



Compliment, Complaints and Comments report Adult Social Care

Annual Report
2021/2022

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Introduction

Feedback from customers is vital to any organisation in making improvements. BCP Council Adult Social Care (ASC) welcomes and encourages feedback by any means including complaints, compliments, comments, surveys, consultation, engagement and audits and uses this feedback systematically to make improvements.

Local authorities have a statutory responsibility to report complaints and other representations about health and adult social care under the Local Authority Social Services and National Health Service (NHS) Complaints (England) Regulations 2009. These require councils and NHS bodies to produce an annual report about the complaints they have received, issues that have been raised and any action that has been taken to improve services.

This annual report covers compliments, complaints and related learning for the period 1 April 2021 to 31 March 2022. It aims to review the management and performance of the statutory complaints and representations process in 2021/22 (including statistics, the nature of complaints and compliments received, and how the learning from these has been used to improve services).

Executive Summary

In 2021/22 the total number of complaints for BCP Council Adult Social Care was **172**. This compares to a total of **149** in 2020/21. It should be noted that in 2020/21, fewer complaints were received nationally, as during the Covid-19 pandemic lock downs, numbers fell dramatically.

Communication, professional practice and financial issues have been highlighted as the most common themes from complaints:

- Communication was raised in 83 complaints
- Concerns around professional practice was the reason for 39 complaints
- Issues around finance were highlighted in 55 complaints
- 40 complaints related to assessment and eligibility

A total of **110** individual concerns and general enquiries were managed outside the complaints process. The individuals involved not wishing to pursue a complaint despite being offered the service, but feeling they needed support to resolve a situation. These cases were dealt with in conjunction with Adult Social Care operational teams or signposting to the correct service, such as Safeguarding services. In order to understand these concerns in more depth, during 22/23 the Complaints Team will re-evaluate their recording of complaints, concerns and enquiries so that constructive learning may be taken from these.

In addition to the complaints and concerns received, a further **19** representations were received from MPs and Councillors on behalf of their constituents and residents.

It is important to note that BCP Council Adult Social Care also received **232** compliments and messages of thanks during 2021/22. 219 compliments were recorded in 2020/21.

Adult Social Care alone serves around 4400 adults and 3000 carers, out of a local population of 350000. Therefore, less than 0.02% of our users have sought to make a complaint about the services they receive.

Over the year, feedback and lived experience has also been sought via other Quality Assurance tools such as consumer surveys, staff surveys, consultations, and stakeholder engagement activity. These findings feed into quality assurance reporting to senior leaders for direction and to influence future planning.

Complaints

It is stated in legislation that most complaints should be resolved by local resolution. This means trying to resolve complaints at the earliest opportunity and as close to the point of service delivery as possible. An in-depth investigation may be carried out if it is judged by the Complaints Manager to be the best way to respond to the issues raised, usually in complex cases. The complainant can also approach the Local Government and Social Care Ombudsman (LGSCO) at any stage of the complaints process. Read more about the statutory process at [Appendix 1](#).

Summary of complaints activity in 2021/22

	2021/22	2020/21	Comments
Complaints received	172	149	There was an increase in complaints this year, and our figures are comparable to volume received pre pandemic (2019/20 - 178 complaint were recorded). Neighbouring authorities and health complaints partners also experienced a national trend of an increase in complaints, post the Covid-19 pandemic lockdown periods.
Complaints acknowledged within 3 days	99% (170)	98% (147)	Two complaint acknowledgements were delayed due to unexpected staffing absence
Resolved at local resolution	95% (163)	93% (137)	The percentage of complaints resolved at an early stage through local resolution remains high, with only 9 complaints from this reporting year going on to the ombudsman for review
Resolved within 20 days	65% (111)	71% (106)	It was recorded by the council that complaint responses may continue to be delayed in 21/22, due to the councils need to respond to the Covid-19 pandemic and support vulnerable adults during this time.

