

# Annual Complaints Report Adult Social Care Wandsworth 2022-23

**Nancy Kurisa**  
**Statutory and Corporate Complaints Manager**



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## 1. Introduction

- 1.1 The production of a complaints report is a statutory requirement for Adult Social Care to provide an overview of the complaints received and handled through the Local Authority's statutory complaints procedure. This report is designed to meet this requirement of Adult Social Care and is a public document.
- 1.2 The Local Authority has a duty to ensure that any individual (or appropriate person acting on their behalf with their consent or Power of Attorney) who wishes to make a complaint about the actions, decisions or apparent failings of a local authority's social care provision have access to the Adults statutory complaints procedure.
- 1.3 The Complaints Team sit within the remit Resident Engagement Service. There is a statutory requirement to have a complaints manager in post. The Complaints Team is led by the Corporate and Statutory Complaints Service Manager who reports to the Head of Resident Engagement. The Complaints Team also comprises of two operational managers: an Adult and Children's Complaints Manager and a Corporate and Ombudsman Complaints Manager, and four complaint officers.
- 1.4 The Complaints Team is an important corporate function within the SSA Chief Executive's directorate. Its role is to support the organisation to ensure that both Councils have effective and efficient complaints procedures, harmonised across the two councils in line with best practice and statutory requirements. The Complaints Team also train and support Council officers to respond effectively to complaints and ensure learning from complaints feeds directly into service improvement.

## 2. Executive Summary

- 2.1 There is a legal requirement for the Local Authority to have in place a complaints procedure, in accordance with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 for the management of social care complaints. The complaints procedure is a single stage process for both Health and Social Care services. The Local Authority has a total of six months to resolve a complaint from start to finish.
- 2.2 This year learning has focused on strengthening communication, improving social worker handover processes, improving communication about charging and Direct Payments, improving the quality of assessments and transition, and providing refresher training on complaints handling.
- 2.3 The 66 complaints this year is a 18% decrease on last year. The reduction can be directly attributed to the reduction of complaints for the Wandsworth East Locality Team. This service was the largest Adult Social Care service dealing with a high volume of demand and a high level of complexity. This year Adult Social Care have

restructured the Wandsworth Localities to align with the ICB primary care networks and this has meant that the volume and complexity of work is more evenly spread across the three Locality services. This restructuring has also supported us to improve performance in reducing waiting times for assessment and enabled Adult Social Care to manage the high level of incoming safeguarding concerns more efficiently. Alongside this, some effective recruitment and retention measures have been implemented, improving the resilience and effectiveness of our Duty system.

- 2.4 As well as the 66 formal complaints, the Complaints Team handled 97 enquires/representations which are mainly matters that fall outside of the formal complaints procedure. These are listed in Table 2.
- 2.5 Finance was the most raised principal issue of complaint which is the same as last year. This is expected as Adult Social care is a chargeable service.
- 2.6 45% of complaints were partly upheld, 26% were not upheld and 29% were upheld.
- 2.7 In total 17 formal complaints raised issues about external care providers such as care homes, domiciliary care providers and supported living. This is higher than the 8 complaints last year. However, the Quality Assurance and Contract Monitoring Team received 321 service concerns for processing which had the potential to escalate to formal complaints but were addressed.
- 2.8 56% of complaints were responded to within the local 25-day target. This is an improvement on the 40% responded to within this target last year. No complaints exceeded the six-month statutory timeframe; the average number of days to respond across all complaints was 25 days.
- 2.9 Data on equalities and the type of support provided to service users is detailed in section 11 of the report.
- 2.10 Adult Social Care do not receive many corporate complaints as most complaints are investigated through the statutory complaints process. In Wandsworth, numbers have decreased significantly from 15 stage 1 corporate complaints last year to 5 this year. Only 1 corporate complaint escalated to stage 2.
- 2.11 There were 4 Ombudsman contacts compared to 10 last year – a 66% decrease. 3 resulted in formal investigation and some fault was found in each case. The Ombudsman are being more selective about the cases they investigate and have informed Councils that this will increase the number of complaints upheld.
- 2.12 The Complaints Team were made aware of 40 compliments for Adult Social Care Teams in Wandsworth. Section 14 provides examples of these compliments which evidence the good quality services that are being provided.
- 2.13 Section 15 sets out the Complaints Team's key achievements this year and priorities going forward into 2023/24.

### **3. Legislation**

- 3.1 There is a legal requirement for the Local Authority to have in place a complaints procedure, in accordance with The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 for the management of social care complaints.
- 3.2 The Regulations cover Adults social care and Health services and/or any of its commissioned services and/or independent services.

### **4. Overview of the Statutory Adults Complaints Procedure**

- 4.1 The complaints procedure is a single stage process for both Health and Social Care services. The Local Authority has a total of six months to resolve a complaint from start to finish. Within this single stage, a complainant may receive a further investigation if not satisfied with the initial response or be offered the opportunity to meet to discuss their complaint.
- 4.2 Internal performance indicators aim to provide the complainant with a first response within 25 working days. Any further response must be completed by the six-month statutory timescale. The complaint can be progressed to the Local Government and Social Care Ombudsman (LGSCO) following the final response from the Local Authority or at any time.
- 4.3 Complaints should be recorded and monitored by the complaints team. All complaints should be offered the opportunity to discuss their complaint with a complaints officer and assessed for risk by the complaints team in liaison with the relevant social care team. Complaints that are deemed very high risk will be referred to the appropriate investigation route such as invoking safeguarding procedures.
- 4.4 A complaint is defined as “an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority’s adult social services provision that requires a response”.
- 4.5 Complaints can be made by the service user receiving a direct service from Adult Social Care or by a person on their behalf such as an advocate or family member where the service user has provided their written consent and they are deemed to be acting in the person’s best interests.
- 4.6 Where a service is provided by a contractor on behalf of the Council, a complaint can either be made directly to the provider service or to the complaints team at Wandsworth Council. Whilst the complaints team will encourage a provider to firstly attempt resolution through its own procedures, if this is not possible, the Quality Assurance and Standards team will investigate.

- 4.7 Service users who fund their own care for services that are regulated by the Care Quality Commission do not fall under this procedure, but people self-funding their care can still make complaints about the adult social care teams if they have been involved in assessing their level of care need and helping to arrange placements.
- 4.8 Complaints will be considered if they are made within 12 months of the incident although the Council can apply their discretion to waive this time limit in some instances.
- 4.9 Complaints are counted in the year in which they were responded to or closed: 2022-23 complaint figures include complaints that will have been initiated in the previous year (2022-23) but then closed in this reporting year.

