

# ADULT SOCIAL CARE COMPLAINTS & COMPLIMENTS 2022/23 SUMMARY REPORT

## Introduction

This is a summary report of the data for complaints/compliments received by Adult Social Care for the financial year 2022/23.

The Council welcomes feedback through the complaints/compliments process which, as well as providing the opportunity to identify where services have not been provided as they should be, it also provides customer insight and helps identify any deficiency in practice, policies, and procedures. It is from these that the Service and those who work in it can continue to learn and improve practice and service delivery.

## Statutory Complaints Procedure

General complaints about Adult Social Care received from service users or their approved representatives (Family Member, Advocate or Power of Attorney) are dealt with through the statutory procedure. This will be one investigation by a senior officer in the relevant service area (Team Manager) and then signed off by either a Service Manager or Assistant Director.

At the Complainant's, or their representative's, request, an external, independent investigator can be appointed to investigate if the Customer Relations & Information Governance Service Manager deems the complaints to be at medium or high risk. The following Risk Matrix is used to assess the complaint.

### **Risk Matrix**

The matrix below is used by the Customer Relations & Information Governance Manager in confirming the level of risk once an expression of concern has been considered within the formal complaints procedure.

		LIKELIHOOD OF RECURRENCE				
		RISK	Rare	Unlikely	Possible	Likely
<b>SERIOUSNESS</b>	<b>Low</b>	Low	Low	Low	Moderate	Moderate
		Low	Moderate	Moderate	High	High
	<b>Moderate</b>	Low	Moderate	High	High	Extreme
		Moderate	Moderate	High	High	Extreme
	<b>High</b>	Moderate	High	High	Extreme	Extreme
		Moderate	High	Extreme	Extreme	Extreme

## Time Limits

Level of Risk	Maximum Time Limit for Completion
Immediate resolution	1 working day – confirm outcome
All accepted as formal complaints	Acknowledge within 3 working days
Low	15 working days
Moderate	25 working days
High	65 working days
Extreme	Up to 6 months

If the complainant feels that the issues they have raised remain unresolved, they have the right to request a meeting with the Service Manager/Assistant Director and the Customer Relations & Information Governance Service Manager or refer their complaint to the Local Government & Social Care Ombudsman.

The Statutory Complaints process encourages the complainant and the Local Authority to consider resolving a complaint or concern informally through a face to face meeting or telephone discussion. It is the complainant's right to request the presence of the Customer Relations & Information Governance Service Manager at any face-to-face meeting.

Some complaints may require immediate action including whether the matter should be considered as a safeguarding issue. If it is a safeguarding issue, the relevant procedures would take precedence over the complaints procedure.

### Corporate Complaints Procedure

The Corporate Complaints Procedure deals with complaints which do not meet the criteria for investigation through the Statutory Procedure (for example the complaint is made by a Provider or a family member who does not have consent from the service user to make the complaint) and is a 2-stage process. The first stage provides an opportunity for a local resolution of any problems which may arise, and it is expected that the majority of complaints will be resolved at this level, usually within 20 working days or less. Where the problems cannot be resolved to the complainant's satisfaction at a local level, Stage 2 of the process involves the investigation of the complaint by a more senior member of staff, usually within 30 working days or less and with a formal sign off by an Assistant Director.

Where the complainant feels that the issues they have raised remain unresolved, they have the right to refer their complaint to the Local Government & Social Care Ombudsman.

### Summary of Compliments and Complaints Activity, Quality Assurance & Learning

This report details information for the past year together with analysis of the data, quality assurance and information on service developments as a result of learning from complaints. Under the current monitoring system, information about complaints received directly by teams is reported to the Customer Relations & Information Governance Service Manager upon receipt. This is to ensure that the Customer Relations & Information Governance Service Manager is aware of all current complaints in order to monitor their progress and highlight cases that can be resolved through Alternate Dispute Resolution (ADR) to Team Managers and senior staff.

## **Part 1 - Corporate Complaints**

**Please Note:** The following tables include information for those complaints received and investigated at Stages 0 and 1 only, as complaints which go on to Stage 2 would count as being a duplicate complaint received for reporting purposes.

For information, the service received one request for a complaint to be investigated further at Stage 2 during this reporting period.

