

# Annual Complaints Report Adult Social Care, Richmond 2022-23

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London Borough of Richmond upon Thames

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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 from complaints has focused on improving communication to ensure it is timely and accurate, providing advocacy when people receiving mental health support lack capacity, undertaking refresher training with social care teams on effective complaints handling, and the development of a new policy on access to records of deceased service users.
- 2.3 The 24 complaints completed this year is a 14% decrease on the 28 complaints completed last year. Most complaints were for Mental Health Social Care teams.

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- 2.4 As well as the 24 formal complaints, the Complaints Team handled 34 enquires/representations which are mainly matters that fall outside the formal complaints procedure.
- 2.5 Principal issues of complaint ranged from communication, delays, quality of assessment, finance, quality of care, staff behaviour and lack of support.
- 2.6 12 complaints were partly upheld, 10 were not upheld and 2 were fully upheld.
- 2.7 In total 5 formal complaints raised issues about external care providers such as care homes, domiciliary care and supported living which is less than the 8 complaints last year. However, the Quality Assurance and Contract Monitoring Team processed 212 service concerns which had the potential to escalate to formal complaints.
- 2.8 42% of complaints were responded to within the local 25-day target, although the complaint regulations allow six months to resolve complaints.
- 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. Richmond teams responded to 2 stage 1 corporate complaints compared to 8 last year. Neither complaint escalated to stage 2.
- 2.11 There has been a 50% reduction in Ombudsman decisions Adult Social Care Richmond; 3 compared to 6 last year. Only one resulted in a full investigation following and a minor fault was found because an invoice for care was sent after care had stopped. 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 Richmond. 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 targets 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 (LGSO) following the final response from the Local Authority or at any time.
- 4.3 Complaints are recorded and monitored by the Complaints Team. All complainants 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 Richmond 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 Contract Monitoring 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 complain 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 (2021-22) but then closed in this reporting year.

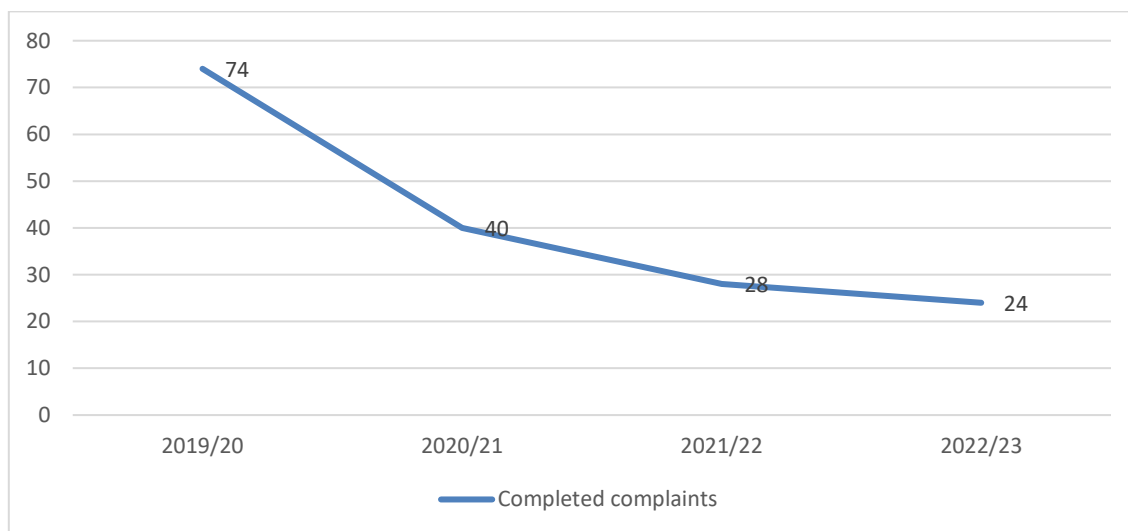
## 5. Approach to learning from complaints/quality assurance

- 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 Key learning from complaints this year is summarised below:
- The mental health social care teams have strengthened processes to ensure that people who lack capacity have advocates to support them through safeguarding processes.
  - The quality of information available to young people transitioning from Children's to Adult Social Care services has been improved.
  - Teams are more aware of the importance of providing information to service users on how to complain when concerns are raised.
  - Reflective practice has focused on the importance of good communication to ensure a safe and settled life for those with care and support needs. One specific example is making sure service users and families are regularly updated on the process of finding placements throughout the discharge from hospital process.
  - Partnership working with the Information Governance Team has been strengthened and a new Council policy is being developed about providing family members with records of their deceased relatives, to ensure that decisions and information released are compliant with the Data Protection Act.
  - For people organising their own care and support, social workers have improved the quality of information provided on the different sources of care and the implications of the choices; particularly for people who choose a private care provider who is not commissioned by the Council.
  - Direct Payment letters have been reviewed and improved to ensure that language is understandable. Finance officers have also received training on letter writing.

