



Adults Wellbeing and Health Partnerships Complaints Management Annual Report



SURREY
COUNTY COUNCIL

Introduction

This is the Surrey County Council, Adults Wellbeing and Health Partnerships Complaints Management annual report for the business year 1 April 2023 to 31 March 2024. It covers complaints made to the directorate, complaints raised with the Local Government Ombudsman (regarding Adult Social Care) as well as compliments.

With regard to complaints, all councils in England that deliver adult social care have a statutory duty to investigate complaints about care under the Local Authority Social Services and National Health Service Complaints (England) Regulations, 2009. In Surrey County Council, such complaints are overseen by the Adults Wellbeing and Health Partnerships Customer Relations Team.

When someone makes a complaint, we aim to:

1. Act quickly to resolve the issues where possible.
2. Acknowledge their complaint within three working days.
3. Propose a plan for how we will respond to their complaint.
4. Invite their confirmation of what the complaints are and what outcome they are seeking.
5. Inform the complainant when they can expect to receive the substantive response.
6. Maintain contact with the complainant during the investigation as appropriate.
7. Respond in full within twenty working days or extend our response time if needed.

Executive Summary

Complaints and compliments provide us with insights into what is working well and what we can do to improve the experiences and outcomes for people who draw upon our services, their carers and families. Complaints are reported weekly and monthly to the Corporate Leadership Team and a detailed analysis is shared with the leadership team on a quarterly basis. The key highlights from 2023/24 include:

- 371 complaints were received in the period 1 April 2023 to 31 March 2024. This represents an increase of 18.6%, compared to 302 complaints received in the previous year.
- The most common causes for complaint relate to service provision (21.4%), funding (19.6%), staff (14.3%) and communication (14.0%).
- 223 (97.4%) of the 229 complaints that received a response were responded to within the agreed timeframe. On average, the Directorate sent responses within 24 working days, this is the same as the previous reporting year.
- A total of 131(57%) complaints responded to, had an outcome of either upheld or partially upheld, while 98 (43%) had an outcome of not upheld.
- The Local Government and Social Care Ombudsman (LGSCO) issued 22 final decisions on complaints about the Council's Adult Social Care services. 15 of these were upheld with £15,400 in financial settlements recommended by the Ombudsman. The 22 final decisions represent 5.91% of the total 371 complaints received in this period.
- Compliments recorded as received increased by 26.7% (to 672) when compared to the previous year (492).

Complaints and Compliments activity

Table 1 provides the key activity data for compliments and complaints for the reporting years 2019/20 to 2023/24.

Table 1

Complaints and Compliments	2019/20	2020/21	2021/22	2022/23	2023/24
Complaints received	255	218	288	302	371
Complaints responded to	261	182	203	223	229
Compliments received	480	455	451	492	672

