



ISLINGTON

For a more equal future



Adult Social Care compliments and complaints: Annual Report 2022-2023

Table of Contents

1. Introduction.....	3
2. Summary	4
3. What residents are complaining about	7
4. When residents are complaining	11
5. Time to respond	12
6. Outcome of complaints.....	14
7. Deep Dive: Occupational Therapy.....	15
8. Local Government and Social Care Ombudsman	17
9. Compliments	18
10. Key learnings	20
11. Actions for the next reporting period	21
12. Further information.....	22

1. Introduction

- 1.1. A complaint is an expression of dissatisfaction by a customer about an action, lack of action or standard of service.
- 1.2. When we receive a complaint in Adult Social Care, our aim is to resolve and learn from the issues raised to ensure they do not happen again. Our ambition is to ensure we get things right first time so that customers do not need to make a complaint.
- 1.3. We actively encourage service users and their carers to make complaints as they help us identify where we are not getting things right and what we need to do to improve services.
- 1.4. Adult Social Care Complaints are managed through a one-stage process. On receipt of a complaint, the service is given the opportunity to reply (**stage one response**).
- 1.5. The stage one response should normally be sent within **20 working days** of receipt of the complaint. Where necessary, these deadlines may be extended, but all complaints should be investigated and responded to within six months.
- 1.6. Should the investigating officer not fully answer a complaint, or not consider all the evidence provided by the complainant, they have one further opportunity to remedy the complaint (**stage one review**). Complainants can request a review within two weeks of receipt of their stage one response. This then completes the complaints process.
- 1.7. All complaints can be escalated by the complainant to the Local Government and Social Care Ombudsman (LGSCO) who will independently review the complaint and determine whether there has been any fault or injustice and their recommendations for remedying that fault. The LGSCO will normally only review a complaint after it has been through our complaints process in full (stage one response and stage one review).
- 1.8. Information about how to make a complaint is available on our website: [adult social services complaints process](#). We also have an [Easy Read version](#) of our complaints process and a [BSL video](#).

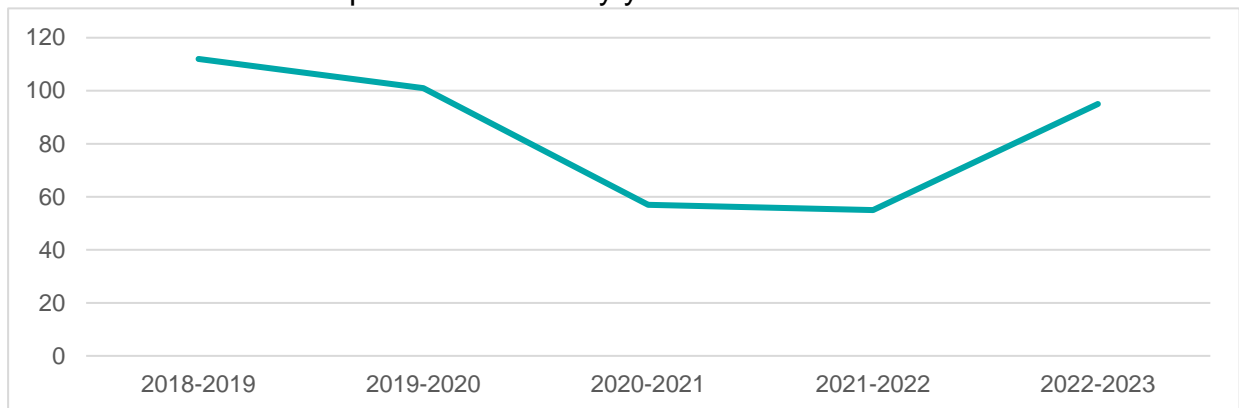
2. Summary

- 2.1. In 2022-2023, the number of complaints received went up although this is in line with longer term trends and follows a dip during a reduction in services during the COVID pandemic. Complaints outnumbered compliments and were predominantly about delays in delivering a service, or the quality of service received. Most complaint responses were late, and two-thirds of complaints were at least partially upheld. We will increase training for staff who respond to complaints and capture and follow up on actions to ensure lessons are learned and complaints about the same issues are averted.

Number of complaints received

- 2.2. In the period 1 April 2022 to 31 March 2023, Adult Social Care received **95 individual complaints**. This compares to 55 complaints received in 2021-22: a 73% increase. However, when compared to longer-term trends, this is more usual: in 2018-19, Adult Social Care received 112 complaints.

- 2.3. **Table 1:** number of complaints received by year

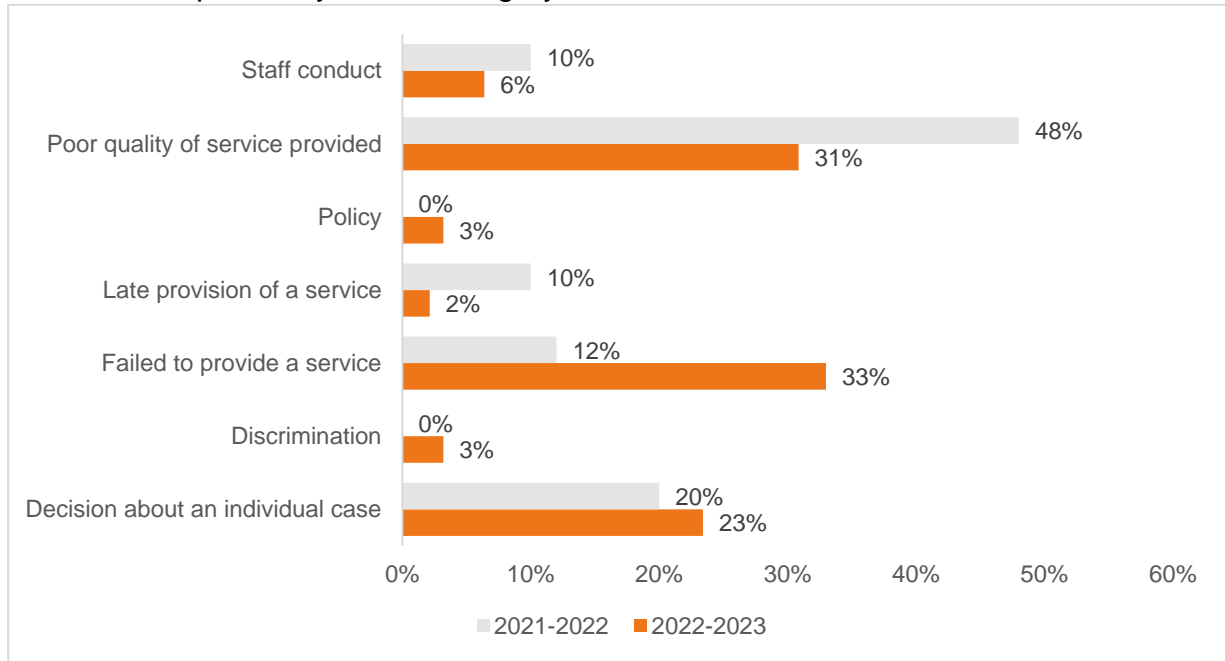


- 2.4. Although we can't know why there was a dip in complaints in the period 2019 to 2022, this is probably due to the Covid-19 pandemic when complainants were either not in receipt of services or saw no merit in complaining. In this respect, it is reassuring to see the number of complaints return to historical levels as this shows that residents are returning to services, are aware of their right to complain about those services, have the confidence and support to make a complaint, and see the value in making a complaint.