### **Corporate Complaints Received**

<b>Total Number of Corporate Complaints Received</b>	<b>Total No. Received</b>	<b>Stage 0</b>	<b>Stage 1</b>
2017/18	7	3	4
2018/19	9	1	8
2019/20	13	3	10
2020/21	17 (+30.8%)	2	15
2021/22	20 (+17.6%)	6	14
2022/23	10 (-50%)	2	8

### **Spread of Complaints Received across Teams**

<b>Team</b>	<b>2022/23</b>	<b>% of Total No. Received</b>	<b>2021/22</b>	<b>% of Total No. Received</b>
CMHT	1	10%	2	10%
Commissioning	3	30%	2	10%
Deputy's Office	1	10%	0	0
FAB Team	0	0	1	5%
Finance	0	0	1	5%
Localities Team	3	30%	3	15%
PBST	0	0	3	15%
Public Health	1	10%	0	0
Safeguarding	0	0	5	25%
Short-Term Team	0	0	3	15%
Wellbeing	1	10%	0	0
<b>Total</b>	<b>10</b>	<b>100%</b>	<b>20</b>	<b>100%</b>

### **Themes of Complaints Received**

<b>Theme</b>	<b>2022/23</b>	<b>% of Total No. Received</b>	<b>2021/22</b>	<b>% of Total No. Received</b>
Communication	1	10%	1	5%
Financial Issue	0	0	7	35%
Lack of Support	0	0	2	10%
Policy Issue/Procedure	3	30%	4	20%
Quality of Service Provided	3	30%	3	15%
Staff Conduct	3	30%	3	15%

<b>Total</b>	<b>10</b>	<b>100%</b>	<b>20</b>	<b>100%</b>
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### How Complaint was Received

Method	2022/23	% of Total No. Received	2021/22	% of Total No. Received
E-mail	3	30%	8	40%
Letter	2	20%	2	10%
Telephone	2	20%	8	40%
Webform	3	30%	2	10%
<b>Total</b>	<b>10</b>	<b>100%</b>	<b>20</b>	<b>100%</b>

### Corporate Complaints Responded To

#### Outcomes for Complaints Investigated Formally to an Outcome

Outcome	2022/23	% of Total Responded To	2021/22	% of Total Responded To
Upheld	1	10%	5	27.8%
Partially Upheld	0	0	5	27.8%
Not Upheld	6	60%	8	44.4%
No Outcome	2	20%	0	0
Multiple Outcomes	1	10%	0	0
<b>Total No. Sent Out</b>	<b>10</b>	<b>100%</b>	<b>18</b>	<b>100%</b>

#### Timescales for Complaints Investigated Formally to an Outcome

	2022/23	% of Total No. Responded To	2021/22	% of Total No. Responded To
Total No. Sent Out In Timescale	<b>7</b>	<b>70%</b>	<b>12</b>	<b>66.7%</b>
Total No. Sent Out Over Timescale	<b>3</b>	<b>30%</b>	<b>6</b>	<b>33.3%</b>

## Part 2 - Statutory Complaints

### Statutory Complaints Received

#### Total Number of Statutory Complaints Received

	Total No. Received	% Change over previous year	Stage 0	% Of total received	Stage 1	% Of total received
2017/18	79	+27.4%	22	27.8%	57	72.2%
2018/19	72	-8.9%	21	29.2%	51	70.8%
2019/20	84	+16.7%	30	35.7%	54	64.3%
2020/21	71	-15.5%	33	46.5%	38	53.5%

2021/22	93	+31%	50	53.8%	43	46.2%
2022/23	89	- 4.3%	58	65.2%	31	34.8%

### Total Number of Statutory Complaints Received, Split by Teams

Team	2022/23	% of Total No. Received	2021/22	% of Total No. Received
Advice & Wellbeing Hub	2	2.2%	4	4.3%
Community Mental Health	1	1.1%	7	7.5%
*Commissioning	13	14.7%	7	7.5%
Community Reablement	1	1.1%	0	0
Deputy's Office	0	0	2	2.2%
Discharge to Assess Team	3	3.4%	0	0
DoLS	1	1.1%	0	0
Finance	1	1.1%	1	1.1%
Financial Assessments & Benefits	0	0	1	1.1%
Independent Living	1	1.1%	0	0
Localities	27	30.4%	44	47.2%
Long-Term Team	2	2.2%	1	1.1%
Mental Health Team	12	13.6%	0	0
Occupational Therapists	0	0	1	1.1%
Personal Budget Support	8	9.0%	6	6.4%
Preparation for Adulthood Team	8	9.0%	0	0
Primary Care Network	1	1.1%	0	0
Public Health	0	0	1	1.1%
Review Team	3	3.4%	0	0
Safeguarding Adults	2	2.2%	2	2.2%
Shared Lives Team	1	1.1%	0	0
Short-Term Team	2	2.2%	16	17.2%
<b>Total</b>	<b>89</b>	<b>100%</b>	<b>93</b>	<b>100%</b>