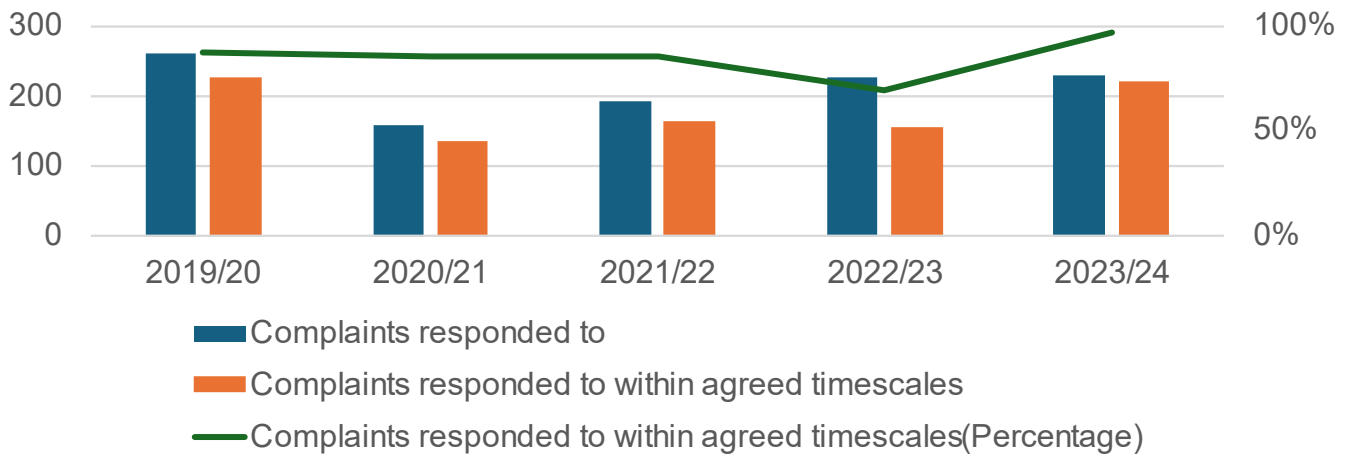
Performance

Table 2 and Figure 1 detail the yearly trend for number of complaints that received a response and the number within the agreed timeframe, over the period 2019/20 to 2023/24. Whilst the Council has adopted a best practice timescale of 20 working days as an initial response timeframe, this can be extended depending on the circumstances of the issues being investigated, which can often be complex and/or involve partners. Adults Wellbeing and Health Partnerships has a performance target of 90% for responding to complaints on time.

Table 2

Complaints and Compliments	2019/20	2020/21	2021/22	2022/23	2023/24
Complaints responded to	261	182	203	223	229
Complaints responded to within agreed timescales (Number)	226	172	193	207	223
Complaints responded to within agreed timescales (Percentage)	87%	95%	95%	93%	97%
Average response times (days)	24 days	22 days	24 days	24 days	24 days

Figure 1



Time taken to respond to complaints

Table 3 shows how many working days were taken to respond to all complaints in 2023/24, providing both the number and overall percentage of the complaints responded to within the reporting year.

Table 3

Working Days	Weeks	Number of Complaints	Percentage
Up to 5	1 week	6	2.6%
6-10	2 weeks	12	5.2%
11-15	3 weeks	19	8.3%
16-20	4 weeks	87	38.0 %
21-25	5 weeks	45	19.7%
26-30	6 weeks	27	11.8%
31-45	7-9 weeks	27	11.8%
46-60	10-12 weeks	3	1.3%
61+	Over 12 weeks	3	1.3%
Total		229	100.0%

Responses to complaints

Adults Wellbeing and Health Partnership operates under a single stage complaints response process and in line with its own timescales typically aims to respond to complaints within twenty working days. This timescale is flexible and can be varied, where a complaint is complex and/or involves multiple agencies and more time is required for investigation, by notifying the complainant in writing.

In 2023/24, Adults Wellbeing and Health Partnerships responded on time to 97% of complaints (223 out of 229 completed responses). This is 4% up on the previous year and remains above the 90% target set across the Council.

In addition, 124 complaints (54.1%) received a response in under 20 working days. A further 72 complaints (31.5%) received a response in less than 30 days. This means that the majority of complainants 194 (85.6%) received a response within 30 working days or less.

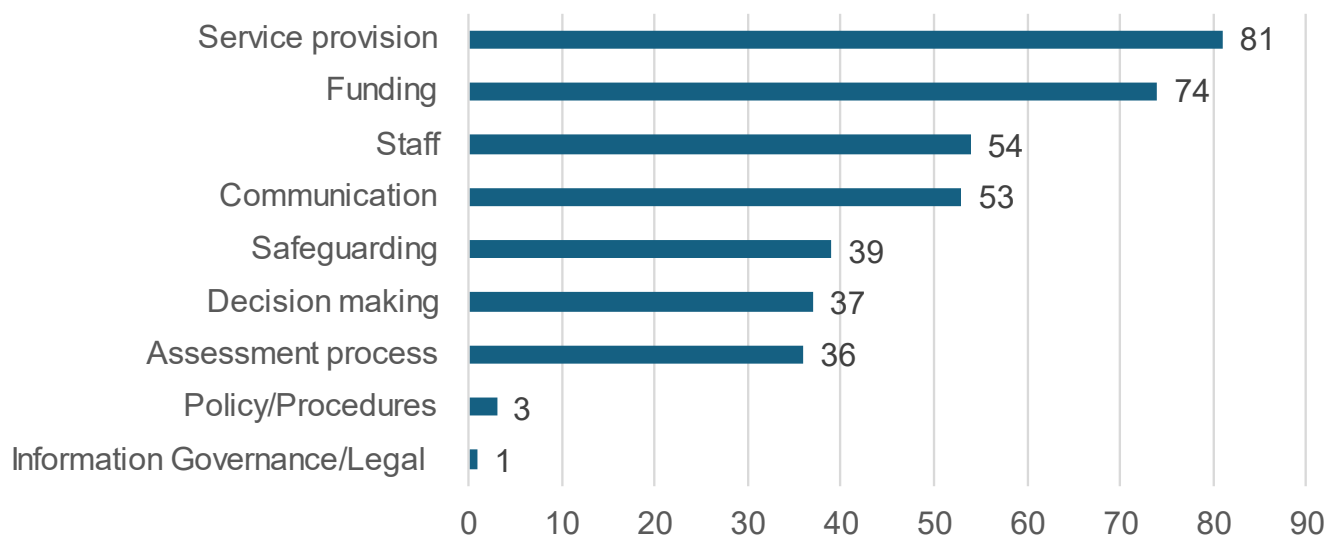
Nature of complaints

Complainants can raise more than one issue in their complaint, hence for the purposes of reporting, the nature of complaints will not match the number of complaints received. Table 4 and figure 2 detail the different nature of complaints received in 2023/24.

