

Adult Social Care Annual Feedback Report

1 April 2023 - 31 March 2024

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1. Introduction

This report provides information in respect of the statutory complaints responded to by Adult Social Care during the year 2023 - 2024.

The report has been produced in line with The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 which required an annual report to be prepared which details:

- The number of complaints received and processed by Adult Social Care Services in line with the regulations.
- The outcome of complaints that have been responded to.
- A summary of the subject matter of the complaints, any matter of general importance and improvements that have been made as a result of the complaints.
- The number of complaints which we have been informed have been referred to the Health Service Commissioner to consider under the 1993 Act or the Local Commissioner to consider under the Local Government Act 1974.

2. The Statutory Complaints Procedure

Adult Social Care are required to handle and consider complaints in line with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 which were introduced in April 2009.

The regulations are based on a single approach across health and adult social care with a single stage providing flexibility for the organisation and the complainant to agree on how their complaint will be handled. In instances where the complainant remains dissatisfied, they are advised they can approach the Local Government and Social Care Ombudsman.

Complaints that are formally investigated are investigated by officers from the Customer Insight Team who are independent of the Adult Social Care Directorate. If the desired outcome of a complaint is something that can be resolved without the need for a formal investigation, then Adult Social Care staff will review the concerns raised.

The following types of complaints are not required to be dealt with in accordance with the regulations:

- Complaints made by a responsible body (another local authority, NHS body, primary care provider or independent provider).
- Complaints that are made verbally and are resolved to the complainant's satisfaction no later than the next working day after the day on which the complaint was made.
- A complaint the subject matter of which is the same as that of a complaint that has previously been investigated under the regulations.
- A complaint the subject matter of which is being or has been investigated by a Local Commissioner under the Local Government Act 1974 (a) or a Health Service Commissioner under the 1993 Act.

Complaints must be made no later than 12 months after the date on which the concern in which 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.

That said the 12-month time limit would not apply if the complaints team is satisfied that the complainant had good reasons for not making the complaint within the time limit and, notwithstanding the delay, it is still possible to investigate the complaint effectively and fairly.

There are no timeframes for responding stipulated in these regulations. They do, however, state that as soon as reasonably practicable after completing the investigation, a written response should be sent to the complainant. If a response is not issued within a period of six months commencing on the day on which the complaint was received, a longer period may be agreed with the complainant.

3. Complaints received within the reporting period 1 April 2023 – 31 March 2024

The following table details the number of pieces of feedback dealt with within the reporting period over the last three years:

Year	Annual Total
2021/2022	38
2022/2023	59
2023/2024	142

The number of complaints addressed during 2023 - 2024 increased by 141% on the previous year.

At the close of the reporting period (31 March 2024) 107 of the 142 complaints received during 2023 - 2024 had been concluded. The data detailed in this report are based on those 107 complaints.

4. Outcomes of Complaints concluded at 31 March 2024

The following table provides details of the outcomes of those 107 complaints received during 2023 – 2024 and concluded by 31 March 2024.

Outcome	Total
Upheld	39
Partially upheld	31
Not upheld	29
Unable to reach conclusion	04
No finding	04
Total	107

5. Subject Matter of Complaints

The categorisation of the subject matter of complaints is undertaken by the Customer Insight Team at the point each complaint is concluded.

It should be noted that whilst 107 complaints were concluded in the period there can be more than one subject matter being complained about.

The top three recorded cause of complaints in this reporting period were:

- *Delay in Service Provision*
- *Poor communication/Information*
- *Quality of Service*

The table below provides details of the recorded reason for the complaints during 2023– 2024 as at 31 March 2024.

Subject Matter	Total
Conduct and Attitude of staff	15
Customer Interpretation	22
Delay in service provision	50
Dissatisfied with policy	03
Lack of support	05
Poor Communication/Information	38
Poor Response/Investigation	05
Quality of Service	32
Non-adherence to process	05
Service Failure to respond	07
Staff/Team error	04
Lack of Process/Procedure	04
Agreed Actions not completed	06
Staff levels	06
Cost of Service	05
Dissatisfaction with legislation	01
Total	208

6. Matters of General Importance arising from complaints received 2023 - 2024

The feedback we receive through complaints continues to provide an invaluable insight to how we can improve our services for the people of Sandwell that meet their needs and expectations.

It should be noted that there will be more key issues as recorded above (208) than complaints concluded (107) as some complainants raise more than one issue.

The table below shows the outcome of each subject matter recorded for those complaints concluded as at 31 March 2024, and whether the complaint was upheld or not.