## 6. Statutory complaint numbers

6.1 This year Adult Social Care completed 24<sup>1</sup> complaints. The 24 complaints completed this year is a 14% decrease on the 28 complaints completed last year.

**Chart 1: Completed complaints by year 2019/20 – 2022/23**



**Table 1: Richmond Adult Social Care complaints by year.**

Richmond adult social care	2019/20	2020/21 received	2020/21 completed	2021/22 received	2021/22 completed	2022/23 received	2022/23 completed
		74	35	40	32	28	22

6.2 Richmond is a small borough with a population of 195,200 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, 22 complaints were received and 24 closed which is a low proportion given that the department handled approximately 23,524 contacts (calls and emails) and supported 2,030 people during the year. Also, while the Financial Assessments Team recorded 1 complaints in 2022/23 it was responsible for processing in excess of 1,941 financial assessments this year<sup>2</sup>.

6.3 Additionally, the Quality Assurance and Contract Management team received 212 service concerns about adult social care external providers. These were quickly resolved by contract officers, which is likely to have reduced the number of formal complaints.

<sup>1</sup> Four of the complaints completed in the first quarter of this year were carried over from the previous year (2020-21). In total 22 new complaints were received during the year. Two of these will be carried over and completed in the first quarter of next year. The 22 new complaints received is a 31% decrease on the 32 complaints received last year.

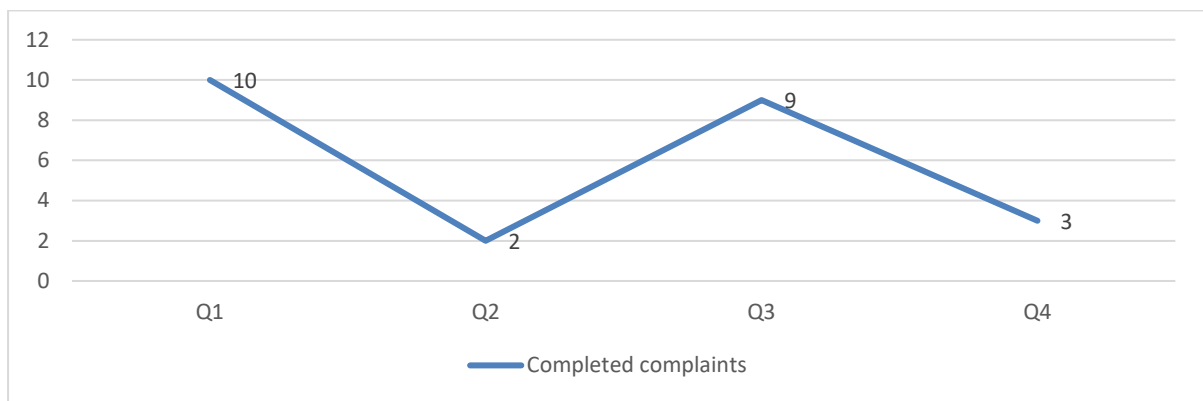
<sup>2</sup> Last year the department handled 27,500 contacts, supported 1,969 people during the year and undertook 1,484 financial assessments.

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6.4 Richmond Adult Social Care and Public Health also responded to 168<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.

6.5 **Chart 2** details the complaints received for each quarterly period. Most complaints were received in quarters 1 and 3.

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



6.6 Adult Social Care welcomes all types of complaints and feedback. It is noted that overall formal complaint numbers continue to decline. Whilst the lower numbers are likely impacted by Richmond having a relatively small population, overall, 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.

6.7 In addition to the 24 formal complaints, during the year the Statutory Complaints Team dealt with an additional 34 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 55 issues for Richmond 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.

6.8 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.

<sup>3</sup> The 168 Member Enquiries responded to this year is a 44% increase on the 117 responded to last year.



