



DARLINGTON

Borough Council

Adult Social Care
Complaints, Compliments and Comment
Annual Report
2022/23

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Introduction

1. The purpose of this annual report is to inform service users, carers, the public, Council Members and staff of the effectiveness of the Adult Social Care Complaints, Compliments and Comments Procedure (the procedure).
2. On 1 April 2009 the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (the regulations) came into force following the consultation 'Making Experiences Count' by the Department of Health. The consultation found that the complaints processes for people receiving both health and social care services were overly complex and inflexible.
3. As a result, the legislation introduced altered the way in which complaints are handled introducing a single joint complaints process for both social care and health services, with one stage as opposed to the previous three stage process used in relation to adult social care services. The regulations also introduced a duty for health and social care services to cooperate.
4. The Council implemented a new procedure on the 1 April 2010 providing a local framework to ensure complaints are handled effectively and in line with the regulations.
5. The procedure aims to:
 - (a) Make it as easy and accessible as possible for service users and their carers to raise complaints;
 - (b) Foster an organisational culture in which complaints are accepted, owned and resolved as efficiently as possible;
 - (c) Ensure high levels of customer satisfaction with complaints handling;
 - (d) Resolve individual issues when they arise and reduce the number of complaints referred to the Local Government and Social Care Ombudsman; and
 - (e) Enable the Council to identify topics and trends in relation to adult social care complaints and improve services as a result.
6. The Assistant Director Adult Services is the responsible person for ensuring that the Council complies with the arrangements made under the regulations. They act as the 'Adjudicating Officer', which means they make decisions on complaints and decide what action should be taken in light of the outcome of a complaint.
7. The Complaints and Information Governance Manager (Complaints Manager) is the responsible person for managing the procedure for handling and considering complaints in accordance with the agreements made under the regulations.

Local Government and Social Care Ombudsman (Health Services Ombudsman)

8. Although complainants can refer their complaints to the Local Government and Social Care Ombudsman (LGSCO) from the outset, the LGSCO will not normally investigate until the Council has conducted its own investigation and provided a response. Where it has not been possible for the complaint to be resolved to the satisfaction of the complainant they may refer the matter to the LGSCO (and the Health Services Ombudsman for some joint complaints).

Information and Accessibility

9. We are committed to making sure that everyone has equal access to all our services, including the complaints procedure. To help make sure the Council's complaints procedures are easily accessible we have produced two leaflets (one for children and young people and one for adults) covering all Council services, to reflect the single point of access for complainants within the Council. The leaflets are available in all Council buildings. They have been written in line with the Plain English Campaign standards. The title is written in the most commonly used community languages and it contains details on how to access the information in other formats, for example, large print, audio and Braille.
10. Information is available on the Council's website. There is also an electronic form which people can use to make a complaint, pay someone a compliment or pass comment on Council services. People may make a complaint in any format they wish. This can be in writing, by email, via the web, over the phone, in person or by any other reasonable means.
11. The Complaints Manager can arrange advocates and interpreters (including British Sign Language interpreters) where appropriate.

Advocacy

12. During 2022/23 the Council commissioned an advocacy service which provides RPRs (Relevant Persons Representatives), IMCAs (Independent Mental Capacity Advocates), IMHAs (Independent Mental Health Act Advocates), Care Act Advocates, Representative Deprivation of Liberty authorised by the Court of Protection (COP10DOLS), general advocacy and advocacy for people with a hearing impairment. This was provided by Darlington association on Disability (DAD).