What residents are complaining about

- 2.5. When we receive a complaint, we record it under one of seven failure categories. In this reporting period, the most common primary failure was **'failed to provide a service'** (33% of complaints received) followed by **'poor quality of service provided'** (31%).
- 2.6. In the previous reporting year, the most common failures were **'poor quality of service provided'** and **'decision about an individual case'**.

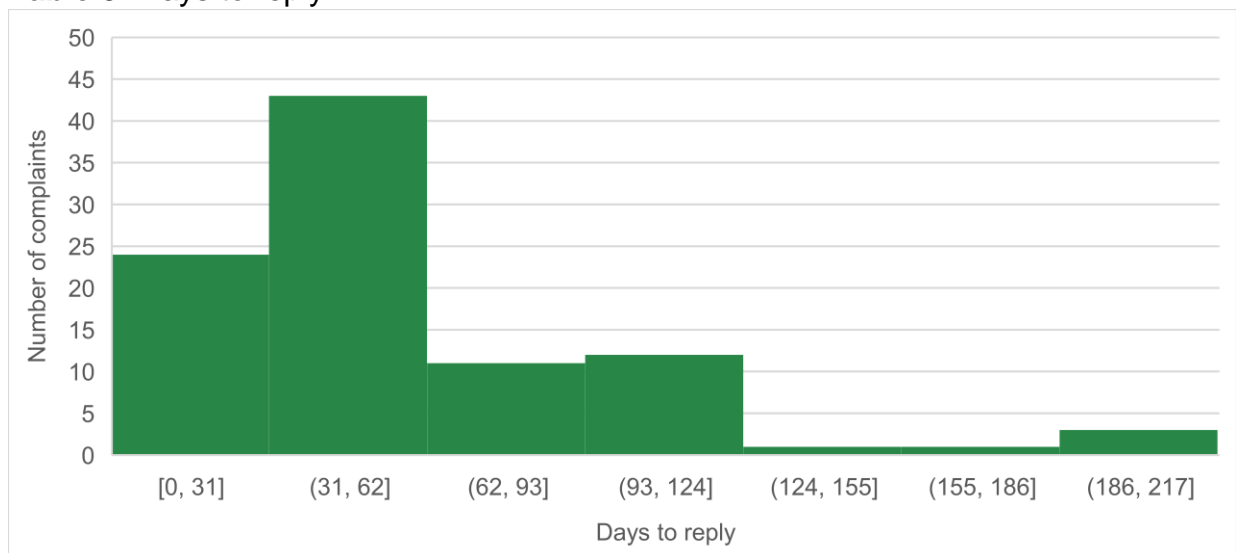
2.7. **Table 2: complaints by failure category**



Time to respond

2.8. **24%** of complaints were responded to within agreed timeframes, which is normally 20 working days. This means that most complaints (76%) were late. The average time to respond to a complaint was **52 calendar days**. The longest was 204 days.

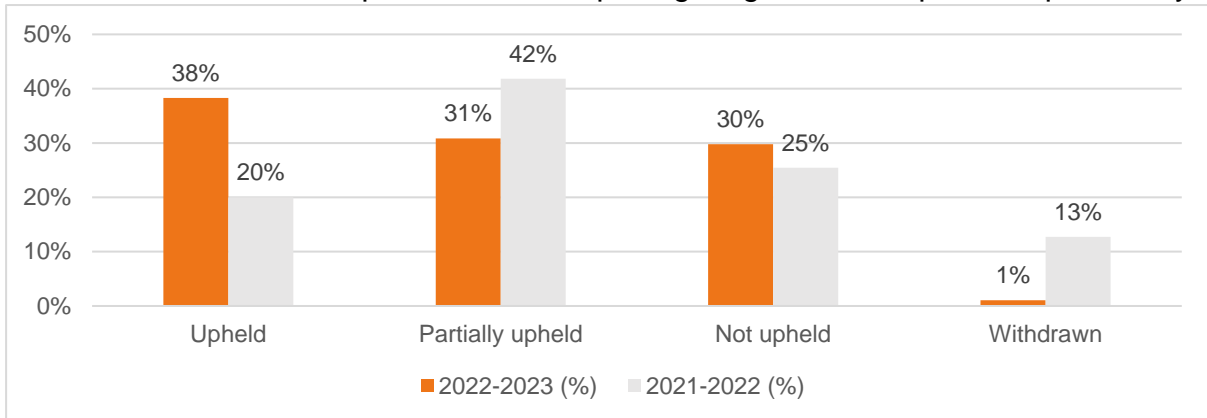
2.9. **Table 3: Days to reply**



Outcome of complaints

2.10. **69%** of complaints were upheld (38%) or partially upheld (31%) in this reporting period and 30% were not upheld.

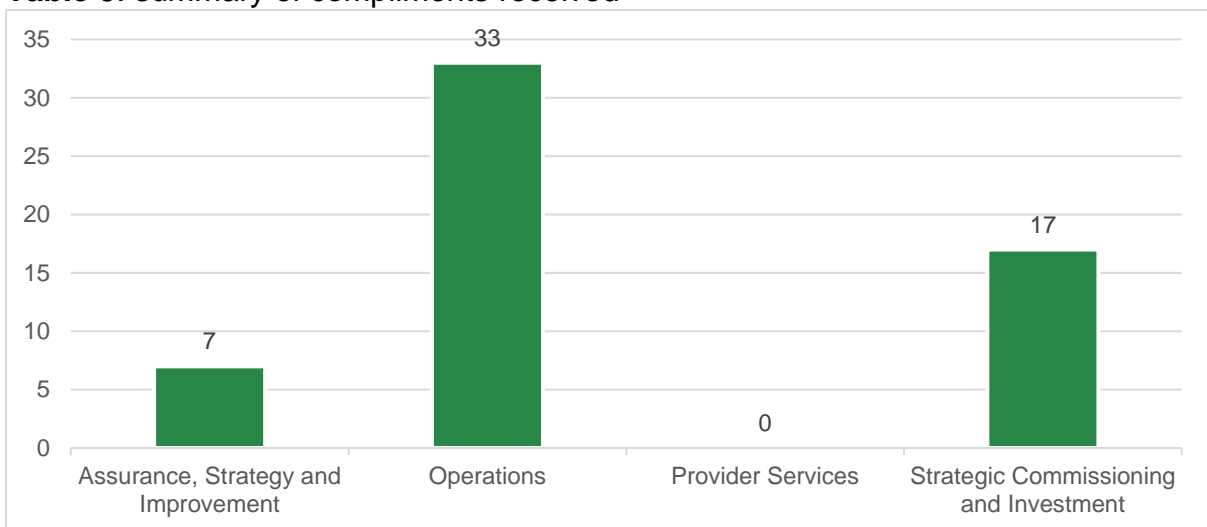
- 2.11. For comparison, 62% of complaints were upheld (20%) or partially upheld (42%) in the previous year and 25% were not upheld.
- 2.12. This suggests a consistent and growing trend of two third of complaints being warranted.
- 2.13. **Table 4:** outcome of complaints after completing stage one, compared to previous year



- 2.14. Of complaints received in the reporting period, none were escalated to the LGSCO.
- 2.15. At the time of this report, two complaints are still open and pending a formal response.