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

Type of case	Number
Formal statutory complaints.	24
Low level complaints sent to Adult teams for quick resolution.	15
Statutory complaint requests rejected (redirected) or no consent.	0
Non-statutory complaints/issues directed to other Council services or directorates.	6
Issues directed to external partners/agencies.	3
Data Protection/FOI requests/Right to Rectification, redirected to Information Governance Processes.	0
Safeguarding concerns directed to Adult Safeguarding procedures.	4
Insufficient informant to progress.	3
Issues directed to the Council's legal/insurance services.	0
Restrictions under the Unreasonable Complainant Behaviour Policy	3
<b>TOTAL</b>	<b>58</b>

**Learning Case Study: “Access to records”****Background**

A relative was unhappy with how the Adult Social Care Team and Information Governance Team responded to their request to access the records of their relative who had died as they were incorrectly told to make a Subject Access Request. They also complained about the quality of the advice provided by the social worker about the implications of privately employing unregistered carers (prior to the death of their relative). The relative was unaware that ‘private carer’ meant that the carer had not been accredited by the Council. Unfortunately, there was issues regarding the quality of care provided by the private carer.

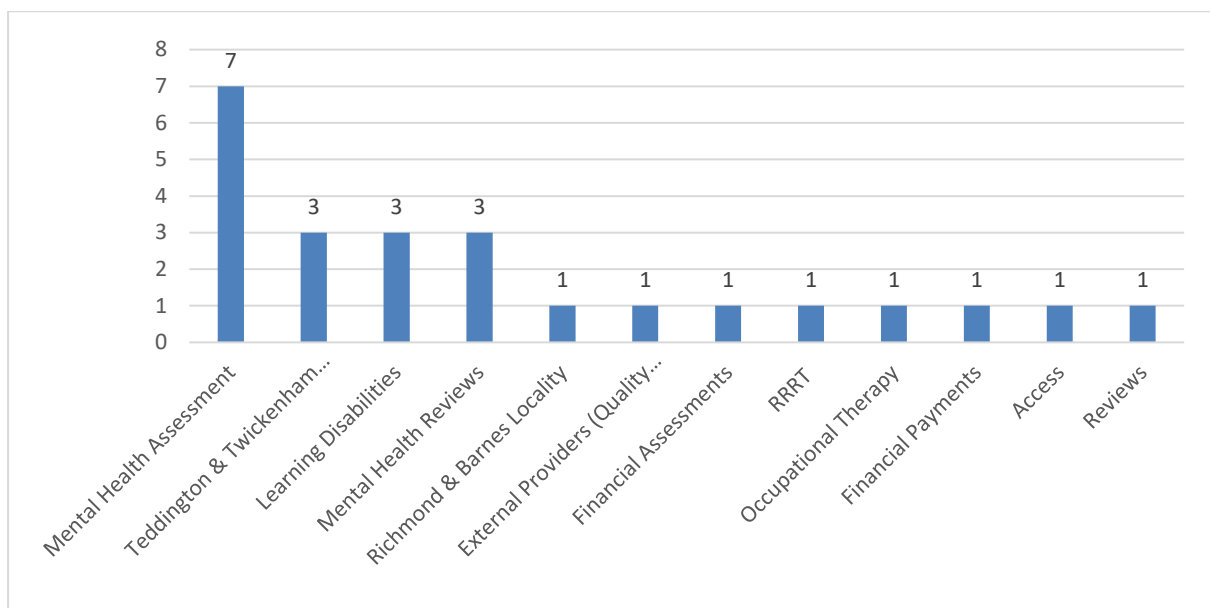
**Learning**

The investigation (undertaken in liaison with the Information Governance Team) upheld that the advice to make a Subject Access Request was incorrect and raised expectations because relatives of a deceased person can only access social care records with authorisation of a personal representative or by obtaining a court order. This identified a gap in Council policy and the Information Governance Manager has committed to use the legal advice provided to respond to the complaint, to form the basis of a new Council policy in relation to requests of this nature.

With regards to the advice provided by the social worker, the service manager recognised that the team were not always clear when communicating with families and individuals around the difference sources of care and the implication of these. They instructed the team both in person and at monthly team meetings to be more vigilant when addressing issues with vulnerable service users and their families. It was reiterated that when carers are unregistered the Council do not recommend individuals, provisions or services. Teams were reminded that they must be clear on the implications when discussing different care options, so that those making the decisions have the correct facts.

## 7. Statutory complaints by team

**Chart 3: Number of complaints by lead teams 1 April 2022/23**



7.1 **Chart 3** details the number of complaints received by the teams during the reporting year. Overall numbers have reduced and there are no trends to report other than the higher number of complaints for mental health teams is expected due to the increase in demand following the Covid-19 pandemic. The numbers show that there are no concerns that an individual service is receiving a disproportionate number of complaints. A certain number of complaints should be expected; overall numbers for all teams are low compared to the number of people supported.

7.2 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.