## **5. Approach to learning from complaints/quality assurance**

- 5.1 Learning from the experience of people using services can identify where services, policies and procedures can be improved, keep senior management informed of issues that are important to people, improve communication and strengthen relationships.
- 5.2 The Complaints Manager holds quarterly meetings with the Adult Social Care Professional Standards team led by the Principal Social Worker. These meetings are an opportunity to triangulate learning from complaints with process improvement being undertaken by the Professional Standards Team.
- 5.3 This year the Complaints Manager and the Principal Social Worker held a 2-hour workshop for operational managers which was chaired by the Deputy Director. The session covered why learning from complaints is a valuable part of a healthy organisational complaints culture and included examples of weak and strong learning taken from real complaint cases. The outcome of the session was to equip managers to be able to identify evidence-based learning during the process of investigating complaints.
- 5.4 This year learning has focused on:
  - Strengthening social worker handover processes to avoid unnecessary delays and inconsistent services.
  - Reducing delays in discharge from hospital for people requiring a care home; social workers can now use temporary step-down placements if there are delays in sourcing permanent care homes.
  - Improving the quality of information about financial contributions provided to people when discharged from hospital with care packages to ensure clarity that Adult Social Care is a chargeable service.
  - Ensuring that when a person requires a new care provider urgently, for example if their current provider is unable to meet an increase in their needs, social workers will escalate to team managers so that these cases can be prioritised by the Service Acquisition Team.

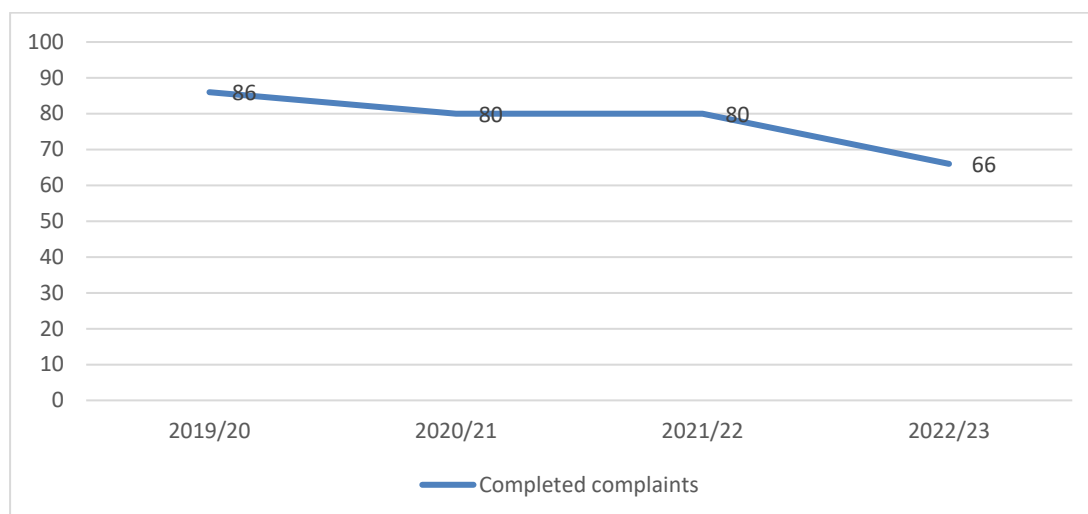
- Improving the quality of assessments by ensuring they are written up promptly and checks are made to ensure the information recorded is accurate at the time of producing the assessment.
- Ensuring social work teams are aware of the importance of signposting service users to the complaints process when they wish to raise a complaint. Refresher training on effective complaints handling was also provided by the Complaints Team.
- Improving the Transition processes for young adults moving from Children’s to Adult Social Care services through the use of a ‘tracking system’. The shared tracker monitors young people from 13/ 14, who may need social care services once they reach 18, highlighting agreed timeframes for key actions to take place on their journey.
- The Mental Health Social Care service have strengthened processes to ensure an inclusive and accessible service so that people receiving an assessment have their voices and views heard and recorded, advocacy is provided if needed, final assessments and outcomes are shared promptly and that unavoidable delays are communicated.

## 6. Statutory complaint numbers

- 6.1 The department completed 66 complaints<sup>1</sup>; which is 18% (14) less than the 80 completed last year.
- 6.2 The reduction in complaints can be directly attributed to a reduction in complaints for the Wandsworth East Locality Team. This year Wandsworth East completed 22 complaints compared to 6 this year which is a 73% reduction. Reasons for this are discussed in Section 7.
- 6.3 **Table 1 and chart 1** details the complaints received over the last 4-year period. There has been a gradual decrease in the number of formal complaints.

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<sup>1</sup> Six of the complaints completed in the first quarter of this year were carried over from last year (2021-22). In total 65 new complaints were received this year. Five of these remain open at the end of the financial year and will be carried forward and completed in the first quarter of next year (2023-24). The 65 new complaints received is 18% decrease from the 79 received last year.

**Chart 1: Statutory complaint numbers by year 2019/20 – 2022/23****Table 1: Wandsworth Adult Social Care complaints by year**

Wandsworth	2019/20	2020/21 Closed	2020/21 Received	2021/22 Closed	2021/22 Received	2022/23 Closed	2022/23 received
	86	80	79	80	79	66	65

6.4 Wandsworth is a large borough with a population of 327,500 and the volume of complaints should be set in context by looking at the overall level of contact and interaction Adult Social Care has with its residents and service users. During 2022/23, 65 complaints were received and 66 were closed but that is a low proportion given that the department handled approximately 44,846 contacts (telephone and email) and supported 3,827 people during the year. Also, whilst the Finance Assessment team lead on 5 formal complaints, this year the Team were responsible for carrying out 3,450 financial assessments<sup>2</sup>.

6.5 Additionally, the Quality Assurance and Contract Management team received approximately 321 service concerns for processing about adult social care external providers.

6.6 Wandsworth Adult Social Care and Public Health also responded to 299<sup>3</sup> Member enquiries this year in addition to the formal complaints. Member enquiries, either through local MPs or Councillors are a way for residents and members to raise questions with the Council about issues related to local services or the community and in particular for this Department, for the welfare of neighbours. The Complaints Team work closely with Adult Social Care to identify Member Enquires that raise issues that require a response through established complaint procedures.

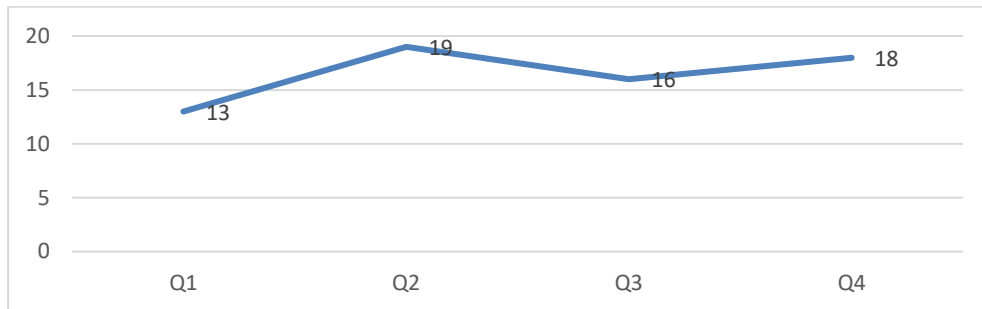
<sup>2</sup> Last year the department handled approximately 49,300 contacts, supported 3,473 people and undertook 2,689 financial assessments.

<sup>3</sup> The 299 Member Enquiries responded to this year is a 2% increase on the 294 responded to last year



6.7 **Chart 2** details the complaints received for each quarterly period. Complaint numbers were lowest in quarter 1.