	Upheld	Partially Upheld	Not Upheld	Unable to Reach a Conclusion	No finding	Total
Conduct and Attitude of staff	01	07	05	02	0	15
Customer Interpretation	0	07	12	03	0	22
Delay in service provision	31	14	02	0	03	50
Dissatisfied with policy	0	0	03	0	0	03
Lack of support	0	01	04	0	0	05
Poor Communication/Information	13	15	10	0	0	38
Poor Response/Investigation	01	03	01	0	0	05
Quality of Service	12	12	07	0	1	32
Non-adherence to process	0	03	01	01	0	05
Service Failure to respond	04	03	0	0	0	07
Staff/Team error	02	02	0	0	0	04
Lack of Process/Procedure	02	02	0	0	0	04
Agreed Actions not completed	03	03	0	0	0	06
Staff levels	01	05	0	0	0	06
Cost of Service	0	03	02	0	0	05
Dissatisfaction with legislation	0	0	01	0	0	01
Total	70	80	48	06	04	208

7. Service Improvements from Statutory Complaints 2023 - 2024

As part of an investigation the Investigating Officer is required to identify any recommended future actions or service improvements that are made as a result of the complaint findings. This analysis draws together all the service improvements that were identified during 2023 - 2024.

Review of Information:

- Information regarding the Well-being Charge within the Extra Care facilities was revised to ensure clarity in explaining the charge to residents.

Written reminders to staff:

- That Social Care Staff are compliant with the escalation process when a Service User or family member requests to speak to their manager.
- A briefing note be issued to staff from the Direct Payment team reminding them of best practice expectations and the council's values.
- A briefing note is issued to the Therapy Team to advise them of best practice for reviewing replacement equipment when potential issues with the equipment have been raised.

Process reviews

- It was recommended that Sensory and Therapy services review their processes so that there is a mechanism to highlight cases where actions such as submitting a request for adaptations is highlighted earlier to avoid unnecessary delays.

Reviews confirmed as underway at time of investigation:

- Sensory and Therapy services confirmed that they are planning the implementation of a new process for making contact and booking appointments. This should help to set better expectations of process times and will allow time for third parties to be updated and information on appointment times to be made available where needed.
- The Direct Payments Team confirmed they are in the process of reviewing the direct payments procedures and were asked to ensure the complainant was part of the co-production engagement groups in place to draw upon people's experiences of a direct payment and shape the improvements needed.
- Social Care Team Manager confirmed they were reviewing the process for allocating active cases when there is a change in team structure as well as continuing to work on recruiting new staff to try and limit unnecessary delays.

Identified learning for individual officers:

- A Best Interest Assessor was reminded of the importance of due diligence, and accuracy when undertaking Best Interest Assessments on the behalf of the Sandwell Supervisory Body. The discussion included reiterating the importance that key decision makers (family/ close friend) must have the opportunity to feedback on what has been recorded in the Form 3 contemporaneously.
- Prevention Store Team Manager /Equipment Technician and a Hospital Team line manager were requested to remind staff of the importance and need to be complaint with the Values and Behaviours of the council and the expectation that all staff were compliant with such.

8. Adult Social Care – Director’s response to the Annual Report

It has been identified that the top three areas of concern identified from the complaints received over the last 12 months are highlighted as:-

- *Delay in Service Provision*
- *Poor communication/Information*
- *Quality of Service*

I am cognisant that in the previous Annual Complaints Report completed in 2021/2022, it was identified that Covid had impacted upon the number of complaints received with a 33% reduction in those received. However, it is of concern to see the significant increase in the level of complaints in 2023 – 2024.

We are seeing increased pressure on adult social care services in Sandwell through growing demand and greater complexity of people’s social care needs. This is the picture nationally, although different areas will have varying pressures depending on their demography. The reasons for this increasing pressure are and complex and multi-faceted. As an example, however, two key drivers are of note:

- ***Increasing demand and complexity of presenting need(s):***
Sandwell’s population is forecast to grow by 6.1% population by 2040. In line with other parts of England, our population is

ageing, with an expected increase of +33.6% in people aged 65+ and, and +50% in people aged 90+ by 2040. Whilst longer life is to be celebrated, many people are likely to spend part of their life with one or more long-term conditions and will require support from health and care services. This is particularly so in areas of relative deprivation, like Sandwell, where people are likely to spend more years of their life in poorer health. Healthy life expectancy in Sandwell is lower than the England average for men at 61.6 (63.1 for England) years and women 60.5 (63.9) years

- ***Increasing challenges in the workforce market for adult social care.*** As a service based industry we are reliant upon a stable and experienced workforce to deliver care. Both internally and externally, we are seeing increasing numbers of vacancies and approximately 25% staff turnover.

Overarching action underway to address key issues:

Complaints and compliments are a valued way for Sandwell Metropolitan Borough Council to understand the experiences of people who use Adult social care. To address delays in service provision, quality issues, and effective communication with residents, a number of improvement projects were set in train in 2023/24 to introduce new ways of working to improve the experience of people who use our services. Together with the service improvements described above in response to complaints, it is anticipated that these will start to impact positively on main causes for complaints. Our key areas of focus are recruitment, quality, and practice, with an overarching theme of continuous learning and improvement:

- **Recruitment - Addressing Staffing and Waiting Times**
In order to ameliorate vacancies and retention in staffing, a comprehensive Adult Social Care Workforce was developed and agreed in January 2024. An aligned work plan was also established. It is anticipated that this will support a more consistent workforce with less reliance on interim staff. This will impact positively on waiting times and people's experience of the service. To date, the following has been undertaken:
 - A new approach to recruitment has been developed. This has involved holding local recruitment events and engaging in national and regional recruitment opportunities. It includes a focus on the increased use of media and new

communication assets to attract workers to Sandwell. The first round of this approach has been completed, and the impact of this is being analysed.

