Barnet Council
Adult Social Care
Annual Complaints Report

2024-2025

Contents

1. Introduction
2. Adult social care Statutory Complaints Procedure
3. Accessing the complaints procedure
4. Overview
5. Compliments
6. Complaints
7. Learning from complaints
8. Local Government Ombudsman (LGSCO)
9. Responding to complaints and concerns relating to external service providers
10. Demographic Overview

1. Introduction

Barnet Council's Adult Social Care Service, part of the Communities, Adults and Health Directorate, delivers a range of statutory social care functions. These include individual care and support, safeguarding, information and advice, preventative services, and assessments under the Care Act 2014, Mental Health Act 1983 (as amended in 2007) and the Mental Capacity Act 2005. Social Care Direct serves as the first point of contact for adult social care enquiries.

The service actively welcomes comments, complaints, and compliments as valuable tools for continuous improvement. Feedback provides opportunities to learn from mistakes, make necessary changes, and recognise areas of good practice.

In line with statutory requirements, Barnet Council is obligated to report annually to the relevant Council Committee on complaints relating to adult social care. This report covers the period from 1 April 2024 to 31 March 2025 and includes complaints managed under both the Statutory Adult Social Care Complaints Procedure and the council's Corporate Complaints Procedure, where applicable.

2. Adult Social Care Statutory Complaints Procedure

Barnet Council is required to operate a separate Statutory Complaints and Representations Procedure for adult social care, in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and the associated Amendment Regulations. These regulations set out the legal framework for handling complaints about adult social care services provided or commissioned by the Council.

Complaints that do not fall within the scope of these statutory regulations are managed under the Council's Corporate Complaints Procedure, ensuring that all concerns are addressed appropriately, regardless of their nature.

All individuals who have exhausted both the Statutory and Corporate Complaints Procedures retain the right to escalate their concerns to the Local Government and Social Care Ombudsman (LGSCO). The LGSCO operates independently and impartially, serving as the final stage for complaints relating to the Council, social care providers, care homes, and home care agencies.

3. Accessing the complaints procedure

The service continually seeks to encourage people who draw on social care and their carers, to provide feedback (positive or negative) on the services and customer care that they have received.

The process is publicised through the following means:

- Comments, Compliments and Complaints booklets are widely distributed to public offices in the Borough.
- The Easy Read version of the booklet 'Comments, Compliments and Complaints' is also widely distributed. This is aimed at people with Learning Disabilities and others who would find a simplified version easier to understand.
- Information about making a comment, compliment or complaint in relation to Adult Social Care is published on the council website www.barnet.gov.uk/comments-and-complaints-adult-social-care.
- Individual staff and managers advise people who draw on social care, their family, carers and relevant organisations of the procedures during their interactions with them, as appropriate.
- Managers are asked to feature compliments and complaints as a standing item in their team

meetings and briefing sessions.

- Historic complaints reports are published on Open Barnet, the council's data portal, a valuable tool in pushing forward Barnet's transparency agenda.
- Compliments are shared with staff and promoted internally through the staff newsletter, senior manager briefings and staff awards.
- Information about complaints and the learning from them is shared with the Management Team and with staff, to improve practice.

The council has commissioned Barnet Citizens' Advice Bureau as the local lead provider for specialist information, advice and advocacy support. This ensures that the Council has a dedicated support service in place for people who require access to independent information, advice and advocacy. Staff are trained in accordance with the Care Act 2014 and staff understand their statutory duties in relation to advocacy.

4. Overview

The following complaints and compliments were received in 2024/25 from individuals, carers and/or their representatives. To give these figures context, there were 6,250 new requests for services in 2024/25 (1,769 resulting from a hospital discharge). 5,897 people were receiving a long-term service. Of these, 4,705 were receiving a community service & 1,192 were receiving residential/nursing services. In addition, the council responded to 1,973 safeguarding concerns and carried out 769 safeguarding enquires. 1,545 people received reablement services. 368 statutory carers assessments were carried out (some of these by Barnet Carers Centre on the council's behalf).

- 115 compliments
- 106 statutory complaints
- 4 corporate complaints
- 21 Local Government Ombudsman enquiries

Of the 106 statutory complaints, 92 resulted in an outcome, 14 were withdrawn. Of the 92:

- 52 were not upheld
- 22 were upheld
- 18 were partially upheld

Of the 106 Statutory Complaints received:

- 24 were considered as straightforward complaints
- 82 were considered as serious and/or complex complaints
- 14 were withdrawn

The main themes of complaints were:

- **Decision** – disagreement with the outcome of a care assessment; or with the outcome of a financial assessment under the charging policy; or a decision made as a result of a statutory duty or national policy.
- **Quality** - quality of service from care homes, home care agencies, care assessments and process.
- **Timeliness & Delays** - Assessment delays, delays in making a decision, and timeliness of care providers

Common improvement themes were:

- **Staff -** formal reflection, staff reminders and training
- **Procedures -** updates and amendments to, or reiteration of procedures to staff
- **Providers** – care provider to review working practices, procedures, policies and contract compliance

5. Compliments

Compliments are as valuable as complaints in helping to improve services. Positive feedback enables the Council to recognise and build on its strengths, while also acknowledging the excellent work being delivered. This provides important balance in the annual complaints report.