Summary

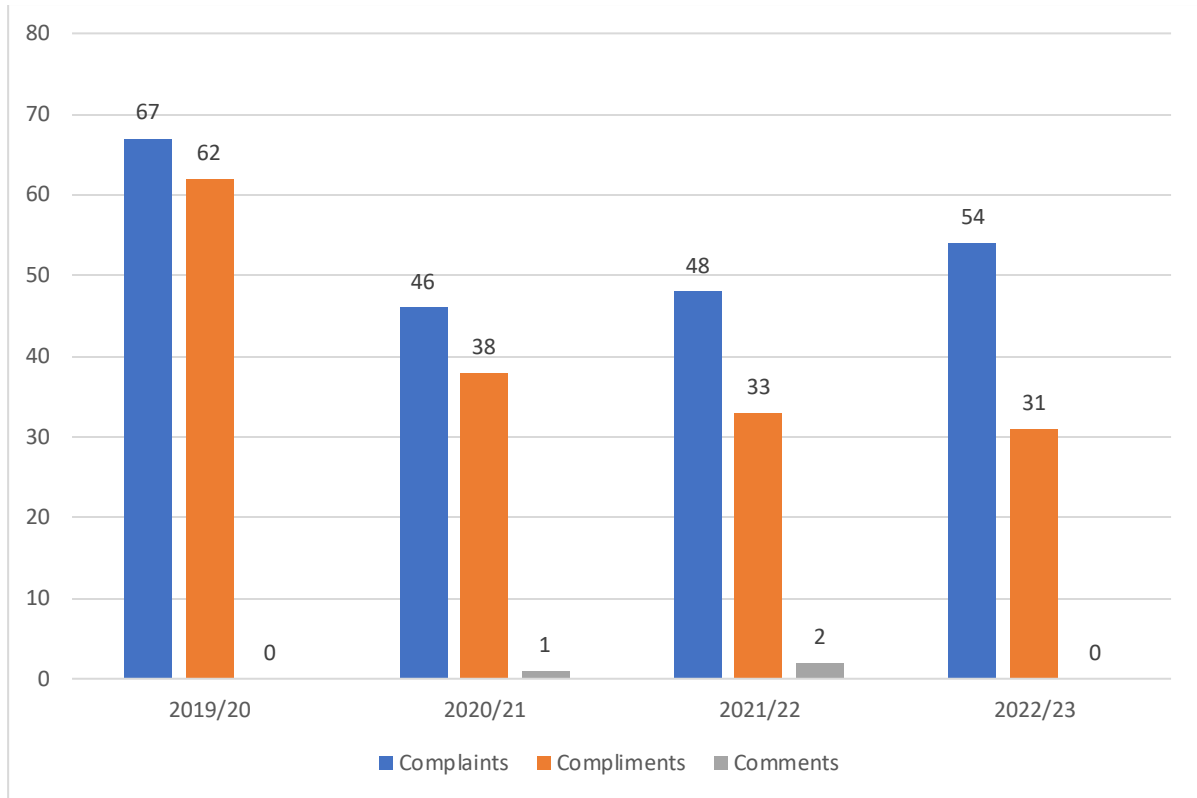
13. There has been a slight increase in overall feedback, 86 representations in 2022/23 compared to 83 representations in 2021/22 and 85 in 2020/21. The overall number of representations remained lower than in 2019/20, when Adult Services received 134 representations.
14. The trend of relatively low numbers of complaints compared to pre-pandemic levels continued during 2022/23, with the Council investigating 54 complaints. Although this was an increase from 48 in 2021/22 and 46 in 2020/21, it was still significantly lower than 67 investigated in 2019/20.
15. The Council received 31 compliments under the procedure during 2022/23, a decrease from 33 in 2021/22, 38 in 2020/21 and 62 in 2019/20.
16. The Council did not receive any comments under the procedure during 2022/23, a decrease from two in 2021/22, one in 2020/21. The Council did not receive any comments 2019/20.
17. The Council received one complaint which did not qualify for investigation under the procedure during 2022/23, an increase from zero in 2021/22, a decrease from six in 2020/21 and five in 2019/20.
18. Nine adult social care complaints were progressed to the LGSCO during 2022/23, an increase from three in 2021/22, six in 2020/21 and two in 2019/2020.
19. The LGSCO reached a decision on nine complaints during 2022/23, an increase from four in 2021/22 and 2020/21 and three in 2019/20. The increase in complaints considered by the LGSCO during 2022/23, is likely as a result of the bottle neck created by the COVID-19 pandemic.