**Chart 2: Number of Adult Social Care Complaints completed by quarterly period 2022/23**



6.8 Adult Social Care welcome all types of complaints and feedback. It is noted that overall formal complaint numbers continue to decline. Adult Social Care teams strive to resolve lower-level issues quickly at first point of contact and this good practice will reduce the number of formal complaints.

6.9 **Section 14** of this report provides examples of compliments which evidence the excellent social care practice taking place across Wandsworth Adult Social Care.

6.10 In addition to the 66 formal complaints, during the year the Statutory Complaints Team dealt with an additional 97 enquiries over a wide range of low-level complaints, or issues/concerns that did not fit within the remit the statutory complaints procedure. Combined with formal complaints the Complaints Team handled 163 issues for Wandsworth Adult Social Care. The Complaints Team also support Adult Social Care to implement the Unreasonable Complainant Behaviour Policy in a small number of cases when a complainant’s behaviour or manner in how they approach the Council in relation to their complaint, result in their contact being restricted.

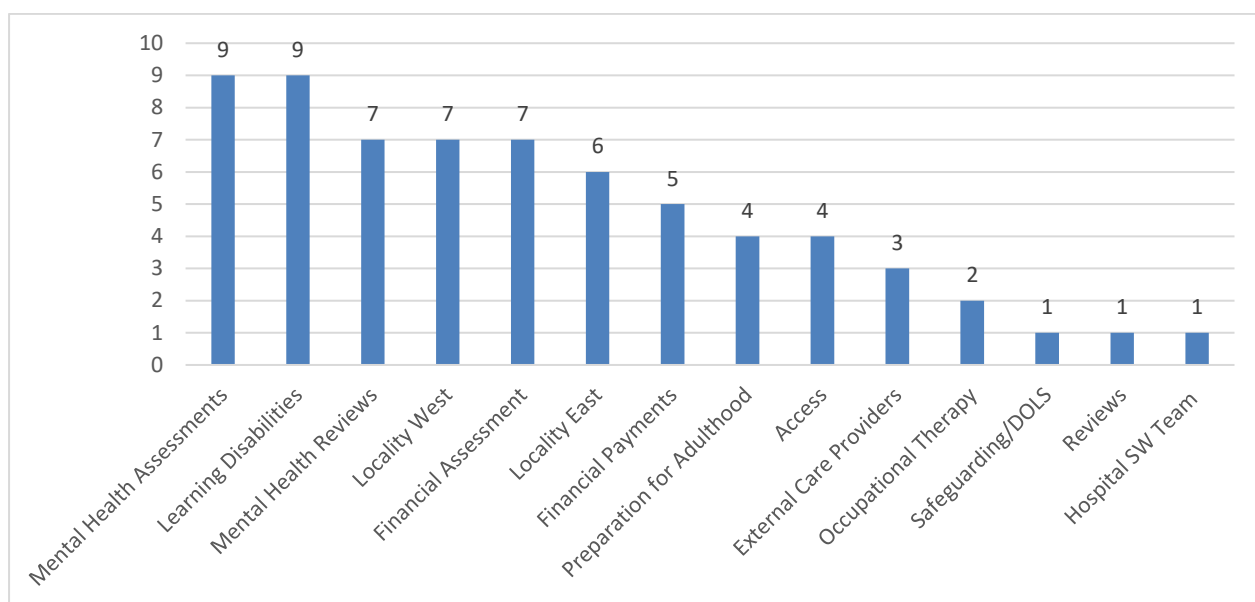
6.11 Low level complaints are issues that have been resolved informally and quickly to prevent escalation to the formal complaints process. Issues or concerns are other matters that residents have sent directly to the Complaints Team for triaging, signposting, or redirecting to another team or process, for example, housing complaints or safeguarding issues. These numbers are included in table 3 below to demonstrate the breadth of the work undertaken by the Complaints Team.

**Table 2: Representations, issues or concerns handled by the Complaints Team in 2022-23**

Type of case	Number
Formal statutory complaints.	66
Low level complaints sent to Adult teams for quick resolution.	37
Statutory complaint requests rejected (redirected) or no consent.	0
Non-statutory complaints/issues directed to other Council services or directorates.	7
Non-statutory complaints directed to the Council's Housing Department.	17
Issues directed to external partners/agencies.	7
Data Protection/FOI requests/Right to Rectification, redirected to Information Governance Processes.	4
Safeguarding concerns directed to Adult Safeguarding procedures.	12
Insufficient informant to progress.	8
Issues directed to the Council's legal/insurance services.	2
Restrictions under the Unreasonable Complainant Behaviour Policy	3
<b>TOTAL</b>	<b>163</b>

## 7. Statutory complaints by team

**Chart 3: Number of Adult Social Care Complaints by lead teams 2022-23**



7.1 **Chart 3 and Table 3** illustrate the number of complaints received by the teams with these service areas during the reporting year.

**Table 3: Number of Adult Social Care Complaints received by teams and Quarter 2022-23**

Team	Q1	Q2	Q3	Q4	Total
<b>Mental Health Assessments</b>	2	5	1	1	<b>9</b>
<b>Learning Disabilities</b>	1	2	2	4	<b>9</b>
<b>Mental Health Reviews</b>	3	1	1	2	<b>7</b>
<b>Locality West</b>	2	2	2	1	<b>7</b>
<b>Financial Assessments</b>	1	2	1	3	<b>7</b>
<b>Locality East</b>	2	1	2	1	<b>6</b>
<b>Financial Payments</b>	0	2	0	3	<b>5</b>
<b>Preparation for Adulthood</b>	0	0	4	0	<b>4</b>
<b>Access</b>	0	1	1	2	<b>4</b>
<b>External Care Providers</b>	1	0	1	1	<b>3</b>
<b>Occupational Therapy</b>	0	2	0	0	<b>2</b>
<b>Safeguarding/DOLS</b>	1	0	0	0	<b>1</b>
<b>Reviews</b>	0	1	0	0	<b>1</b>
<b>Hospital Social Work Team</b>	0	0	1	0	<b>1</b>
<b>Total</b>					<b>66</b>

- 7.2 Complaint numbers are split fairly evenly across mental health, the locality teams, financial assessment and learning disabilities. The numbers show that there are no concerns that one particular service is receiving a disproportionate amount of complaints. A certain number of complaints should be expected and overall numbers for all teams are low compared to the number of people supported. Complaints have raised issues that we would expect such as delays, communication and the quality of information, and services have learnt when things have gone wrong. Teams across Adult Social Care regularly receive comments and feedback from service users and/or carers and generally these issues tend to be resolved directly by the staff.
- 7.3 The 73% reduction in complaints for the Wandsworth East team is mainly as a result of actions taken to reduce waiting times for assessment and to more efficiently manage the high level of incoming safeguarding concerns, including recruitment<sup>4</sup> and retention measures, improving the resilience and effectiveness of the Duty system.
- 7.4 Overall, the highest number of complaints were for the Mental Health Teams. Combined, the Mental Health Social Care and Mental Health Review teams completed 16 complaints. As reported last year, this is to be expected due to the significant increase in demand for mental health assessments following the Covid-19 Pandemic.
- 7.5 Whilst complaints have reduced for the East Locality team, combined the East and West localities completed 14 complaints. Locality teams support older people and people with physical disabilities receiving long-term adult social care.
- 7.6 Financial Assessment led on seven complaints; complaints about financial matters are expected because Adult Social Care is a chargeable service.
- 7.7 In total, 17 complaints raised issues about external care providers. The Quality Assurance and Contracts Team led on 3 of these complaints (6%). The other 14 complaints were led by social care teams, in liaison with the Quality Assurance and Contracts Team, as the primary issues in the complaints were about social care support.

