

Adult Social Care Complaints

Annual report April 2021 to March 2022



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1. Introduction

This is the Complaints Manager's annual report for Adult Social Care. It is a statutory requirement to prepare an annual report for each year about the complaints activity within Adult Social Care that will be made available to any person on request. This must:

- a) Specify the number of complaints received
- b) Specify the number of complaints which we decided were well-founded
- c) Specify the number of complaints that we have been informed have been referred to the Local Government Ombudsman
- d) Summarise:
 - The subject matter of complaints received;
 - Any matters of general importance arising out of those complaints, or the way in which those complaints were handled;
 - Any matters where action has been or is to be taken to improve services as a consequence of those complaints.

This report provides information about complaints made during the twelve months between 1 April 2021 and 31 March 2022 under the Local Authority Social Services and National Health Service Complaints (England) regulations 2009.

2. Context

2.1 Legislation

Section 5 of the Regulations (2009) requires local authorities to consider complaints made by someone who:

- Is receiving or has received services from the authority;
- Is affected, or likely to be affected by the action, omission or decision of the authority.

A person is eligible to make a complaint where the local authority has a power or duty to provide, or to secure the provision of, a service for someone.

The 2009 regulations set a benchmark for all complaints to be investigated within six months. If a complaint is going to exceed this timescale the council should write to the complainant to advise them of this and explain the reasons why.

The corporate complaints process is used for anyone else who makes a complaint.

2.2 What is a complaint?

A complaint may generally be defined as an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social care provision which requires a response.

A complaint must be made not later than 12 months after:

- The date on which the matter which is the subject of the complaint occurred; or
- If later, the date on which the matter which is the subject of the complaint came to the notice of the complainant.

This time limit will not apply if we are satisfied that:

- The complainant had good reasons for not making the complaint within that time limit; and
- Notwithstanding the delay, it is possible to investigate the complaint effectively and fairly.

2.3 Who can make a complaint?

A complaint may be made by a relative, carer or someone acting on behalf of a person who has died, or is unable to make the complaint themselves because of:

- Physical incapacity, or
- Lack of capacity within the meaning of the Mental Capacity Act 2005, or
- Has requested the representative to act on their behalf

Complaints can be made in person, by telephone, in writing, or by e mail to the Complaints Team.

2.4 The Statutory Complaints Procedure in Newcastle

We will always try to resolve problems or concerns before they escalate into complaints. If it is possible to resolve the matter immediately (or within 24 hours) there may be no need to engage in the formal complaints process. When a complaint is first received, the Complaints Manager will review the details provided and assess whether an investigation is required under the Statutory Complaints Procedure.

When someone contacts us to make a complaint, we aim to acknowledge their complaint within 3 working days. We also:

- Make sure that we understand their concerns
- Find out what the person wants to happen as a result of their complaint
- Agree a plan with the complainant about who will look into the complaint, and by when
- Keep in regular contact with the complainant
- Act quickly to resolve matters if we can

We aim to sort out most complaints within 30 working days. However sometimes because of the nature and complexity of some issues it may take longer, and complainants will be informed if this is the case.

When the investigation of a complaint is complete, the investigating manager will write a letter explaining what they have found and what they will do to put things right. Sometimes, our findings do not fully support the complainant's view of their complaints. However, we always try to give clear reasons for our decisions, explain any misunderstandings and agree a way forward.

If the complainant is not happy with our final decision, or how we have dealt with their complaint, they can refer the matter to the Local Government and Social Care Ombudsman (LGSCO).

3. Summary of statutory complaints

3.1 Number of complaints received

We received 83 complaints between 1 April 2021 and 31 March 2022; in 2020/21 we received 103 statutory complaints. The table below shows comparisons of the number of statutory complaints over the past three years.

| Year | Number of complaints received |
|---------|-------------------------------|
| 2021/22 | 83 |
| 2020/21 | 103 |
| 2019/20 | 99 |

Of the 83 complaints that were received in 2021/22, 64 were closed at the time of reporting.

