

Adult Social Care Annual Feedback Report

1 April 2020 - 31 March 2021

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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 2020 - 2021.

The report has been produced in line with The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and details:

- The number of complaints received and processed by Adult Social Care Services in line with the regulations;
- The outcome of complaints 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; and
- 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 complaints are managed 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 Ombudsman.

It should be noted that complaints made by a responsible body (another local authority, NHS body, primary care provider or independent provider) and complaints that are made verbally and are resolved to the complainant's satisfaction are not required to be dealt with under the regulations.

Furthermore, the National and Regional Complaint Officers groups continue to meet on a quarterly basis to share their experiences and, when invited, provide feedback to the Department of Health on their experiences of working with the regulations.

3. Complaints received within the reporting period 1 April 2020 – 31 March 2021

The following table details the number of pieces of feedback registered and responded to as a formal complaint over the last three years:

Year	Annual Total
2018/2019	92
2019/2020	87
2020/2021	57

The number of complaints we have formally investigated and responded to during 2020 - 2021 decreased significantly by 34.5%. There was a particular decline in complaints received due to Covid 19 and notably during the first national lockdown from March to July 2020.

At the close of the reporting period (31 March 2021) 30 of the 57 complaints received during 2020 -2021 had been concluded. The data is based on the 30 complaints that were formally investigated and concluded in the period.

4. Outcomes of Complaints concluded as at 31 March 2021

The following table provides details of the outcomes of those complaints received during 2020 – 2021 and concluded by 31 March 2021.

It should be noted that each of the 30 complaints investigated in the period can contain more than one complaint element. For the period 50 complaint elements were concluded and the outcomes can be seen below.

Outcome	Total
Upheld	14
Partially upheld	13
Not upheld	19
Unable to reach conclusion	1
Not a complaint	3
Total	50

5. Health Service Commissioner or Local Commissioner complaints:

During the 2020 – 2021 reporting period, Adult Social Care have not been informed that any complaints have been referred to the Health Service Commissioner to consider.

A total of 11 complaints during this period were referred by complainants to the Local Commissioner (Local Government and Social Care Ombudsman) to consider under the Local Government Act 1974.

6. 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.

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

- *Poor Communication/Information*
- *Dissatisfaction with policy*
- *Delay in service provision*

The table below provides details of the recorded reason for the complaints during 2020 – 2021 as at 31 March 2021 (based on the 50 complaint elements of the 30 concluded complaints).

Subject Matter	Total
Conduct and Attitude of staff	5
Cost of Service	3
Customer Interpretation	4
Delay in service provision	9
Dissatisfied with policy	6
Lack of support	5
Non-Adherence to Process/Procedure	5
Poor Communication/Information	9
Quality of Service	1
Staff / Team error	3
Total	50

7. Matters of General Importance arising from complaints received 2020 - 2021

The feedback we receive through complaints continues to provide invaluable insight in order that we can learn from our mistakes and ensure that we make the necessary improvements to the services we are providing to the people of Sandwell that meet their needs and expectations.

It should be noted that there will be more key issues (50) than complaints concluded (30) as some complainants raise more than one issue.

The table below shows the root cause of each complaint element concluded as at 31 March 2021, and whether the complaint was upheld or not.

	Upheld	Partially Upheld	Not Upheld	Unable to Reach a Conclusion	Not a complaint	Total
Conduct and Attitude of staff	2	1	2			5
Cost of Service			1		2	3
Customer Interpretation		1	2		1	4
Delay in service provision	6	1	2			9
Dissatisfied with policy		2	4			6
Lack of support	1		4			5
Non-Adherence to Process/Procedure	2	1	2			5
Poor Communication/Information	2	6		1		9
Quality of Service			1			1
Staff / Team error	1	1	1			3
Total	14	13	19	1	3	50

8. Service Improvements from Statutory Complaints 2020 - 2021

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 2020 - 2021.

Improvement in communication –

- The Hospital Team management addressed the issue regarding clear communication with families, via their team meeting and with individual Social workers during one to one sessions to monitor that the expected standard of communication is being achieved.
- The Hospital Team management raised issues about poor communication on the hospital wards, with the Clinical Lead for the NHS Trust.

Review of process/procedure –

- The Community Care Business Unit (CCBU) reviewed how financial assessments are tracked and actioned to ensure they are responded to within an appropriate timeframe.

Written or verbal reminders to staff –

Reminders were given to staff to improve service delivery in the following areas:

- Ensuring copies of Care and Support Plans are sent to service user/family as soon as possible after approval in line with the Care Management Processes.
- The importance of all Community Social Work Teams recording accurate and precise details during a contact assessment so that care and support is not delayed.
- The need for officers within the Community Social Work Teams to accurately record requests for referrals and equipment and ensure this are actioned appropriately.
- Referrals for Recruitment Support for individuals with a Direct Payment should be made as soon as possible using the appropriate electronic form, and to clearly detail the reasons for referral in accordance with the Care and Support Plan.