## 8. Complaints by issues and outcome

- 8.1 Adult social care complaints can be complex and raise multiple issues, sometimes across more than one team or service area. Each complaint has been classified by a single principal issue, which is the overarching theme or trigger of the complaint. Also,

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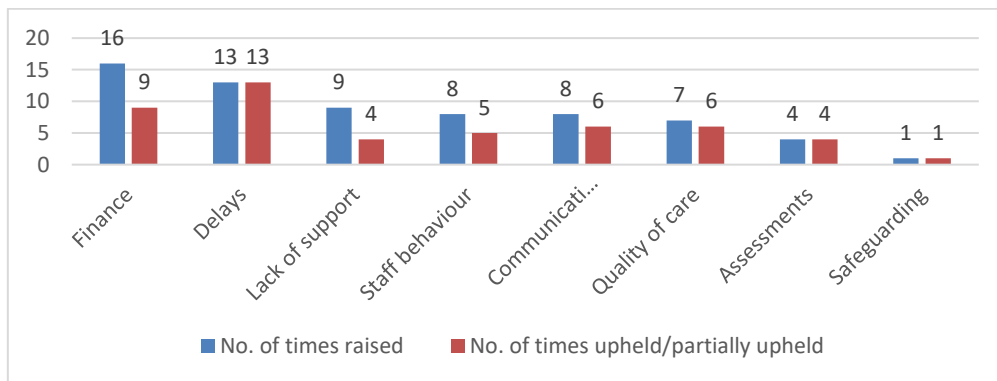
<sup>4</sup> From 1<sup>st</sup> April 2023 the localities will move from a 2-locality service to a 3 locality service (West, South and North). This is to be better aligned with the Health PCN and improve multi agency working. 3 smaller and more agile teams may have contributed further to a reduction in complaints.

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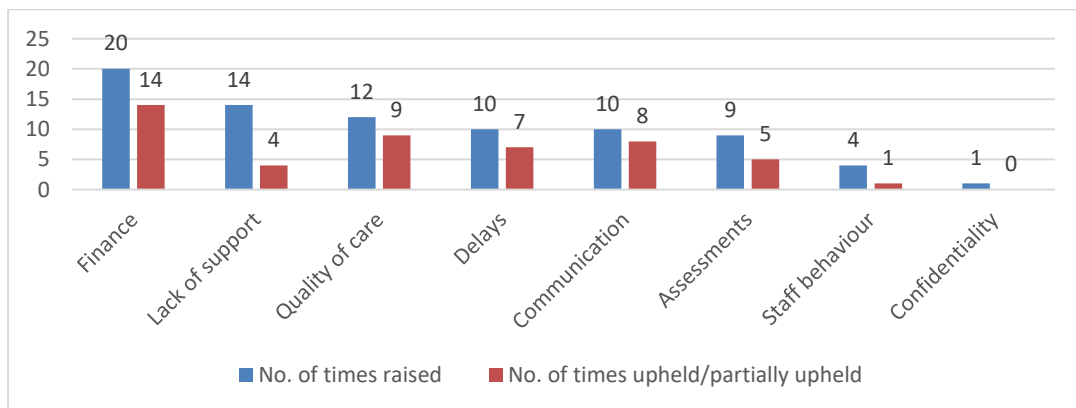
to provide a broader analysis, data has been provided for every issue raised across all formal complaints completed this year.

8.2 **Chart 4** sets out complaints by principal issue this year and **Chart 5** sets out complaints by principal issue in 2021-22. Both charts demonstrate that the main issues of complaint have remained constant with only a slight fluctuation in numbers, with the exception of staff behaviour which has increased by 50% (although overall numbers are still low). Finance has been the most raised principal issue of complaint over the last two years, but this is to be expected as Adult Social Care is a chargeable service.

**Chart 4: Number of Adult Social Care Complaints received by Principal issue 2022-23**



**Chart 5: Number of Adult Social Care Complaints received by Principal issue 2021-22**



8.3 **Finance** was the most raised principal issue (16 times or 24%) and upheld/partly upheld 9 times. When complaints about finance were raised often the problems were individual errors or misunderstandings rather than systemic issues. When complaints were upheld, teams quickly rectified mistakes and issued apologies. A summary of the types of issues raised is below:

- The wrong information used to calculate a financial assessment.
- Delays in providing financial information to service users.
- Lack of understanding of what care charges are for or struggling to understand financial contributions.
- Unclear about what Direct Payment monies can be spent on.

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- Charging errors or expectations that Direct Payments should be increased.
- Misunderstandings about what is chargeable and what is not, for example the free reablement period of care and trial care which is chargeable.
- Continuing to send invoices after care packages have stopped.

8.4 **Delays** were raised 13 times (20%) and upheld/partly in each case: Issues are summarised as:

- Delays in sending documents such as records of meeting and support plans; social workers were reminded of the importance of sending documents on time.
- Delays in making decisions; in one case this resulted in a service user missing a holiday.
- Delays in allocating social workers.
- Delays in completing assessments or putting care in place following assessments; some complaints arose from a social worker not putting in place adequate cover when going on leave or delays due to lack of cover for sickness. These issues were raised with the whole service to ensure better handover arrangements are in place.
- Delays in transition planning for young adults moving from Childrens to Adult Social Care. A tracker system is now in place which supports key actions taking place on time.

8.5 **Lack of support** was raised 9 times (14%). It was only upheld 4 times. Often people expect a higher level of service than is realistic or achievable within statutory responsibilities. Complaints raised issues such as:

- The amount of advocacy support available; this issue was fed back to commissioners.
- The amount of contact by social workers which made the service user feel unsupported. From one complaint social workers were asked to consider alternative methods of communication if they cannot reach a person via phone.
- Lack of support in a learning disability supported living placement. Feedback was provided to support workers as the service user and their family did not feel listened to.
- Lack of eligibility for various types of Adult Social Care support.

8.6 Complaints about **staff behaviour** have increased from 4 to 8 (12%) this year and was upheld/partly upheld 5 times; an overall increase of 50%. These complaints raise issues about the perceived professionalism of individual staff members. Some of these complaints relate to locum Social Workers who were either not fully appraised of processes and procedures, or not meeting expected standards of practice/communication. However Adult Social Care do have competent, motivated, and skilled locums working in some vacant posts. Given the number of people supported each year by Adult Social Care, the number of complaints about this issue are very low. Where complaints have been upheld, social workers have received reflective supervision to consider how their actions or communication was perceived and how to approach situations differently in future.

