

ANNUAL REPORT 2022-23

ADULT SOCIAL CARE

Complaints, Comments and Compliments

Prepared for: Barbara Nicholls, Director of Adult Social Care & Health

**Prepared by: Johannah Philp
Complaints & Information Team Manager**

Contents

Item	Contents	Page No.
1	Executive Summary	3
2	Introduction	4
3	Service Context	5
4	Complaints Received	6
4.1	Ombudsman referrals	6
4.2	Total Number of Complaints	6
4.3	- Stages	7-8
4.4	- Service Areas	8-9
4.5	- Themes	9-10
4.6	- Outcome & Learning	10-13
4.7	- Response Times	13
4.8	- Monitoring Information	14-17
5	Method of Contact	17
6	Expenditure	18
7	Compliments & Resident Satisfaction	18-21
8	Member Enquiries	21-22
9	Conclusion	23
10	Complaints Action Plan	24-27

1. Executive Summary

Adult Social Care (ASC) complaints fall within the remit of the 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009' which includes a requirement to publish an annual report. This report covers the period from April 2022 to March 2023.

There was an increase in ASC complaints during 2022-23. Many of the additional complaints related to client financial contributions towards care. In 2021-2022 during the pandemic, discharge processes continued to be altered to continue to cope with the impacts on the NHS and discharge care was free (under government funded NHS pathways) for this time. These arrangements ceased in 2022-23 at the end of the pandemic and the Local Authority was able to revert to assessing client contributions to care from the point of discharge. The change in discharge pathways and charging caused confusion for a small number of clients, which resulted in an increase in complaints. In addition, clients have found themselves struggling financially due to the cost of living crisis and this has likely had an impact on the complaints around charging for care and affordability.

The Service is working hard to mitigate the issues that are most impacting on ASC clients with an aim to reduce the number of complaints and drive continuous learning and improvement across the Directorate. Outcomes from the complaints process have been incorporated into the ASC Action Plan (Appendix 1) in order to aid learning and improve performance.

Whilst there was an increase in the number of complaints received in 2022-23, the compliments received within the same period highlighted the continued dedication and positive work across the Service.

2. Introduction

Local authorities have a statutory process for complaints, which are set out in the Local Authority Social Services and National Health Service Complaints Regulations 2009 and the Secretary of State for Health and Social Care's recommendation in paragraph 3.55. It is a requirement for the local authority ASC and Children's Services to have a system of receiving representations by, or on behalf of, users of those services. Havering ASC welcomes all feedback, whether this is a comment on improving the service, a complaint on what has gone wrong, or a compliment about how well a service or individual has performed.

Havering has adopted the statutory guidelines for complaints management as outlined by the Department of Health and good practice principles of the Local Government Ombudsman, and has encompassed this within its new procedures as follows:

Local resolution

Enquiries - Anyone can make an enquiry of the service for any reason, they do not need to have been adversely affected or be in receipt of a social care service. If a response is appropriate either the service can respond directly or SCCI can respond on their behalf. Responses can be provided over the phone or face to face as long as a record is kept.

Informal - Where a complaint relates solely to a regulated service, this will be referred to the relevant agency.

Formal - Complaints will be responded to within 20 working days from the date in which points of complaint are agreed and/or relevant consent or further information received. Complaints involving an external agency will be responded to within 25 working days. Complaints requiring an independent investigation will be completed within 25-65 working days. Timescales may vary in agreement with the complainant.

Although there is no longer a Stage 3 Review Panel in the regulations, it has been agreed within Havering to have an option for complaints to be reviewed by a Hearings Panel.

Complainants who remain dissatisfied will have the right to progress to the Local Government Ombudsman and are advised of such in responses.

The time limit for complaints to be made has remained at 12 months.

3. Service Context

ASC is responsible for ensuring the most vulnerable adults in our community, and their carers, are provided with support to meet their assessed needs. Safeguarding is a priority, with a personalised, outcome focused approach adopted with each case. The Service ensures residents are provided with practical support to help them live their lives and maintain independence, dignity and control, with individual well-being at the heart of every decision.

ASC supports and works with individuals across our communities: older adults; adults who have physical disabilities; those with sensory impairment; mental health needs; and/or learning disabilities; as well as carers in the community.

The Service has the responsibility for supporting individuals to remain well and self-sufficient for as long as possible in the community, as well as providing services to those who are vulnerable and have social care needs. ASC provides direct delivery of services namely day opportunities for people with learning disabilities and physical disabilities.

For those that do not meet the eligibility criteria, we also have a duty to provide information and advice to all residents, and to signpost to services. The Service operates a strength-based approach to frontline social care to support clients to make the best use of community resources and to carry out assessments based on client assets and strengths (we call this 'Better Living'). We continue to work with and integrate with partners, such as the Integrated Care Board and wider Health colleagues, to help people remain well and active for as long as they are able.

ASC is further supported through the commissioning and brokerage of care, as well as quality and contract monitoring of provider services. In addition, the Service supports clients with the management of direct payments; Appointee and Deputyship and managing client finance arrangements; and assessing client financial contributions to their care to generate income for the Council.

4. Complaints Received

4.1 Ombudsman referrals

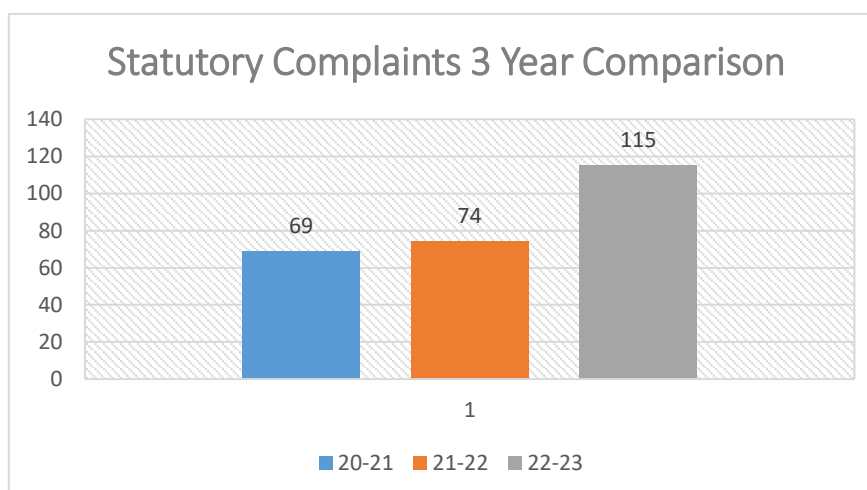
In 2022-23, there were a total of 7 Ombudsman investigations regarding ASC decisions. There were 2 decisions for maladministration (injustice with penalty) and 5 closed after initial enquiries (no further action).

One of the decisions returned for maladministration was regarding the level and quality of care provided by a home care agency along with poor communication in relation to care costs. The other decision related to an assessment for a Disabled Facilities Grant.

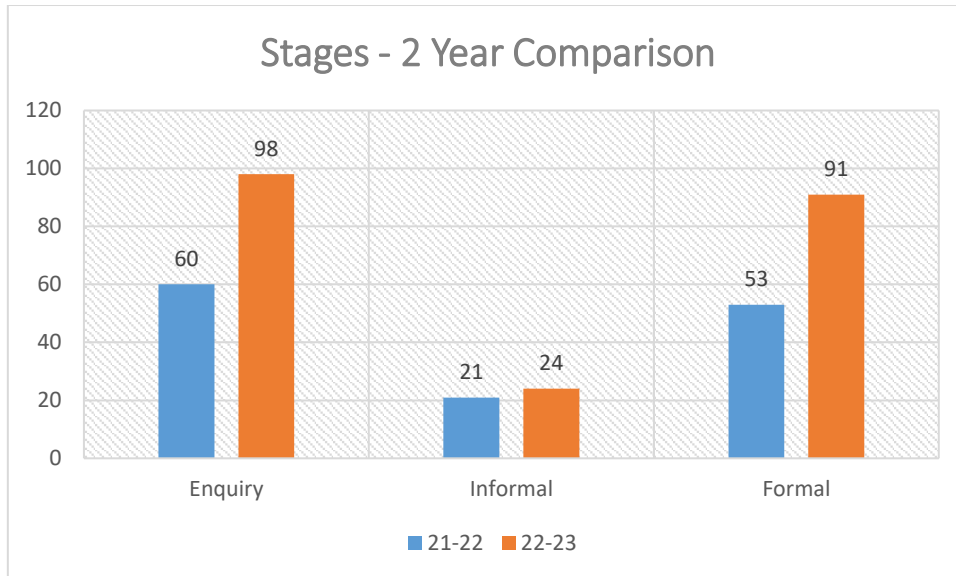
	Apr22 – Mar23	Apr21 – Mar22	Apr20 – Mar21
Maladministration (no injustice)			
Maladministration Injustice with penalty	2	2	3
Maladministration injustice no penalty			
No maladministration after investigation			
Ombudsman discretion			
-Cases under investigation/ongoing			
-Investigation not started/discontinued			
Not upheld no maladministration/service failure		1	1
Closed after initial enquiries: no further action	5	3	1
Closed after initial enquiries: out of jurisdiction			1
Premature/Informal enquiries			
Total	7	6	6