Review of the Year

Breakdown of all Representations

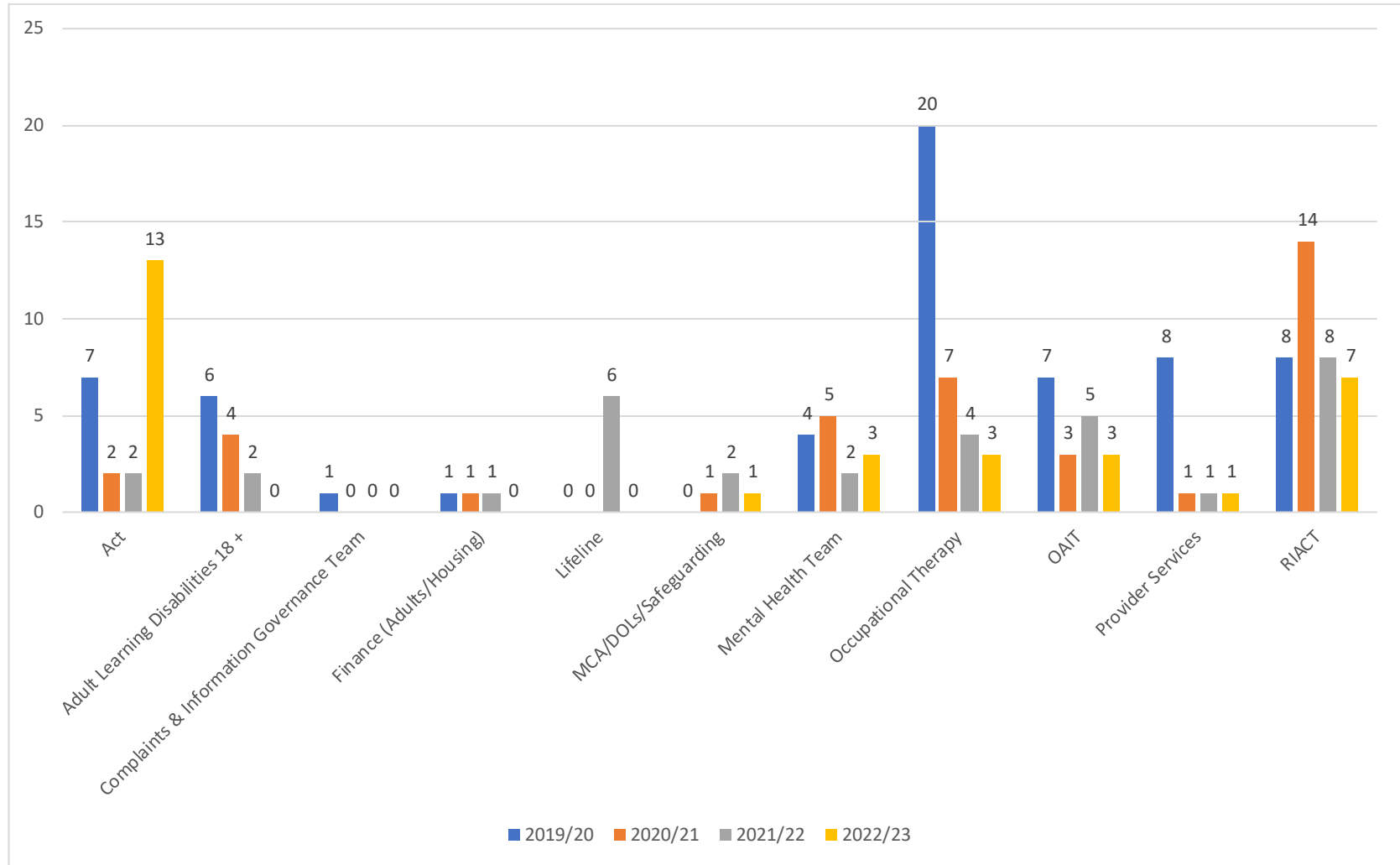
20. A total of 86 representations (including one non-qualifying complaint) were handled under the procedure during 2022/23. This does not include those representations responded to directly by social care providers i.e. care homes and home (domiciliary) care providers.

