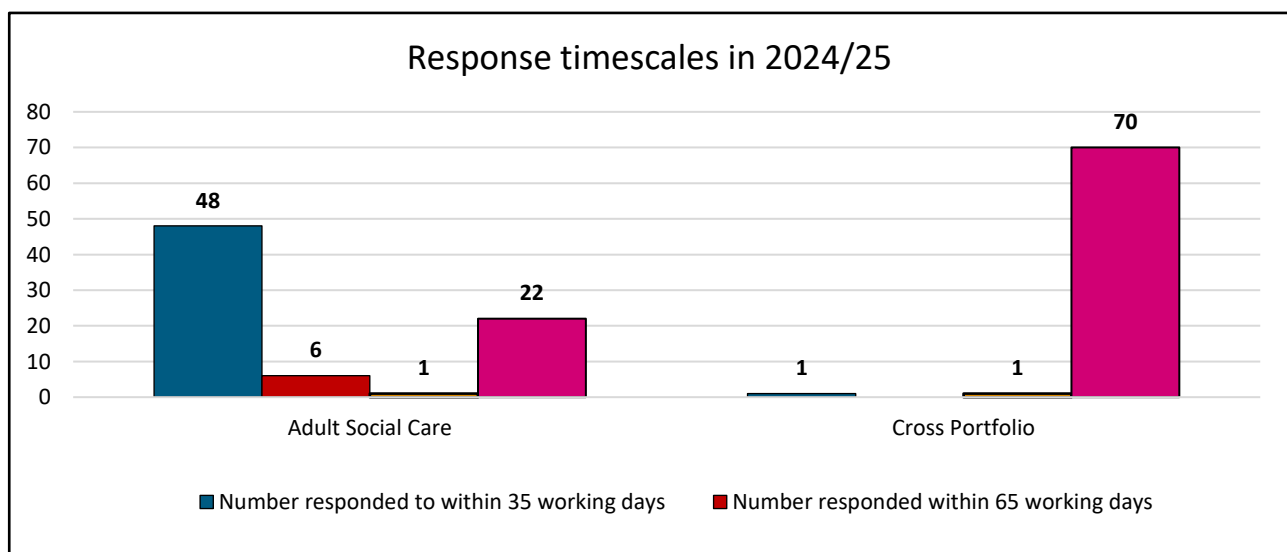
In 2024/25, the average number of working days to respond to an Adult Statutory Complaint across all portfolios was 24 working days. This is a decrease on the average of 29 working days achieved in 2023/24 and significantly lower than the typical 35 working days negotiated for a response.

Adult Social Care took 22 working days to respond to statutory complaints. Two complaints involved cross directorate working, one complaint took 15 working days to respond to and one complaint did exceed the six months outlined in the regulations however this was because it was complex and required external investigation to bring to a conclusion.

Adult Social Care continues to work to maintain good response timescales. 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 and Integration 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 at Leadership Team Meetings. For a breakdown, see the chart below.

Chart 5: Response timescales at Stage One



57 complaints have been responded to in year, 49 responses were sent within 35 working days (86%), and 6 further responses were sent within 65 working days and two cases exceeded 65 working days one was sent on day 69 and the other exceeded six months due to the complexity of the case.

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.

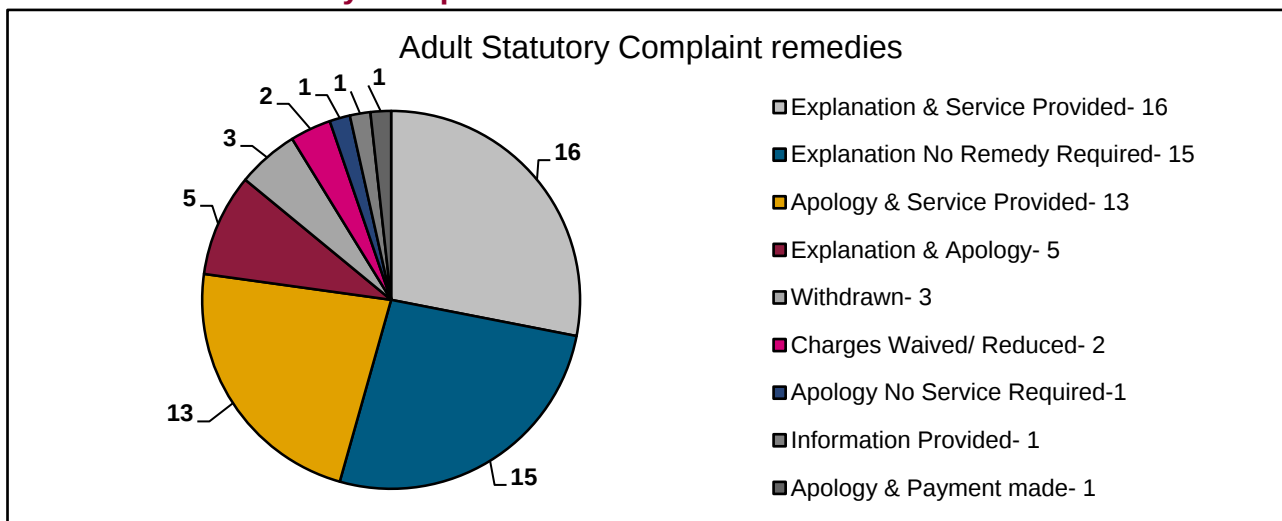
Lessons can usually be learned from complaints that were upheld, but also in some instances where no fault was found, the Council recognises that improvements to services can still be made.