8.7 **Communication** was raised 8 times (12%) as a principal issue. Complaints are summarised as:

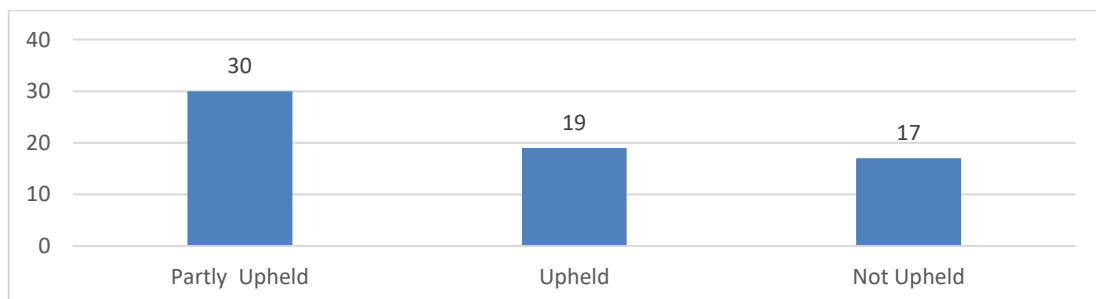
- Poor communication with another London Borough Council when a service user was transferring.
- Misunderstandings about social work decisions concerning the provision of services.
- Lack of clarity about why referrals have been made.
- Lack of clarity about the role of Adult Social Care when there are social housing issues for the Wandsworth Housing Team.
- Delays or gaps in communication.

8.8 Complaints about **quality of care** were raised 7 (11%) times and upheld 6 times. Most complaints were about the standard of care by either domiciliary, care home or supported living providers. Learning is detailed in **section 9**.

8.9 **Quality of assessments** was only raised 4 times as a principal issue and upheld/partly upheld on 4 occasions. Issues are summarised as:

- Dissatisfaction with the level of social care offered after an assessment.
- Dissatisfaction with the Occupational Therapy offer following an OT assessment.
- Gaps in information or incorrect information in assessments; on one occasion this resulted in delays with an Extra Care Housing application.

**Chart 6: Number of complaints by all outcomes 2022/23**

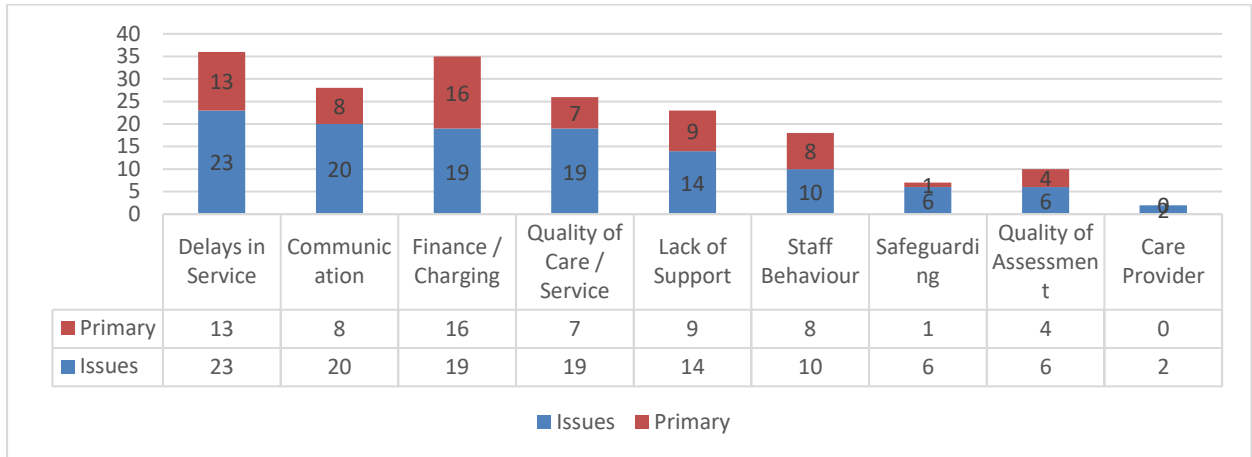


8.10 Chart 6 demonstrates that this year 30 complaints (45%) were partly upheld, 19 were upheld (29%) and 17 were not upheld (26%). Last year 18 complaints (23%) were partly upheld, 32 (40%) were upheld and 20 (25%) were not upheld.

8.11 Whilst **Chart 4** has set out the primary issues for each stage 1 complaint, Chart 7 below sets out each issue raised within the 20 stage 1 complaints. Across the 20 stage 1 complaints a total of 119 issues were raised, demonstrating the complexity of adult statutory complaints. This can present a challenge in determining the key motivation for making the complaint, as often issues like communication and delays are a thread through an entire complaint, yet the complainant’s desired outcome is to have an assessment amended or a professional decision changed. For example, Chart 7 demonstrates that whilst delays were raised 23 times, it was only a principal issue 13 times.

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**Chart 7: Number of Adult Social Care Complaints received by issues 2022-23**





## Learning “Care Charges”

### Background

The relative of a service user complained that their mother was receiving care that she did not know she was being charged for. They had been in hospital for 3 months and were discharged through the Discharge 2 Assess (D2A) scheme. Whilst receiving short-term reablement care the service user received a financial assessment as longer-term care was required but was surprised when they were then retrospectively charged for care; the complainant felt it was unreasonable of the Council to retrospectively charge.

*The D2A scheme provides an assessment within 48 hours of discharge for people who will need extra short-term social care support to enable them to stay in their own home. The service is free charge and last for a few days to a maximum of 4 weeks. If longer-term care is needed after this period, a person will receive a financial assessment to confirm how much they will need to contribute towards their care.*

### Learning

The investigation found that whilst the charging was correct and D2A had been explained to the service user, communication by the Hospital Social Work team had not been adequate in explaining that the D2A period is for a maximum of 4 weeks. The investigating manager found that whilst the D2A scheme was explained, no timescale was given for the period of free care which is why the service user assumed that they were receiving free care until after the financial assessment.

The Head of Service investigating the complaint raised the issue with the Hospital Discharge Manager so that going forward, hospital social workers will be clear as a matter of course that the period of free care is only for a maximum of 4 weeks. The complaint was also disseminated and discussed at a D2A meeting so that all staff are clear of the importance of informing service users that free reablement care is only provided for up to 4 weeks.

## 9. External Care Provider Complaints

- 9.1 The Quality Assurance and Contract Monitoring Team, that sit within the Commissioning Service, investigate care provider complaints for Adult Social Care. This includes residential and domiciliary care services. Complaints regarding a commissioned provider service, received directly by the Complaints Team, will be logged and processed in accordance with the Statutory Complaints Procedure and referred to the Quality Assurance and Contract Monitoring Team to investigate and monitor as required. Some complaints that raise issues about external providers are led by other teams if there are other aspects to the complaint, such as financial issues or care planning. In these complaints, social care teams liaise with the Contract Monitoring Teams to ensure that issues relating to quality of care are addressed.