4.2 Total number of complaints

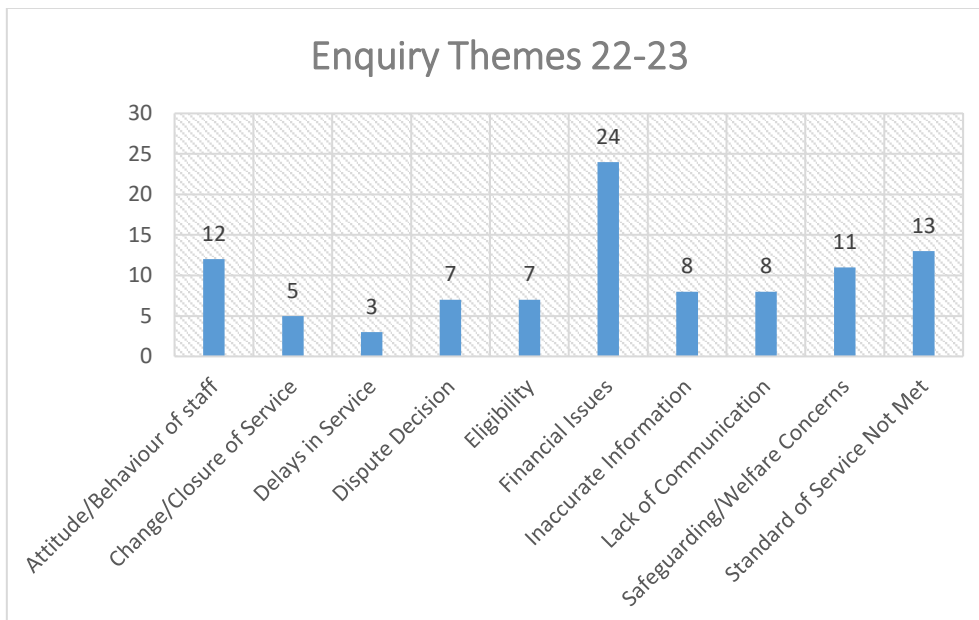
In 2022-23, there were 115 statutory complaints, representing a 31% increase from 2021-22 (74). This was likely impacted by services opening up fully following the pandemic and changes to the charging methods for services following discharge from hospital.



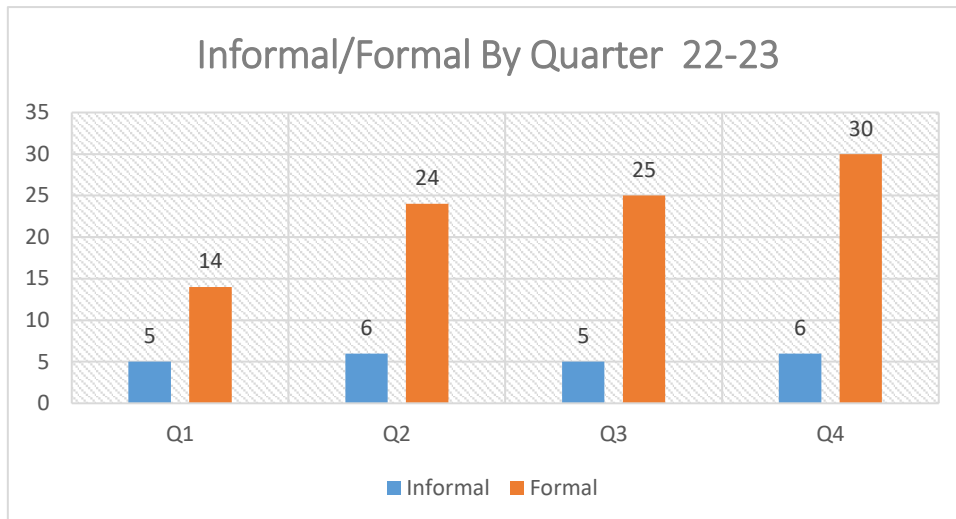
4.3 Stages



The number of enquiries received has risen sharply from 60 in 2021-22 to 98 in 2022-23, a 63% increase. The chart below gives an indication of the type of enquiries being received. Given the current financial climate and the changes in post pandemic discharge arrangements and charging, it is unsurprising to see that 25% of the enquiries relate to financial issues which are generally about financial charging, client contributions and cost of care enquiries. There also continued to be complaints about the quality of care provided by home care services and the provided hours. Information has been shared with providers regarding the importance of accurate record keeping and the complaints manager continues to work with the quality team to identify where improvements can be made.



There has also been a significant increase of 42% in formal complaints (linked to the increase in complaints relating to financial charging) whilst the informal complaints showed a nominal increase of 12% during 2022-23 from 2021-22 (linked to standard of service of home care/domiciliary provision).



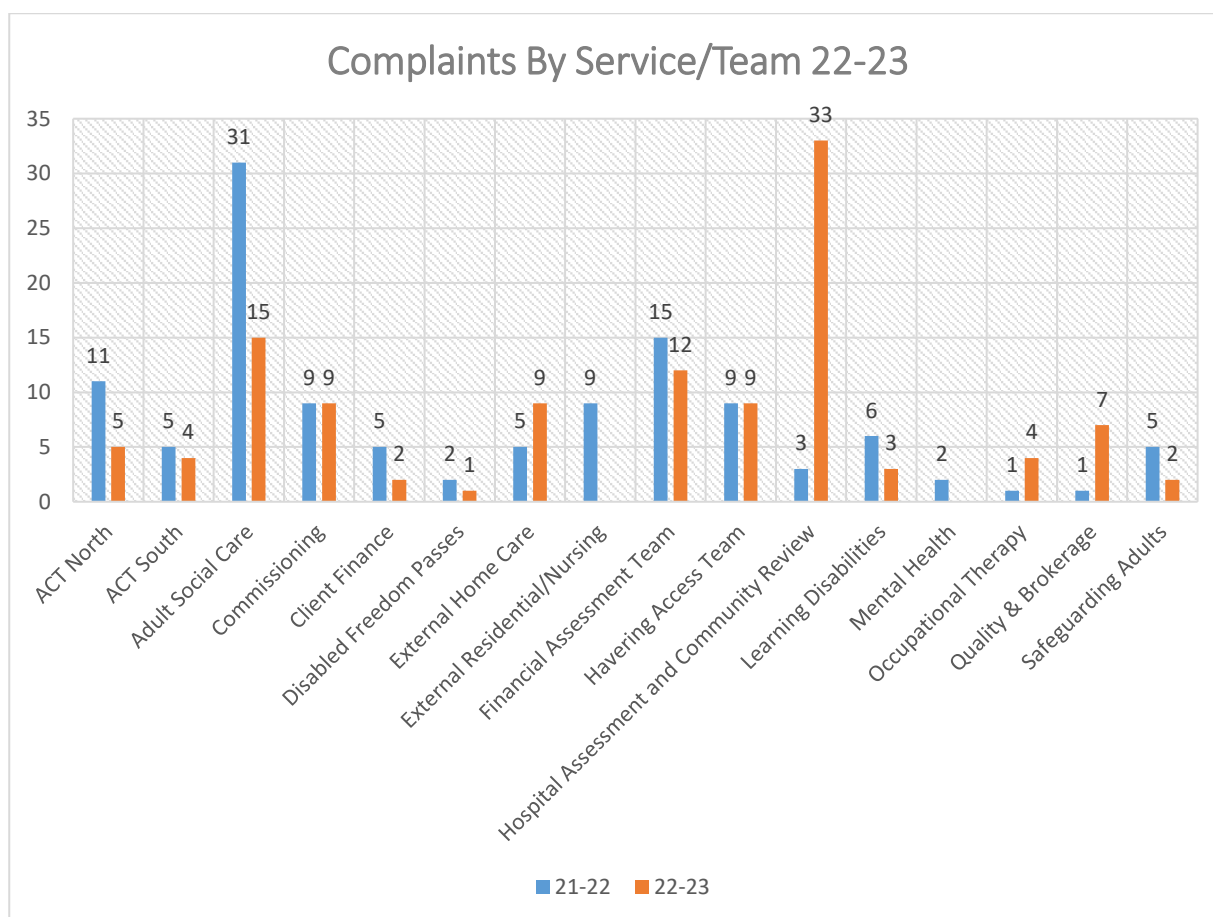
The last quarter showed an increase of 20% in complaints received compared to the previous quarter. Formal complaints have continued to increase throughout the year which could be attributed to additional pressures being faced by clients and their families as the cost of living crisis continues.