Total Complaints, Compliments and Comments Received



21. There was an increase in the number of complaints investigated, 54 compared to 48 in 2021/22 and 46 in 2020/21, however, complaints remain significantly lower than in 2019/20.
22. There was again a decrease in the number of compliments received, 31 compared to 33 in 2021/22 and 38 in 2020/21. Again compliments remain significantly lower than in 2019/20.
23. There was also a decrease in the number of comments received. No comments were received in 2022/23, a decrease from two 2021/22 and one in 2020/21. The number of comments received has historically remained low. The Council did not receive any comments in 2019/20.

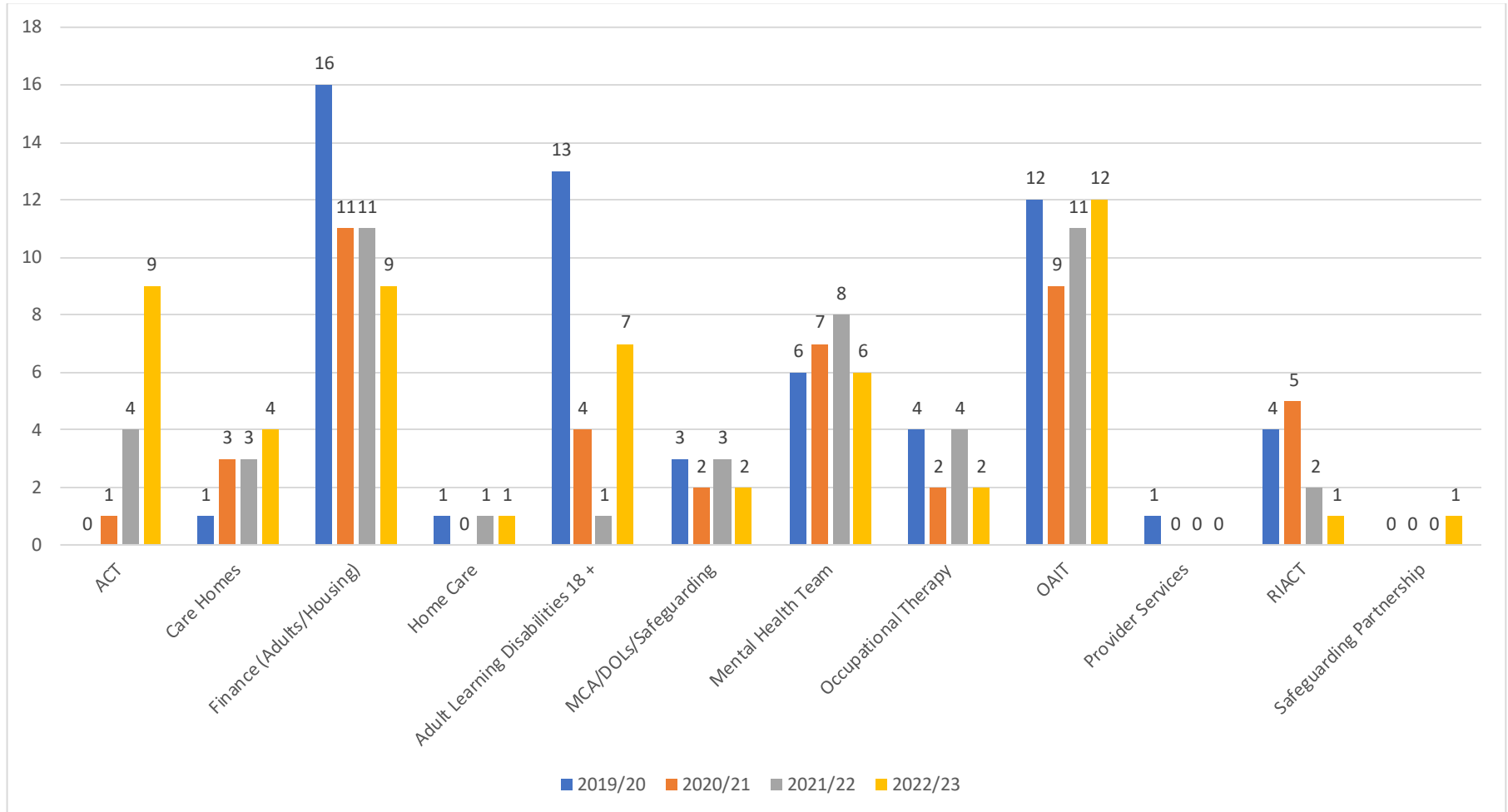
Breakdown of Compliments Received by Team