Occasionally, during the course of an investigation, issues will be identified that need to be addressed over and above the original complaint. 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.

Quality Assurance is an integral part of everyday practice within Adult Social Care and measuring the impact of service delivery is central to achieving improved outcomes for adults with care and support needs. 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. This is reflected in the Adult Social Care Quality Framework, of which statutory complaints is a part of.

As part of the Adult Social Care Governance framework, quarterly quality assurance reports are prepared, shared and discussed at the ASC Quality Assurance Delivery Group and subsequently at the ASC Assurance Board. The reports also include a report on 'Feedback from people who use our services, their carers and families' which includes issues identified, areas for reflection and improvement and learning outcomes from complaints, concerns resolved at service level, compliments, comments, enquiries and other sources of feedback. The reports are used to help inform service improvements and development and improve outcomes for people with care and support needs in Telford and Wrekin.

Chart 6: Adult Statutory Complaint remedies in 2024/25

Of the remedies recorded against Adult Statutory Complaints in 2024/25:

- 28% were to provide an explanation and a service
- 26% were to provide an explanation where no remedy was provided
- 13% were to provide an explanation or apology and provide a service
- 9% were to provide an explanation and apology

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

- *Working Together* documents have been embedded in all teams.
- An Adult Portal is being developed which has been coproduced with experts by experience to allow sharing of assessments and documents. Individuals, families and representatives will be able to access and, in the future, add to and amend their own assessments.
- Reminders to teams about effective communication, including sharing information and updates in a timely way.

- Measures put in place to ensure individuals and family/carers are contacted and updated when a worker is on leave (planned or unexpected) and effective handovers are completed.
- Reminders to staff and managers on the importance of ensuring a worker's out of office is on when moving role or leaving the authority so that all those attempting to make contact are aware of the circumstance and provided with alternative contact details.
- Best Practice guidance for Case Summaries on the person's electronic records has been developed (case summaries provide an overview of the person's current situation and identify any ongoing work).
- Reminders to teams about best practice in record keeping.

Assessment and support planning

- Mechanisms reviewed and embedded to ensure a consistent approach to evidence gathering and assessment and reflective discussions with workers and the importance of making clear the reasons questions are asked as part of assessment conversations.
- Additional checks and monitoring have been implemented to prevent delays in support plan processing.
- A carers' assurance process has been introduced to support decision making and ensure individuals are receiving the correct support.
- Written guidance about Disability Related Expenditure (DRE) has been co-produced with our Making It Real Board and other experts by experience. This will be followed by a new form and training for staff to ensure consistency and equity.
- Supervision processes are being reviewed and training for managers and supervisors being developed.
- Reminders to teams about ensuring points of action are completed following meetings, and professionals and people/families are aware of timescales.

Charging for care

- Financial Assessment and service processes reviewed and updated to reduce calculation errors.
- Processes reviewed and updated mechanisms implemented to prevent delays in releasing invoices, and prevent automated invoices being issued unnecessarily.
- Additional training held for staff to improve knowledge and understanding of the ASC Charging Policies and financial assessment processes.
- Additional monitoring in place for joint funding arrangements.

- Reminder to teams about good practice when dealing with queries about outstanding assessments/invoices.

Providing care and support

- New process implemented to alert brokers to urgent referrals.
- Follow up contact with providers implemented to ensure our residents are receiving prompt delivery of equipment and expected timescales are being met.
- Further work identified to improve information shared with people and their families about ordering equipment.
- Reviewed and updated the Market Position Statement for Adult Social Care in Telford and Wrekin, including joint approach across Shropshire, Telford and Wrekin Integrated Care System, to incorporate the needs of working age adults who have an acquired brain injury.

Experience of care and support

- Follow up contacts enabled (Provider Quality Assurance Framework and other processes), supporting providers to implement and embed changes, where needed.
- Placement transition processes have been reviewed to ensure compatibility and support improved experiences for people.
- Follow up to support improved communication and responsiveness to individuals' routines when equipment is provided.

Other

- Review and update to the recording processes of safeguarding concerns.
- Reminder to staff in Adult Social Care about expectations when working from home.
- Review of the training offer for staff delivering information and advice via contracted services
- Customer Services' switchboard directory updated to support enquiries relating to Disabled Facilities Grants/Occupational Therapy assessments.
- Guidance has recently been introduced across the Council to ensure that when an individual has raised concerns via an elected member, the ensuing enquiry response advises how the individual or their representative can access formal complaints procedures should they wish to do so.