**Table 3: Number of Adult Social Care complaints by quarter 2022-23**

Team	Q1	Q2	Q3	Q4	Total
Mental Health Assessments	2	1	3	1	7
Teddington & Twickenham Locality	0	0	2	1	3
Learning Disabilities	2	0	1	0	3
Mental Health Reviews	1	1	1	0	3
Richmond & Barnes Locality	1	0	0	0	1

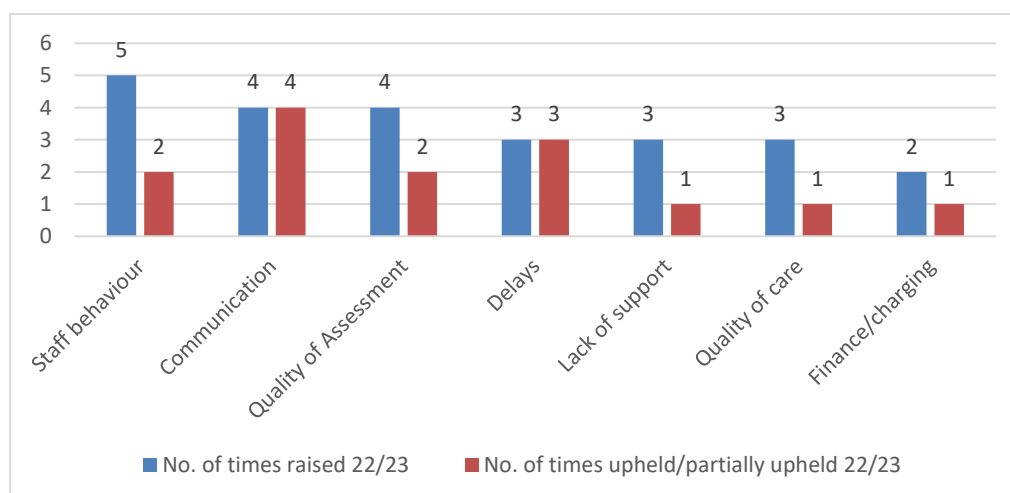
Team	Q1	Q2	Q3	Q4	Total
External Care Providers (Quality Assurance & Contract Monitoring)	1	0	0	0	1
Financial Assessments	0	0	1	0	1
Richmond Response and Rehabilitation Team	0	0	1	0	1
Occupational Therapy	1	0	0	0	1
Financial Payments	0	0	0	1	1
Access	1	0	0	0	1
Reviews	1	0	0	0	1
					<b>24</b>

## 8. Complaints by issues and outcome

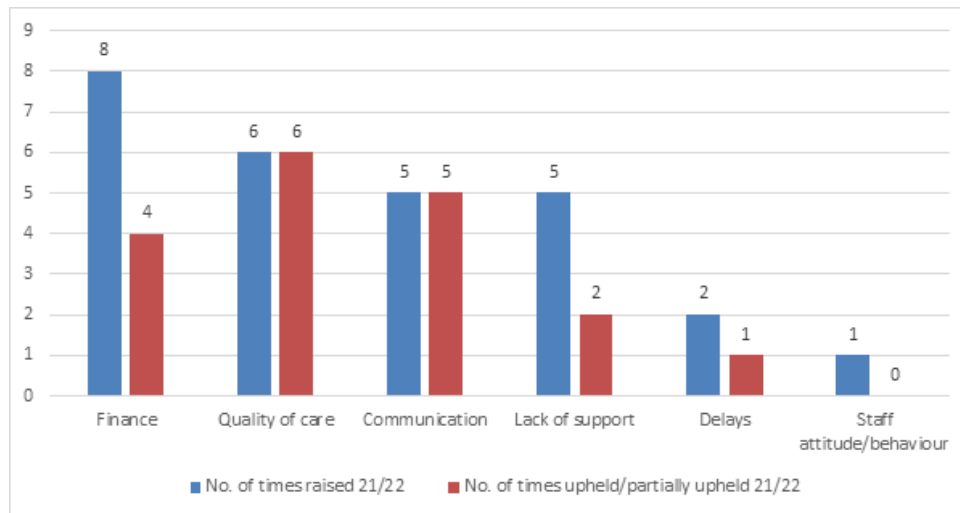
8.1 Adult social care complaints can be complex and raise multiple issues, sometimes across more than one team or service area. Each complaint has been classified by a single principal issue, which is the overarching theme or trigger of the complaint, and due to the overall low number of complaints, only the top 3 issues have been analysed. 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. The most notable change for Richmond Adult Social Care is the increase in complaints about staff behaviour and the decrease in complaints which are primarily about financial issues.