Table 4

Nature of complaints	Number	Percentage
Service provision	81	21.4%
Funding	74	19.6%
Staff	54	14.3%
Communication	53	14.0%
Safeguarding	39	10.3%
Decision making	37	9.8%
Assessment process	36	9.5%
Policy/Procedures	3	0.8%
Information Governance/Legal	1	0.3%
Grand Total	372	100.0%

Figure 2



The most common causes for a complaint relate to service provision (21.4%), funding (19.6%), staff (14.3%) and communication (14.0%).

Outcome and resolution of complaints

Table 5 shows the trend by year, for the complaint outcome, by number and the overall percentage of complaints received, over the past five reporting years. Complaints resolved outside the process have been recorded since 2020/21. This will often be where a relatively simple complaint has been made verbally and can be resolved within one day to the resident’s satisfaction. These complaints are still tracked but will not have a formal investigation. This approach is supported by the statutory procedure and the Ombudsman also actively encourages early resolution.

Table 5

Outcome of complaints	2019/20	2020/21	2021/22	2022/23	2023/24
Complaints upheld in full	60 (24%)	36 (21%)	52 (24%)	41 (18%)	33 (14%)
Complaints upheld in part	84 (34%)	67 (38%)	81 (38%)	93 (42%)	98 (43%)
Complaints not upheld	101 (41%)	72 (41%)	80 (38%)	89 (40%)	98 (43%)
Total responded to	245	175	213	223	229
Complaints withdrawn	10	10	15	9	21
Complaints resolved outside the process		33	60	74	118
Total ended (withdrawn/ Resolved outside the process)	10	43	75	83	139

A pattern is emerging to reflect the work being done to resolve complaints with pace to the satisfaction of the complainant outside of the formal complaints process.

The overall percentage of complaints upheld in full or in part remains broadly consistent at around 60%.

Table 6

Resolution of Complaints	Number	Percentage
Advice/Information Given	188	82.1%
Apology	93	40.6%
Service provided	36	15.7%
Staff training	19	8.3%
Funding redress	12	5.2%
Service improved	10	4.4%
Communication improved internally	5	2.2%
Support plan reviewed	4	1.7%
Agreement with person using service or carer	3	1.3%
Review communications	0	0.0%
Process/policy review	0	0.0%
Process/policy change	0	0.0%
Total number of actions taken:	370	
Total number of complaints responded to	229	

The Council now reports on the resolution of complaints and there are often multiple resolutions. In 2023/24, there were 370 actions taken in response to our learning from complaints.

Local Government and Social Care Ombudsman activity

Table 7 shows how many complaints investigations were undertaken by the Ombudsman each year in the period 2019/20 to 2023/24 and the total sum of the Ombudsman's financial remedies in each year.

Local Government and Social Care Ombudsman Activity	2019/20	2020/21	2021/22	2022/23	2023/24
Investigations undertaken by LGSCO	30	26	12	16	22
Investigations upheld by the LGSCO	14	12	9	10	15
Financial remedies recommended for upheld complaints by the LGSCO*	£6,695*	£28,069**	£14,085	£1,550	£15,400***

* £3,769.72 refund of incorrect charges for residential care and paid directly by the provider

** includes reimbursing £11,000 paid to a care provider as an unofficial third-party top up and a backdated Direct Payment of £9,603 for a separate complaint

*** Includes a payment of £9,150 made due to the care provider, acting for the Council, being at fault as they charged an additional fee with no top up agreement being in place. The Council were instructed to repay the top up fee

Learning from complaints

Learning from complaints is an important source of information for implementing service improvement. The focus on identifying learning and putting things right and making a difference to service delivery is a key requirement across all services and monitored closely by the Customer Relations Team.