**Note:** The Commissioning Team investigate complaints and concerns about Providers. The 13 complaints referenced above are complaints raised and investigated about service Providers.

### Total Number of Statutory Complaints Received, Split by Theme

Theme	2022/23	% of Total No. Received	2021/22	% of Total No. Received
Communication	12	13.5%	19	20.4%
Data Breach	1	1.1%	0	0

Financial Issue	10	11.2%	7	7.5%
Lack of Support	7	7.9%	5	5.4%
Policy Issue/Procedure	7	7.9%	6	6.5%
Quality of Service Provided	40	44.9%	49	52.7%
Staff Conduct	12	13.5%	7	7.5%
<b>Total</b>	<b>89</b>	<b>100%</b>	<b>93</b>	<b>100%</b>

### How the Complaints were Received

Method	2022/23	% of Total No. Received.	2021/22	% of Total No. Received
E-mail	48	53.9%	48	51.6%
Letter	9	10.1%	9	9.7%
Telephone	20	22.5%	24	25.8%
Webform	12	13.5%	12	12.9%
<b>Total</b>	<b>89</b>	<b>100%</b>	<b>93</b>	<b>100%</b>

### Statutory Complaints Responded To

#### Outcomes of Statutory Complaints Investigated Formally to an Outcome

Outcome	2022/23	% of Total No. Responded To	2021/22	% of Total No. Responded To
Upheld	28	31.8%	12	27.9%
Partially Upheld	9	10.2%	9	20.9%
Not Upheld	31	35.2%	10	23.3%
No Outcome	4	4.5%	1	2.3%
Multiple Outcomes	16	18.3%	11	25.6%
<b>Total</b>	<b>88</b>	<b>100%</b>	<b>43</b>	<b>100%</b>

Note: One of the 89 complaints received was withdrawn by the complainant, 88 were investigated.

#### Timescales for Responding to Statutory Complaints

	2022/23	% of Total No. Responded To	2021/22	% of Total No. Responded To
Total No. Responded to in Timescale	<b>62</b>	<b>70.5%</b>	<b>24</b>	<b>55.8%</b>
Total No. Responded to Over Timescale	<b>26</b>	<b>29.5%</b>	<b>19</b>	<b>44.2%</b>

**Note:** The statutory complaints above, we worked to an initial 15 working day response date extending to no more than 25 working days.

## **Learning & Service Improvements following Complaints received**

Complaints and concerns provide essential and valuable feedback from our service users and customers. Listening to customers and reflecting on examples of where we have not got it right can reveal or highlight opportunities for improvement (for example, a deficiency in practice, communication or service delivery). Even if a complaint is not upheld, lessons can be learnt from that complaint with service developments and improvements as a result. The complaints process and the feedback gained is an integral part of the quality assurance process, which feeds into the development and monitoring of services. Learning from complaints are reviewed by the Adult Social Care Care & Quality Board to ensure lessons have been understood and are embedded into practice. Below are some examples of learning from complaints in the past year along with key service improvements as a result of the complaints received.

### **Examples of complaints and learning:**

#### **Complaint 1:**

Unhappy with the support provided by the Locum Social Worker in the Discharge to Assess Hospital Team, who contacted you to advise the Care Centre could not meet her father's care needs due to his behaviour. She was not offered any help to find another care home placement for her father or kept up to date with his situation at Care Centre – Complaint upheld

#### **Learning 1:**

All workers will be reminded to inform family members of the decision-making process and legislation we have to adhere to when working with individuals who appear to lack mental capacity.

Workers to be reminded to complete a formal mental capacity assessment when there are any changes to an individual's day to day life when they lack mental capacity. In this case when the father was moved to the Care Centre and at the four-week placement review.