3.2 Subject matter of complaints

| Subject matter | Number | Percentage |
|-------------------------------|--------|------------|
| Quality of service | 53 | 64% |
| Information and Communication | 7 | 9% |
| Staff practice and behaviour | 6 | 7% |
| Financial issues | 10 | 12% |
| Delay/Waiting Times | 5 | 6% |
| Eligibility | 0 | 0% |
| To be confirmed | 2 | 2% |
| Total | 83 | 100% |

Reports of all active complaints and timescales are provided to Senior Managers. These show an overview of all active complaints and allow for early resolution of issues where possible, as well as identifying where agreed timescales are not being met. Both during the course of a complaint investigation and after the investigation has concluded, recommendations can be made to ensure that learning is embedded as a result of complaints that have been upheld. The implementation of recommendations is monitored to ensure that changes occur to improve service delivery. This ensures that the organisation learns from the feedback and complaints it receives from people who use our services.

The Complaints and Customer Relations Team provide ongoing daily advice and support to managers around complaints management and resolution and responding to representations.

3.3 Outcome of complaints

There are seven possible outcomes that can be reached when responding to a complaint these are:

- Upheld
- Not upheld
- Partially upheld
- Unable to prove or disprove
- Refused
- Withdrawn
- Referred to other procedures or organisations

Of the 83 complaints that were received in 2021/22, 63 were closed at the time of reporting. The following table shows the outcome of the 63 closed complaints. 15 were upheld or partially upheld.

| Outcome | Number of complaints | | | | | |
|---|----------------------|-----|---------|-----|--------|-----|
| | 2021/22 2020/21 | | 2019/20 | | | |
| | Number | % | Number | % | Number | % |
| Upheld | 3 | 5% | 1 | 1% | 4 | 8% |
| Not upheld | 13 | 20% | 4 | 6% | 16 | 31% |
| Partially upheld | 12 | 19% | 3 | 5% | 20 | 19% |
| Unable to prove or disprove | | | | | | |
| Withdrawn or resolved informally | 9 | 14% | 34 | 51% | 11 | 21% |
| Refused | 5 | 8% | 6 | 9% | 4 | 8% |
| Referred to other organisations or procedures | 11 | 17% | 19 | 28% | 7 | 13% |
| Closed due to lack of engagement | 11 | 17% | | | | |
| Total | 64 | | 67 | | 62 | |

4 Complaints made to the Local Government Ombudsman

The Local Government Ombudsman (LGSCO) has authority to investigate when it appears that our own complaints process has not resolved the complaint. Complainants can refer their complaint to the Ombudsman at any time; however, the Ombudsman will generally refer all complaints back to us if they have not been through our complaints process first. In exceptional circumstances however, the Ombudsman will look at things earlier.

The Ombudsman provides a free service; but must use public money carefully. They may decide not to start or continue with an investigation if they believe:

- It is unlikely they would find fault, or
- It is unlikely they could add to the previous investigation by the Council, or
- They cannot achieve the outcome someone wants

The Council were notified of 17 Adult Social Care complaints that were escalated to the LGSCO between 1 April 2021 and 31 March 2022.

| LGSCO Outcomes | Number |
|-----------------------------|--------|
| Decision not to investigate | 7 |
| Fault found | 3 |
| No fault found | 2 |
| Premature referral | 3 |
| Discontinued work on case | 2 |

5 Learning from complaints

Complaints provide invaluable information which may be used to identify issues in services, help staff learning and also identify any risks and so improve services for the future.

Improvement actions/recommendations arising from complaints fall into three main categories:

- Remedial action for individual complaints
- Improving social work practice and delivering training
- Establishing or changing existing processes, policies or procedures.
- a. Examples of remedial action for individual complaints
 - Apology to complainants where complaints were upheld or partially upheld.

- Additional evidence placed on case record.
- Reassessment of needs.
- Refund offered for bus fares paid.
- Offer of Welfare Rights assessment.
- Charges cancelled and funds refunded.

b. Examples of improving social work practice and delivering training

- Clearer communication methods: social workers to ensure that telephone contact or face to face contact is made when there are any conflicting issues arising or when more important information needs to be shared with people they support and family members. Emails can back up the conversation but should not be the only way to communicate vital information.
- Circulation of guidance on visiting requirements.
- Housing benefit appointeeship briefing note for social work staff.

c. Examples of establishing or changing existing processes, policies or procedures

- Changes made to payment process to reduce delays.
- New template that will be used to obtain consent and signatures that will explicitly reference wishes and preferences in terms of disposal of unsalvageable items/rubbish. This includes consent for photographs to be taken before and after clearing work is completed.
- Reminder to staff dealing with complaints of the timescales for responding to complaints.
- Processes reviewed to ensure that Teams are clear about areas of responsibility relating to the appointment of support workers to help clients requiring assistance.