Examples of learning from complaints for this reporting year are detailed below:

- Communication** - Poor communication with an individual at the centre of a S42 safeguarding enquiry. We found that we failed to effectively communicate with the individual and her mother during the process leaving them feeling frustrated and excluded. This was further impacted by our failure to relay the outcome of the enquiry to them in a timely manner. In response to this complaint we reminded all staff of our Adult Safeguarding Policy and Procedures, specifically that individuals must be involved in the decisions where there is to be a safeguarding enquiry or safeguarding adults review (SAR).
- Service Provision** - The complaint was about the Council's failure to keep under review the best interest decision it made about a person's care and funding arrangements. The complainant told us we did not provide proper information about paying for the costs of care. In response we reminded staff, they must give full information about paying for the costs of care, including information about how a person's contribution to those costs will be calculated and what happens if a person chooses a care home or care package that exceeds this. We are also working to ensure best interest decisions are kept under review.

LGSCO complaints and learning

If a complainant remains unhappy with the outcome of a complaint, they can refer their complaint to the Local Government & Social Care Ombudsman (LGSCO).

The Local Government & Social Care Ombudsman (LGSCO) have written to us with our annual summary of complaint statistics for year ending 31 March 2024. This information offers valuable insight about our organisation's approach to complaints.

The LGSCO received 39 complaints in the year (2023/24) and 22 of these complaints were investigated, with 15 being upheld. Examples of learning identified from the 15 upheld LGSCO complaints is summarised below.

- New guidance was shared with all social care staff regarding offering an Independent Advocate, when we become aware that there is not an appropriate person to represent and support the individual. This was supported by a series of training and awareness sessions.
- In response to an Ombudsman Investigation, Adult Social Care undertook an action plan to improve the waiting list for the Deprivation of Liberty Safeguards (DoLS) assessments. This included a data cleanse, additional investment to commission an agency to undertake some DoLS assessments and a review of the size and structure of the DoLS team to ensure it is sustainable for the future. We use a nationally recognised approach to prioritising applications which looks at every case individually and helps us respond urgently to those most in need of safeguards.
- The ICB and Council jointly reviewed, and updated, systems and protocols they had in place for transferring care responsibilities from one organisation to another. We have a new jointly agreed Transfer of Care Protocol and an escalation procedure to ensure cases are picked up by the receiving authority in a timely manner which will be enacted in every case. We also have a regular joint operational meeting between Adults Wellbeing and Health Partnerships and Integrated Care Board (ICB) to discuss any operational issues including a review of transfers pending.

The Ombudsman will recommend a remedy where there has been fault resulting in an injustice to the individual. A financial remedy is recommended only when the complaint has resulted in a quantifiable financial loss as a reimbursement and/or to acknowledge identified distress, time, and trouble.

We recognise that we need to be more proactive in the ways that we learn from complaints and translate it into improvements in practice. To support this process the status of LGSCO cases is reported to the Practice Assurance Board for review and learning to be built into wider practice improvement. We also need to be more systematic in aligning the feedback gathered by Healthwatch with our complaints data and adopt a 'you said – we did' approach moving forward.

Compliments

Table 9 shows the total number of compliments that have been received by service areas in Adult Social Care Services in the period 2019/20 to 2023/24. To celebrate, all the compliments are shared with the senior leadership team, included in the staff newsletter and staff also receive an letter of congratulations from the Executive Director.

Table 5

Team	2019/20	2020/21	2021/22	2022/23	2023/24
East	98	48	62	73	75
Mid	156	96	41	109	76
North West	116	86	77	91	99
South West	79	34	42	42	86
PLD, Autism & Transition	0	27	29	40	84
Mental Health Service	0	32	27	27	52
Service Delivery	180	129	165	97	167
Countywide	31	3	8	13	34
Total	480	455	451	492	672

Summary of achievements

- We are monitoring complaint themes and learning which is shared with the Practice Assurance Board to ensure any learning is being embedded into frontline practice.
- We analyse complaints by protected characteristic and know we receive disproportionately more complaints from, or on behalf of, young adults and people with a learning disability and/or autism, but less from carers in their own right. This intelligence has informed actions designed to raise the profile of our complaints process with carers and carer organisations so that we can better capture learning arising from their experiences and act upon what this is telling us.
- We deliver learning space sessions on complaints to which all staff are invited, to ensure that we meet our legal duties and avoid future faults by learning from the findings and changing processes and practices
- Compliments are being shared with staff to highlight the good work and support that they are able to offer people who use our services and their families.

- Addressing and resolving complaints jointly when appropriate. We have a duty to cooperate and work closely with partners including the NHS, this benefits our clients by ensuring where possible they receive one response to a complaint that may span across multiple organisations.
- Providing monthly training sessions for staff on how to respond to complaints enables practitioners to respond to complaints in a timely, outcome focused way that assists our complainants to receive a timely reply to concerns raised.

If you have any comments concerning the content of this report, please contact the Adult Social Care Customer Relations Team:

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