Many compliments are shared informally through face-to-face conversations or phone calls and are not captured in annual figures. 115 formal written compliments were received during the period. These varied in nature, ranging from individual expressions of gratitude to praise for entire teams

Most of the formal compliments received were directed toward operational and front-line teams, reflecting the high level of service and direct impact these teams have on individuals and communities. Their consistent delivery of responsive and effective support is clearly recognised and appreciated by people who draw on care and support.

Compared to 2023/24, the number of formal written compliments has increased, with several service areas showing notable improvements. Safeguarding, Access and Occupational Therapy remained the highest-performing area, consistently receiving 50 compliments in both years. Localities experienced a rise in recognition, increasing from 17 to 23 compliments, while Hospitals & Health also improved, rising from 16 to 19. Learning Disabilities received 10 compliments this year, up from seven the previous year, indicating growing appreciation for the service.

Importantly, there has been a positive shift in the recognition of back-office functions. Both Commissioning and Business Intelligence, Performance and Systems received more compliments this year—rising from 2 to 4 and from 3 to 4 respectively. These increases reflect a growing appreciation for the strategic and operational support these teams provide.



Examples of compliments received in 2024-2025

"XXX You are my role model and inspiration to help people. I wouldn't be where I am now without your support. I can't thank you enough, you really are amazing. I am very grateful to you."
Compliment for the Complaints and Information Manager - Business Intelligence, Performance & Systems

"We would like to express our deepest thanks for all your invaluable help in making the adjustments to XXX bathroom. We are truly grateful for your kind and continuous support, as this would not have been possible without your involvement. Our mother now feels comfortable and safe using her bathroom, and it brings us great comfort to see her at ease. She sends her heartfelt prayers for your health and safety as she genuinely appreciates everything you have done."
Compliment for the Grants Team -Commissioning

"Please can I thank you on behalf of my family for drawing this to a conclusion and relieving us from a significant amount of stress. We are super grateful and hope that YYY now follow the correct process to ensure proper care and continuity for our Brother."
Compliment for the Customer Finance Service

"I am writing to sincerely thank you for your support and assistance in providing the necessary equipment for my husband. Your patience and dedication in answering all our questions regarding the process have been truly appreciated. Your time, effort, and kindness have made a significant difference for us, and we are deeply grateful for your help. It is reassuring to know that there are professionals like you who genuinely care about the well-being of the community."
Compliment regarding a member of the Hospitals & Health Team

"I would like to extend my heartfelt thanks to you, XXX and the rest of the Barnet Care Quality Team for your support during my time at YYY. Your visits have been instrumental in driving progress, particularly in addressing and escalating some environmental concerns for action. Your support visits have greatly helped me improve the overall quality of governance at YYY, and for that, I am truly grateful. Over the nine years that we've worked together I've greatly valued the support you've given me; I've enjoyed our open and positive working relationship and the difference that we've been able to make to the quality of care in Barnet."
Compliment regarding staff members in the Care Quality Service

"Thank you very much for your support; it is sincerely appreciated. XXX and I have been collaborating on the implementation of his daily life skills, and your contributions have been invaluable to our progress. We are grateful for the positive impact you have made in our lives. Thank you once again."
Compliment regarding a member of the Learning Disabilities Service

"I am writing to you regarding the excellent care received from a member of your team XXX. It has been a difficult couple of years watching my father's health deteriorate due to Alzheimer's and Vascular dementia. It became incredibly easier since XXX was assigned to support with his care. While remaining professional throughout, XXX has a natural caring ability to make the family or person that she is representing feel well cared for and shows she has their best interest at heart. We all feel very lucky that XXX was assigned to Dad's care and would like to share with you how incredibly grateful we are. XXX truly is an Angel."
Compliment regarding a member of the Localities team

"Dear XXX Thank you for all of your help, myself and my family all wanted to say thank you, as you have been very kind and supportive."
Compliment regarding a member of the Mental Health Team

" I am writing to express my deepest gratitude for the incredible work and dedication you have shown in ensuring XXX's safe return home before Christmas. Your professionalism, work ethic, and genuine care have truly left a lasting impression on me, and I wanted to take a moment to acknowledge your outstanding efforts. Your support has gone above and beyond expectations. Your thorough review, prompt coordination, and seamless delivery of all necessary equipment were exemplary. It was clear at every step that you were not just completing a task but wholeheartedly invested in ensuring XXX's transition home was as smooth and safe as possible. XXX is now back home, just in time for Christmas—a gift that means so much to her and her loved ones. You are truly a brilliant occupational therapist and an incredible person to work with."
Compliment regarding a member of the Occupational Therapy service.