	2021/22	2020/21	Comments
Resolved within 20 days (continued)			Where delays were unavoidable, complainants were kept informed and updated of when they could expect a response by.
Formal/in-depth Investigations	2	0	In 21/22, two cases were investigated independently of ASC due the complex nature of the complaints.
The Unreasonably Persistent Complaints process	1% (2)	2% (3)	This year we have had to invoke the Unreasonably Persistent Complaints process on 2 occasions due to the protracted nature of these complaints.

Complaints made to the Local Government and Social Care Ombudsman (LGSCO)

16 complainants referred their complaint to the ombudsman for an independent review during 21/22. Common themes were around charging for care, assessed needs and charging within extra care housing.

The Ombudsman chose not to investigate 7 of the 16 referrals as either they had not yet gone via the councils complaint processes or the Ombudsman could not find fault with the investigation undertaken by the Council and that everything had already been done to remedy the situation.

Therefore, **9 complaints** from reporting year 21/22 were investigated this year, compared to 10 investigations in 20/21.

It should be noted, that from 20/21, 7 complaint referral investigations were carried into 21/22, one of which was reopened after a decision was already reached and additional information provided.

At the end of this reporting year (from complaints referred in 20/21 and 20/22):

- 6 decisions have been received that were upheld
- 3 decisions have been received that were not upheld
- 1 decision was not to investigate further due to concerns the complainant was not acting in the person's best interest
- 6 are currently still under investigation and are awaiting decision

Details of the referrals where there has been a decision can be found in [Appendix 2](#).

Complaint themes

To enable detailed recording and identification of key areas of learning and improvement, complaints may have more than one theme recorded.

Complaint theme	2020/21	2021/22
Communication (perceived inadequate communication, information and advice)	68	83
Finance (decisions around funding, invoice disputes/delays, self-funders approaching the council for funding, financial assessment)	48	55
Decision around assessment and eligibility	34	40
Professional practice (level of support and guidance, feeling involved/ empowered in assessment process)	38	39
Delay in providing a service	20	22
Policy or process	17	21
Quality of domiciliary provision	9	15
Quality of residential or nursing home	15	11
Hospital discharge process – with Health partners	NA	9
Safeguarding process	8	4
Extra Care Housing	7	4
Commissioning	5	3
Respite	1	3

Communication

Many of the complaints around communication relate to providing information in a timely manner and families not feeling as involved as they would have liked to have been. Adult Social Care Practice Standards will be introduced in April 2023 which will clearly define the expectations for our colleagues around communication.

Financial (funding issues, charges or fees)

Individual complainants have challenged national and local policy decisions in terms of funding eligibility.

Decision regarding assessment and eligibility

Difficult conversations are being held around what services can or cannot be provided in line with Care Act 2014 eligibility criteria.

The lessons we have learnt from customer feedback

In year the main learning points have focussed around:

- Ensuring that adults and carers are informed from the beginning that they may need to contribute to the cost of their care. This has included training for social care practitioners and the introduction of a new Charging Declaration form.
- Training and information delivered via staff networks to ensure that robust risk assessments are completed when an adult declines to engage with a service or package of care despite practitioner advice.
- Improving information and advice for those who need to contact and seek support from Adult Social Care including factsheets and letters.

Desired outcomes to complaints are often specific to the case, but when there are organisational learning points that influence policy or procedure, they are acted upon. Individual case learning is dealt with directly with the complainant and more general issues are managed through supervision with team managers and reminders at team meetings.

This year, a Quality Board has been developed to give governance to learning and quality as a whole. This has meant we are now triangulating complaint themes and learning, with other quality assurance findings and performance measures, allowing more evidence-based decisions to be made about how to improve services.

Please see a full table of learning, including organisational learning, being rolled out across the BCP Council area in [Appendix 4](#).

Monitoring the effectiveness of the complaints procedure

A routine online feedback survey is sent to complainants after the process has closed, response rates tend to be variable with not everyone wishing to engage further with the process after their issues have been resolved. However, complimentary feedback has been received by the team, thanking them for their support and facilitation in managing complaints both by complainants and by managers responding to complaints.