**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 **Staff behaviour** was the most raised principal issue, raised 5 times (21%) as a principal issue and partially upheld twice. 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. However Adult Social Care do have some competent, motivated and skilled locums working in 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 appropriate, social workers have discussed and reflected on complaints raised about their behaviour to understand how their practice has impacted on the people they support and to ensure communication remains sensitive.
- Social workers in the Mental Health Social Care Team have been reminded of the importance of understanding a person’s capacity to engage in safeguarding processes and provide advocacy where needed.

8.4 **Communication** was raised 4 times (17%) and partially upheld in each complaint.

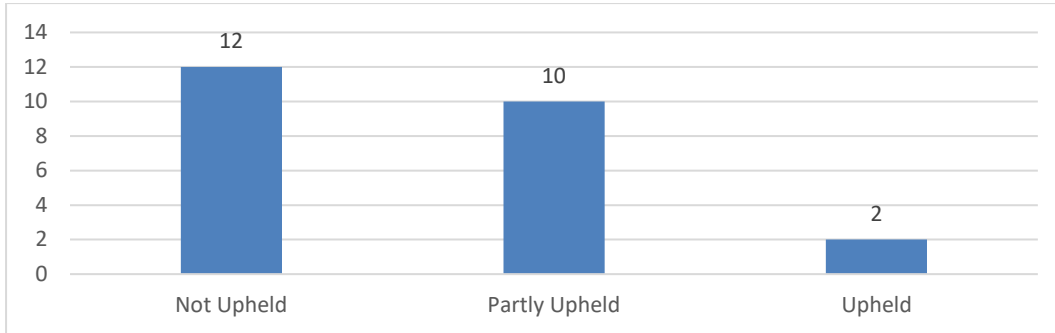
- From two complaints, teams were reminded about the impact of poor communication, particularly on carers who want to be included in decisions relating to the person they care for
- Teams have been reminded about the importance of clearly explaining different care options and the implications of people choosing private care that is not commissioned by the Council.
- In the Payments Team, officers have discussed the importance of the use of language and letter writing style to improve written correspondence.

8.3 **Quality of Assessment** was raised 4 times (17%) as the principal issue of complaint and was upheld once and partly upheld once.

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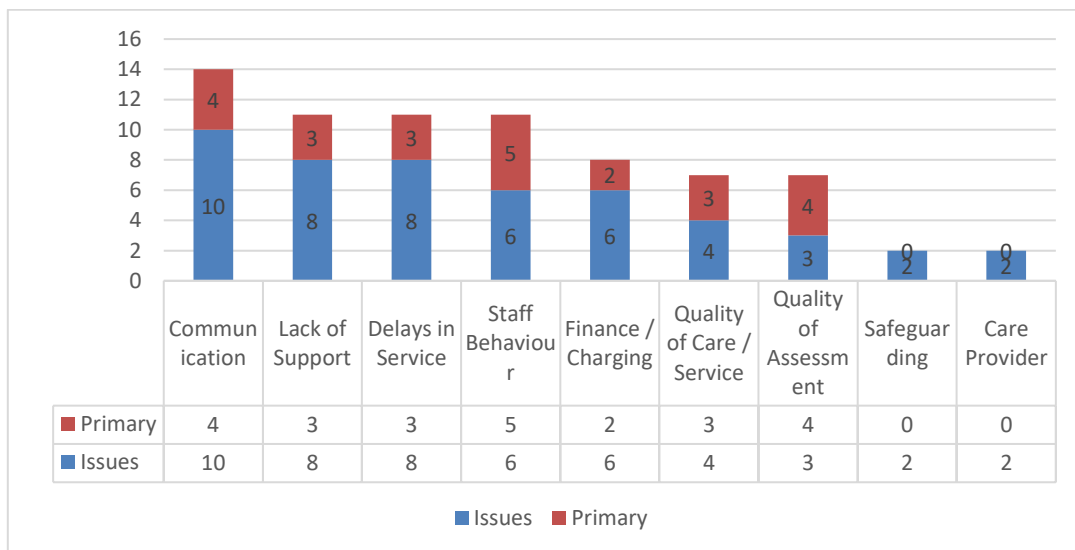
- The Mental Health Social Care Team committed to improve co-working with other boroughs to ensure a smoother transition for service users moving to another borough; in this case support hours were withdrawn before services from the new borough had started.
- Social workers were reminded to ensure the use of language used with service users and families remains sensitive.

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



8.4 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 49 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 communication was raised 10 times, it was only a principal issue within 4 complaints.

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



### **Learning Case Study “advocacy”**

#### **Background**

The Mental Health Social Care team received a complaint from a service user who was unhappy with how they felt treated during a safeguarding meeting. They felt like the communication did not take account of the adjustments they needed and there were delays in providing an advocate.