6. Complaints

From 1 April 2024 to 31 March 2025, Adult Social Care received a total of 106 complaints, 101 were considered under the statutory procedure and five were managed through the corporate complaints' procedure. The number of statutory complaints received into the service increased by 23 cases compared to 2023/24; corporate complaints numbers remained consistent with previous years.

Less than 1% of people who draw on social care support through the council (or someone acting on their behalf) raised a complaint in 2024-25. This percentage reduces further if we take into consideration all contacts and interactions with the service.

It should also be noted that the service received 18 complaints which were resolved within 24 hours to the resident/person's satisfaction and 42 potential complaints that were resolved outside of the formal procedure. In line with the statutory procedure, these were not formally recorded but do highlight the services ambition to resolve immediate concerns (where guidance permits) as swiftly as possible.

6.1 Statutory Complaint outcomes

In 2024/25, Adult Social Care witnessed a positive shift in the distribution of complaint outcomes compared to the previous year. The proportion of complaints not upheld in 2023/24 was 45.6%. This has improved to 56.5% in 2024/25, reflecting an improved ability to demonstrate that services related to these complaints were delivered appropriately and in line with expected standards. This suggests that, even when concerns were raised, the service was often able to provide clear evidence of good practice and sound decision-making.

The percentage of complaints that were partially upheld also decreased from 26.7% to 19.6%, indicating fewer cases where only some elements of a complaint were substantiated. Consequently, upheld complaints declined from 27.8% to 23.9%.

6.2 Complaints by category

The table below identifies complaints by root cause and the investigation outcome.

	Category 2024/25	Upheld	Partially upheld	Not upheld	Total
Decision (24)	Care Assessment - Assessment disagreement (including unhappy with decision)	3	0	12	15
	Finance - Assessment disagreement (including unhappy with decision)	1	3	5	9
	Total	**4**	**3**	**17**	**24**
Conduct (10)	Staff Conduct - Conduct of council employed staff (attitude/ behaviour)	2	2	6	10
Quality (32)	Care Agency - Quality of service	1	0	2	3
	Care Assessment - Quality of service	1	2	1	4
	Care Home - Quality of service	1	1	4	6
	Hospitals – Quality of service	0	0	2	2
	Equipment provision/ Installation - Quality	0	1	0	1
	Finance - Quality of service	4	2	2	8

	Hospitals - Discharge Process	0	2	4	6
	Care Assessment - Request (process)	0	1	1	2
	Total	**7**	**9**	**16**	**32**
Timeliness & Delays (13)	Care Assessment - Assessment delay (including delay in making a decision)	4	1	4	9
	Care agency - Timeliness	0	0	1	1
	Hospitals - Delay (including delay in making a decision)	0	0	1	1
	Finance – Timeliness	0	0	2	2
	Total	**4**	**1**	**8**	**13**
Communication (11)	Care Assessment - Lack of communication	1	0	1	2
	Care Home - Lack of communication	0	1	1	2
	Finance - Lack of communication	1	0	0	1
	Total	**2**	**1**	**2**	**5**
Other (4)		3	2	3	8
	Total	**22**	**18**	**52**	**92**

6.3 Complaint Trends by category

Decision

This category continues to experience an increase in complaint volume. Encouragingly, the proportion of complaints not upheld improved compared to 2023/24, alongside a reduction in partially upheld cases. These trends suggest greater clarity and consistency in decision-making, as well as improved communication around assessment and financial decisions.

Of the complaints received, 17 were not upheld. These primarily related to statutory duties concerning financial charging, national care legislation, regulations, or policy—areas where the council or provider has limited discretion to alter outcomes. In cases where complainants are dissatisfied with the outcome of an assessment, the council offers reassessments or considers changes in circumstances, where appropriate.

Conduct

There has been a reduction in the number of complaints received in this category during the current reporting period and the number of substantiated complaints relating to staff conduct has decreased by 32.4%. To address concerns raised about staff behaviour or conduct, the service continues to implement training, formal reflection, and staff reminders as part of its response and improvement process.

Quality

The total number of complaints in this category increased slightly compared to 2023/24. However, the proportion of upheld complaints decreased from 33.3% to 21.9%, and there was a 13-percentage point increase in the number of unsubstantiated complaints. This is a positive development, as it reflects the service's ability to demonstrate that care was delivered appropriately and in line with expected standards. It also highlights that a growing number of concerns were found not to warrant action upon review.

Complaints relating to quality were addressed through staff training, learning events, enhanced auditing, and procedural amendments. Substantiated complaints involving care provider services were managed through contract management procedures, with lessons learned informing the work of the Care Quality team. This approach supports ongoing improvements in the quality of provision across the social care market.

Timeliness and Delays

This category relates to the time taken to conduct assessments or provide services, with waiting times for care assessments and financial reviews being the primary sources of complaints. There has been an increase in complaints in this area compared to last year, reflecting a return to typical levels following a period of improvement. The proportion of upheld complaints rose from 44.4% in 2023/24 to 61.5%, a shift attributed to increased demand on services. Adult Social Care continues to prioritise urgent cases and individuals with the highest levels of need to minimise delays.

