



Adult Social Care Annual Complaints and Representations

Performance Report 2021/2022

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1. Summary Headlines

Complaints in 2021/2022

In 2021/2022 a total of 464 cases were considered through the Adult Statutory Complaints process compared to 377 for 2022/2021 with the following outcomes:

- 137 Upheld
 - 42 Assessments, 35 Quality of Care, 11 Staff Conduct, 4 Safeguarding, 45 Finance
- 262 Not Upheld
- 35 Partially Upheld
 - 14 Quality of Care, 3 Staff Conduct, 12 Assessments, 5 Finance, 1 Safeguarding
- 2 Withdrawn
- 11 Not Relevant
- 7 Non ECC

10 cases still active with outcome currently unknown

Summary of complaint outcomes for 2021/2022 showing comparisons for 2020/2021:

Case Outcome	Total 21/22	% of Total 21/22	Total 20/21	% of Total 20/21
Not relevant	11	2.37%	12	3.18%
Non ECC	7	1.50%	7	1.85%
Not Upheld	262	56.46%	157	41.64%
Partially upheld	35	7.54%	19	5.03%
Upheld	137	29.52%	136	36.07%
Withdrawn	2	0.43%	9	2.38%
Outcome currently unknown	10	2.15%	37	9.81%
Grand Total	464	100%	377	100%

The recorded outcome of 'not relevant' refers to those cases where it has not been possible to consider under the complaints process for the following reasons:

- Active court proceedings
- No informed consent

Summary of a selection of Adult Statutory Complaint Upheld Cases 2021/2022:

Team:	Issue:	Outcome Decision:
South Quadrant	Wife of service user feels she was not given correct advice regarding care costs and states was never told carer's visits would be chargeable and care plan was never discussed, disputes invoice received.	Upon review service apologised for distress caused and agreed to write off charge of £826.
West Quadrant	Mother unhappy with the management of son's case by the West Essex Learning Disability and Autism Team and states social worker left without any warning.	Service apologised for experience and acknowledged that communication with the allocated social worker could have been more consistent, and the family should have been made aware of her departure in advance of the day she was leaving. Assurance given that the matter would be taken forward as a learning outcome to be shared within the team to ensure this does not happen again. Following completion of further Care Act assessment, son allocated another worker to continue the process against the agreed outcomes.
North Quadrant	Sister of service user unhappy with incorrect invoices and demand letters received states was advised first 6 weeks were free, and despite informing social worker and Finance she has not heard anything further.	Upon review service established that X was provided with a reablement service which was commissioned for 'up to' six weeks and is non-chargeable. X moved to a commissioned domiciliary care service following reablement and it was explained to the sister that if reablement is ended prior to the six-week period based on assessed needs, and domiciliary care is commissioned, this would be considered a chargeable service. Sister advised this information was not shared with her and therefore was under the assumption care would be free. Considering that sister

Team:	Issue:	Outcome Decision:
		expressed she was told the first six weeks care would be free of charge, service agreed on this write off all care charges for a period of 2 weeks.
Mid Quadrant	Daughter of service user unhappy with Care Act assessment when her mother was in a residential home following discharge from hospital	Service recognised and provided apologies that the assessment was not completed at the expected standard and for the inconvenience and frustration this would have caused. Service agreed to undertake additional training to ensure such instances do not occur again and a reminder to the Discharge to Assess Team to provide clear information about processes.
Countywide/Independent Workforce	Concerns raised about process of arranging ongoing care and the shorter than expected reablement care following discharge	Service apologised for poor experience, rectified the charging issues which related to the period of reablement care received. Necessary steps taken to discuss both practice and communication approaches with colleagues who source the commissioned care arrangements,
South Quadrant	Son of service user states the authority has severely lacked communication and professionalism when dealing with his mother's case.	Upon review service recognised and apologised that the family were not updated within the timescales they were originally given, and the social worker should have directed earlier to the housing authority regarding the housing and rent for issues to be resolved.
West Quadrant	Service user states his care has been cut and he does not understand the reason for this and states some of the information held on him was incorrect and he just wants to keep his current care hours	Upon review service user's care package was reinstated until a full review completed in collaboration with the service user.
North Quadrant	Son unhappy with delay in care assessment, feels adult is in vulnerable state and family suffering	Service acknowledged and apologised for the delays in the system during a period of increased demand and recognised communication was