Staffing of the complaints service

Currently there are two full time officers in post who manage the day-to-day statutory complaints process. This includes acknowledging complaints, recording and documenting details, tracking and monitoring each case and quality assuring responses to make sure all elements of the complaints are answered. The team also ensure that complainants are kept up to date with progress on their complaints and facilitate meetings where requested.

Work has now completed to align the three predecessor authorities complaint processes and the service now operates as one including contact details, guidance and reporting.

Training

There is now an online complaints training module for practitioners to use across the whole of social care. This course is intended to be used as an induction and refresher. Since being rolled out at the beginning of 2020, however, take up has been limited and consideration is being given as to how to increase this.

Bespoke workshops and team-focused complaints training has been delivered online by the complaints team. This training has been well received and strengthened the working relationship between the complaints staff and operational teams and creating a more robust service. This programme of training will continue through 2022/23.

An online staff complaints toolbox has been developed to provide support; the tool kit includes staff guidance, documents such as letter templates, language checklists, legislative information and LGSCO information.

Compliments

Service users and staff are encouraged to report feedback about services. Compliments are vital because they help to give us a complete picture of opinions about services. In addition to complaints, they can help us make changes to improve services further by identifying good practice.

In total, **232** compliments and messages of thanks were received.

Areas where the highest numbers of compliments have been received	2021/22
Locality Teams	71
Learning Disability	26
Hospital Social Work Team	21
Carers Services	17
Preparing for Adulthood Team	10

Compliments and positive feedback are shared with staff on a regular basis through the staff newsletter and Team Brief. At the same time, teams are reminded to feedback comments from adults and carers and many teams now have a systematic way of doing this.

A small selection of compliments are detailed below:

“ “ I would like to take this opportunity to thank you all for your team effort to get this house ready for X. You have all shown great sensitivity to X's needs. It has been well planned and executed from start to finish, thank you BCP. It has been a long journey and you have all made it possible for today (moving in day) to happen. It is very much appreciated. NB; Thank you for putting up with my last minute demands and rectifying things so quickly. ” ”

“ “ You will probably never know how much this means to us all – thank you so much from the bottom of our hearts. ” ”

“ “ Thank you so very very much for all the support you have given us to help C have as good a life as they are able to have in their own home.

You have gone far beyond our hopes and expectations, and we are so very grateful.

I never imagined when they left hospital last November that they would be in this position now....genuine continuous care, purpose built equipment and all in his chosen environment.

I had hoped to thank you personally at some point but we remain in the ether. Perhaps our paths will cross again in the future ... in the meantime I send you a very big virtual hug. ” ”

“ “ I don't know where to start.

You have been my support, listening to me warble on, being a shoulder to cry on, sorting out my issues, not telling me I'm a pain. I have never been on this side of the care system and it's been the most difficult thing I have ever had to deal with. If I've left a message you call me back, the problems I have had and there have been many, you have dealt with straight away. In this world where you hear so many negatives about social services you have been my rock.

You have guided and informed me of the paths I needed to take. Thanks to you X is safe and hopefully so are the other people who don't have someone to stand up for them. Every time I've come to you about X you've also thought about these people too. It's been a privilege having you by my side and I'm going to miss your support and our chats. Thank you with all my heart. ” ”

Appendix 1 – the Joint Adult Social Care and Health Complaints Procedure

What is a complaint?

An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social care services provision which requires a response.

What is a representation?

A comment, suggestion or compliment made about the service provided. Legislation states that if it is possible to resolve a lower level matter immediately or within 24 hours, there is no need to engage the complaints process.

Who can complain?

An adult who is entitled to, or has a possible need for, a personal social service at any stage in their contact with the service. They also qualify if they are acting on behalf of the adult as their representative and acting in their best interests.

How the procedure works

a) Local resolution

In the majority of cases, a problem-solving approach will be adopted to resolve complaints as close to the point of service delivery as possible. Most complaints are resolved using this approach and typically by the operational manager. Timescales for responding to complaints are agreed between the complainant and the Complaints Officer. Locally, complaints are normally responded to within 20 working days. If the complainant is not satisfied with the outcome of their complaint they have the option to ask for their complaint to be formally investigated or to request a further meeting, or they can ask the Local Government and Social Care Ombudsman to consider their complaint.

b) Formal investigation

In discussion with the complainant and Complaints Officer, an investigation can be invoked rather than using local resolution. The risk, complexity and seriousness of the complaint will be considered when making this judgement.