- 9.2 If the care provider service has not had the opportunity to investigate the complaint through its own process, the Complaints Team may ask the complainant if they agree to firstly attempt local resolution with the care provider. If the complainant does not feel local resolution is possible, or they have attempted to resolve their complaint with the provider, the Council will investigate.
- 9.3 This does not include complaints by 'self-funders' who are able to complain directly to the care provider and/or the Local Government and Social Care Ombudsman (LGSCO). Whilst complaints received by self-funders will be signposted to the relevant provider and/or LGSCO, information received by self-funders about the quality of provider services will be passed to the Quality Assurance and Contract Monitoring team to inform the wider quality monitoring of services.
- 9.4 For this reporting year, 17 formal complaints were completed that were fully or partially about external care providers which is an increase on the 8 complaints last year. Three of these formal complaints were led by the Quality Assurance and Contract Monitoring Team as the complaint only raised issues about the external care provider. The remaining 14 complaints were led by social care teams in partnership with the Contract Monitoring Team as the complaints also raised issues about social care support.
- 9.5 Eight of the complaints were about care homes (one of these was also about domiciliary care), 5 were about domiciliary care, 2 were about supported living, 1 was about extra care housing, and 1 was about the advocacy service.
- 9.6 These low numbers of complaints should be set in the context of the number of service concerns that have been dealt with by the Quality Assurance and Contract Monitoring Teams. This year, 321 service concerns were raised about external care providers which required processing by Quality Assurance and Contract Monitoring Team.
- 9.7 Service concerns are a quick and effective way of dealing with issues as an informal complaint and prevent issues escalating. The Quality Assurance and Contract Monitoring Team aim to provide an outcome on these concerns within seven working days. Service users are always provided with information about the formal complaints process, but the benefits of the service concerns process are that it provides a rapid response to the service user and intelligence to the Quality Assurance and Contract Monitoring team about the performance of external providers.

## Learning Case Study

### Background

A complaint was received about the standard of care by a domiciliary care agency who were providing support to a person with dementia. The complaint firstly raised issues that the service user's family were not made aware that KITE (the internal provider which delivers free reablement care) were stopping and that a new care provider was starting to provide longer-term care. The social worker acknowledged that they had not kept in contact with the family as they should have done. Also, visits from the new provider were late or missed. When carers did turn up, they did not have PPE, did not know what care was required and carers did not have access to the keycode box. The complainant was unhappy that the carers were unclear about the timing of the visits and details of the care plan and asked for a new provider. However, when the new provider started, the same issues occurred.

### Learning

The service manager from the Adult Social Care Team investigated the complaint in partnership with the Commissioning Team (responsible for monitoring the quality of external providers). The social worker received reflective practice to ensure they understood the impact that their poor communication had on the family and received support and training to improve their communication skills.

The investigation also identified a common issue relating to the standard of care across both providers. Consequently, both providers were requested to increase their spot monitoring by field supervisions, Care workers were required to receive refresher training about providing care to someone with dementia, Care workers were reminded of the code of conduct and infection control including PPE and all providers were reminded to report all cancelled calls using an online reporting form.

## 10. Response times

- 10.1 Complaints should be investigated and completed within a statutory timescale of six months. Within this six-months, the statutory complaint regulations allow Councils to respond to complaints flexibly, so that investigations can be tailored to best meet the needs and desired outcome of the person making a complaint.
- 10.2 If the Council cannot resolve the complaint in its entirety within six months, it should consider signposting to the Local Government and Social Care Ombudsman (LGSCO). This is to ensure that complaints escalated to the LGSCO are in time<sup>5</sup>.

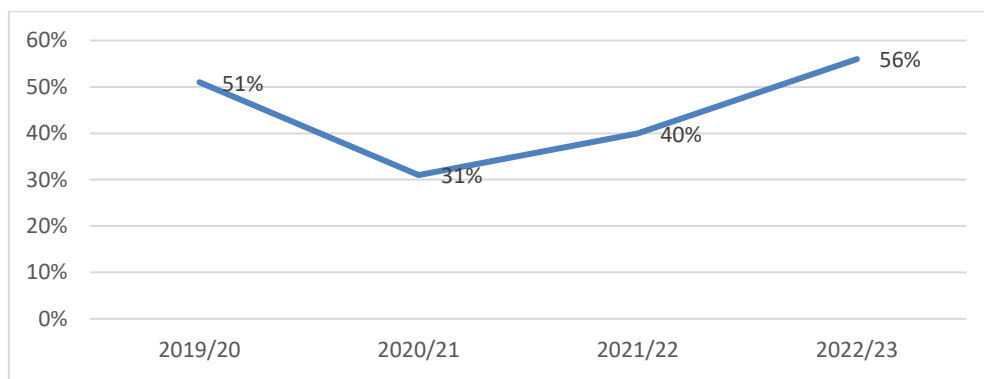
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<sup>5</sup> Requests for independent reviews by the LGSCO should be made within 12 months of the incident happening

10.3 Adult Social Care teams work towards a local target of 25 working days to respond in writing to formal complaints. As the complaint regulations allow flexibility, this timescale can be changed with the agreement of the complainant who is always kept fully informed. Therefore, whilst we measure against 25 working days to manage our internal performance, no complaints breached the statutory six-month timescale<sup>6</sup>. Also, where complaints have been extended past 25 days, complainants have been consulted throughout and have not raised concerns about delays.

10.4 For this reporting period, Wandsworth received 65 complaints but completed 66 complaints. Timescales were measured for the 66 complaints closed during this year within the 25-day local target.

**Chart 8: Percentage of complaints responded to within 25 working days 2019/20 – 2022/23**



10.5 Of those, 37 complaints (or 56%) were closed within 25 working days and 29 (44%) exceeded this timeframe. **Chart 8** details response times for the last four years which shows that less complaints this year were completed within 25 days.

10.6 For the 44% of complaints that exceeded the 25-day internal timescale, the average time for completing the complaint from start to finish was 36 days which is an improvement on the average of 70 days last year. Positively, no complaints exceeded the six-months statutory timeframe this year<sup>7</sup>.

10.7 Where complaints take longer than 25 days, extensions are agreed with the consent of the complainant and complainants are kept informed at all stages. As Adult Social Care complaints can be complex, sometimes it is necessary to use additional time to provide a comprehensive investigation. No complaints were received about the length of time taken to complete an adult statutory complaint.

<sup>6</sup> Six months is calculated as 182.5 days although this includes non-working days.

<sup>7</sup> Six months has been calculated as 182.5 days although this includes non-working days.

## 11. Equalities data and categories of support

11.1 This year 37 complaints (56%) were from or on behalf of service users of working age; between the ages of 18 and 64. A further 29 complainants (44%) were from complaints from, or on behalf of, service users in the older adult's category (or over 65).