Team:	Issue:	Outcome Decision:
		not as prompt as usual. Service reassured that information shared by the son within his complaint correspondence will help to inform Adult Social Care processes going forward.
Mid Quadrant	Mother of service user unhappy with poor communication and actions of social worker, false promises, and lack of action regarding increase of personal budget	Concerns regarding support looked into and service agreed that service user's review be reallocated to another worker. Direct payments and personal budget clarified. and service user agreed to make arrangements for return of excess fund.
Countywide/Finance	Customer states apologies are not enough as the authority/Purple do not look at the bigger picture regarding the financial hardship to the carer and issues with credit score. Customer states medical certificate was sent and stat sick pay is still outstanding to the carer. Customer states if the authority/Purple cannot pay this because of the length of time that has passed then they should be paying compensation.	Purple accepted fault in missing paperwork for Statutory Sick Pay which was not previously corrected when issue first raised. Apologies given and Statutory Sick Pay amended. and steps taken to improve service going forward.
South Quadrant	Service user states authority has failed to pay the care company and believes he is being discriminated against as social workers show no compassion or concern.	The service noted that the Council had consistently maintained payments to the agency that provides the service user's care and support in line with contractual arrangement. The service user's request for an increase in funding to match an increase in his care hours on discharge from hospital was not responded to promptly. As a result, the care company was not being paid in full by the Council for the care they were providing to him. Apologies given for the delay in responding and the concern caused whilst aware his care company was not being fully paid. Matter rectified and payments backdated to ensure all

Team:	Issue:	Outcome Decision:
		care paid for and a new contract in place.
West Quadrant	Family member with Lasting Power of Attorney unhappy with lack of involvement from Adult Social Care despite making all reasonable efforts to contact the relevant worker/s to discuss the discharge plans.	Apologies given for lack of communication and advised staff reminded of importance of timely communication to staff. Team manager contacted representative to fully explain discharge process.
North Quadrant	Wife unhappy with assessment carried out on her and her husband, also unhappy with charges towards respite care and feels social worker wrote incorrect information in assessment.	Upon review service noted social worker had followed out of date information. Apologies given and advised entitled to carers assessment which will be arranged at their request.
Mid Quadrant	Mother of service user states carers rarely spent enough time with her son, and states there was a lack of medical intervention.	Service apologised and recognised that there were opportunities for Essex County Council to have reviewed the care and support that X was receiving and deal with any problems in the delivery of the care he was receiving. Assurances given that the service will review how they are determining what actions need to be taken following a referral or a concern raised in relation to a vulnerable adult, including how intervention is prioritised.

What we did well:

- Actively listen to customers when things go wrong
- Fully consider issues raised and seek suitable remedies
- Capture the learning from complaints and share with services
- Record trends and outcomes for monitoring and learning
- Identify viable improvements and work with service to implement for the benefit of all customers and the organisation
- Positively work with service to resolve issues when first raised

- Provide guidance and training sessions on all aspects of complaint management
- Identifying individual needs and treating everyone respectfully.
- Managing customers' expectations by meeting response deadlines and keeping customers fully updated throughout the complaints process.
- Continuously review processes to ensure these are consistent and current
- Manage complaints in line with policy and legislation

What do we need to improve?

- Not lose sight of what we do well
- Introduce regular retrospective sessions with the service to consider what could have been done better and highlight areas of good practice
- Share trends and outcome reports more widely across the service area to ensure everyone handling complaints has the opportunity to view and consider these
- Compliance and Complaints to spread their service offer more regularly across the service area highlighting any updates or change in process for a consistent approach

Purpose of the Report:

The purpose of the Annual Report is to review the operation of the complaints process over a twelve-month period, including statistical data, and to provide the local authority with the means by which it keeps itself informed about complaint themes and how effective its current arrangements are for handling customer complaints. It offers an analysis of what the information obtained from the operation of the complaints process means for the council.

This report has been produced by Essex County Council's (ECC) Compliance and Complaints Team in order to meet this statutory requirement, to be published on the Council's website alongside ECC's policy and procedural guidance referring to complaints, representation, compliments and comments for Adult Social Care:

<https://www.essex.gov.uk/customer-services/Pages/Complaints,-compliments-and-comments.aspx>

Period covered and data:

This report focuses on Adult Social Care complaints, compliments, enquiries, and comments received for the period 1 April 2021 to the 31 March 2022. The report makes extensive use throughout of data available from the Case and Complaint Management System which is used by the Customer Service Compliance and Complaints Team to record and manage all statutory social care complaints and feedback received by the Team, as well as insight and learning from operational services. The statistical information presented within this report can be verified by reference to this database and is based on the date received. All percentages and costs are rounded to the nearest whole number.

Terms:

The term 'representations' is applied to:

Comments: neutral observations and suggestions.

Compliments: positive comments, praise, and thanks; and

Complaints: expressions of dissatisfaction, seeking a remedy.

Complaint's process:

ECC Adult Social Care is subject to two representations procedures.

1. ECC Corporate Complaints

This is the voluntary ECC complaints procedure, which is referred to as the ECC corporate procedure. The whole directorate, and indeed the whole authority, is subject to this procedure, which provides for any customer or service user making a representation about any aspect of the operation of the directorate.