*ACT = Adult Contact Team, MCA/DOLS = Mental Capacity Act/Deprivation of Liberty Safeguards, OAIT = Ongoing Assessment and Intervention Team, RIACT = Responsive Integrated Assessment Care Team, STAR = Short Term Assessment and Review

N.B. Those teams that do not appear in the graph did not receive any compliments

Breakdown of Complaints Received by Service Area/Team



*ACT = Adult Contact Team, MCA/DOLS = Mental Capacity Act/Deprivation of Liberty Safeguards, OAIT = Ongoing Assessment and Intervention Team, RIACT = Responsive Integrated Assessment Care Team.

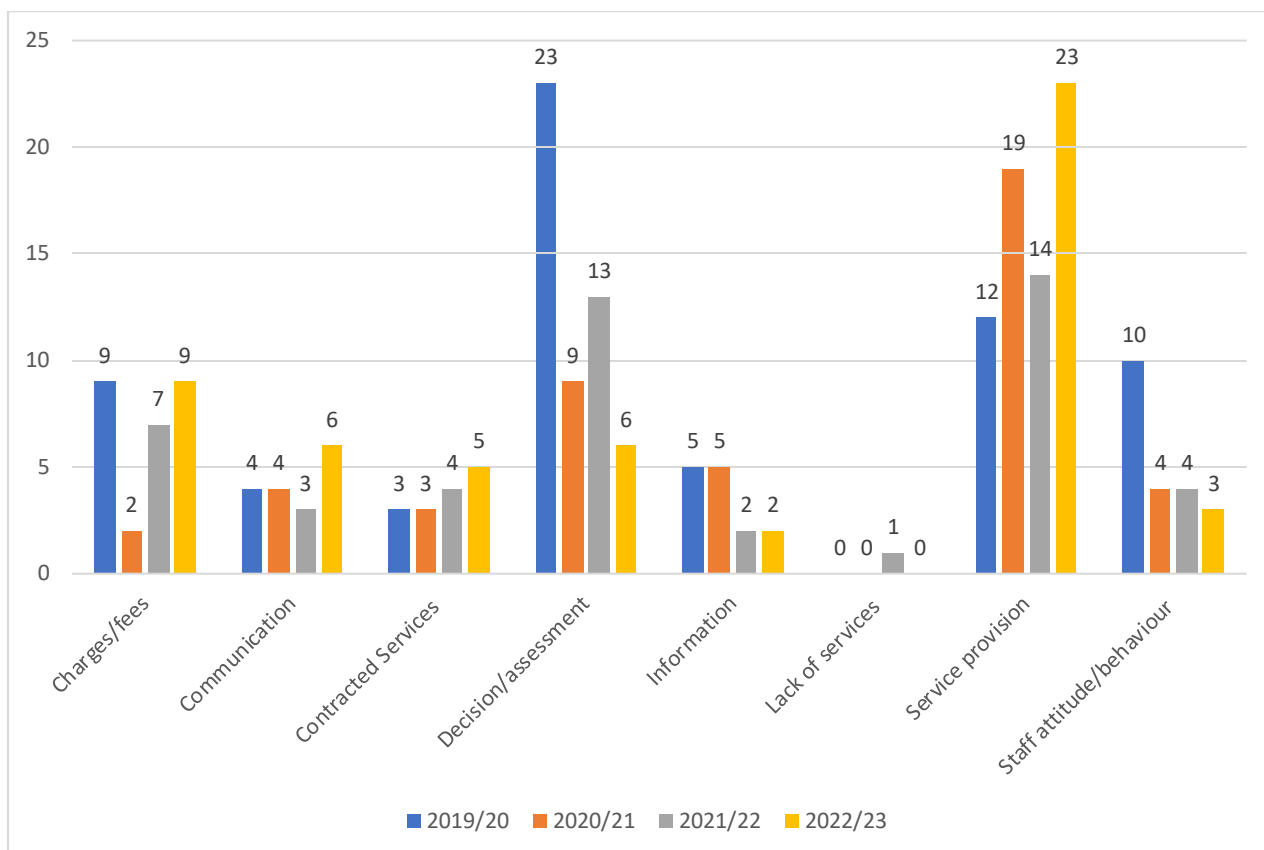
N.B. Those teams that are not listed did not receive any complaints.