Communication

Complaints relating to communication dropped from 11 in 2023/24 to five in 2024/25, indicating a notable reduction in concerns raised. However, the percentage of upheld complaints increased, suggesting that although there have been improvements, those that were raised required formal resolution.

6.4 Statutory Complaints by Service Area

The table below provides a breakdown of statutory complaints figures for complaints with an outcome:

Service Area	2023-24	**2024-25**	No of complaints DOT	No. of cases upheld (2023-24)	**No. of cases upheld (2024-25)**	No. of cases partially upheld (2023-24)	**No. of cases partially upheld (2024-25)**
Localities (Older People & Physical Disabilities)	14	19	▲	1 (7%)	2 (10%)	4 (29%)	6 (32%)
Safeguarding, Access and Occupational Therapy	9	9	-	1 (11%)	0 (0%)	3 (33%)	1 (11%)
Integrated Learning Disabilities	17	11	▼	7 (41%)	4 (36%)	5 (29%)	2 (18%)
Mental Health	8	16	▲	1 (13%)	3 (38%)	1 (13%)	1 (6%)
Customer Financial Affairs	9	17	▲	3 (33%)	6 (35%)	0 (0%)	4 (24%)

Integrated Care Quality	7	5	▼	2 (29%)	2 (40%)	5 (71%)	1 (20%)
Hospitals & Health Partnerships	24	14	▼	10 (42%)	1 (7%)	5 (21%)	3 (21%)
Commissioning	2	1	▼	0 (0%)	1 (100%)	1 (50%)	0 (0%)
Total	**90**	**92**	▲	**25**	**25**	**24**	**18**

Localities

In 2024/25, Localities experienced a modest increase in the number of complaints, with 19 cases compared to 14 in 2023/24.There was also a slight rise in the number of complaints upheld, with two upheld in 2024/25 versus one upheld the previous year.

Of the eight substantiated complaints (upheld or partially upheld), concerns were raised across nine distinct categories, reflecting the diverse and often complex nature of the work undertaken. The most frequently raised issue among these was: Care Assessment – Conduct of staff (attitude/behaviour)

Localities is a service area that supports older people and adults aged 18+ with physical or other disabilities.. The team's work is primarily long-term, involving careful assessment and regular review of care and support needs, with a focus on working collaboratively with individuals to achieve their personal goals through a strengths-based approach.

Safeguarding, Access and Occupational Therapy

The team received nine complaints, the same as in 2023/24. Of the 2024/25 complaints, no complaints were upheld and only one case was partially upheld. This case related to occupational therapy equipment provision/Installation

This service acts as the first point of contact for Adult Social Care, providing urgent responses to individuals at risk, conducting occupational therapy assessments, and managing safeguarding concerns. The nature of the work often involves rapid decision-making under pressure, which can lead to a wide range of concerns being raised.

Integrated Learning Disabilities

The Learning Disabilities Team is an integrated health and social care team comprised of psychiatrists, social workers, psychologists, physiotherapists, occupational therapists, speech and language therapists, and nurses. They support people with severe learning disabilities..

In 2024/25, the team received 11 complaints – four were upheld and two partially upheld. This marks a decrease in total complaints compared to 2023/24.

Due to the complex nature of the work undertaken, complaints were received across 6 different categories. The most common themes among substantiated complaints were Care Assessment – Assessment delay (including delay in making a decision) and complex cases categorised under 'Other'.

Mental Health

The service supports adults with a range of mental health issues ranging from people in crisis, early intervention, long term support and short-term support.

Since 2021/22, there has been a gradual rise in the number of complaints, with 2023/24 marking the only deviation from this trend, showing a slight dip before numbers rose again in 2024/25. The majority of complaints have historically been not upheld, however partially upheld outcomes have

appeared more regularly since 2020/21 and upheld complaints have increased slightly in recent years, with 2024/25 showing a higher number of substantiated complaints than previous years. The increase in upheld and partially upheld complaints indicate growing complexity in service delivery or gaps in communication and expectations. The diversity of complaint categories illustrates that people who draw on care and support are engaging with multiple aspects of care.

Customer Finance

In the financial year 2024/25, the Customer Finance team recorded a total of 17 complaints, representing an increase from nine complaints in 2023/24.

The increase in complaints coincides with the implementation of a new financial management system, Oracle Cloud, which replaced the legacy platform previously used for council financial management including managing adult social care billing. The transition to Oracle Cloud presented some short-term operational challenges and disruption to billing processes. These issues have impacted the team's ability to maintain routine communication and have contributed to the rise in complaints, particularly those related to billing accuracy, timeliness, and communication. The Customer Finance team continues to work with council colleagues on stabilising the new system and improving internal processes to reduce the likelihood of similar issues in the future.

Care Quality

In 2024/25, the Care Quality team received a total of five complaints. Of these, two were upheld and one was partially upheld. This represents a slight decrease in volume compared to 2023/24, when the team received seven complaints, of which two were upheld and five were partially upheld.