Compliments

- 2.16. We also record compliments received about services. In the reporting period we received **57 compliments**. Most compliments (33 or 58%) were about Operations.
- 2.17. **Table 5:** summary of compliments received

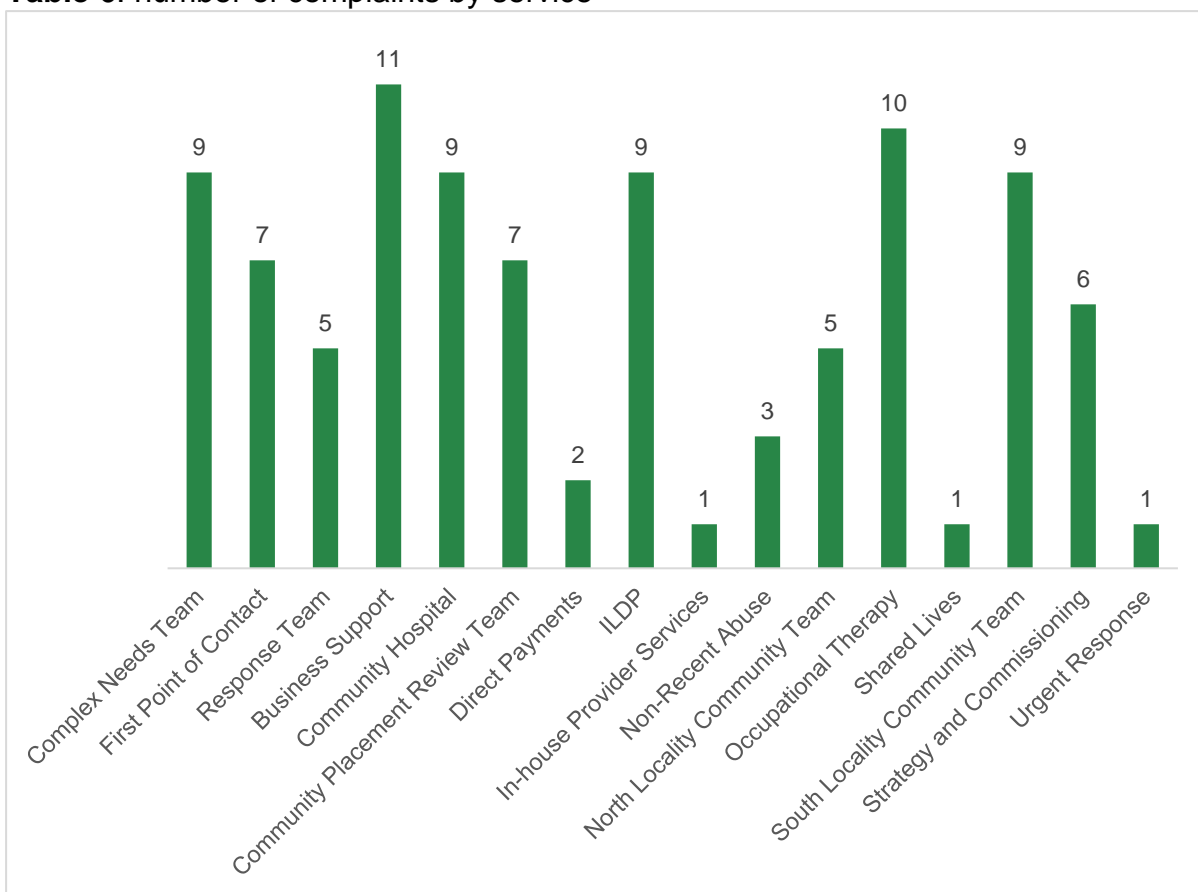


3. What residents are complaining about

3.1. In this reporting period, we received 95 complaints. The services that received the most complaints were Business Support (11) and Occupational Therapy (10).

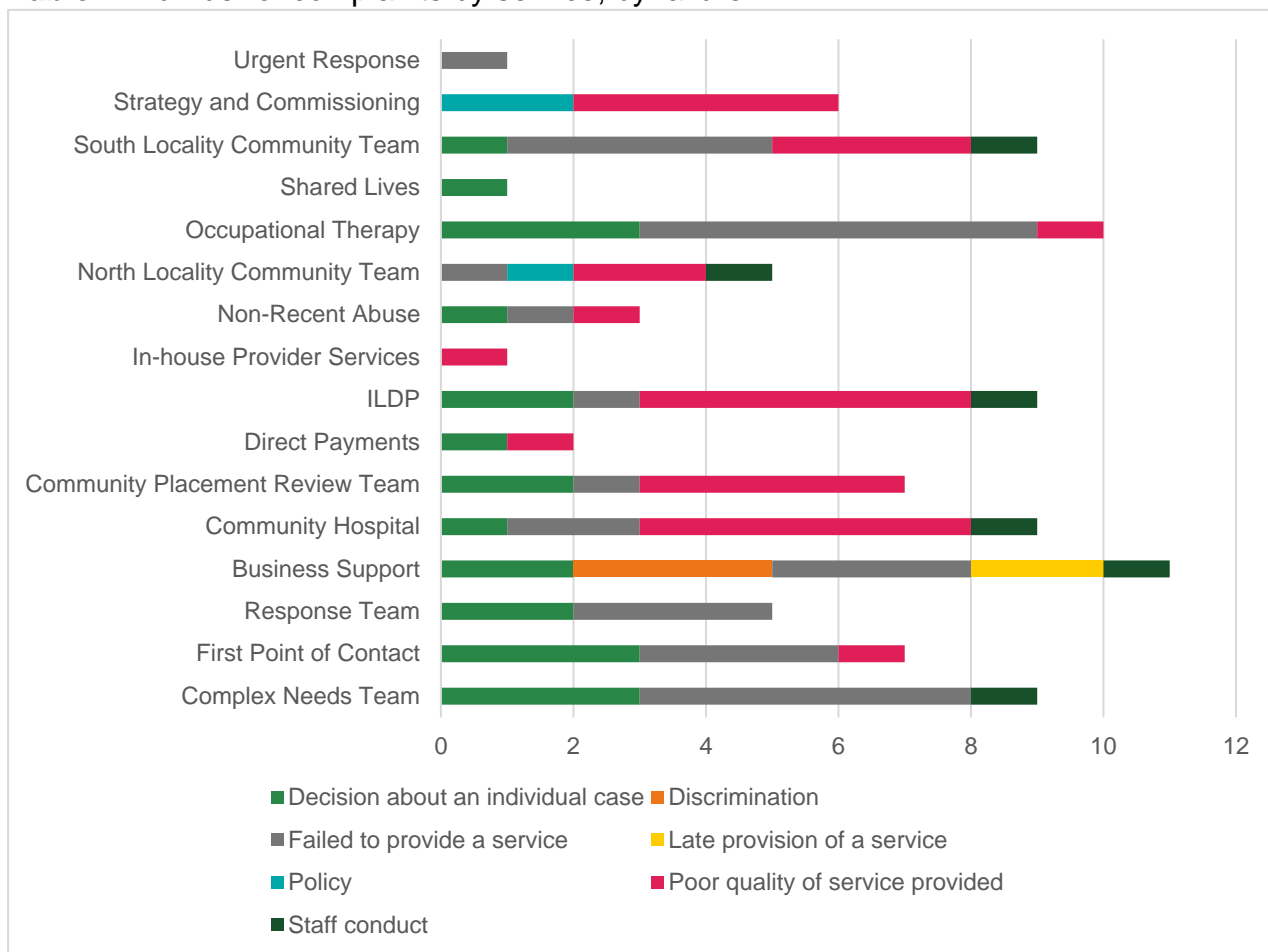
3.2. In this reporting period, we started managing complaints about the Adult Social Care front door– the First Point of Contact team – which was not previously captured in this report. This service received seven complaints in this reporting period.