4.4 Service Areas

The Havering Assessment and Community Review Team showed a significant increase in the number of complaints during 2022-23 with 33 being received compared to 3 in 2021-22. These were predominately regarding client financial contributions to the cost of care. During the pandemic, discharge pathways from hospital were changed to expedite discharge. Discharge for many clients during 2021-22 was under Health pathways and therefore not chargeable by the Local Authority. This changed at the end of the pandemic and Havering was once again able to charge for services at the point of discharge which cause confusion and lead to a relatively small number of additional complaints.

Explanatory leaflets were designed for hospital ward staff to provide to clients at the point of discharge, and these were somewhat successful in informing individuals that they would have to contribute to care costs. To improve information sharing further a new process has now been developed (in 23/24) so that all Havering clients (or their carers) are contacted shortly after discharge to ensure they understand the discharge pathway and financial charging process.

Despite the fact that complaints around charging for care increased; reassuringly, the number of complaints received around the financial assessment process and the Financial Assessment Team reduced. This confirms that the financial assessment process is clear, but clients understanding and expectations about having to contribute was an issue.



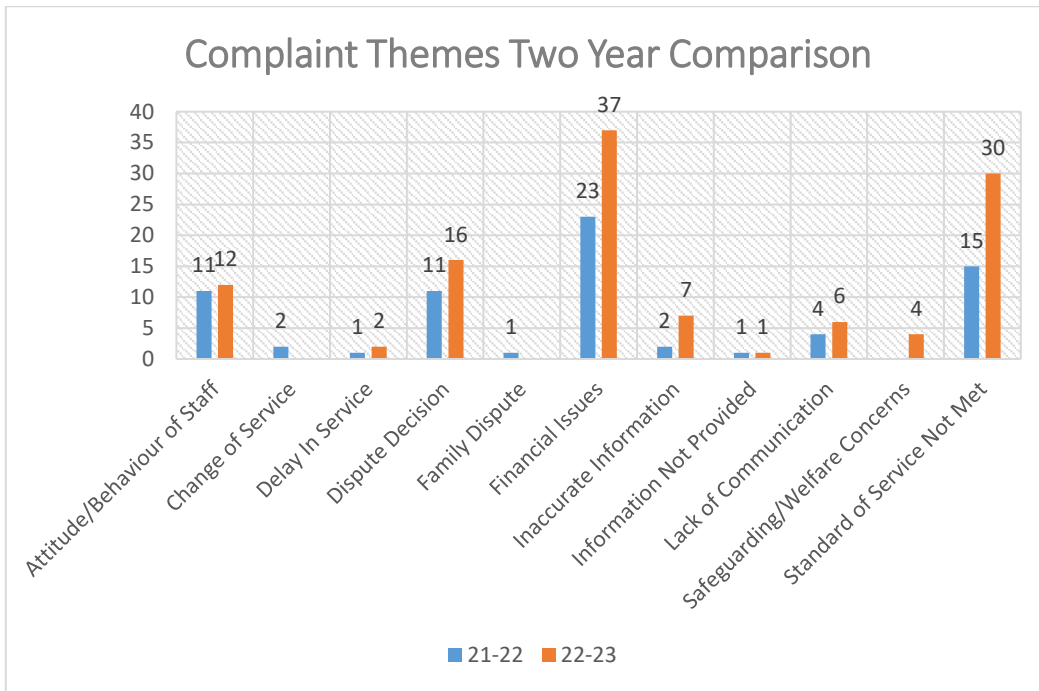
Complaints that relate to multiple areas of the Service (Cross Service - Adults Social Care) have seen a 50% decrease in the number of complaints recorded in 2022-23 and many other frontline teams have also reduced in the number of complaints they receive. This is likely due to the fact that assessments and reviews of client care are now back to being face-to-face (held virtually during the pandemic) and this means that frontline workers are able to have more quality conversations with clients to understand the issues faced. Quality & Brokerage and Occupational Therapy have seen a small rise in the number of complaints received again linked to the provision of home care.

4.5 Themes

'Financial Issues' were the highest reason for complaints during 2022-23 followed by 'Standard of Service' (linked predominately to home care provision) which is the same as in 2021-22.

Where financial issues were given as the primary reason this is not just related to a lack of clarity around discharge information, but also due to clients raising concerns over the amount of care delivered by home care agencies and subsequently charged for. Standard of service remains mainly around the quality of care by home care providers and these also subsequently tend to lead to disputes regarding charges and invoices.

'Dispute Decision' was the third highest relating to the discharge pathways (and the associated financial contributions) and frontline social care assessments reducing care packages in accordance with reassessed needs.

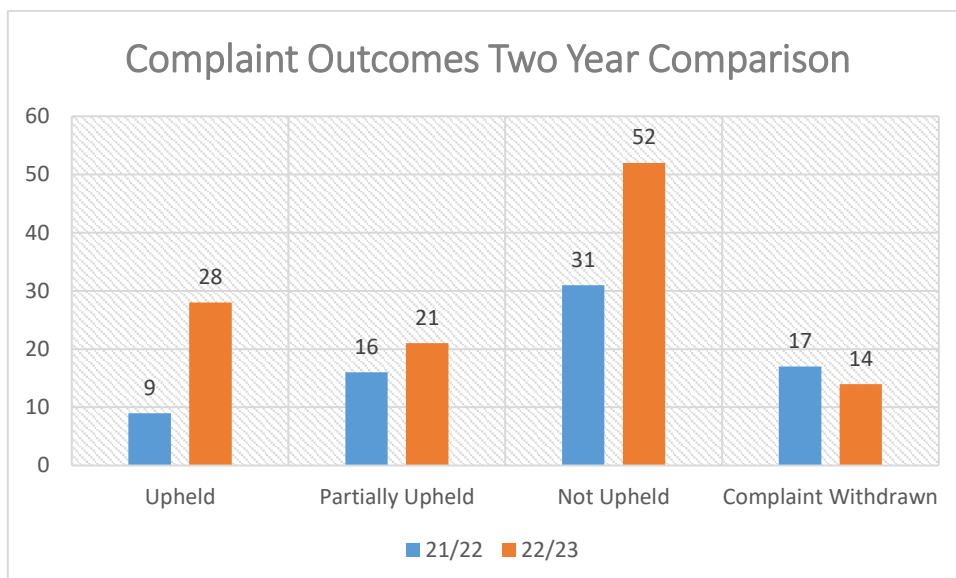


4.6 Outcomes & Learning

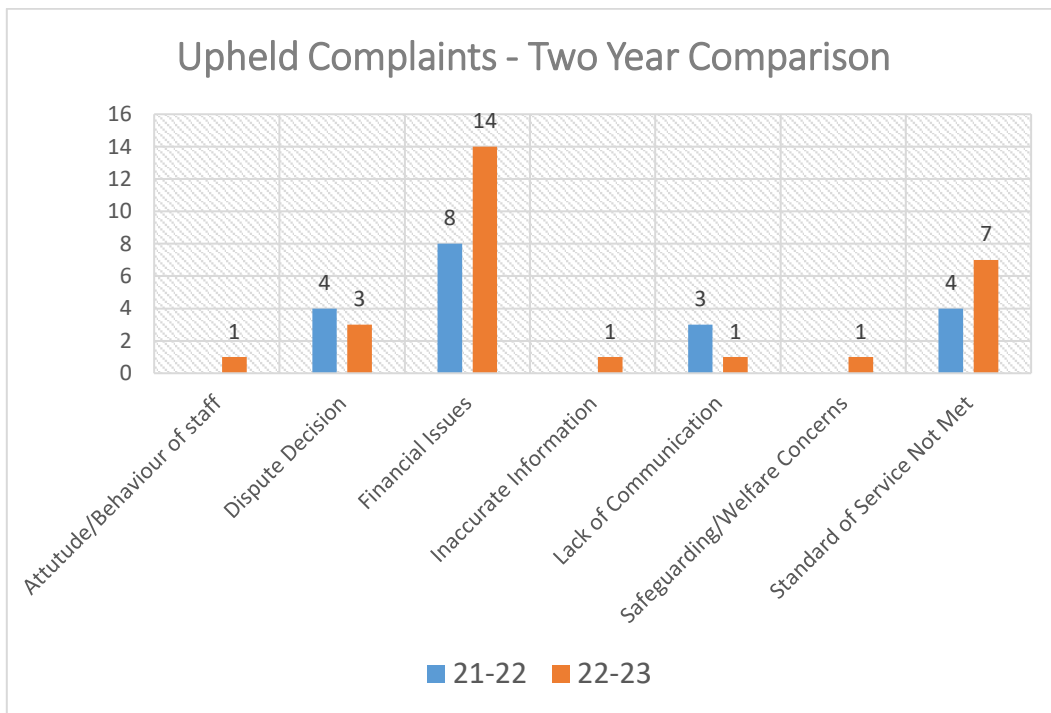
Of the 115 complaints which recorded an outcome, 24.3% were upheld, 18.2% were partially upheld, 45.2% were not upheld, and 12% were withdrawn.