Four of the five complaints received in 2024/25 related to either residential or domiciliary care providers. As these concerns involve services delivered by external organisations, they are initially passed to the relevant provider for investigation. If the outcome of the provider's investigation is not satisfactory, either to the complainant or to the Care Quality team, Adult Social Care may intervene and take further action.

The nature of these complaints highlights the importance of strong partnership working and clear accountability between the Council and commissioned care providers. Ensuring that providers respond effectively to concerns remains a key focus for the service.

Hospitals and Health Partnerships

In 2024/25, the Hospitals and Health Partnerships team received a total of 14 complaints. This represents a significant decrease from the previous year, when the team recorded 24 complaints.

Of the complaints received in 2024/25, two were upheld, one was partially upheld, and the remaining eleven were not upheld. In contrast, the 2023/24 figures included ten upheld complaints, five partially upheld, and nine not upheld.

Complaints were received across eight different categories, reflecting the breadth of the team's responsibilities and the varied challenges they face.

Commissioning

The Disabled Facilities Grants (DFG) team specialises in facilitating grants to help individuals adapt their homes, enabling them to continue living safely and independently in environments that better suit their needs.

During the reporting period, one complaint was received into the DFG team. This complaint related specifically to adaptations carried out by a service provider. As with all provider-related concerns, the matter was reviewed in line with established procedures to ensure that the person drawing on

care and support needs and expectations were appropriately addressed.

6.5 Timeliness of responses to statutory complaints

It is important to note that the handling of Adult Social Care complaints is governed by the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. This statutory guidance allows for a resolution period of up to six months from the date a complaint is received. This timeframe is designed to ensure that complaints are addressed thoroughly and fairly, while also allowing flexibility for complex cases.

In line with this, Adult Social Care is committed to resolving complaints as efficiently and constructively as possible. The complaints process is designed to be resolution-focused, offering complainants the opportunity to engage in face-to-face meetings, family discussions, or mediation, where appropriate, to help reach a satisfactory outcome.

To support this commitment, the service has adopted ambitious internal targets for complaint resolution. These include a 20-working day deadline for straightforward complaints, and 25 working days for more complex or serious cases, with the option to extend this period to up to 65 working days where necessary. These internal standards reflect the service's dedication to timely and person-centred complaint handling.

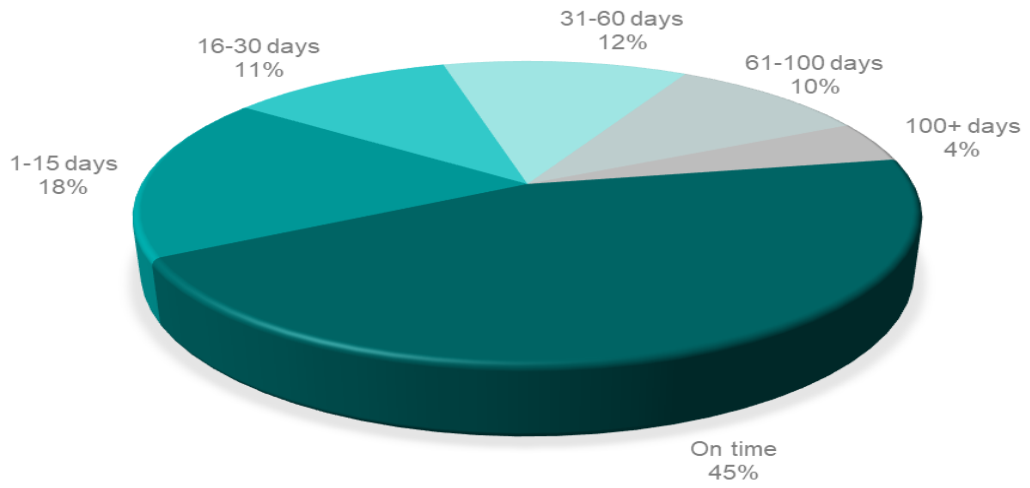
It is also important to note that statutory complaints are managed through a single stage process. If the complainant is not satisfied with the initial response to their complaint, they can request further information or a further investigation which may prolong the overall outcome of a complaint. When a complaint was likely to exceed our initial target response date, we endeavoured to keep complainants informed of the case progress.

During the reporting period 14 complaints were escalated to the next stage of the statutory complaints' procedure for further consideration by a member of the senior management team. This marks a notable reduction from the previous year, when 27 cases were escalated.

Of the 14 complaints escalated to the next stage of the statutory process, one resulted in a change to the original outcome. The remaining ten complaints did not lead to any change, with original decisions upheld or clarified. These cases were either not upheld at both stages or involved further explanation without altering the outcome. In all instances, complainants were signposted to the Local Government and Social Care Ombudsman (LGSCO) for independent review, should they wish to pursue their concerns further.

In 2024/25, one complaint exceeded the statutory six-month deadline for resolution, representing an isolated instance where the required timeframe was not met. Overall, 45 percent of complaints were resolved within the service's internal target. Chart 2 provides a summary of how promptly complaints were handled, showing the proportion completed on time and the additional time taken to resolve those that required longer.