3.3. **Table 6:** number of complaints by service



3.4. As well as the service, we record complaints by the primary type of failure. Table six shows a full breakdown of the number of complaints received by service and the failure type.

3.5. **Table 7: number of complaints by service, by failure**



3.6. During the reporting period, Adult Social Care teams were reorganised, and the data reflects the different names for services before and after this reorganisation. Because of this, some data is distorted. For example, complaints about the ‘South Locality Community Team’ may now be recorded under ‘Response’ or ‘Complex Needs’. This can mean that the number of complaints about a service are higher than the data show.

3.7. This also makes it more difficult to run a direct comparison to previous reporting periods. However, by grouping services into four areas – Assurance, Strategy and Improvement, Operations, Provider Services, and Strategic Commissioning and Investment – we can run a direct comparison to the last five years. This shows that most complaints are about ‘Operations’ and the number received this year (84) is consistent with the trend pre-pandemic (75 in 2019-2020 and 84 in 2018-2019).

3.8. Complaints about Assurance, Strategy and Improvement have fallen, from 18 in 2018-2019 to six in 2022-2023.

3.9. Complaints about Strategic Commissioning and Investment have fallen, from a peak of 13 in 2019-2020 to six in 2022-2023.

3.10. Provider services received two complaints in 2022-2023 following no complaints in the four previous years.

Case study: Business Support

Business Support received the most complaints in the reporting period and most of these were about Disabled Persons Freedom Passes.

For context, during the pandemic the Mayor of London and Transport for London announced that the Older Persons Freedom Pass – which grants free travel to over 65s – would temporarily no longer be accepted during peak hours (before 9am) on London transport. This change was made permanent in January 2023.

This policy change has led to an increase in the number of applications for Disabled Persons Freedom Passes, which do not have this peak restriction. The Older Persons Freedom Pass is paid for and administered by Transport for London whereas the Disabled Persons Freedom Pass is paid for and administered by the person's local authority.

10 individuals or their advocates complained to us about their experience of applying for a Disabled Freedom Pass in the reporting period. Issues raised by complainants included delays in the application process, lost application forms, lack of an online application form, and no clear guidance on expected timeframes. Residents also complained about our understanding of the application process, including eligibility and acceptable items of evidence.

All complaints were upheld. As a result, the Business Support team has agreed to the following actions:

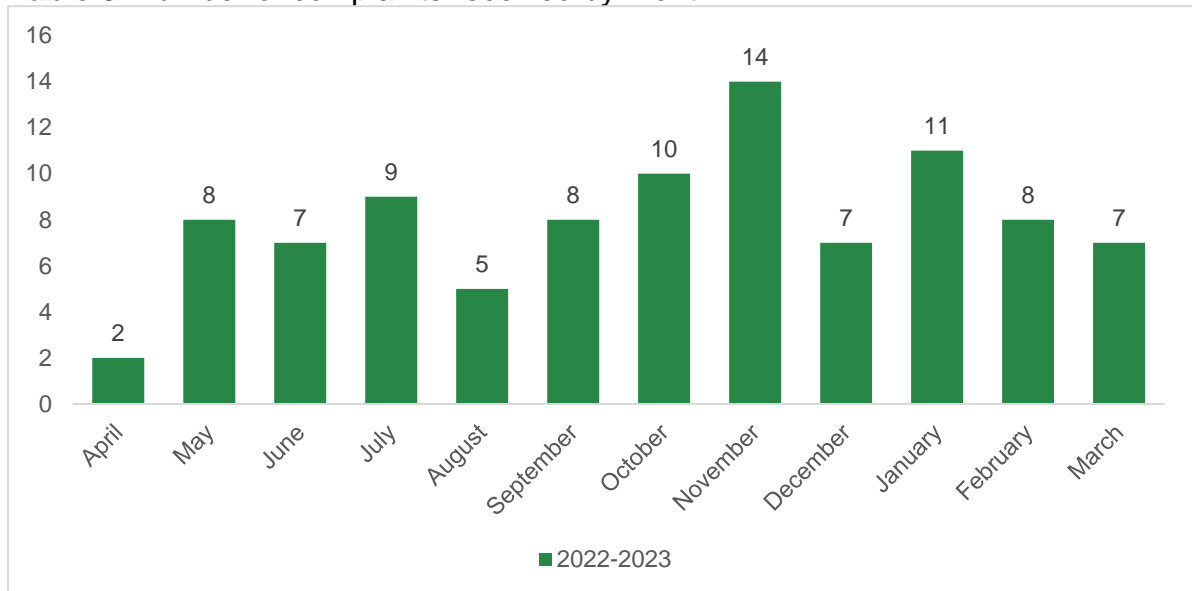
- Customer service training for all staff involved in Disabled Persons Freedom Pass applications
- To update the Disabled Persons Freedom pass webpage with up-to-date information, including timescales for applications
- To replace the paper-based form with an online application form, creating a more accessible and safer process for applicants, and a quicker internal process for staff

Unfortunately, there has been delays in implementing all these actions, some of which are outside of the service's control. For example, creating an online form requires support from our digital services team. However, recognising that we were at fault and that change was required demonstrates that the service is learning from feedback which is a key goal of complaints.

4. When residents are complaining

4.1. Most complaints were received in November (14) and the least in April (2). The average number of complaints received was eight a month.