There was a significant increase in the number of complaints ‘not upheld’. A number around financial charging were able to be rejected due to evidence that discussions had taken place with the client or family members around the charging processes in advance.

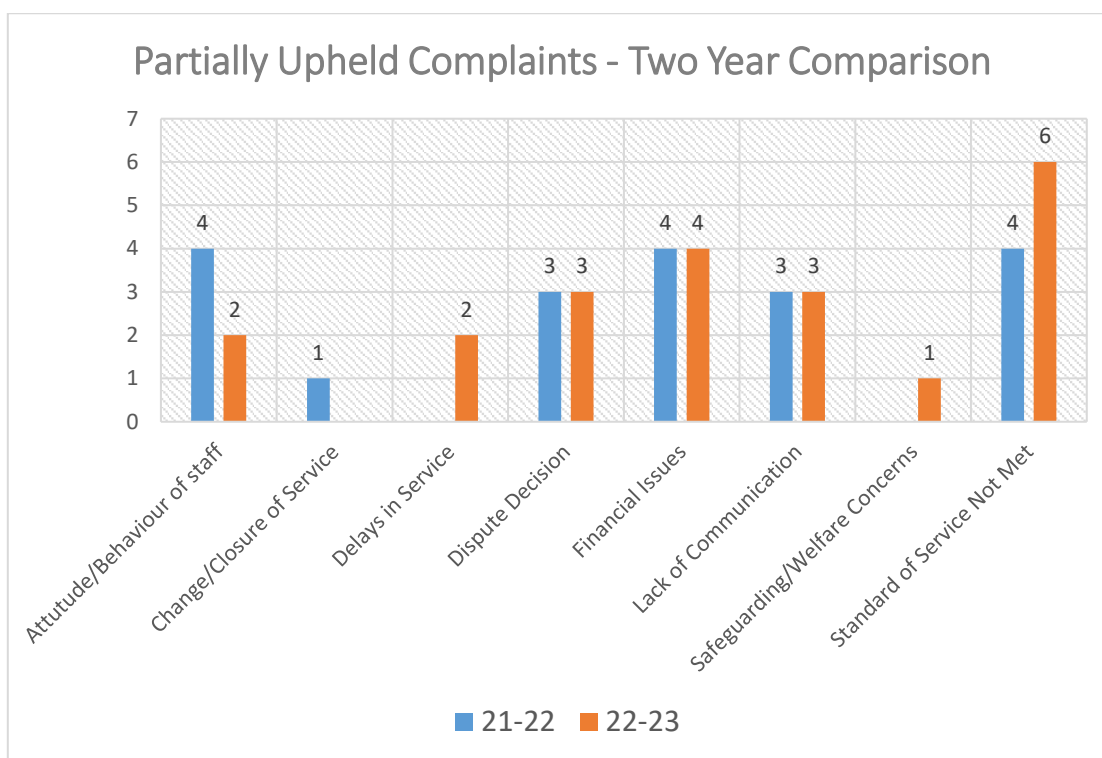
Complaints upheld increased by 12% in 2022-23 compared to 2021-22; however, the number of complaints received also significantly increased. Those partially upheld decreased slightly by 3% in 2022-23 compared to 2021-22.



For complaints that were upheld 53.5% resulted in an apology being given and 46.4% resulted in a financial adjustment being made. The financial adjustments were due to the Service not being able to evidence from the client database records that information about client financial charging was given in a timely manner. Processes have already been updated (as explained previously) to mitigate this in future as far as possible. Furthermore, home care charges are reimbursed when clients challenge the care hours received and this is upheld by the Service. These costs are recouped from the payments to the providers where they have erroneously charged.



For complaints that were partially upheld 47.6% resulted in an apology being given and 28.5% resulted in a financial adjustment being made. The remaining 23.8% in addition to either an apology being given or information/explanation provided, resulted in either a review of practice or provision, records amended or training identified.



4.6.1 Learning from Complaints

During 2022-23, with rising financial demands on residents the priority and focus for ASC was on vulnerable residents within Havering and ensuring appropriate support was provided. With the complaint outcomes it highlighted that there was still a need for workers to ensure that clients and family members received appropriate, relevant and accurate information. This resulted in frontline workers being reminded across the teams as part of team meetings, and 1:1 supervision about the importance of recording decisions and when information is provided and to whom. This is also reinforced through quality case file audits that are conducted twice a year looking at cases across the Service. Many of the financial adjustments were in relation to a lack, or incorrect information being given at the point of hospital discharge with regard to care costs. The council continues to work closely with health partners to ensure the right information is being given.

4.6.2 Learning from the Ombudsman

The Local Government Ombudsman ceased to deal with complaints for a period of time during 2020-21 (between late March and the end of June 2020) linked to the pandemic. Despite this situation, the number of Ombudsman complaints received for both the current and preceding periods of this report has remained about the same.

It is important to note that where ASC commission a service, the local authority will be deemed responsible for those services and the actions of the organisation. Commissioning, as part of their monitoring and quality visits, inspect records and complaints of providers and will make recommendations for improvements required. Quality visits were restricted significantly during the pandemic. Through the roadmap out of lockdown, these were reinstated and are progressing. This is also reinforced through the Quality and Safeguarding Board meetings that take place in ASC, which cover safeguarding concerns, quality concerns, and complaints.

As a result of an Ombudsman’s decision received in 2022-23, there were areas which required improvement in relation to being clear about when care costs would start to be chargeable following hospital discharge. The decision also highlighted that when domiciliary carers were unable to use their telephone to log in and out, the system automatically defaulted to 30 minutes; however, carers were often there for less time than the chargeable amount. The investigation also highlighted poor quality of care and poor record keeping by carers.

The Council takes its responsibility for commissioned care packages seriously and robustly investigates issues with provision. The domiciliary agency was asked to supply data which was checked by the Quality and Outcomes Team. An inspection was completed and there were a number of issues identified, which were set out into an Action Plan for improvement. These were robustly followed up in Quality & Safeguarding Meetings. CQC subsequently inspected the provider and rated the provision as ‘Requires Improvement’ overall after a focused inspection. A suspension was put in place due to the issues already identified and those in the CQC inspection report. The agency subsequently worked through the Action Plans, which were monitored to ensure compliance. The suspension was able to be lifted after demonstrated improvements and support and a ‘Place with Caution’ was applied which allowed a maximum of 2 new packages per week while the provider was kept under review until all restrictions were able to be lifted successfully some months later.