Chart 2



Cases Concluded Beyond the Internal Service Timescale

In 2024/25, 50 complaints were responded to outside of the service's internal timeframe—an improvement on the previous year, when 54 cases were delayed despite a lower overall volume. There are several reasons why some complaints could not be resolved within target timescales. These include complex investigations where the depth and duration of the process were proportionate to the seriousness of the complaint. In some cases, legal advice was required, circumstances evolved during the investigation, or outcomes from safeguarding enquiries were awaited.

7. Learning from Complaints

Learning from complaints offers valuable insight into areas where services may not be meeting expectations and provides an opportunity to drive continuous improvement. By identifying what has not worked well, we can take meaningful steps to prevent similar issues from recurring wherever possible.

In some instances, the outcomes of complaints are specific to individual cases and do not highlight broader learning points that would necessitate changes to policy or procedure. In such cases, learning is addressed at an individual or team level through targeted training, reflective practice, supervision, and team discussions.

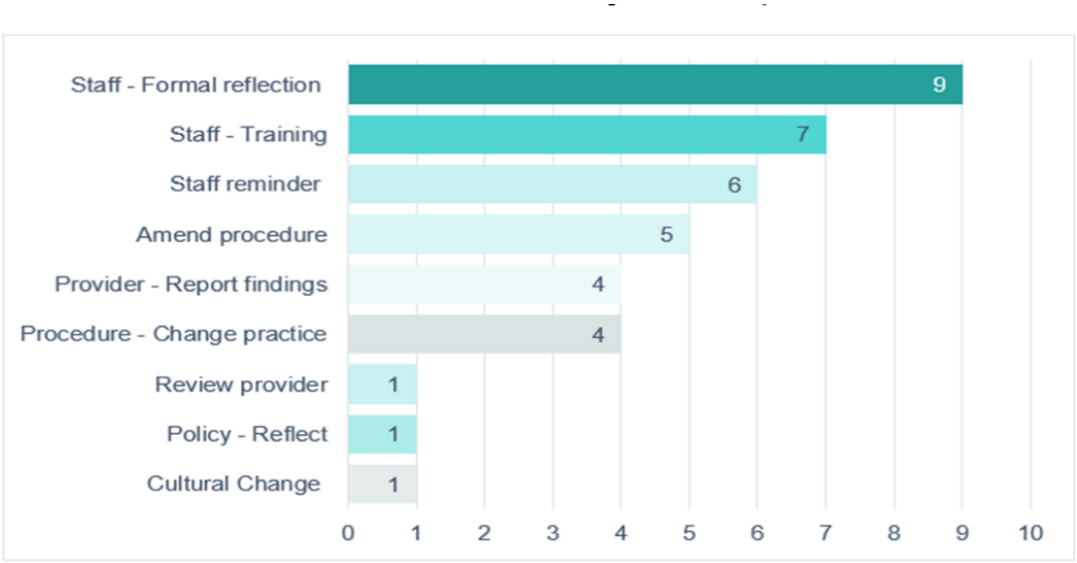
The table below categorises the key learning themes identified from complaints and the number of lessons associated with each. It also outlines the types of actions taken by Adult Social Care's management team, as well as our providers and partners, to reduce the likelihood of similar complaints arising in the future. These themes are intentionally broad to support trend monitoring, although the actions taken in response to each theme may vary.

Theme	No of lessons identified	Action
People Issues relating to the behaviour or conduct of a member of staff	22	Formal reflection Training Staff reminder
Policy Review or amendment of a formal	1	Reflection

policy to reflect the need for change		Audit Amend policy
Systems Preventative updates /amendments to system/s, staff training on systems or applications	0	Amend system Change working practice
Procedure Changes to current procedures and working practice as a preventative measure	10	Change working practice Amend procedure Cultural change
Provider Work with a provider to review working practices, procedures, policies and contract compliance	5	Report findings (to provider) Review contract Suspend provider

It is important to note, however, that the system issues associated with the implementation of the new financial management system, Oracle, have not been included in the learning from complaints analysis. These challenges were actively managed throughout the year as part of the system transition and were addressed through ongoing internal process improvements and system stabilisation efforts.

The below chart (chart 3) provides an overview of the actions taken as a result of learning from our complaints. In a number of cases there were several actions identified that were addressed to mitigate further complaints of a similar nature.



The Localities, Mental Health, and Customer Finance teams have demonstrated a commitment to service improvement by extracting the most learning from complaints data. This outcome reflects the presence of a robust feedback culture, where customer concerns are not only acknowledged but actively used to inform and enhance service delivery. Such an approach underscores the teams' dedication to continuous improvement and responsiveness to the needs of people who draw on care and support.