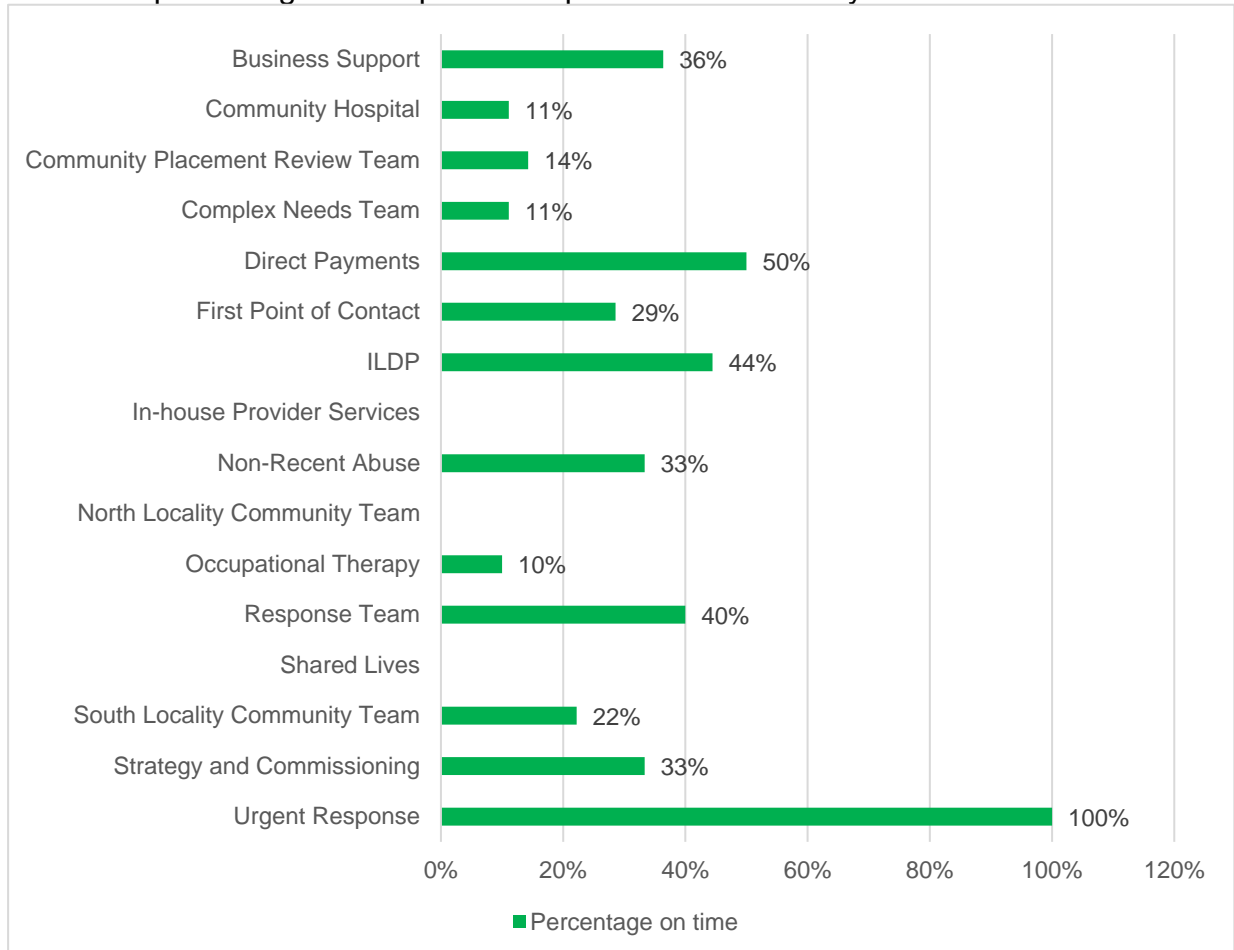
4.2. **Table 9:** number of complaints received by month



5. Time to respond

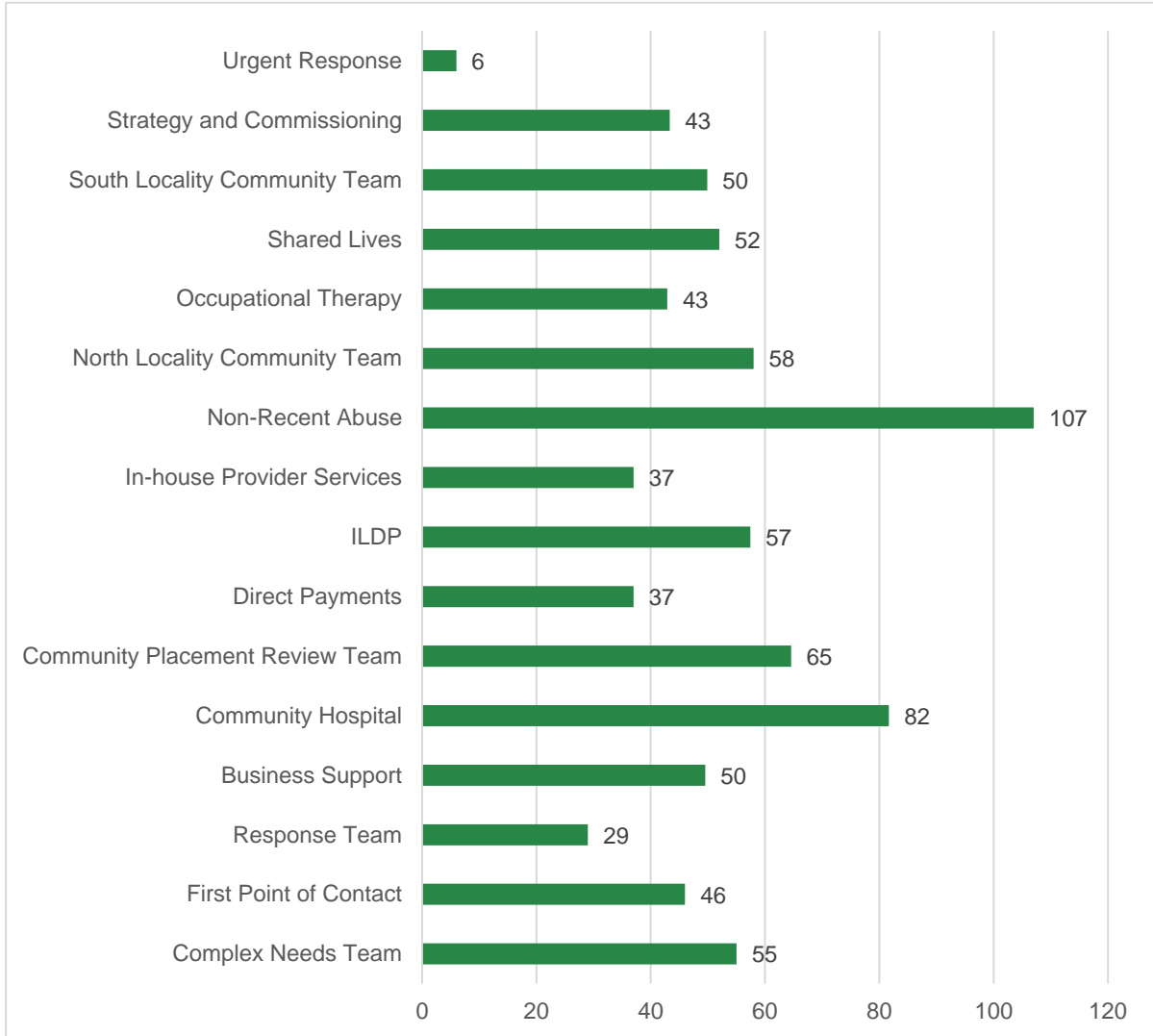
5.1. The usual target to respond to any complaint is 20 working days, which is normally 28 calendar days. Most complaints (76%) were late. Fewer than one in four complaints were responded to within agreed timeframes.