4.7 Response times

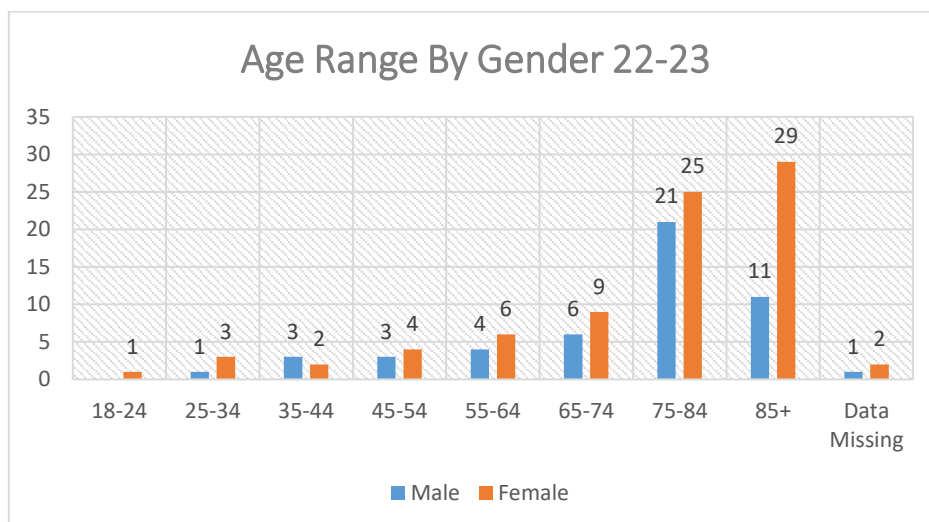
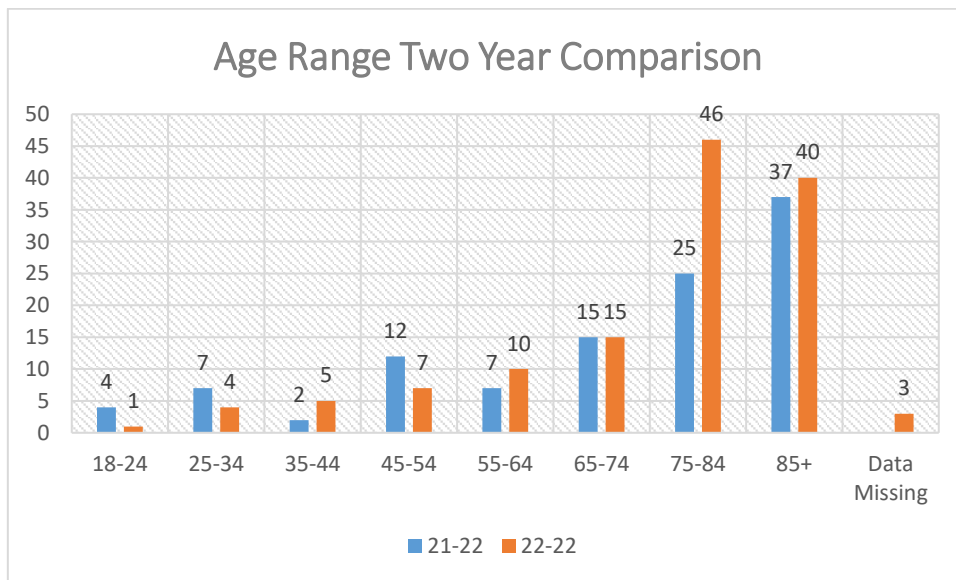
Response times improved for complaints responded to within 20 working days in 2022-23, 58.2%, against 43% in 2021-22. The increased performance was a testament to the hard work of staff and the strategies put into place to deal with complaints in time. Responses over 20 working days showed an improvement in 2022-23 at 41.6%, compared to 45% in 2021-22, this is also encouraging given that many of the complaints received in 2022-23 have seen more complexities and often involve care providers and require more thorough investigation.

	Within 10 days	%	11-20 days	%	20+ days	%	25+ days	%
2021-22	11	15%	28	38%	13	18%	20	27%
2022-23	21	18.20%	46	40.00%	11	9.50%	37	32.10%

4.8 Monitoring information

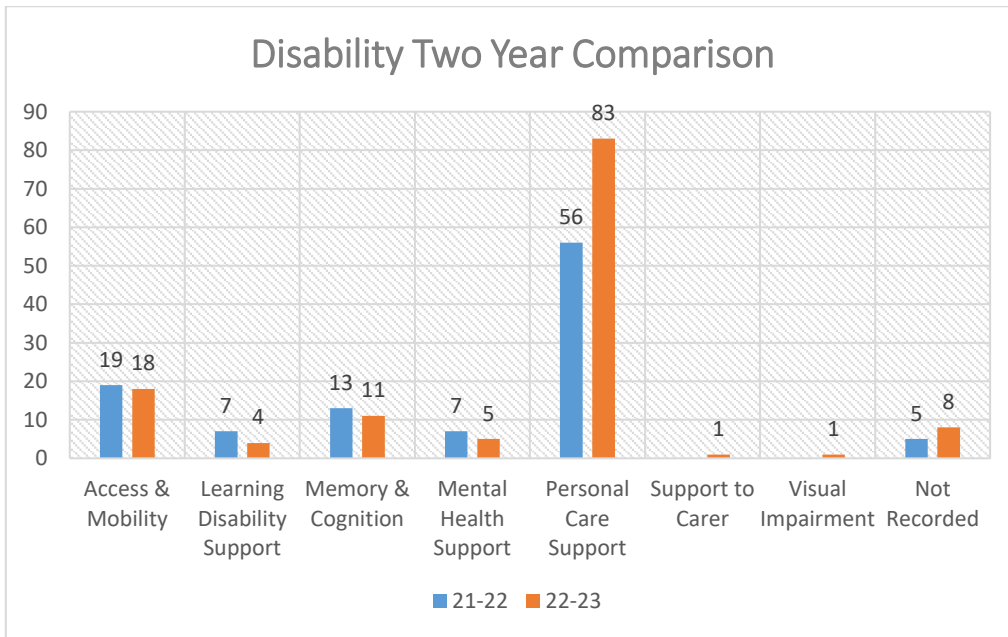
4.8.1 Age

During 2022-23 complaints received in relation to those aged 75 to 84 almost doubled, increasing by 84%. Complaints regarding those aged 85+ slowed down in 2022-23 only increasing by 8%. It is noted that during 2022-23 complaints relating to females were 83% higher than those for males. Females have the highest number of complaints recorded across all age ranges in 2022-23.



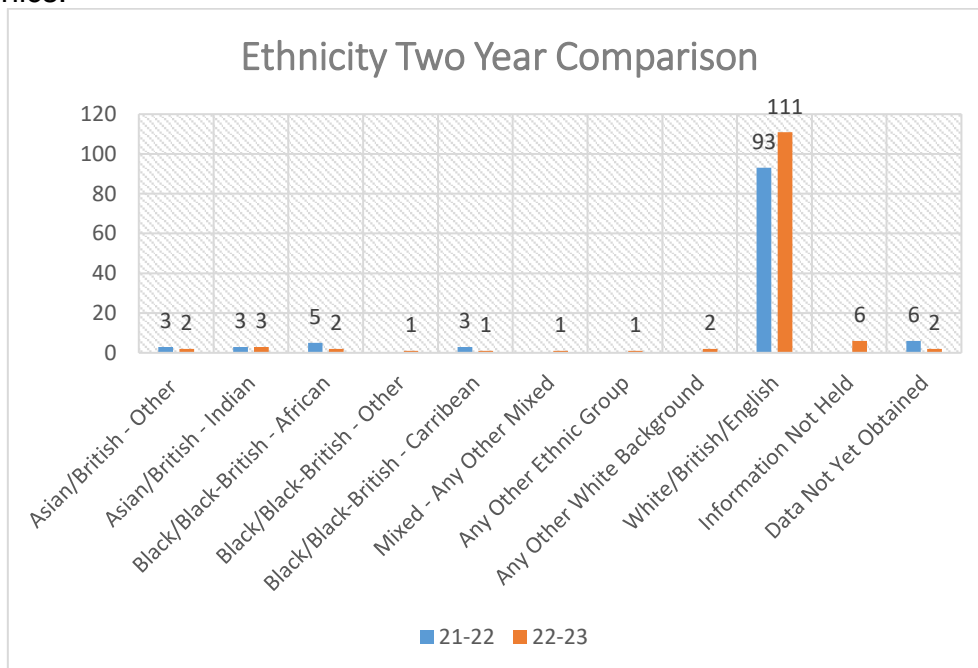
4.8.2 Disability

Complaints received by those requiring 'Personal Care Support' have risen by 53% in 2022-23 from 56 to 83. Complaints from those recorded as having other types of disability have all reduced slightly, and there have been 8 complaints from those who have a disability marker on record but it is not recorded which type of disability they have.



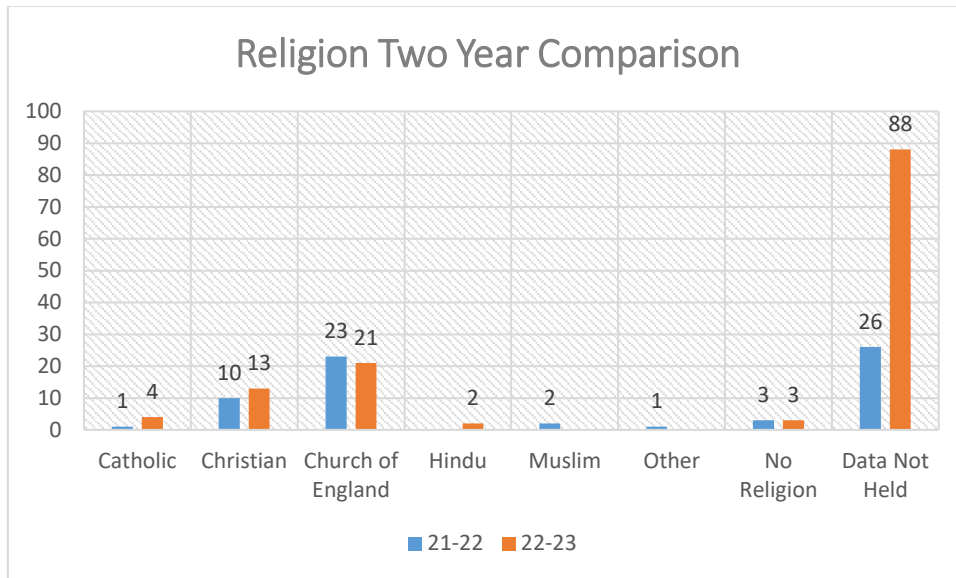
4.8.3 Ethnicity

As reflected in the population of Havering, 'White British' is the highest ethnicity and there was an 84.7% representation in this category for 2022-23 as against 78% recorded for 2021-22. There were no significant changes in the data collated for the other groups such as 'Asian/Asian British – Any other Asian background', 'Asian/Asian British – Pakistani' and 'Mixed White & Asian', 'Black/Black British – African' and 'Black/Black British – Caribbean'. Whilst underrepresented groups have not changed significantly over the years, we continue to monitor our resident involvement in view of Havering's changing demographics.