All workers to be reminded to record all discussions with line managers on the social care electronic record so there is a clear audit of decision making.

All workers to be reminded to keep in contact/communicate with family members until a placement has been made permanent and/or is stable.

#### **Complaint 2:**

Have received the financial assessment outcome letters from the Financial Assessment & Benefits Team, which have confirmed her mother's maximum weekly charge for her non-residential care & support package that she is receiving.

The Social Worker allocated to the case in March 2021 informed the complainant that there would be no charges until the Financial Assessment & Benefits Team had contacted her to obtain the necessary information for the assessment, however this was not the case and the complainant had to query this with the Financial Assessment & Benefits Team. – Complaint Upheld.

#### **Learning 2:**

The Council will now be seeking to urgently introduce an Errors and Omissions report so we can compare data across the two systems used in this process. This will avoid the possibility of a similar occurrence in the future.

### Complaint 3:

Attitudes of both staff members involved within the formal complaint about an external provider; The timings of visits and staff logging off at differing times when both have left at the same time; Tasks stipulated in the care plan not being completed by both members of staff involved in the complaint; and the general lack of respect towards the Service User and family during the visits causing upset and distress – Complaint Upheld.

### Learning 3:

Members of staff are to engage in further training to increase their knowledge and skills regarding dispute resolution and how approaches can have an impact on others. Medication and manual handling techniques to be reviewed and staff to be observed. Service to conduct an audit of calls made across the service to ensure compliance. Ongoing process to be established by the service. Earlier intervention by the management team to prevent escalation and focus on resolution where conflict arises.

### **Service Improvements – in 2022/23:**

- ASC have implemented the Quality Improvement Team which works with Providers in Reading to improve the quality of care provided by them
- ASC have undertaken 1553 reviews between April 2022 and March 2023 which is an increase on the previous year
- ASC have invested in the Carers Partnership delivered by Voluntary Sector Providers to ensure Carers have easy access Carers assessment and increase the number of assessments and Carers Personal Budgets offered.
- ASC have developed a customer survey to measure satisfaction and are gathering monthly data to identify areas for improvement
- All managers continue to be trained in investigating and responding to complaints. In addition, the service is looking to commission training for all staff on customer care and what good customer care looks like.
- The ASC Care and Quality Board continue to review all elements of care quality in the service, review lessons learnt from complaints, and implement any agreed service improvements.
- ASC have improved workflows on the Mosaic system to ensure providers are paid in a timely manner

### **Quality Assurance**

The Customer Relations Team carries out checks of all complaint responses to ensure the quality of the response and that the language and terminology used is made easy for the complainant to understand, particularly if the complainant has a disability. We have on occasion asked the investigating officer to translate reports and responses into Easyread.

Statistics indicate 100% of responses were checked by the Customer Relations Team before being sent out. The Customer Relations & Information Governance Service Manager and the Team are also available to the complainant and the investigator for advice on best practice during the complaint investigation but remain impartial.

The Customer Relations & Information Governance Service Manager will deliver training on investigating and responding to complaints on request. The Corporate Complaints Procedure is available on-line. The Adult Social Care statutory procedure is available on-



line also. The Customer Relations & Information Governance Service Manager attends Team Meetings to provide training and advice to Teams and Senior Managers when required. The Customer Relations Team has also improved processes to ensure upcoming responses are discussed and monitored at weekly meetings. The Social Care staff are in more regular contact with the Customer Relations & Information Governance Service Manager and her team and are aware of their processes which has led to improved joint working for the benefit of the complainant.

### **Support Network**

The Customer Relations & Information Governance Service Manager is the Vice Chair and participates in the Southern Region Complaints Managers' Group and the National Complaints Managers' Group, which continues to support Customer Relations and Complaints Managers in sharing good practice, both nationally and locally. Where cases are complex the Customer Relations & Information Governance Service Manager often seeks advice and guidance from Legal Services and the Local Government & Social Care Ombudsman's advice line.

### **Local Government & Social Care Ombudsman (LGSCO)**

The Local Government & Social Care Ombudsman's role is to investigate complaints about maladministration or administrative fault that lead to injustice for the complainant. In some complaints the LGSCO may find evidence of administrative fault but no resultant injustice. The LGSCO should not investigate complaints about policy changes where the decision has been properly made.