24. The Council investigated nine complaints about ACT, an increase from four in 2021/22, one in 2020/21 and zero in 2019/20.
25. The Council investigated four complaints about care homes (contracted service), an increase from three in 2021/22 and 2020/21 and one in 2019/20. These primarily concerned the standard of care provided.
26. The Council investigated nine complaints about Finance (Adults/Housing), a decrease from 11 in 2021/22 and 2020/21 and 16 in 2019/20. Complaints concerned delays, poor communication, inaccurate information and dissatisfaction with decisions.
27. The Council investigated one complaint about a home (domiciliary) care provider (contracted service), the same number as in 2021/22, an increase from zero in 2020/21 and the same number as in 2019/20.
28. The Council investigated seven complaints about Adult Learning Disabilities 18+, an increase from one in 2021/22, four in 2020/21 and a decrease from 13 in 2019/20. Complaints concerned communication, support from social workers, dissatisfaction with decisions and issues with respite.
29. The Council investigated two complaints about MCA/DOLS (Mental Capacity Act/Deprivation of Liberty Safeguards), compared to three in 2021/22, two in 2020/21 and three in 2019/20.
30. The Council investigated six complaints about the Mental Health Team, a reduction from eight in 2021/22, seven 2020/21 and the same number as in 2019/20. Complaints concerned staff attitude/behaviour, communication, the service provided by the social worker and the outcome of decisions/assessments.
31. Occupational Therapy received two complaints, a decrease from four in 2021/22, the same number as in 2020/21 and a decrease from four in 2019/20.
32. Ongoing Assessment & Intervention Team (OAIT) received 12 complaints, an increase from 11 in 2021/22, nine in 2020/21 and the same number as in 2019/20. These primary concerned the level of service provided by the social workers and communication issues, particularly in relation to financial assessments/care charges.
33. Provider Services did not receive any complaints in 2022/23, 2021/22 or 2020/21, a decrease from one in 2019/20.
34. Responsive Integrated Assessment Care Team (RIACT) received one complaint, a decrease from two in 2021/22, five in 2020/21 and four in 2019/20.
35. Safeguarding Partnership received one complaint in 2022/23, an increase from zero in 2021/22, 2020/21 and 2019/20.

Breakdown of Comments Received by Service Area/Team

36. The Council did not receive any comments, a decrease from two in 2021/22, one in 2020/21 and the same number as in 2019/20.