An in-depth examination of the complaint is completed by an investigating officer who is independent of the service area. A report will be compiled and forwarded to the Director of Service who acts as an adjudicator and will identify the Service Unit's response/decision on each point of complaint and any actions with timescales for implementation. Timescales are agreed between the complainant, the responding manager and the investigating officer.

c) Local Government and Social Care Ombudsman (LGSCO)

The complainant can approach the LGSCO at any time during the procedure or if they remain unhappy after the local authority's efforts at resolution have been exhausted. However, if the ombudsman considers that issues could be resolved at a local level, they will refer the complaint back to the local authority.

Complaints that have both health and social care elements

There may be some occasions when complaints have elements of both health and social care services. If so, the Complaints Officer will look at the issues and decide whether the Protocol for Dealing with Joint Complaints needs to be adopted and the complaint progressed in accordance with this route.

Appendix 2 – Local Government and Social Care Ombudsman (LGSCO) decisions received.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
2021/22	Complaint around professional practice	Communication – Information Professional Practice	Not Upheld	The Ombudsman could not find fault in the way that the Council managed an investigation and communicated the process to the complainant. There were also no issues with the support provided during this time.
2021/22	Complaint around the provision of a direct payment and claims regarding professional practice	Professional Practice Decision around funding	Not Upheld	Complaint around withdrawal of direct payments in 2015 and a care assessment in 2020. The Ombudsman did not investigate matters dating back to 2015 as they said they were too long ago to be properly considered. The decision found no issue with the Council's actions in 2020 as it could not complete a care assessment because the complainant disengaged.
2021/22	Complaint around assessment after the individual moved into the BCP area, and ongoing support.	Decision around assessment and eligibility Professional Practice	Upheld	The ombudsman advised the Council could have better planned for needs and there was a delay in providing some of the care. The complainant's contact was managed by the Council due to the disproportionate amount of time that was being expected for the social worker to meet with them, however the ombudsman recommended that this plan was reviewed as they stated it was not properly communicated. A further recommendation of a financial remedy of £200 was also given.
2021/22	Complaint around actions taken to support a mother	Safeguarding	Not investigated	The Ombudsman did not investigate the complaint because they felt the complainant was not a suitable person to complain on behalf of their mother.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
2020/21	A complaint around monitoring and service improvement processes for domiciliary care providers	Home care	Upheld	The Ombudsman found issues with the way the Council monitored a care provider and the quality of care from that provider. The Council was recommended to apologise, to make a payment of £300 to reflect the distress and inconvenience caused and provide evidence of revised service improvement processes.
2020/21	Complaint around charging for care and risk assessing a reduction in a care package	Decision around assessment and eligibility Invoice dispute or delay	Upheld	The complainant stated that they were not advised that they would have to contribute to the cost of their care. They also refused the level of care that was advised by the social worker however the Council did not reduce the package of care due to risks. The recommendations were that; the Council apologised, waived an amount of the outstanding bill, made a remedy payment of £200, improved processes to ensure conversations around risks and financial payments are better documented.
2020/21	Complaint around delays to a care act assessment	Delay	Upheld	The council had offered signposting to other services when the complainant made a referral for an assessment which the Ombudsman said was incorrect. A financial remedy of £1000 was recommended.
2020/21	Complaint around a social worker raising a safeguarding alert	Professional Practice	Not upheld	The Ombudsman did not find fault with the actions of the Council and the Social Worker had acted correctly.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
2020/21	Complaint around the financial assessment for contributions towards the cost of a care package	Decision around funding Policy Invoice dispute or delay	Upheld	The Ombudsman stated the Council did not arrange care and support for the complainant after the Direct Payment was stopped. It was recommended that the Council pay a financial redress of £300. The Ombudsman did not find any issues with the Council's financial assessment or request for the complainant to pay the assessed contributions.
2020/21	Daughter complained of the quality of care for her late mother	Professional Practice Residential care Safeguarding	Upheld	Concerns around fluid management recording and seeking emergency treatment at the home. The home had taken appropriate action to address these issues after the original safeguarding investigation however the Ombudsman recommended the home again apologise for the uncertainty caused to the complainant.