5.2. **Table 10:** percentage of complaints responded to on time by service



5.3. The average time to respond to a complaint was **51 calendar days**. The longest was 204 days.

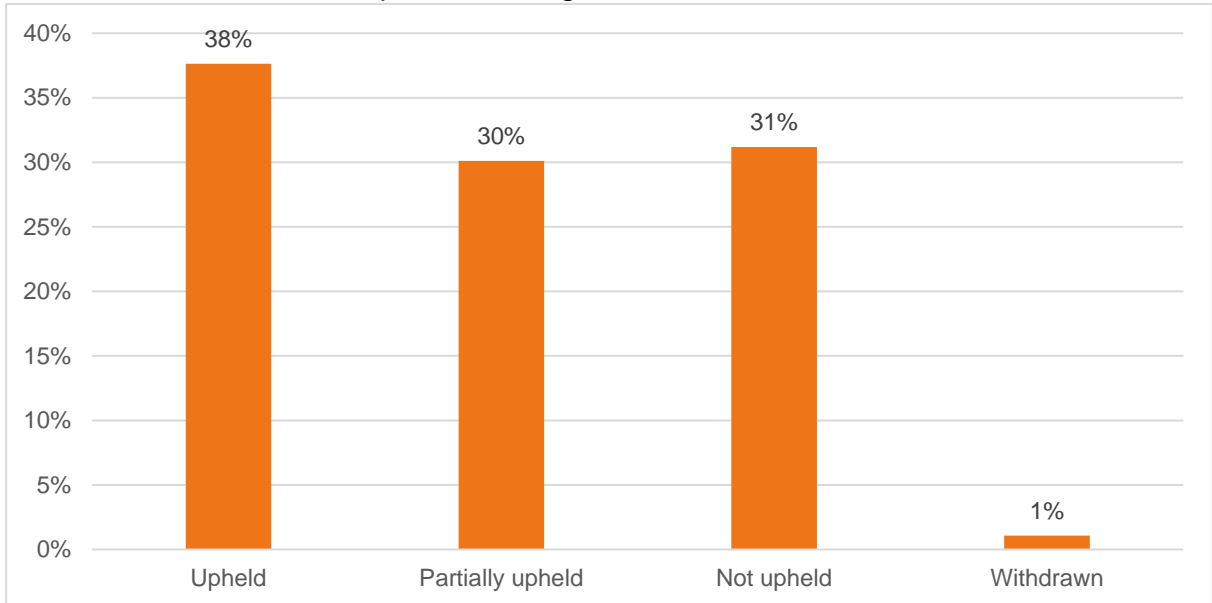
5.4. **Table 11:** average number of days to respond to a complaint at stage one, by service



6. Outcome of complaints

6.1. After completing the initial stage one process, 38% of complaints were upheld and 30% were partially upheld. 31% were not upheld.

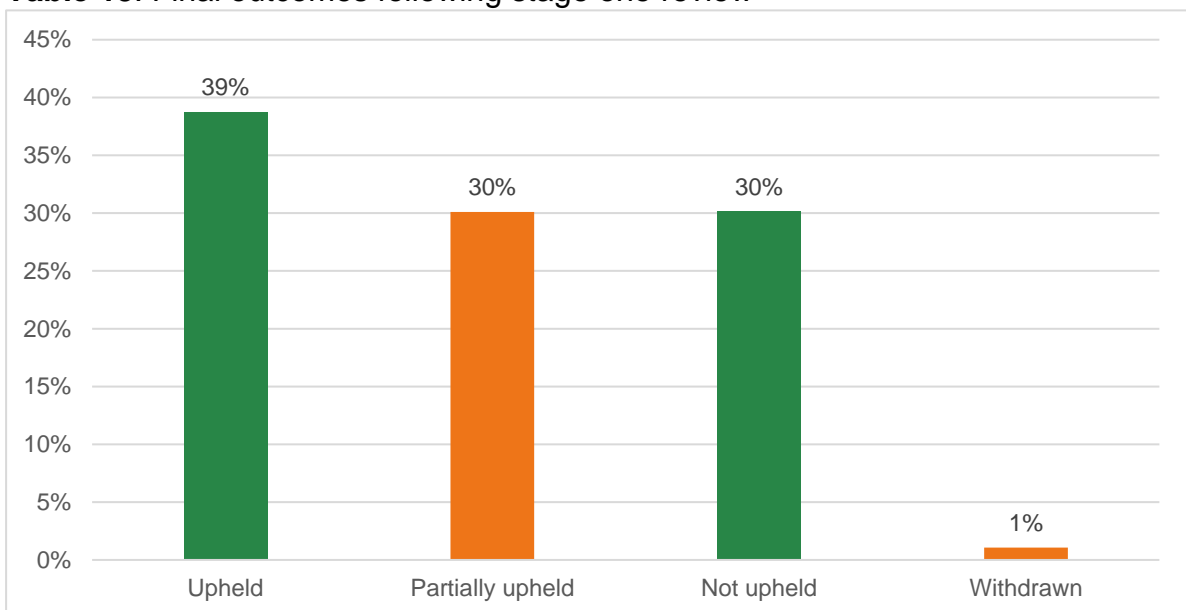
6.2. **Table 12:** outcome of complaints at stage one



6.3. 22 complaints were escalated to a **stage one review** (23% of complaints investigated), which is when a complainant asks us to look at our response because we haven't answered it in full.

6.4. Of these, the outcome of one complaint was changed from 'not upheld' to 'upheld' whereas the other 21 complaints saw **no change** to the outcome following a review.

6.5. **Table 13:** Final outcomes following stage one review



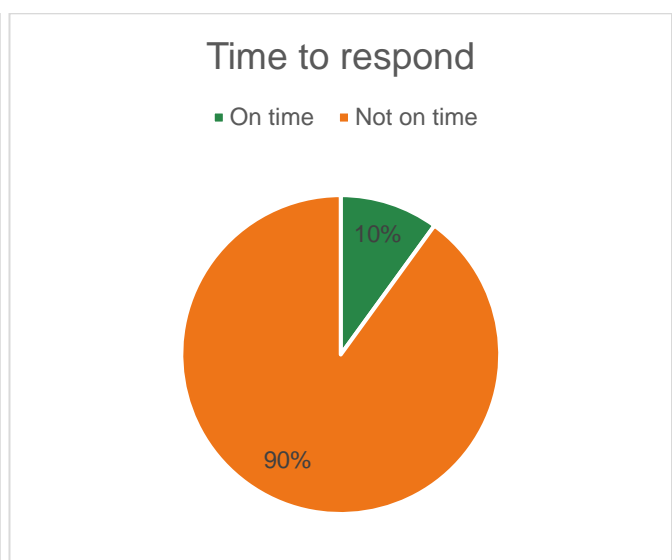
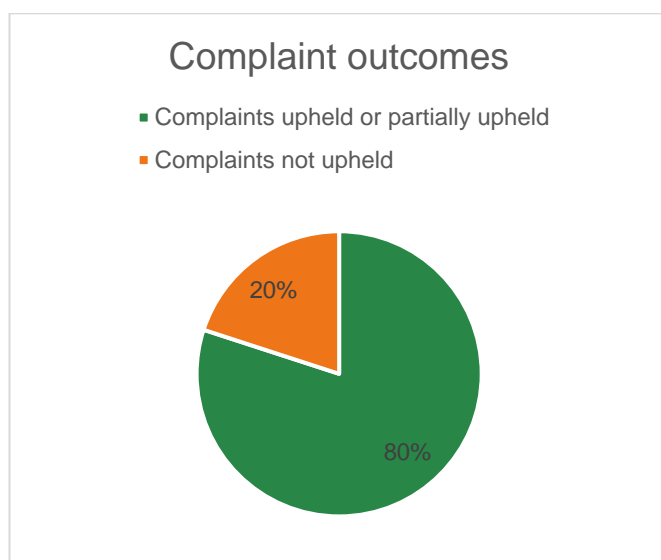
7. Deep Dive: Occupational Therapy