11.2 This year 36 complaints concerned females and 30 complaints concerned males.

11.3 For the 37 complaints from or on behalf of service users of working age:

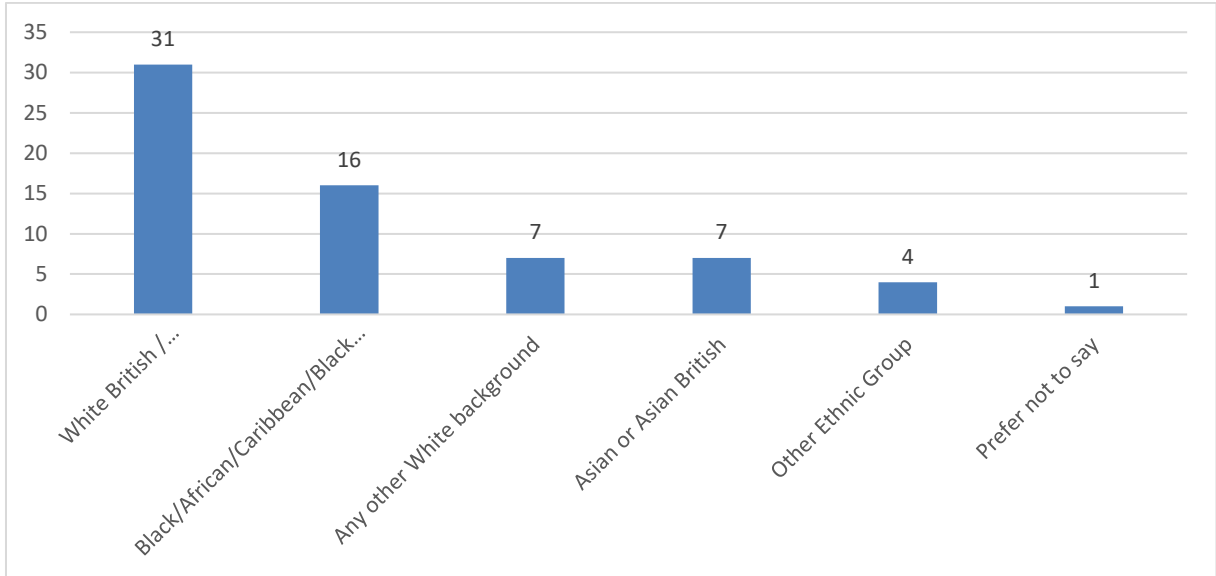
- 16% were in receipt of support for physical support which includes personal care and mobility and/or personal care
- 35% were in receipt of support from the Mental Health Teams
- 35% were in receipt of support for Learning Disabilities services.
- 6% (two people) were in receipt of care for social support.
- 6% (two people) were in receipt of support for both physical support and from Mental Health Teams.
- 3% (one person) was a former disabled child.

11.4 For the 29 complaints from service users in the older people's category (65 plus), where known:

- 66% were receiving physical support, for example, personal care and mobility, which is unsurprising given the demographics
- 7% (or 2 people) were receiving support for memory and cognition.
- 7% (or 2 people) were receiving support from Mental Health Teams.
- 7% (or 2 people) were receiving support due to a learning disability.
- 3% (or 1 person) was receiving sensory support.
- 3% (or 1 person) was receiving physical and learning disability support.
- 3% (or 1 person) was receiving support from Mental Health Teams and physical support.
- 3% (or 1 person) was receiving support for Physical and Sensory Disability and Frailty Physical Disability.

11.5 Where known, **Chart 9** provides ethnicity data for the service users who made complaints or had complaints made on their behalf. The majority of service users were from a White background (38 or 58%). In Wandsworth, 53% of Adult Social Care services users are from a White background. Black, Asian and Minority Ethnic Groups represent 47% of service users.

**Chart 9: Ethnicity Data 2022-23**



## 12. Corporate Complaints

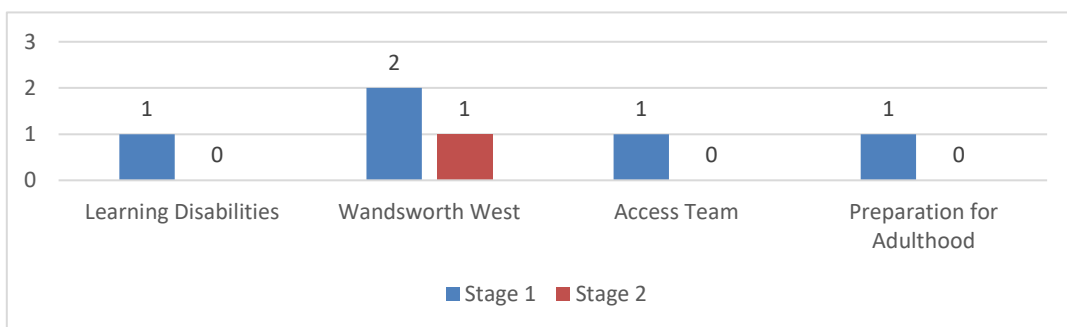
12.1 This report provides a brief overview of Corporate Complaints closed by Adult Social Care. Detailed reporting on Corporate Complaints is within Wandsworth Council’s Corporate Complaints Report 2022-23.

12.2 Adult Social Care do not receive many corporate complaints because most people that complain about Adult Social Care are people in receipt of statutory care services. Adult Social Care completed 5 stage 1 corporate complaints compared to 15 last year – a 200% decrease.

12.3 Stage 1 corporate complaints should be completed within 20 working days. Two of the 5 stage 1 complaints were sent on time.

12.4 Stage 2 corporate complaints should be completed within 15 working days. Only one complaint escalated to stage 2 this year and it was completed on time.

**Chart 10: Corporate complaints by stage and team 2021-22**



### 13. Ombudsman Cases

- 13.1 This report provides a brief overview of Local Government and Social Care Ombudsman (LGSCO) closed by Adult Services. Detailed reporting on Corporate and Ombudsman Complaints is within Wandsworth Council's Corporate Complaints Report 2022-23.
- 13.2 A complainant reserves the right to refer their complaint to the Local Government and Social Care Ombudsman (LGSCO) at any time. However, in most cases, the LGSCO will seek to ensure that the Local Authority has been provided with the opportunity to respond to the complaint in accordance with the Council's statutory complaints process.
- 13.3 In 2022-23, a total of 4 Ombudsman enquiries were made for Adult Social Care. This is a 60% decrease on the 10 last year. Of these, 3 resulted in a full investigation and fault was found in all 3 cases. The 3 full investigations are a 33% on the 6 full investigations last year. These are set out in **table 4** below.
- 13.4 Outcomes and status of the cases are in Table 4 below:

**Table 4: Ombudsman cases by team and outcome**

Quarter 1	Service Area	Outcome
1	Wandsworth East/Finance	<p>A service user complained that they were not provided with a copy of their Needs Assessment, Financial Assessment and Care Plan in an accessible format and that the Council unreasonably sought to cover unpaid financial contributions.</p> <p>The LGSCO found the Council at fault for not sending correspondence in a format suitable to support their needs as a blind person and at fault for seeking repayment of an old debt that was disputed. The Council wrote off the debt and provided £150 for the injustice of not providing information in an accessible format.</p>
1	Mental Health	<p>A service user complained that the Council denied knowledge of their need for respite care and failed to pay for residential care whilst their home was being renovated; this caused a financial impact as the service user would have been at risk if they stayed in their home.</p>

		The LGSCO found fault in the way the Council dealt with the case and recommended it retrospectively fund the care home amount.
2	Wandsworth West	<p>A relative of a deceased service user complained about the outcome of a safeguarding enquiry.</p> <p>The LGSCO found that there was a lack of multidisciplinary approach between the NHS and Council. Also, the Council did not action the safeguarding enquiry immediately and were not open and honest with the relative during the complaints process which caused distress. An apology and financial award of £250.00 was provided. District Nurses also received training on the safeguarding process and accurate record keeping and both NHS and Council staff received further training on Pressure Ulcer Protocol.</p>
2	Mental Health	<p>A complaint that the Council failed to act in a timely manner on referrals for an assessment of a complainant's needs.</p> <p>The LGSCO did not investigate as this was unlikely to achieve anything further.</p>