#### **Learning**

All social workers involved in safeguarding were reminded of their responsibility to consider a person’s capacity to understand and engage in the safeguarding process, and that this is reviewed throughout the process if there are any concerns. This was discussed at team meetings to ensure the learning was cascaded.

## **9. External Care Provider complaints**

- 9.1 The Quality Assurance and Contract Monitoring Team, that sit within the Commissioning Division, investigate care provider complaints for Adult Social Care. This includes care homes 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 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 (LGSO). Whilst complaints received by self-funders will be signposted to the relevant provider and/or LGSO, information received by self-funders about the quality of provider services will be passed to the Quality Assurance and Contracts Monitoring Team to inform the wider quality monitoring of services.
- 9.4 For this reporting year only 5 complaints were completed that raised issues about external care providers, compared to 8 last year. Of these, 1 was led the Quality Assurance and Contract Monitoring Team as the complaint only raised issues about the

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external care provider. The remaining 4 complaints were led by social care teams in partnership with the Contract Monitoring Team as the primary issues in the complaints was about social care support. 3 complaints were about domiciliary care, 1 was about a care home and 1 was about supported living.

- 9.5 These low numbers 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, 212 service concerns were processed by the Quality Assurance and Contract Monitoring Team.
- 9.6 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 “quality of care”**

### **Background**

A representative of a service user was unhappy with the care provided by domiciliary care agency, contracted by the Council to provide care and support. The complainant said that the carers had not been provided with an assessment or support plan, were not suitably trained to provide care to people with dementia, were not provided with enough travel time (which reduced the amount of time they provided care), and the agency had not made provision for car parking fees for carers.

### **Learning**

The investigation found that carers had not been informed that the support plan was electronic and did not have access to the app required to access it electronically. The complaint also upheld the concerns about travel time.

To ensure a better service in future, care providers have been asked to ensure that carers have access to care plans and that copies are also left in people’s home.

This investigation also acknowledged that there were delays by Adult Social Care in providing an urgent review when the person’s needs changed. Care providers have been informed that in future, if they have concerns regarding the progression of support plans or reviews, they should use self-reporting forms to alert the Access Team.

With regards to parking, the Council agreed to re-consider providing parking permits to commissioned services as part of the domiciliary care contract. Free parking permits had been removed as part of the Council’s commitment to reducing carbon emission.

The investigation also established that as the agency employed carers on zero-hours contracts, they have no incentive to pay for parking permits. Therefore, in the recommissioned of new domiciliary contracts, a commitment has been made to reduce the number of staff paid on zero-hours contracts.

## **10. Response Times<sup>4</sup>**

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.

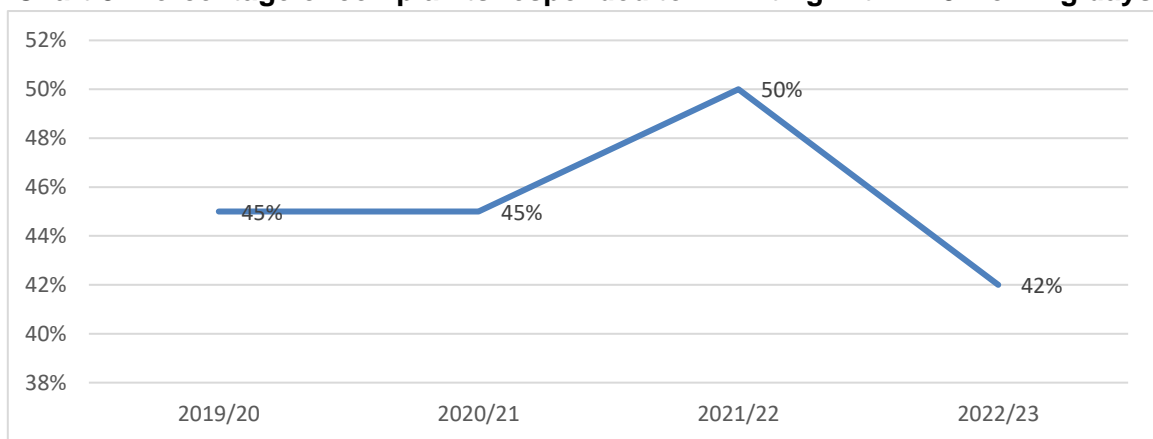
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<sup>4</sup> The response times are different to those reported in the Annual Corporate Complaints Report 2022-23 as the data annual adults data was verified after completion of the corporate complaints report.