- The job descriptions of professional front line staff roles have been evaluated to ensure that these reflect current practice requirements. This also resulted in an increase in pay grade for most staff, which means that Sandwell is now in line with benchmarked remuneration of neighbouring authorities and can be more competitive in the regional market.
- Further work is underway to improve the induction, practice, and training offer for new and existing staff, as described below.

- **Practice – Practice Framework and Strengths-Based Practice**

As part of our work to support all staff to work with our residents in a strengths-based way, we are undertaking the following:

- A revised Practice Framework is in development. This approach to practice provides clear guidelines and protocols for practitioners to follow, informing and encouraging best practice. It will provide a strengthened basis for monitoring and evaluating the quality of practice, identifying areas for improvement, and ensuring accountability.
- A training matrix linked to roles in Adult Social Care is being created to support professional development and ongoing learning for staff at all levels.
- Work on improving induction is being undertaken through the Workforce Board in conjunction with the above.
- A comprehensive programme of support to fully embed strength-based practice is being explored. This will invest further in our staff to support the further development of a positive and confident approach to a strength-based practice model that emphasises coproduction and a culture of continuous learning and improvement.

- **Quality Assurance and triangulation of feedback**

Triangulation of information and experience is key to the oversight of quality. A stronger strategic approach to the oversight of quality and direction of improvement is in development to build both on the new Practice Framework, and the quality frameworks that are already in

place in the Adult Social Care Directorate. The consists of the following elements:

- Although we have quality assurance frameworks in place for different areas of Adult Social Care (such as externally commissioned services), a whole-systems Quality Assurance Framework for whole Adult Social Care is being developed. This approach will provide our overarching position and direction for the delivery of high-quality practice and service delivery across Social Work, Therapy, Commissioning and Directly Provided Services in Sandwell.
- A Practice Governance Board, chaired by the Assistant Director for Social Work, has been established to oversee both the development of the framework, and the work that will take place under the new Quality Assurance Framework. The Board meets six-weekly, and reports to the DASS on issues of quality identified and its work programme.
- A key focus for the new Quality Assurance Framework will be the triangulation of customer feedback, practice development issues, and information on quality of provision from commissioning and directly provided services. Working in this way, we can improve our ability to identify our priorities for quality improvement and oversee their development.
- Our new approach to quality assurance will involve mechanisms for collecting feedback from service users and their families including via compliments and complaints.
- By identifying areas for improvement, our approach to assurance will facilitate continuous learning and development within adult social care.
- It is intended that this approach to assurance will help to build trust and confidence among service users, their families, and the broader community.

9 .Health Service Commissioner complaints

During the 2023 – 2024 reporting period, Adult Social Care have not been informed that any complaints have been referred to the Health Service Commissioner to consider.

10. Local Government and Social Care Ombudsman Enquiries and Complaints (Local Commissioner)

The following table details the elements of feedback (enquiries and complaints) received from the Local Government and Social Care Ombudsman within the reporting period over the last three years:

Year	Annual Total
2021/2022	13
2022/2023	16
2023/2024	14

During the 2023 – 2024 reporting period, Adult Social Care received nine enquiries from the Local Government and Social Care Ombudsman (LGSCO) which were not progressed for the following reasons:

Outcome	Total
Premature	4
Closed after initial enquiries – out of jurisdiction	1
Closed after initial enquiries – no further action	4
Total	9

Adult Social Care received five complaints from the LGSCO during this reporting period compared to the nine received during the 2022 – 2023 reporting period.

All five were concluded at 31 March 2024. The outcome of these five investigations are:

Outcome	Total
Premature decision	0
Upheld – fault and injustice	5
Upheld – no further action	0
Upheld – fault – no injustice	0
Not Upheld – no fault	0
Total	5

The nature of these five complaints were:

- Delays in completing a review of care needs in a timely manner and failing to consider service users capacity to make decisions about their care and finances. Stopped Direct Payments without notice and failed to meet the care needs in the meantime.
- Delays in providing service user with accurate and timely information about the costs of residential care.
- Fault with the actions of a Care Provider with the quality of care it provided causing distress to the service user and their family.
- Care Provider failure to review care provided by and failure in recording its decision to impose a visitation ban.
- Care Provider failure to provide adequate S117 aftercare on behalf of the council including protecting service user from Covid-19, provide adequate care and failure to provide complainant with a proper response to the complaint they submitted to the Care Provider.