Other feedback and the actions taken to improve our services

We gather feedback from various sources to improve the service we provide to people who use our services, their carers and families. For example;

- Adult Social Care feedback forms – using QR codes, electronic and paper forms to gather feedback from people
- Feedback from Experts by Experience, and Making it Real Board and a number of other partnership boards
- Individual feedback through frontline workers
- Staff forum
- Complaints, compliments and comments
- Experiences of people / carers / families highlighted through employee awards and other mechanisms
- Other surveys
- Mystery Customer exercises
- Feedback from community and voluntary organisations/groups, staff and partners
- Feedback from partners
- Consultations External reviews, including Care Quality Commission assessment framework for local authority assurance.

Actions which have been informed through this feedback include.

- An All Age Carers Strategy has been developed, following extensive consultation and engagement with carers, professionals, organisations and groups across the Borough. This was launched in November 2024
- Carers Wellbeing Guide has been co-produced and re launched. This resource provides practical advice and local contacts to support our resident informal/unpaid carers in their day-to-day life
- A new feedback form has been created to capture the experiences of individuals involved in the Safeguarding process
- Keeping in Touch processes continue to be developed, including advice on how to 'wait well' whilst an assessment is pending
- Public guidance relating to Disability Related Expenditure (DRE) has been developed
- A recruitment drive has taken place to widen representation on our partnership boards

- Adult Social Care Knowing Where to Go has been further developed and promoted. Easy read, video and audio description versions have been created, and further development is planned, with a focus on Mental Health and Occupational Therapy
- Benefits awareness sessions have been delivered by Department of Work and Pensions and the Council's Benefits Team for experts with lived experience, Adult Social Care staff and community organisations
- Telford Voices and Learning Disability Partnership Board have co-produced a new webpage to help adults with learning disabilities and their parent carers to live well in Telford
- Locality team functions and responsibilities have been realigned to further improve the service provided to people with care and support needs
- Artificial Intelligence options are being explored to improve assessment experiences
- We are reviewing our training offer in relation to Mental Capacity Act and Deprivation of Liberty Safeguards
- Community-based assets continue to be promoted within the service
- A new Live Well Hub has been created in Madeley providing a one stop shop for information and advice for residents across a wide range of topics, including Adult Social Care, benefits, healthy lifestyles and more
- New focus areas have been identified for ongoing work, including reviewing the accessibility of documents, with input from experts by experiences; public understanding of assessment processes, and Live Well Telford

All feedback from both complaints and other sources is used to continually improve our services. We will continue to develop our services based on this feedback and also develop new and innovative ways to gather feedback from people, their families and carers to ensure that we continue to provide the best possible service to them.

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.

Three cases were escalated to the LGSCO in 2024/25. All cases have been determined in the year. Two cases were upheld, one of which the ombudsman was satisfied that the concerns had already been remedied, one case was not upheld.

The Council fully complied with the recommendations made by the LGSCO, and further learning will be taken forward to improve practices in relation funding particularly in relation to calculating capital reductions and ensure that there are no delays. Changes have been implemented to capital reduction processes to reduce the time for referrals.

Concluding Comments

This annual report shows that the number of Adult Statutory Complaints received in 2024/25 increased from 39 in the previous year to 57, however it is reasonable to conclude that this increase is as a result of less oral complaints, which can be resolved under the 24 hours resolution process, whilst recorded complaints have increased the number that could be resolved within 24hours has reduced so overall the number complaints across the year has reduced to 81 when compared with the 94 recorded and resolved in 2023/24.

Our Adult Social Care services continue to receive a low number of complaints, this report demonstrates that it continues to manage complaints well and is committed to putting right anything that has gone wrong. Whilst the numbers are low it's positive that the numbers of complaints received continues to demonstrate that people are aware of the complaint processes and can easily access them. This report shows that the Council continues to seek to resolve complaints at the earliest opportunity. 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 has also reduced to 44% this year in comparison to 2023/24, which saw 70% of complaints upheld.

Adult Social Care welcomes all complaints as a key part of its quality assurance activity, 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 2024/25.

Timescales for responding to complaints have decreased to 24 working days from 29 working days in 2023/24. The changes to local procedures and our complaints policy, has continued to impact by reducing timescales by 55% (53 working days) 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
7. Provide regular dashboards/ complaints samples to Directors, and performance is reported monthly to the Senior Management Team

The Quality and Complaints Officer (who sits within the Adult Social Care Assurance & Integration Team) 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' Quality Assurance Framework.

Priorities for 2025/26

During 2025/26, the Customer Relationship team and 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
- Further development of the digital complaints system to further improve efficiencies in complaint handling, recording of data and performance monitoring
- Working alongside ASC (and experts by experience) 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 & 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).