About this service

- 7.1. Occupational therapy, often referred to as OT, is provided for people who have a disability which affects their normal daily living activities such as dressing, washing, bathing, getting on and off the toilet, getting in and out of the bath, and preparing and cooking a meal. It also includes issues such as access to employment, education, housing, and leisure opportunities.
- 7.2. Islington's Occupational Therapy can help anyone who is a permanent resident of Islington **and** has a medical condition or physical disability that makes everyday tasks difficult to do.
- 7.3. Before providing a support, an OT will normally complete an assessment of a person's needs, usually by visiting the person who needs support in their home. Following this assessment, the OT may then provide advice or information, signpost to other services, or provide equipment, like specialist cutlery, raised toilet seats or hoists. An OT may also recommend adaptations to the person's home, such as installing stair rails or grab rails, or installing showering facilities. OT will support with making these adaptations, but they can only go ahead with permission from whoever owns the property.
- 7.4. It is important to understand that everyone is different, so the services and support offered to each person will be designed to meet their individual needs and is based on the outcomes of an individual assessment.

Complaints about this service

- 7.5. OT received 10 complaints in the reporting period. Eight of these were upheld (five) or partially upheld (three) and two were not upheld.
- 7.6. Most complaints were late, with 90% not on time. The average time to respond to a complaint was 43 days, with the longest taking 65 days and the shortest 26 days.



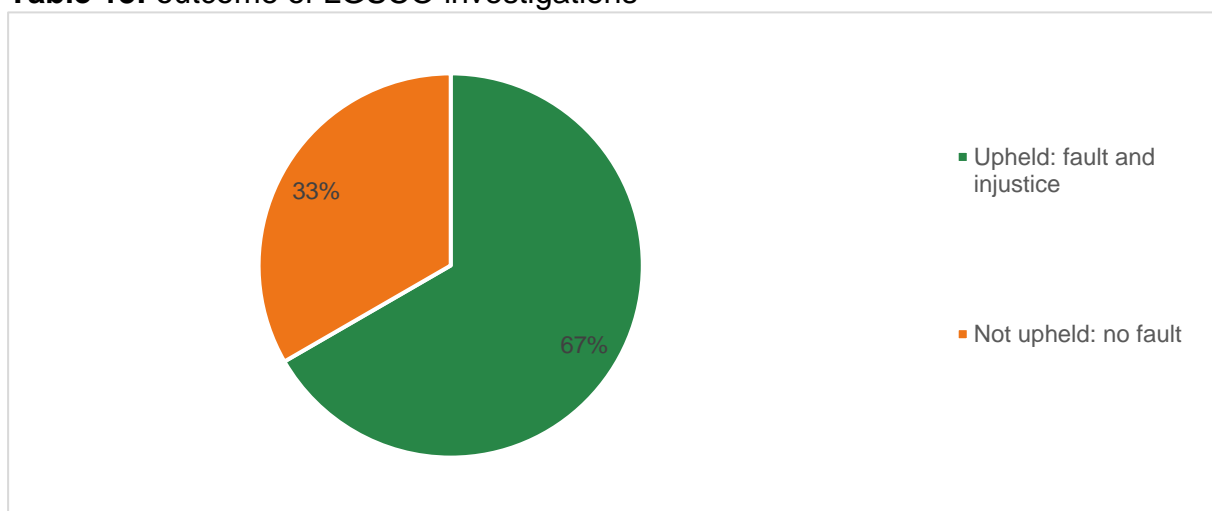
- 7.7. Most complaints primary failure recorded was '**failed to provide a service**' (60%) and all of these mentioned a delay in responding to a request for an assessment. All these complaints were upheld.
- 7.8. Three complaints (30%) recorded their primary failure as '**decision about an individual case**' and these complaints disputed the outcome of an assessment, including eligibility for support. Two of these complaints were not upheld.
- 7.9. Other issues raised in these complaints concerned the time to install home adaptations and the quality of adaptations that have been installed.
- 7.10. There was also a complaint about how personal data was handled. This was not upheld. Following an investigation, the service was satisfied that the appropriate information governance procedures had been followed.

Actions from complaints

- 7.11. OT has reviewed their structure to ensure they are better placed to respond to requests for assessments and has reviewed its internal record-keeping to improve timeliness for responding to complaints.