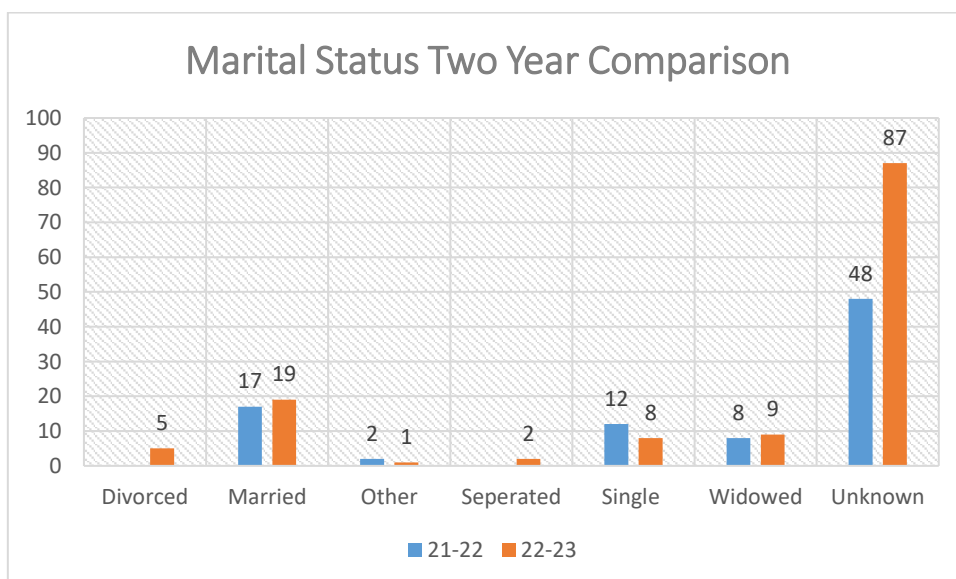
4.8.4 Religion

There has been a significant increase in the number of service users who have no religion recorded, this has increased from 26 in 2021-22 to 88 in 2022-23 up 238%, and greater emphasis will be placed on case file auditing to address this recording. There have been marginal increases in those recorded as Catholic and Christian and a small decrease in those recorded as Church of England during the year 2022-23.



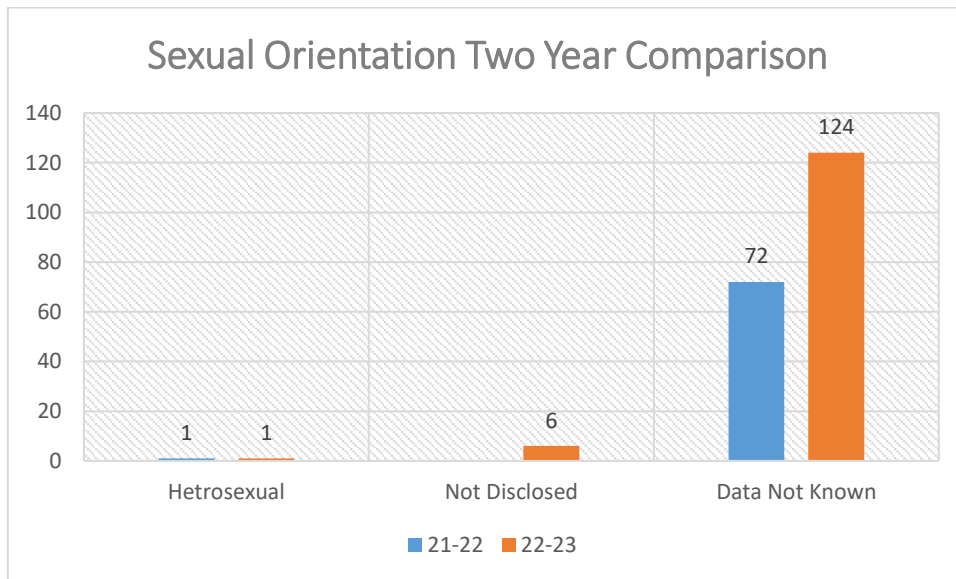
Marital Status

In 2022-23, 5 service users are recorded as being divorced up from 0 in 2021-22. Those recorded as single dropped from 12 to 8 (33%). There are very small changes in other marital statuses, however, the number recorded as unknown has gone up significantly in 2022-23 to 87 from 48 in 2021-22 (48%).



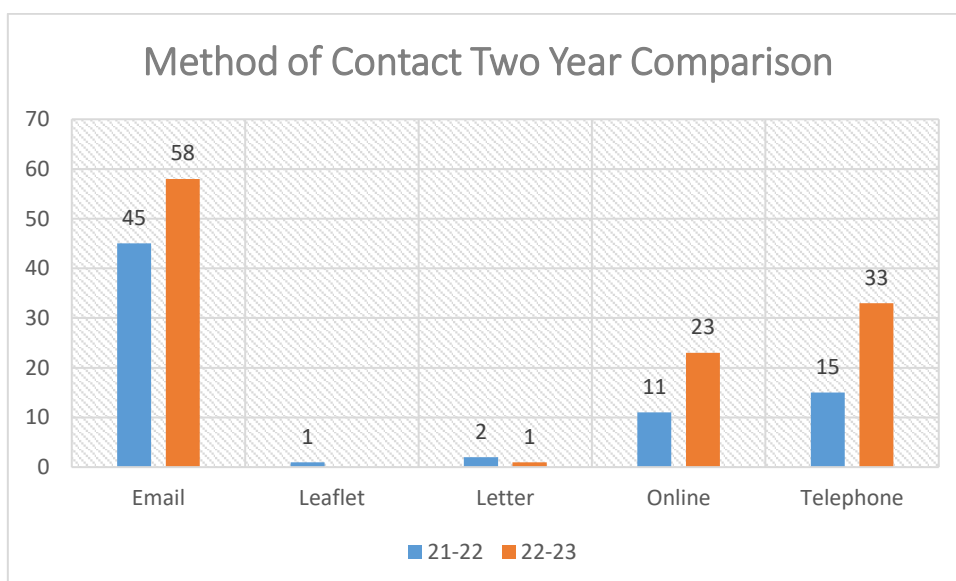
4.8.5 Sexual Orientation

This continues to be a category in which recording of this data could be seen as very sensitive and personal to an individual and is reflected in the high numbers that are ‘not known’.



5 Method of Contact

Email continues to be the favoured method of contact during 2022-23 at 50.4%, with telephone being the second highest method of contact at 20%, which remains consistent with 2021-22. It is encouraging to see that those choosing to complain using the online service increased in 2022-23 and represented 20% of complaints received. Whilst acknowledging the multiple channels through which residents are able to register their complaints, we recognise the need to promote the online service as a preferred option for residents as the template provides a structured format that benefits all parties i.e. the complainant and service provider.