Between 1 April 2022 and 31 March 2023, the Local Government & Social Care Ombudsman received 5 representations from dissatisfied service users for issues relating to Adult Care & Health Services, which is 2 less than the previous year. Of these 5 cases, 4 cases were investigated and fault found and 1 case was assessed and not further investigated.

The LGSCO did not issue any formal reports finding maladministration by the Council.

### **Compliments**

The Customer Relations Team owns the logging of compliments for the Council as a whole. Staff are reminded and encouraged to pass on all compliments to the Customer Relations Team's generic mailbox.

In the year 2022/23, 42 compliments were received by the following Adult Social Care Teams: In the previous year only 10 were recorded.

Teams that were complimented by service users include - AMHP and Forensic Team, Adult Safeguarding team, Occupational therapists (OT), D2A team, Review team, Mental Health Team

Examples:

- For the D2A and Review team - I have just spoken to VJ's daughter J who had nothing but praise for the support they had from RBC when VJ was placed in a Nursing Home in Wiltshire. Both J and P were excellent in their roles. The family are very grateful that their mother is getting exceptional care. J said she has no need to attend the review meeting because she trusts RBC and the home to do the best for her mother. She is very well looked after and thank you for the time and support J and P have given them to make the right decision.

- For an OT - I'm pleased to share that MLD's son R could not have spoken more highly of you today on the phone, described you as "brilliant" and that your assessment of need when MLD was in hospital was exactly right.
- For the AMHP and Forensic team - Hope all well. Just would like to say it's been a pleasure working with you. Many thanks for all your input which have contributed a lot in the improvement of the quality of life of our residents. On behalf of HH, I wish you all the best in your future plan and may God answer all your prayers.
- For an OT - Many thanks for visiting E last week and supporting us with this bathing requirements. To be honest, We have struggled from last one year to find a suitable bathing support. Although many solutions were offered, but either they were too 'high-tech', didn't fit our bathtub or not suitable for his age. In our first meeting, you got involved, listened to our requirements and proposed a solution swiftly. The solution & products you have provided nicely fits in our bath tub nicely and very easy to use for us and E. You were very quick to order the equipment which arrived the next day. Just wanted to say 'Many thanks' for continued help and devising a practical solution which will make our and E's live comfortable and safe. You have been thoroughly professional, supportive, empathetic and patient during the whole discussion.
- Another OT - Visiting family had commented on the difference input had made to P mobilising safely on stairs and in garden and he thanked me, I explained there is also team behind the various work so he wanted to extend his thanks to everyone in this team as he thought the work we did "was brilliant and he knows people knock the council but you have all been great and made such a difference to me. I don't want to embarrass you but you are all great". Wife also thanked as the TEC had made much easier for her to manage falls risk with overnight toileting and on stairs, and she felt his quality of life improved eg being able to access garden again which is up some steps outside.
- For AMHP staff - We have always had a good working relationship with the Reading AHMP service. Recently it has been highlighted to me on a number of occasions how proactively the two services have worked together particularly in relation to preventing hospital admissions. This is due in no small part to the efforts that V and her team put in. Please could you pass my thanks on to the team for the excellent work they do.
- For Adult Social Care - I just wanted to let you know that I spoke to BG's mother today and she offered a lovely compliment about L, she said that she found L to be very passionate and that she had a really good understanding of children with complex learning disabilities. She said that moving her child towards adulthood services was very daunting however she felt much more positive after meeting with L.

### **Contact Information: How to make a complaint**

Some complaints can be sorted out by discussing your problem with your Social Worker or a manager. If you want to make a complaint, you can contact the Council by telephone, letter, in person or by e-mail. Telephone the Customer Relations Team on 0118 937 2905 or e-mail: [Socialcare.Complaints@reading.gov.uk](mailto:Socialcare.Complaints@reading.gov.uk). If you wish to make your complaint to

us in writing, our address is: The Customer Relations Team, Reading Borough Council, Floor 2 South Rear, Civic Offices, Bridge Street, Reading, RG1 2LU. Your complaint will be recorded and if we cannot sort out the problem immediately it will be passed for further investigation and action. The Customer Relations Team can take your complaint over the telephone and explain the complaints procedure in more detail or send you a leaflet explaining how to complain. The leaflet is also available in Council buildings or via the Council's website. You can also use these contact details to tell us if you have a concern (but do not want to make a complaint) or if you want to make a compliment about a service.