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- 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>.
- 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 complaint who is always kept fully informed. Whilst we measure against 25 working days to manage our internal performance, no complaints breach 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, Richmond received 22 new complaints but completed 24 complaints. Timescales were measured for the 24 complaints closed during this year within the 25-day local target.
- 10.5 Of those, 10 (42%) were closed within 25 working days and 14 complaints (58%) exceeded this timeframe. **Chart 8** details response times for the last four years.
- 10.6 For the 42% of complaints that exceed 25 days, the average response time was 34 days, which is still well within the statutory timeframe. As Adult Social Care complaints can be complex, sometimes it is necessary to use additional time to provide a comprehensive investigation.

**Chart 8: Percentage of complaints responded to in writing within 25 working days**



<sup>5</sup> Requests for independent reviews by the LGSCO should be made within 12 months of the incident happening  
<sup>6</sup> Six months is calculated as 182.5 days although this includes non-working days.

### **Learning Case Study “communication”**

#### **Background**

A parent complained on behalf of their young person about transition arrangements from Children Services to Adult Social Care. They were unhappy with the communication by the social workers as they felt there was a lack of information and the assessment did not accurately reflect their young person’s care needs, their views or the views of professionals. They raised that they were not provided with details on how to complain when they expressed dissatisfaction with the process.

#### **Learning**

As a result of the complaint, the young person was offered a reassessment. Staff were reminded of the importance of being sensitive and understanding in communications with service users and families. The Transitions Team also agreed to consider the quality of information provided to young adults; for example whether a leaflet about transition could be produced. Staff were also reminded to ensure that information is provided to service users and families on their right to complain if they are unhappy with the service they have received.

Since the time of this complaint we have introduced very clear pathways and protocols for transition from Children’s to Adult services including an easy read version.

## **11. Equalities data and categories of support**

11.1 This year 17 complaints were from, or on behalf of, service users of working age; between the ages of 18 and 64. A further 7 complaints concerned complaints made from, or on behalf of, service users in the older adult’s category (65 and over).

11.2 10 complaints concerned females and 14 complaints concerned males.

11.3 For the 17 complaints from, or on behalf of, service user of working age (18-64), where known:

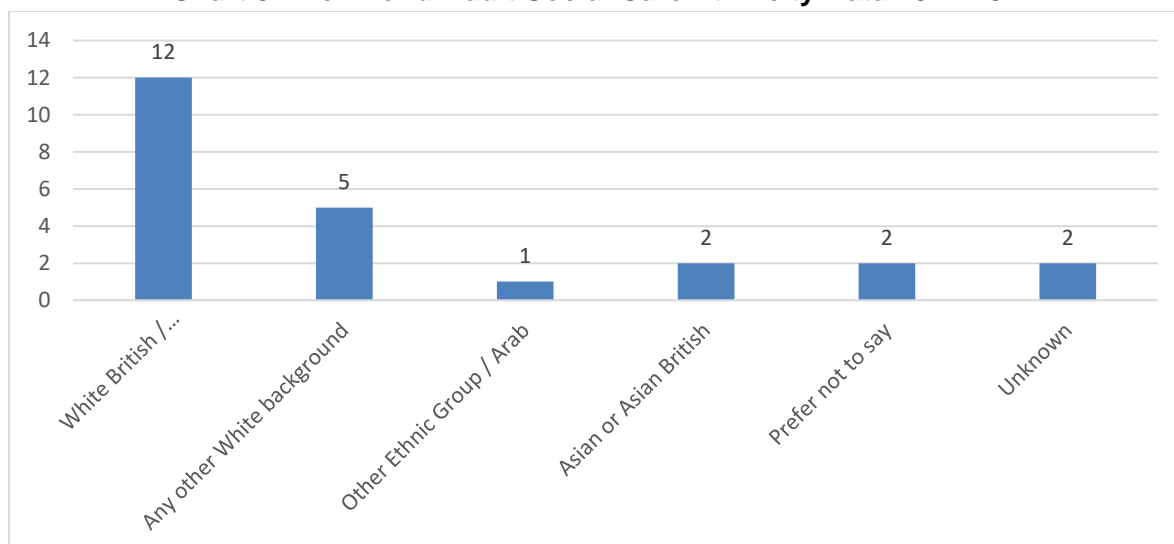
- 47% were in receipt of support from mental health services
- 12% were in receipt of support from learning disability services
- 18% were in receipt of support for physical support.
- 6% were in receipt of support for sensory impairments
- 6% were in receipt of support from learning disability services and social support.
- 12% were in receipt of support for mental health, physical and/ social support.

11.4 For the 7 complaints from, or on behalf of, service users in the older adult’s category (65 plus):

- 43% were in receipt of physical support
- 29% were in receipt of physical support and support for memory and cognition.
- 14% were in receipt of support for memory and cognition.
- 14% (or one person) was in receipt of physical support and personal care support.