8. Local Government and Social Care Ombudsman

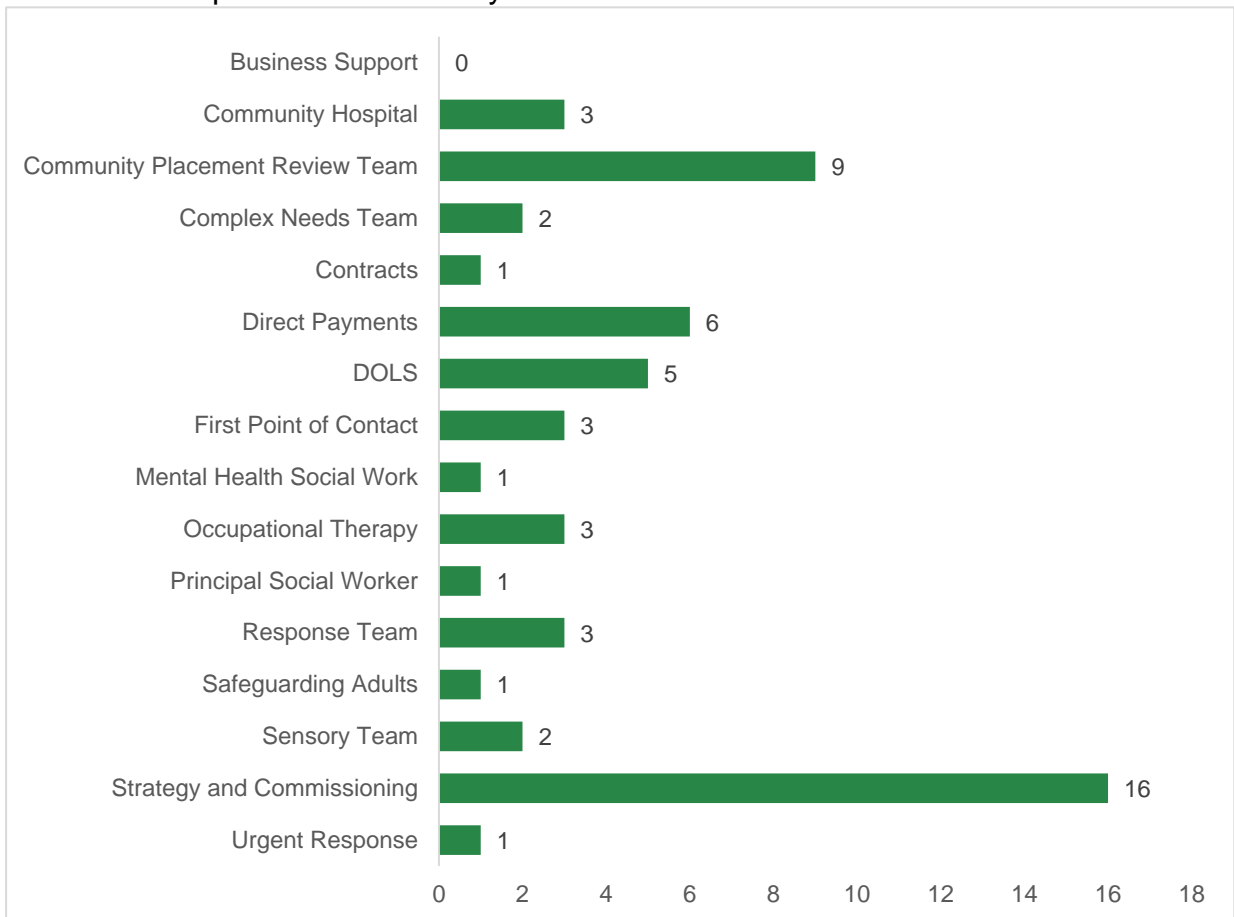
- 8.1. No complaints received in this reporting period were escalated to the Local Government and Social Care Ombudsman (LGSCO).
- 8.2. However, the LGSCO will normally investigate a complaint up to 12 months after the event or since the complaint was investigated by the relevant body, for example, by Islington Council.
- 8.3. Exceptionally, the LGSCO may also choose to investigate a complaint even if it has not been investigated by us through our complaints process.
- 8.4. For this reporting period, two complaints were escalated to the LGSCO: one of which related to a complaint from the previous financial year and one which had not been investigated by us, but which the LGSCO decided to investigate.
- 8.5. The LGSCO also concluded an investigation into a complaint referred to them in the previous reporting period.
- 8.6. When the LGSCO investigates a complaint, they will judge whether there has been fault and if that fault has caused any injustice. Where they find fault and injustice, the LGSCO will normally recommend actions to remedy that injustice.
- 8.7. Of the three investigations completed by the LGSCO in the reporting period, two were upheld with recommendations made and one was not upheld.
- 8.8. **Table 13:** outcome of LGSCO investigations



- 8.9. We complied with all agreed recommendations from both upheld complaints, specifically:
 - 8.9.1. Apology to the complainant and compensation payment, and improvements to the service to prevent the issue complained about happening again
 - 8.9.2. A compensation payment, reminders to staff of council policy, and a letter to the Ombudsman setting out how we were managing care home shortages.

9. Compliments

- 9.1. In the reporting period, Adult Social Care received **57 compliments** from service users, their families, or stakeholders such as commissioned providers.
- 9.2. The service that received the most compliments was **Strategic Commissioning and Investment** (16) followed by the **Community Placement Review team** (9).
- 9.3. **Table 14: compliments received by service**



- 9.4. Here is a sample of compliments received:

- 9.4.1. From a service user after speaking to a social worker in the **Community Placement Review team**:

I want to thank you for being very kind, patient and polite and very, very understanding of my situation when we spoke. I didn't know what to expect speaking with you but you made it very easy and straight forward.

- 9.4.2. From another service user who received support from the same social worker in the **Community Placement Review team**:

I'd like to say a big thank you to a member of your team. She facilitated respite for my grandmother, which was greatly appreciated. Her approach when talking to me, was always kind and personable. She is an asset to your team and I hope if there is any reward for great service, her name is put forward.

9.4.3. From a service user about another social worker in the **Community Placement Review team**:

X has gone above and beyond to help my father. He is amazing. Every bit of help has been amazing. He is assisting me to arrange respite. You need to know you have a good team member.

9.4.4. From a family member following support provided by the **Sensory Team**:

I am pleased to say that the hearing, headphone equipment works; mum can hear very well. This is truly a god send. The doorbell is fabulous too. Thank you very much for help with this matter

9.4.5. From a commissioned provider following a 'lunch and learn' session on dementia by **Strategic Commissioning and Investment**:

The talk about Dementia was really interesting. It was good to have a discussion with our local authority about their plans to improve services for those most vulnerable in our community and for them to want our feedback, I really enjoyed it.

9.4.6. From a commissioned provider about **Strategic Commissioning and Investment**:

I wanted to send you some feedback on the Extracare panel and the impact this has had on Mildmay as a service, our residents and my Team. We have found the panel an excellent tool for preassessment of cases. Scrutiny at the panel has ensured that appropriate information and referrals progress to our Extracare assessment. Having Heads of services present has really given a helicopter view of the process, they have been able to step in on many levels and support us or remove obstacles.

10. Key learnings

- 10.1. If a complaint includes any lessons learned, we will record these centrally. Through analysing these learnings, we can see which common words are included. The most common words are 'pass' (26%) and 'get' (13%). Image two shows a word cloud of the most common words – the larger the word, the more times it is used.
- 10.2. **Image two:** word cloud of learnings from complaints



- 10.3. A recurring theme from complaints is about staff failing to share updates or information with service users and their advocates and not being open and transparent about delays and availability of services in the borough. Staff have been reminded through the staff newsletter of the importance of keeping service users informed, and about being transparent when explaining why a service isn't available or if there is a delay.
- 10.4. This includes when dealing with complaints. Some complaint responses were significantly late and have often escalated because of a lack of communication with the complainant. It is important that staff respond to complaints quickly and keep complainants updated and informed whenever there is a delay.
- 10.5. When we uphold a complaint, we should be clear about what we will do to remedy it by stating what we will do, who will do it, and when we will do it by. This has not always happened, and some remedies are not completed because of a lack of clarity over who is doing what and when they will do it by.
- 10.6. To improve timeliness of complaint responses, staff should respond to complaints when they know what action or remedy they are going to complete, not wait until that remedy has been completed.

11. Actions for the next reporting period

- 11.1. To ensure services are learning from fault and are completing the remedies they identify, we will embed new processes to log and monitor actions from complaints and ensure evidence is provided to show the remedy has been completed.
- 11.2. We will continue to support staff with effectively handling complaints, by running regular workshops and events, and sharing best practice. This will include informal 'lunch and learn' sessions and attendance at formal events for staff.
- 11.3. We will look at our outreach work, to ensure we are meeting with service users and explaining their right to complain and providing them an opportunity to do so, outside of the online or telephone route to complain.
- 11.4. We will monitor the proportion of complaints that are upheld or partially upheld through quarterly reporting to ensure that services are learning from complaints and are not receiving similar concerns about the same issues.
- 11.5. We will review the complaints process so that a stage one review is considered by another manager and not the same investigating officer.

12. Further information

- 12.1. For more information or for any questions about Adult Social Care complaints, please contact the Customer Services Team on 020 7527 8046 or 020 7527 8047 or email People@islington.gov.uk