6 Expenditure

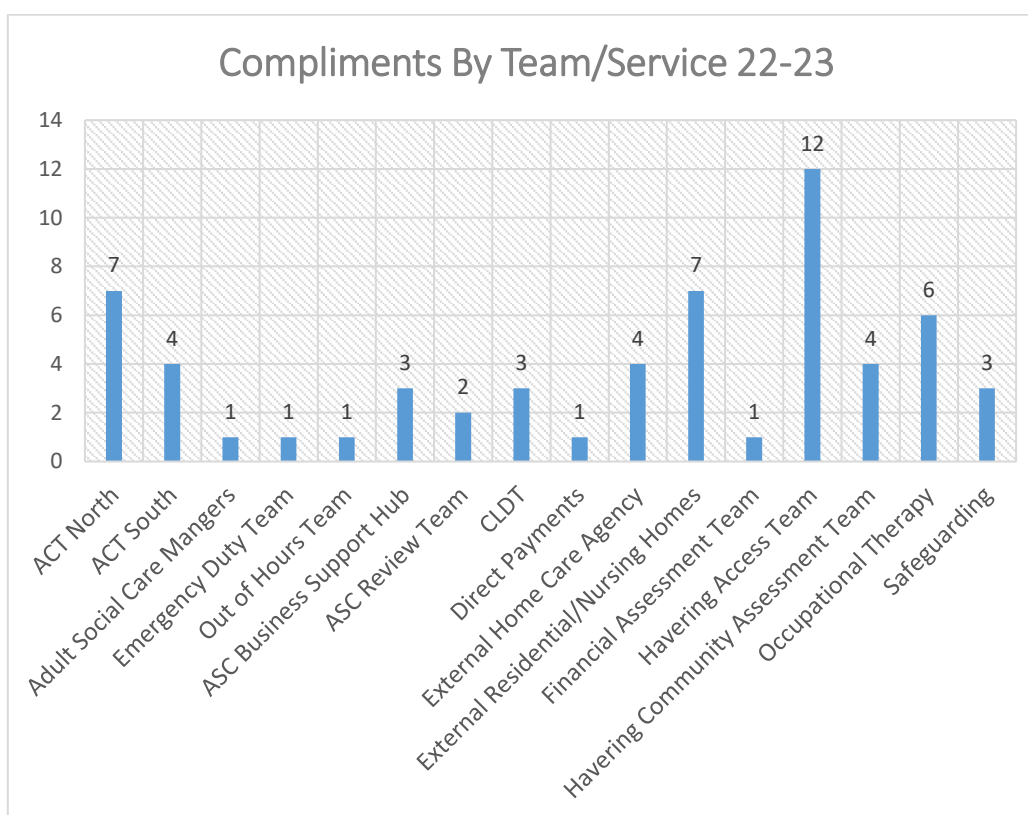
Whilst expenditure has significantly increased in 2022-23 this mainly represents invoices waived in relation to care charges following hospital discharge. The exceptionally low levels seen in 21/22 are predominately linked to the change in hospital discharge pathways during the pandemic, which meant that clients were not having to pay for their discharge care for at least the first 6 weeks. The Ombudsman expenditure relates to a recommendation to a refund of a third of care costs paid by the complainant.

	Ombudsman	Invoices Waived	Goodwill Payment	Total
Apr 2021- Mar 2022	£350	Not reported		350.00
Apr 2022-Mar 2023	£2024.42	£8282.14	£195	£10,501.56

7. Compliments and resident satisfaction

7.1 Compliments

The number of compliments received during 2022-23 reduced slightly to 48 from 52 in 2021-22. A plausible reason for this could be attributed to the correlating increase in complaints over the past year. There is a likelihood that we will continue to see a rise in complaints as the cost of living crisis and pressures on Local Authorities to deliver services increases.



Some of the outstanding work of teams/staff are shown by a small selection of examples of compliments given below:

Safeguarding

*Jenny
Thank you for listening,
again I thank you for your
call and most importantly for
your attitude as I felt very
comfortable relating to you*

ACT South

*I felt compelled to write to you
regarding Dan. He has been
dealing with my elderly
mother. I wanted to write and
tell you (in case you didn't
already know) that he has
been exceptional in his work
related to my Mum.*

ASC Review Team

*Hi Lynne,
Thank you for everything
you have done, you have
been amazing and I want
to let you know how much
we appreciate what you
have done.*

Financial Assessments
Team

*I especially wanted to thank
Sandra and Marie who
have been really helpful
and clear in their
explanations to her.*

Home Care Agency

*My special thanks to Carl for
the compassion he always
showed, a very special young
man*

CLDT

*Dear Eunice,
Thank you for everything and
helping supporting my sister. I
just know without LBH providing
vital care support at her most
vulnerable time my sister would
have deteriorated further.*

Residential/Nursing

To Hari and all the carers and staff past and present

We wanted to express our deepest gratitude for everyone's no ending care and affection given

Community Assessment Team

I cannot thank you enough for all your care and attention to his needs and requirements, you really have been such a help and we have now managed to achieve success



Havering Access Team

Ruhena was very kind, thorough, caring and extremely professional. She went over and above to help me and for that I am very appreciative

Occupational Therapy

I'm sending you a hug, I'd like to thank you, Sandra. They've brought a bath lift, from their store Just like the one I had before. So bath times now, will be sheer bliss

ACT North

Thank you Tracy, I cannot thank you enough for all you have done - you are an inspiring example of your profession.

EDT

I would like to make a compliment about Lawrence. He was extremely helpful, professional, and flexible in his approach

7.2 Adult Social Care Outcomes Framework – Survey 2022/23

The chart below shows comparative data against 2021-22. In line with the statutory guidance, it should be noted that the 'Quality of Life' outturn is not calculated as a percentage (all others are), this is a weighted combination of a number of questions answered in the survey to come up with an outturn.

The data shows an improvement in almost all of the categories with the exception of the proportion of people who use services who find it easy to find information about services which dropped by 0.3%. The 5% increase in those who feel they have as much social contact as they would like is expected as things began to return to 'normal' following pandemic restrictions.

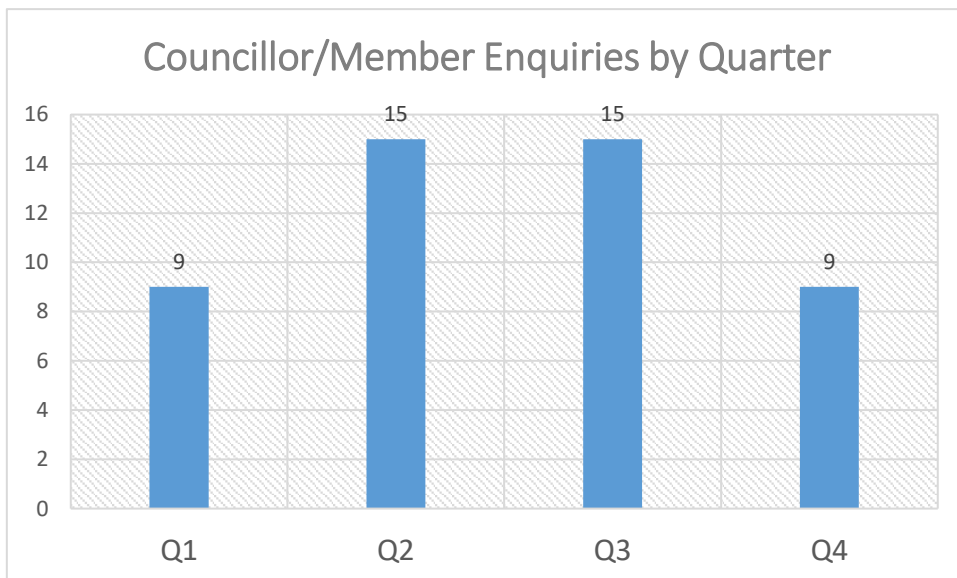
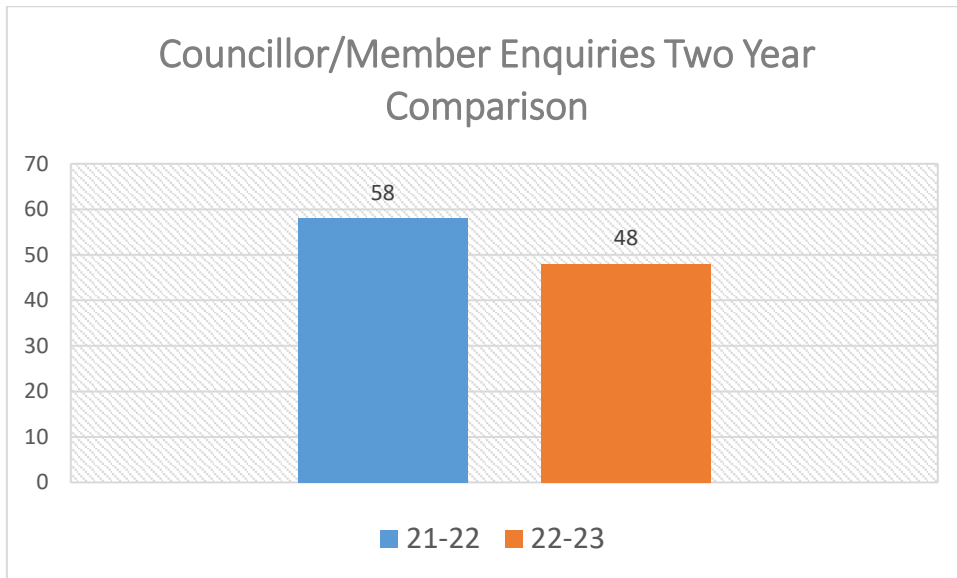
Service User Survey	22/23	21/22
Social care-related quality of life	19.0	
The proportion of people who use services who have control over their daily life	75.8%	74.2%
The proportion of people who use services who reported that they had as much social contact as they would like	43.0%	38.0%
Adjusted Social care-related quality of life – impact of Adult Social Care services	0.442	0.423
Overall satisfaction of people who use services with their care and support	63.1%	61.8%
The proportion of people who use services who find it easy to find information about services	65.3%	65.6%
The proportion of people who use services who feel safe	73.7%	68.8%
The proportion of people who use services who say that those services have made them feel safe and secure	87.7%	85.8%

8. Member Enquiries

The number of MP/Councillor enquiries received in 2022-23 was 48, a 17% decrease from 2021-22 (58), with 89.5% (43) being responded to within the timeframe in 2022-23, an improvement on the 81% in 2021-22. Those that were not responded to within the timeframe were related to complex cases that required further investigations to be undertaken in order to provide a robust response.