Breakdown of Complaints Received by Issue



37. The most common cause of complaint remained service provision. The Council received 23 complaints about service provision, an increase from 14 in 2021/22, 19 in 2020/21 and 12 complaints in 2019/20.
38. The second most common cause of complaint was charges/fees, overtaking dissatisfaction with the outcome of a decision/assessment. The Council received nine complaints about this issue, an increase from seven in 2021/22, two in 2020/21 and the same number as in 2019/20.
39. The third most common causes of complaint were dissatisfaction with the outcome of a decision/assessment and communication. The Council received six complaints about dissatisfaction with the outcome of a decision/assessment, a decrease from 13 in 2021/22, nine in 2020/21, although complaints about this issue remained lower than 2019/20 when the Council received 23 complaints. Adult Service received six complaints about communication, an increase from three in 2021/22 and four in 2020/21 and 2019/20.
40. Contracted services was the fourth most complained about issues during 2022/23. The Council received five complaints about contracted services, an increase from four in 2021/22 and three in 2020/21 and 2019/20.
41. Staff attitude/behaviour was the fifth most complained about issue. The Council received three complaints about this issue, a decrease from four in 2021/22 and 2020/21 and 10 in 2019/20.

42. Information was the least complained about issue. The Council received two complaints about this issue during 2022/23, the same number as in 2021/22. This was a decrease from five in both 2020/21 and 2019/20.

Complaint Outcomes

43. 62 complaint investigations were concluded during 2022/23. The outcomes of these complaints are detailed in the chart below.

Service Area/Team	Upheld	Partly Upheld	Not Upheld	Inconclusive	Withdrawn	Total
Adult Contact Team (ACT)	0	5	2	0	2	9
Adult Learn Disabilities 18+	1	3	1	0	1	6
Care Homes (contracted service)	1	1	0	0	0	2
Finance	1	4	3	0	0	8
Home Care (contracted service)	0	0	0	0	1	1
Life Stage 26+	0	0	0	0	1	1
MCA/DOLS/Safeguarding	1	1	0	0	1	3
Mental Health	1	3	2	1	2	9
Occupational Therapy	0	2	0	1	0	3
Ongoing Assessment & Intervention Team (OAIT)	1	8	5	0	4	18
Responsive Integrated Assessment Care Team (RIACT)	0	2	0	0	0	2
Total	6	29	13	2	12	62

Local Government and Social Care Ombudsman (LGSCO) Complaints Received 2022/23

44. Nine adult social care complaints were progressed to the LGSCO during 2022/23, an increase from three in 2021/22 and five in 2020/21 and 2019/20.

Local Government and Social Care Ombudsman (LGSCO) Complaint Outcomes 2022/23

45. Nine adult social care complaints were determined by the LGSCO during 2022/23, an increase from four 2021/22 and 2020/21 and five in 2019/20.

46. Full details of those complaints determined by the Local Government and Social Care Ombudsman are included in the Cabinet reports of 6 December 2022 and 5 September 2023 entitled [Review of Outcome of Complaints Made to Ombudsman](#).

Organisational Learning

47. All resolution and organisational learning actions identified as a result of complaints are assigned to a responsible manager and progress against those actions is monitored by the Complaints Manager. In addition to those actions taken to resolve individual complaints, a number of service improvements were made following complaint investigations during 2022/23, some of which are detailed below.

Finance

48. The Council agreed to send a reminder to social workers on the process of the allocation of financial assessment requests to the Financial Assessment Team and not themselves.
49. It was agreed, care would be taken by the Brokerage officers to ensure that when packages are amended due to the change in funding paths that the actuals reflect the correct hours provided, and system generated hours are checked.

Mental Health

50. Adult Services agreed to remind all staff of the importance of recording contacts with family members.
51. Adult Services staff were reminded of the importance of providing detailed explanations to families reaching crisis point. Adult Services also considered providing relevant literature to help navigate the process of transitioning into care.
52. Adult Services circulated national practice guidance and their own practice guidance for social workers and reviewed the website to ensure it provides information for the public on assessment processes.
53. It was agreed Adult Services would, consider introducing written information on the services provided and the rationale and thresholds to access these to assist families to understand the roles that Adult Services can play and when support should be provided.