Appendix 3 – Equalities information

Primary Support Reason	2021/22
Physical support - personal care support	22% (37)
Physical support - access and mobility only	19% (32)
Not known - not a service user	15% (25)
Support with memory and cognition	12% (20)
Learning disability support	9% (16)
Mental health support	6% (10)
Not recorded	5% (9)
Physical Support (non specific)	3% (6)
Not recorded – corporate	3% (5)
Social support - Support for social isolation / other	2% (4)
Sensory support - support for visual impairment	2% (4)
Social Support – support for carers	2% (3)
Physical and Sensory Disability	1% (1)

Gender	2021/22
Female	58% (100)
Male	39% (67)
Corporate	3% (5)

Ethnicity	2021/22
White - English/Welsh/Scottish/Northern Irish/British	68% (117)
Not recorded	24% (42)
Corporate	3% (5)
White - Any other White background	3% (5)

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Ethnicity	2021/22
Black/African/Caribbean/Black British - Any other Black/African/Caribbean background	1% (1)
Other ethnic group - Other	1% (1)
Other ethnic group - Arab	1% (1)

Appendix 4 – Learning from customer feedback

NB - Below is a summary of learning which is measured and reviewed as part of the quality assurance framework.

Origin of learning and issues raised	Learning improvement identified	Measure/outcome of learning
Complaint referred to the LGSCO where the outcome was a recommendation to strengthen the process for letting a client know that they may need to contribute to their care costs.	A practise briefing was distributed explaining the importance of case recording conversations around client contribution and how to complete a new charging declaration form that was introduced.	Review of complaints and comments in 22/23
Complaint referred to the LGSCO where they recommended that we review procedures for monitoring commissioned care providers.	Where concerns have been identified in a provider service, new processes ensures the required improvements have been made and are being maintained.	Review of complaints and comments in 22/23
A complaint was received around charges for Extra Care Housing.	A review of the charges was completed and fees brought into line with other facilities. Further work is ongoing to engage with residents to understand how the service can best support them.	Review of complaints and comments in 22/23
Complaint around a delay in receiving care and support due to the Care Act easement for OT work and adaptations, as a result of COVID pandemic.	Practitioner communication was reviewed for this case and learning addressed with the team.	NA
Complaint around information and advice for Direct Payments.	A review of information and advice for Direct Payments is being undertaken	Review of complaints and comments in 22/23

Origin of learning and issues raised	Learning improvement identified	Measure/outcome of learning
A complaint was received around a SAR given out in error.	An error in the system was reviewed, now all case documents are able to be viewed by the IG team.	NA
Complaints received regarding the contact centre call waiting times.	This issue is being addressed within the Front Door project including the design and implementation of a webform to field irrelevant referrals/contact. When further corporate IT systems are in place this will extend to telephone operating systems. The team are now also asking a series of questions when answering the phone to shorten conversations that need to be signposted to other parts of the council.	Less complaints received of this nature in the 2 nd half of 20/21
A number of complaints around the hospital discharge process – joint complaints with Health partners	Work continues with partners to agree a way forward with managing these complaints and how to progress the learning. The QA manager will be working with the project lead to better understand what is needed from the system.	Review of complaints and comments in 22/23
A complaint was received around communication and language.	Reminder for the team around use of language when communicating and new Practice Standards are being implemented in April 2022.	Review of complaints and comments in 22/23
Complaints received around care from an agency.	A review of the factsheet Care in the Home in order to manage expectations and support relationships	NA
Complaint around Direct Payments letters.	A standard letter asking for repayment was reviewed and changed accordingly	No further complaints received of this nature
Ombudsman decision around adults wanting to reduce their POC despite SW advice and risk assessment.	Practice Briefings designed around Risk Assessments, delivered via staff networks.	Review of complaints and comments in 22/23