11.5 **Chart 9** provides ethnicity data for the service users who made complaints (or had complaints made on their behalf). The majority were from a White background (46% or 13 people). In Richmond, 85% of Adult Social Care services users are from a White background. Black, Asian and Minority Ethnic Groups represent 15% of service users.

**Chart 9: Richmond Adult Social Care 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 Richmond Council's Corporate Complaints Report 2022-23.

12.2 Adult Social Care do not receive many corporate complaints. Sometimes complaints are put through this process if a complaint is from a resident who does not receive statutory social care services but has had interactions with the social care teams and is unhappy with how they have been dealt with.

12.3 This year Adult Social Care only completed 2 stage one corporate complaints compared to 8 last year. One was for Mental Health Assessment, and one was for the Teddington and Twickenham locality. None of these escalated to stage 2 of the corporate complaints process. Last year there were 5 stage 2 corporate complaints.

- 12.4 Stage 1 corporate complaints should be completed within 20 working days. 1 of the 2 stage 1 complaints was completed on time.

### 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 Richmond Council's Corporate Complaints Report 2022-23.
- 13.2 A complainant has the right to refer their complaint to the Local Government and Social Care Ombudsman at any time. Generally, the Ombudsman will seek to ensure that the Local Authority has been provided with the opportunity to first respond to the complaint in accordance with the Council's own statutory complaints process.
- 13.3 During 2022/23 a total of 3 Ombudsman enquiries and/or investigations were completed for Adult Social Care compared to 6 last year which is a 50% decrease. Only one resulted in a full investigation following the initial assessment and a minor fault was found due to the Finance Team issuing an invoice for care charges after the service had been stopped.
- 13.4 Of the 3 completed complaints for Adult Social Care the outcomes/status were as follows:

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

Quarter	Service Area		Outcome
1	Access Team		<p>A complaint that Adult Social Care failed to help a vulnerable person access a GP or refer to long-term support.</p> <p>The LGSCO did not investigate as there was insufficient evidence that the Council failed to help the complainant register with a GP.</p>
3	Teddington and Twickenham Locality Team		<p>A service user complained that the Adult Social Care team suspended the carers providing domiciliary care through an externally provided service.</p> <p>The complaint was premature so re-directed through the complaints process.</p>

3	Financial Assessments		<p>About incorrect charging for services and the stress caused by debt recovery actions.</p> <p>The LGSCO found fault that the Council sent an invoice for charging after the care services had ended (this was a minor injustice) but not about how it informed the service user of the care charges.</p>
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## 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 the Complaints Team can record as much positive feedback as possible to evidence the commitment to good social care practice.
- 14.2 This year the Complaints Team have been made aware of 40 compliments regarding Adult Social Care Teams in Richmond. 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 are outlined below:

*“I would like to express my gratitude in your management of my mother’s case. You have been professional at all times whilst holding a compassionate ear and full understanding of how much care my mother needs and the impact that her disabilities have had on her and myself”.*

*RRRT*

*“[service user] was very happy with the equipment and support provided. They Mrs stated the support I had provided had made such a difference to them. They was so grateful for everything I had done, that I am doing wonderful job in helping people, and that I have been a godsend”.*

*Sensory Team*

*“Thank you for all your help and kindness you showed me during your helping my needs. Your thoroughness at everything you did showed me what a nice and sweet lady you are”.*

*Richmond and Barnes Locality Team*

*“Just wanted to let you know that you have inspired me to avoid getting more depressed by buying a few items that might help, and by changing gp. You made me feel I was worth something more. Thank you. I don’t have to be a victim. You have shown such empathy, you are one in a million”.*

*Teddington and Twickenham*

*“This is just a quick email to feedback how impressed I was today with [social worker] who I have not dealt with previously. They showed me everything good about how to liaise with the service user or client. Introduced himself and name of his team, Listened and didn't interrupt or talk over, Made clear their aim to assist or find a solution. In other words excellent customer care or as one of Amazon's customer support told me years ago 'taking the load off the customer'. One of the 5 Amazon Contact Tenets. I copy in the complaints manager as customer care is something we both value and believe all, not just a majority, should get the basics right”.*

*Mental Health Team*

*“With her guidance, advice and the actions she took upon herself and her prompts for the actions I was invited to take, the day ended with my huge sigh of relief and complete reassurance for myself. Throughout the day [social worker] worked hard on our behalf. Their approach was absolutely professional, totally reassuring and very much undertaken with complete consideration, patience and understanding”.*

*Access*

## 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.



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- 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.