Examples of some of the learning from our complaint investigations:

Lesson Identified	Outcome
There was a lack of clear, empathetic, and carefully considered communication when engaging with individuals who may have been feeling vulnerable or overwhelmed. This impacted how messages were perceived and may have affected the individual's understanding and experience of the process.	Supervision with team manager and worker to discuss the complaint, the outcome and the areas of support needed. Reinforced the policy of zero tolerance of abuse, as the worker indicated that their response was linked to the way in which the complainant was speaking to them.
The complaint highlighted a need to change the way the AMHP service work with partner agencies and services; improvement in communication to ensure cases are considered collaboratively and concerns and barriers to progressing referrals are addressed at the earliest opportunity.	Revised s.13 enquiry process introduced to formally document pre assessment evidence. New leadership of the AMHP service to build positive relationships between agencies to ensure better outcomes are achieved for residents.
The Council did not notify the relevant parties of the panel deputy's appointment or refer individuals appropriately. Consequently, the deputy was unable to arrange a visit to the property before it was cleared.	Restructure to improve capacity. Alongside the appointment of a new dedicated Property Protection and Public Health Funerals Officer.

8. Local Government & Social Care Ombudsman

The Local Government and Social Care Ombudsman (LGSCO) is an external body that looks at complaints relating to councils and Adult Social Care providers. The LGSCO investigates matters where there is an alleged or apparent maladministration or service failure.

In 2024/25, nationally the LGSCO received 3,231 complaints relating to social care services an 8% increase compared to 203/24. They upheld 79% of these cases.

8.1 Complaints and enquiries dealt with by the LGSCO 2024/25

Complainants are entitled to refer their concerns to the Local Government Ombudsman at any stage. However, if the matter has not yet been addressed through the council's internal complaints procedure, the Ombudsman will generally classify it as premature and refer it back to the council for initial consideration.

Of the 21 enquiries received by the LGSCO in 2024/25:

- 9 enquiries related to Assessments and care planning
- 3 Charging
- 1 related to a Disabled Facilities Grant
- 3 related to residential care
- 5 Other

Of these:

- 6 cases were upheld - Upheld: Fault and Injustice

- 6 cases were closed by the ombudsman after initial enquiries
- 9 premature cases were referred back for local resolution

In 100% of the upheld cases the Ombudsman were satisfied that Adult Social Care had successfully implemented their recommendations.

9. Responding to complaints and concerns about quality relating to external service providers

The Service is responsible for ensuring its contracted providers meet the quality and performance standards they have been set.

Adult Social Care requires all external providers of care and support services to operate a complaints procedure. For services regulated by the Care Quality Commission under the Care Standards Act 2000 (Homecare, Residential Care and Supported Living and Extra Care), this is a statutory requirement. For services that are not regulated, there is no statutory requirement but all contracts for services commissioned by the council include a requirement to have a complaints procedure. This is also examined during the procurement process.

Where a person who used social care services or their representatives raises a concern about the quality of an external provider with the council, the Care Quality Service logs the matter and passes it to the provider to investigate, in line with their complaint's procedure. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, Adult Social Care may take further action, through the complaints process if this is the most appropriate route.

The Service takes complaints about providers very seriously, both to ensure individuals and their carers receive high quality services and to learn lessons and make improvements more widely where necessary.

If it is found that a provider regulated by the Care Quality Commission (CQC) does not meet the CQC's fundamental standards, the Service will inform the CQC, acting primarily to ensure the safety of individuals and, once this is established, working with the provider to improve their standards.

10. Monitoring Care Quality

The quality of care and support services is monitored by the Care Quality Service through a range of contract compliance mechanisms. These include:

- Contract compliance and Quality Assurance visits, which include a review of complaints management by the provider.
- Quality alerts, which are written / telephone / electronic communications alerting us to a shortcoming in the delivery of a service.
- Working with the Care Quality Commission as appropriate when services do not meet the fundamental standards below which the provision of regulated activities and the care people receive must never fall.
- Responding to any other events, including safeguarding incidents and recommendations which indicate that the provider is not fully complying with contractual requirements.

The table below provides a breakdown of concerns about quality that were passed to providers to investigate

	2022-23	2023-24	2024-25
Complaints and quality alerts	Care Homes & Extra Care – 9	Care Homes & Extra Care - 45	Care Homes & Extra Care - 48
	Homecare - 79	Homecare - 70	Homecare - 79
	Supported Living - 15	Supported Living - 20	Supported Living - 34

Care Homes and Extra Care

For the Care Homes and Extra Care services, there has been a slight increase, but highlighting some consistent themes.

The main emerging themes include:

- Governance (Communication and lack of management oversight)
- Moving and handling (unwitnessed falls and poor care)
- Medication management (missed medication and medication errors)

The Care Quality team have addressed this by facilitating bespoke workshops such as Dignity and Respect, Words and Phrases, Herbert Protocol, Dementia Awareness, MCA awareness, and Care planning.

Due to changes in ICB funding, we no longer have access to clinical support from the Community Pharmacist or NCL ICB training hub which is beginning to reflect on the emerging trends and patterns identified, although we continue to work closely with Skills for Care and the One Care Home Team where possible.