MCA/DOLS/Safeguarding

54. Adult Services agreed to consider sharing information in respect of what meeting outcomes and analysis can be shared with interested parties and what information should be accessed via a Subject Access Request.
55. Adult Services agreed to, consider how staff moves and retirements are communicated to individuals in respect of ongoing matters and how handovers between staff in respect of ongoing matters are recorded, in terms of dates and information available. It was agreed managers should have oversight in order to facilitate handovers if there is a break in service cover.

56. Adult Services agreed to ensure, team members and managers respond to e-mails, which raise legitimate concerns, in an appropriate and timely manner.
57. Adult Services agreed to ensure, all safeguarding referrals were thoroughly investigated in line with Darlington Borough Council Adult Safeguarding Procedures.
58. Adult Services agreed, to consider training staff to ensure decision making in respect of safeguarding referrals is timely, proportionate, recorded correctly and communicated to all parties effectively.

Occupational Therapy

59. It was agreed that OT assessment reports would be shared with the person as a matter of course.

Ongoing Assessment & Intervention Team (OAIT)

60. Adult Services considered how the purpose and result of assessment meetings are communicated to service users and whether current arrangements are sufficient.
61. Adult Services also considered that if support and carers plans are kept separate then support is considered in conjunction with the work both teams are doing.
62. Adult Services agreed to, consider documenting the care/support planning process in plain language to ensure service users are fully informed.
63. Adult Services agreed, consider ensuring that management oversight and decision making in relation to service management is clearly recorded within case notes.
64. Adult Services agreed, to consider reminding staff when making decisions that discussions with service users should be clearly recorded.

Responsive Integrated Assessment Care Team (RIACT)

65. Adult Services agreed to, consider providing definitive guidance relating to Continuing Health Care appeals in relation to what support, if any, the Local Authority can provide and that this guidance is made available to relevant service users.
66. Adult Services agreed, to consider reminding staff of their duties under the Care Act in relation to assessments and support, particularly in relation to prevention of further need.
67. Adult Services agreed, to consider reminding staff of the importance of recording all information and supporting decision making in relation management oversight.
68. Adult Services agreed, to remind staff to ensure appropriate transfer of cases to a local authority when a case moves out of area, even if the person is self funded.

69. Adult Services agreed, to consider implementing a robust process for implementing Discharge to Assess funding that references processes for out of area transfers and backdated assessments.

Performance against the Procedure

70. The target for acknowledging receipt of complaints under the procedure is 3 working days.
71. 81.13% of complaints received during 2022/23 were acknowledged within the 3 working day timescale, a decrease from 91.67% in 2021/22.
72. There are no longer any statutory timescales for complaint responses, except that complainants should receive a response within the 'relevant period' i.e. six months or longer where an extension is agreed in advance. Where the Local Authority is unable to respond within the relevant period it must write to the complainant explaining why and respond as soon as reasonably practicable after the relevant period. The procedure sets out a 30 working days timescale for dealing with complaints solely about the Council's services, although there are circumstances in which the investigator may agree an extension with the complainant up to a maximum of six months. It also states that for joint health and social care complaints, the complaints managers from the different organisations will work together to decide a reasonable timescale and agree this with the complainant. This is to ensure investigations are completed in a timely manner and within the maximum time allowed in the regulations.
73. 8.2% of complaints were responded to within 30 working days, a decrease from 15.56% in 2021/22.
74. 12.9% of complaints exceeded the maximum six month time limit set in the procedure, a decrease from 45.5% in 2021/22.

Performance Indicator for 2022/23

75. In relation to Adult Social Care complaints the Council's key performance indicator is the number of upheld decisions received from the Local Government and Social Care Ombudsman. Adult Services received two upheld decisions during 2022/23, a decrease from four during 2021/22, an increase from one in 2020/21 and a decrease from five in 2019/20.
76. Full details of those complaints determined by the Local Government and Social Care Ombudsman are included in the Cabinet reports of 6 December 2022 and 5 September 2023 entitled [Review of Outcome of Complaints Made to Ombudsman](#).