## 14. Compliments

- 14.1 Positive feedback regarding staff or service delivery is another way in which the department can learn how well services are being delivered. Compliments remind us of the excellent practice within services and reinforce that the promises made to learn from complaints are sincere. Staff are reminded to report compliments they receive so we can record as much positive feedback as possible to evidence the commitment to good social care practice. This year the Complaints Team were sent 40 compliments for Adult Social Care Teams in Wandsworth.
- 14.2 However, it is likely that some compliments have not reached the Complaints Team. To ensure we can capture as much positive feedback as possible, the Complaints Manager has worked with both the Professional Standards and Executive Support Teams to create a central log so that all compliments can be held in one place and provide more accurate reporting next year.
- 14.3 Examples of compliments received from both service users and partner organisations are outlined below:



- *“I would like to say a big thank you for [social worker] coming to visit me to assess my needs, I was very nervous and very embarrassed and felt shame in some areas of talk, may I say that [social worker] was very polite and put me at ease and made it feel so normal. thank you and please thank [social worker] again for me”.*  
**Occupational Therapy**
- *“[social worker] went the extra mile towards [service user’s] best interests. I really appreciate them listening carefully and patiently to my comments and suggestions”.* **Mental Health Reviews**
- *“Thank you to you for everything you have done. We are so grateful for your compassion and professionalism”.* **Mental Health Substance Misuse**
- *“[service user] thanked me very much for my support, complimented me on the Service provided and the way I was proactive in moving their concerns forward, making them feel confident that that they were listen to understood and that things were going to happen as a result of their call”.* **Learning Disabilities**
- *“I appreciate how busy you must be but every time I have emailed you with a question, you always come back to me extremely quickly with the information. Navigating the council system for anything is not always straightforward but you have made it much easier which has culminated in an offer of a wonderful flat for [service user], which we are extremely grateful”.* **Wandsworth East**
- *“When you took [service user’s] case we were in one of the worst moments of our lives. The interest and care you took was remarkable. Your kindness and the time you gave us made us feel looked after, when nobody was there for us. Your continuous work has made a massive difference to [service user’s] life and something we will never forget”.* **Preparation for Adulthood**
- *“Following their contact with the Front Door they received a call from Sensory duty and within a week that you were allocated to them. [Service User] spoke very positively of their interactions with you noting that you keep them updated and that the communication is good. They reported feeling treated like a person rather than a number and they really enjoy working with you”.* **Sensory Team**
- *“[Social Worker] created an environment where [service user] could express himself clearly. [social worker] created a rapport with them, through what I saw as their excellent capacity to listen to [service user’s] non-verbals, their sensitively and appropriately timed questioning and their ability to demonstrate empathy with [service user’s] situation, all delivered in a clear boundaries and structured time. I was really impressed!”* **Reviews**
- *“Reception called me today to say [service user] came in to say thank you for all of the support we gave them. They explained to the team downstairs in great detail what was arranged and said that they were really blown away and grateful for the input”.* **Access Team**

## 15. Going forward: key achievements and priorities for 2023/24

15.1 Below are some of the key achievements from this year:

- Our external webpages, complaint leaflets, and internal staff guidance on complaints handling have been reviewed and improved to ensure the complaints service remains inclusive and accessible.
- We have worked with services to drive up complaints performance which has resulted in stronger adherence to timescales across all complaint types. Of particular note are corporate stage 2 complaints; 68% were responded to on time across the year (against a KPI of 50% on time) compared to 36% on time in 2021-22. The co-ordinated focus on performance by the central complaints team and directorates own business support teams resulted in particularly strong results in the last two quarters of 2022/23 with 78% and 83% of stage 2 complaints responded to on time.
- The Complaints Manager has progressed work on learning from complaints to ensure that it provides added value by directly feeding into service improvement. For example, in Adult Social Care, quarterly meetings take place with the Principal Social Worker and Professional Standards Team to triangulate themes and learning from complaints with work undertaken by Professional Standards. This is then fed into quarterly Senior Management Team through quarterly complaint reporting.
- The new Unreasonable Complainant Behaviour Policy was launched in January 2021 and has been put into practice during 2022-23 to good effect. The policy provides a structure for the Complaints Team to manage complainants who take up a disproportionate amount of time, freeing up resources for other complainants to ensure a fair and equitable service. The policy has been aligned with the Unreasonable Customer Behaviour policy and is now overseen by a bi-monthly senior level working group which reviews customers who have had their communication restricted under one of the policies to ensure that decisions have been made fairly, reviewed regularly and staff are applying consistent approaches.
- Information on the Council's complaints processes is now included in the Member Induction pack (following the 2022 elections) and will be included in mandatory staff induction for all new starters from 1st April 2024. Both actions help to support a healthy complaints culture within the organisation.

15.2 In 2023-24 our priorities will be to:

- Support directorates through the changes to the corporate complaints process so that their current high performance continues. From 1<sup>st</sup> April 2023 the new

timeframe for stage 2 responses of 25 working days (from 15 working days) will allow more time to provide quality reviews and identify further learning. However, the KPI of '50% on time' will be increased to 80% on time, which following a benchmarking exercise, is in line with other boroughs.

- Work closely with the Ombudsman to ensure our complaint handling remains effective. This includes reviewing, updating, and publishing the Council's self-assessment against the Housing Ombudsman's complaint handling code and preparing to respond to a consultation from the Local Government and Social Care Ombudsman who are proposing a new joint complaint handling code with the Housing Ombudsman.
- Further strengthen our complaint training offer to Directorates for both statutory and corporate complaints. Statutory: The Complaints Team are already planning, in liaison with the Children's Services Quality Assurance and Multi Agency Safeguarding Lead, to host a training event for team managers and supervisors on good complaints practice and with Adult Services, a bespoke complaints training session for the Learning Disabilities service. Corporate: Briefings on the corporate process are available to all council-wide services but have not been delivered in the last six months due to limited team resources following a noticeable increase in stage 2 complaints and LGSCO and HO investigations. There will be renewed promotion of the briefings to services which have shown they would benefit from training, and these will include the recent changes to the stage 2 process.
- Developing complaints procedures, policies, and literature into Easy Read format to further improve the accessibility of the complaints service.
- Creation of public facing adult and children's statutory complaint procedures that set out how the Council apply the Statutory Complaint Regulations when making decisions on how to manage complaints, and any exceptions or cross-over with other policies/rights of appeal.
- Work with colleagues in the Consultation Team to explore opportunities to engage with residents to obtain feedback on the accessibility of complaints processes.
- Further roll out of Respond Case Management System to Corporate complaints to enhance strategic oversight and streamlined responsive reporting. The system is now operational for Adult complaints and Freedom of Information Requests.
- Enhance work on learning from complaints to include detailed learning case studies in reports and ensure that learning from Ombudsman complaints is included in quarterly complaint insight reports for senior managers.