The Service is aware that some Councillor/Member enquiries are being sent directly to Officers and therefore may not be captured in the performance data. Staff across ASC are reminded to forward these to the SCCI Complaints Team for inclusion in the figures.

The majority of the enquiries centred on social care need related issues (51%), welfare concerns (14.5%), housing (12.5%), quality of care (10.4%), and financial concerns (10.4%).



9. Conclusion

ASC continues to embrace complaints as a learning tool, and the senior management team continue to ensure that improvements are embedded in the Service. Complaint levels have increased following the pandemic. Response times are improving, and we anticipate that this will continue to be the case as new reporting mechanisms are put in place. Learning from complaints will continue with improved monitoring on actions arising from complaints to improve service provision.

ASC complaints recording will be transferring to a new Complaints Handling Management System in 2023-24 and it is anticipated, as this matures, that this will lead to better monitoring to provide evidence-based learning, through the action plan incorporated within it.

There is also a review and restructure of complaints teams across the Council being carried out currently, due to be implemented by October 2023. The new Service will have a specific focus on service improvement, which will also aim to support a further reduction in the number of complaints and will aim to improve the consistency of responses and create a single point access for all residents to access.

9. ASC Complaints Action Plan

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
<p>Information about the financial assessment process and potential client contributions has not always been communicated clearly or consistently</p>	<ul style="list-style-type: none"> • Communications need to be improved and made more consistent in all arenas, especially when people are coming out of hospital • Material covering the financial assessment process must be regularly reviewed and updated • Evidence of information being shared with client's needs to be recorded in the LAS database 	<ul style="list-style-type: none"> • Gather customer views on the Financial Charge Leaflets to ensure issues are understood • Review of all financial assessment information including leaflets and policy in 23/24 • Review and improve the information available on the Havering website to support the Financial Charing Leaflets and improve customer understanding • The Financial Assessment Team will continue to promote the online financial assessment tool • Communications with clients going through hospital discharge process to be improved • Frontline staff and business support staff to record in case notes as standard when financial charging information is shared 	<ul style="list-style-type: none"> • Financial Assessment Team Team Manager, Salim Rabah • Havering Access and Review Team Sophie Webster, Service Manager 	<p>Material to be reviewed throughout 23/24 and thereafter monitored and refreshed yearly or sooner if required</p>	<ul style="list-style-type: none"> • Succinct information leaflet produced to be shared with all clients undergoing discharge to make clear to them their individual discharge pathway and whether this is a chargeable service • Hospital admin unit are providing follow up call to all Havering discharges to ensure they are aware of discharge pathway and that most Council services are chargeable • Customer feedback received on existing leaflets has been taken into account in design of new leaflet

Adult Social Care Complaints & Compliments Annual Report 2022-23

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
Quality and level of service received from commissioned providers is monitored robustly	<ul style="list-style-type: none"> • Quality of commissioned providers must be continually reviewed and proactively managed where problems are identified through the complaints process • Commissioning Leads to continue to quickly address themes of poor performance (such as poorly recorded care hours or mischarging) with identified providers 	<ul style="list-style-type: none"> • Providers are engaged with regularly to understand recruitment and retention pressures • Feedback from complaints shared with Quality Team and Commissioning Leads to highlight areas of poor practice or providers that have increased complaints 	<ul style="list-style-type: none"> • Joint Commissioning Unit <p>Acting Assistant Director - Laura Nielson</p>	Provider forum attendance – throughout 2023/24	<ul style="list-style-type: none"> • Proactive work with providers via Quality and Outcomes Team and Safeguarding Team to address areas of concerns • Provider Forums in place for Care Home and Domiciliary Care providers to pick up on issues impacting provision, recruitment and sustainability
Ensure an approach of continuous improvement relating to information about adult social care ensuring that information is easily accessible	<ul style="list-style-type: none"> • Review ASC information on the Havering Website to ensure it is available in the right places and is accessible, and is provided to people in timely fashion 	<ul style="list-style-type: none"> • Review the information available to residents on our websites • Invite service user feedback on services • Expansion of local area coordinators to improve information sharing • Better Living approach to social care to be understood by clients that access services 	<ul style="list-style-type: none"> • Integrated Services Director Ageing Well - Annette Kinsella • Joint Commissioning Unit <p>Acting Assistant Director - Laura Nielson</p> <ul style="list-style-type: none"> • Business Management Hannah Thorogood 	Website to be updated and reviewed throughout 2023	<ul style="list-style-type: none"> • Review of Information and Advice underway across the service involving all areas

Adult Social Care Complaints & Compliments Annual Report 2022-23

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
Continue to improve the percentage of complaints responded to within timescales	<ul style="list-style-type: none"> Response times require improvement 	<ul style="list-style-type: none"> Complaints involving other NHS agencies – adult social care element to be responded to within 20 days. It is noted that NHS timescales for response are longer than 20 days Commissioning is to support the Complaints Team in getting information from external social care providers back within the timescale Raise the profile of Complaints and the learning opportunities presented by increased attendance at Team Meetings and presence in various forums, (i.e. staff events). 	<ul style="list-style-type: none"> Integrated Services Assistant Director - Annette Kinsella Joint Commissioning Unit Acting Assistant Director - Laura Nielson Complaints and Information Team Team Manager - Johannah Philp 	March 2024	
Assessments and support plans must be shared with clients	<ul style="list-style-type: none"> Assessments and support plans (including budget information and clear recording showing start and end dates of provision) are shared with clients before provision begins where possible 	<ul style="list-style-type: none"> Develop an improved process via the Quality Assurance Working Group for frontline staff send out the assessments and evidence this on the LAS system 	<ul style="list-style-type: none"> Frontline Adult Social Care Teams Jackie Lawson & Chibuike Oji – Service Managers Professional Practice Lead Movita Hussain 	Ongoing	<ul style="list-style-type: none"> The process for sharing assessments and reviews is being reviewed by Service Managers and Practice leads to improve ease of recording in the area to demonstrate auditable compliance
Learning from Complaints	<ul style="list-style-type: none"> Staff are empowered to improve services by understanding issues related to complaints received where the reason for the complaint reflects on practice or communication 	<ul style="list-style-type: none"> Responding managers to ensure that relevant staff have sight of complaints and responses and these should be discussed in supervision meetings Complaints and compliments to be added 	<ul style="list-style-type: none"> All managers 	To Start in June 2023	<ul style="list-style-type: none"> Complaints Manager produces quarterly information on complaints included lessons learned and common issues and reports to Senior Leadership

Adult Social Care Complaints & Compliments Annual Report 2022-23

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review/Progress
		as a standing item on team meeting agendas to discuss complaints received and learning opportunities <ul style="list-style-type: none"> • Lessons Learned to be communicated via Service Team briefings 			
Contribute to the Council Wide Complaints Service Redesign	<ul style="list-style-type: none"> • Ensure that the new Service takes account of Statutory Complaints Process 	<ul style="list-style-type: none"> • Ensure that Adults Statutory Complaints are understood and processed effectively • Ensure complaints process is effectively advertised • Ensure that clients are easily able to access the complaints process in the new structure 	<ul style="list-style-type: none"> • Integrated Services Assistant Director - Annette Kinsella • Business Management Hannah Thorogood • Complaints Johannah Philp 	September 2023	<ul style="list-style-type: none"> • The Complaints and Information Restructure is underway and due to transfer to a single central service in Autumn 2023 • The current Team manager is involved in designing pathways and systems in the new Service to support Statuary complaints
Development of a new Complaints Handling Management System across the Council	<ul style="list-style-type: none"> • New system will support easier and more accurate data on complaint numbers; waiting times and issues identified 	<ul style="list-style-type: none"> • New system to be embedded across all areas of the Council • Clients to be able to make complaints via the new system using a more simplified system 	<ul style="list-style-type: none"> • Complaints Johannah Philp & Caroline Little 	March 24	<ul style="list-style-type: none"> • Tender process for new Complaints Handling Management System completed • New system being tested in key areas – roll out expected for statutory complaints in Jan 24