Homecare

The main emerging themes included:

- Missed/late calls
- Poor communication/Field staff not reporting feedback to the office
- Staff not always following the care and support plan

Supported Living

The main emerging themes included:

- Medication management
- Managing finances
- Leadership and management

The Care Quality team have been working closely with Learning Disabilities (LD) and Mental Health (MH) teams and through regular engagement and communication we are now receiving feedback about LD and MH commissioned services we work with. Hence, we are now receiving more alerts than before about supported living.

Based on the emerging themes the Care Quality Team have facilitated a number of workshop and training events, to support providers in improving their services.

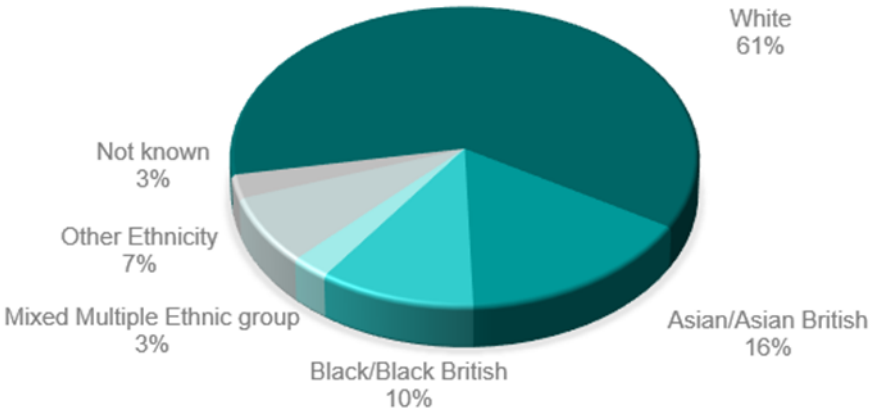
10. Demographic Overview

Ethnic Representation in ASC Complaints

Individuals identifying as White accounted for 69% of complaints, compared to 61.4% of individuals drawing on care and support—an over-representation of 7.6%. Similarly, people from Mixed or multiple ethnic groups were over-represented, making up 4% of complaints while comprising only 2.5% of those drawing on care and support. Asian/Asian British individuals also showed a slight over-representation, contributing 17% of complaints versus 15.9% of individuals drawing on care and support.

In contrast, Black/African/Caribbean/Black British individuals were under-represented, making up just 4% of complaints despite representing 10.3% of those drawing on care and support. Additionally, 2% of complainants had unknown ethnicities, slightly lower than the 2.6% recorded among individuals drawing on care and support.

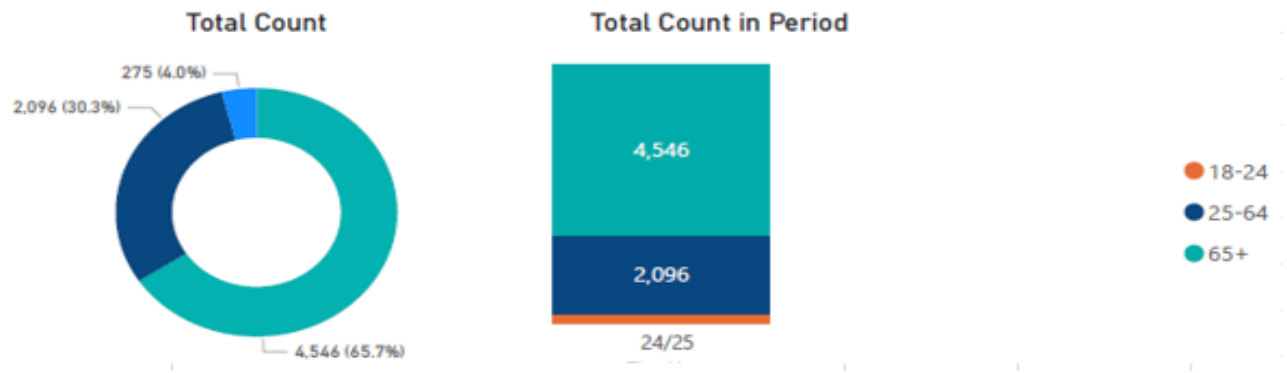
Numbers and % of all individuals in receipt of a sevice from the council by ethnicity



Age range

In 2024/25, 33% of complaints received related to individuals drawing on care and support aged 18–64. Within this age group, the majority of complaints were associated with the Learning Disabilities Service (33%), followed by Mental Health services (30%). This age group represents 34.3% of all individuals in receipt of a service, indicating a slightly higher proportion of complaints from this cohort relative to their overall representation.

Numbers and % of all individuals in receipt of a sevice from the council by age band



Primary Support Group

In 2024/25, more complaints were received from individuals receiving Mental Health Support than would be expected based on their share of all individuals in receipt of a service. Mental Health accounted for 23.6% of complaints but only 14.3% of people drawing on care and support. .

In contrast, fewer complaints came from those receiving Physical Support (51.7% vs. 62.6%) and Learning Disabilities Support (13.5% vs. 16.0%).

Numbers and % of all individuals in receipt of a sevice from the council by support group