2. Statutory Social Care Complaints

Adult Social Care also operates a statutory procedure that relates to a specific range of its activity related to Social Care services and this Statutory process is set by Central Government. This procedure provides for representations made by or on behalf of any adult who may be entitled to receive a service and by any other person who is deemed to have sufficient interest in the welfare of the adult to warrant inclusion in this procedure.

The Care Act 2014 ('the Act'), supporting regulations and the Care and Support Statutory Guidance ('the statutory guidance') were introduced in April 2015. This is the law on which adult social care in England is based and local authorities must adhere to it.

The health and social care complaints systems are based on the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 ('the complaints regulations'), made under powers in sections 113 to 115 of the Health and Social Care (Community Health and Standards) Act 2003.

Complaints and Representations procedures are provided in several formats aimed to facilitate easy access to the complaints process.

Complaints and Representations may also be raised by contacting a County Councilor or a Member of Parliament; these enquiries are managed through the Member Enquiries service.

(Full details of the complaints process can be found in Appendix1)

2. Introduction

This report provides information on complaints for Adult Social Care Services for the period 1 April 2021 to 31 March 2022, dealt with through either the statutory social care complaints procedure or the corporate complaints process. The complaints process provides us with the opportunity to monitor performance, improve service quality and learn from complaints made by our service users. We achieve this by capturing a range of complaint information including, the nature of the complaint, the action we took, the outcome of the complaint and whether we responded to the complaint on time. By publishing an annual complaint report, we hope to demonstrate our commitment to transparency and a positive approach to dealing with and learning from complaints.

Background:

Under statutory regulations, we are required to prepare an annual report about the previous year that examines how well we dealt with Adult Social Care complaints, including the numbers received and how many were upheld. Our Adult Social Care service is required to operate a statutory complaints procedure in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and the Local Authority Social Services Complaints (Amendment) Regulations 2009. Any complaint, which does not fall under these provisions, we will consider under our corporate complaint's procedure.

3. Executive summary

This report focuses on Adult Social Care complaints and compliments received for the period 1 April 2021 to the 31 March 2022. The report makes extensive use throughout of data, feedback received, as well as insight and learning from operational services.

During the period 1 April 2021 to 31 March 2022 464 Adult Social Care complaints were received and considered under the statutory complaints process, which is slightly higher than 377 for previous period 2020/2021. Whilst an increase measured against previous period, 464 is comparable to the period 2019/2020 prior to the pandemic where a total of 467 was received and considered. In 2020/2021 only very complex, urgent, and safeguarding issues were considered to alleviate the extreme pressures on operational services being experienced at that time and therefore the total cases recorded at that time was 377.

There are no statutory timeframes for Adult Statutory Complaints with realistic and achievable response times negotiated with operational services and the complainant updated accordingly. However, we actively work towards responding within 20 working days. During this period 143 cases (31%) were concluded within 20 working days, 151 (33%) within 40 working days and due to the complexity and/or multi-agency involvement 170 cases (36%) were resolved in excess of 40 working days.

The longest cases to resolve fell into the following categories:

- Safeguarding 5 cases = 1.77%
- Quality of Care 60 cases = 12.93%
- Staff Conduct 12 cases = 2.58%
- Assessments 61 cases = 13.14%
- Finance 32 cases = 6.89%

During 2021/2022 a total of 146 compliments were received by the Compliance and Complaints team in relation to Adult Social Care which is a 43% increase to previous year. Additional compliments may have been received direct to individual workers and work continues in this area to ensure all positive feedback received is captured and recorded centrally. Many of these compliments reflect the themes of some of the complaints.

4. Analysis of contacts received

During the period 1 April 2021 to 31 March 2022 464 complaints were received and considered under the Adult Statutory complaints process, which is slightly higher than 377 for previous period 2020/2021 giving a 18.75% increase. The following data is a summary of cases received and resolved with comparison for previous periods:

Month	2019/2020	2020/2021	2021/2022
April	42	9	45
May	30	12	39
June	30	31	45
July	40	22	47
August	36	32	40
September	40	41	48
October	40	42	32
November	50	39	38
December	32	28	29
January	44	24	26
February	45	37	38
March	38	60	37
TOTAL	467	377	464

The following is a breakdown of complaint type received during 2021/2022:

Assessments – 150 cases = 32%

Finance – 109 cases = 23.49%

Quality of Care – 151 cases = 32.54%

Safeguarding – 20 cases = 4.31%

Staff Conduct – 34 cases = 7.32%

Method of contact:

The following methods of contact were used during this period:

Method	2020/2021	2021/2022	% Variance from 20/21
Email	226	230	1.76% increase
Letter	24	47	95.83% increase
Online Form	101	154	52.47% increase
Telephone	26	33	26.92% increase
In person	0	0	-
TOTAL:	377	464	23.07% increase

The preferred method of contact continues to be via email with an increase in contact via the online form. Contact by postal letter format is usually relatively low and the increase this period may be due to recurrent contact on same issue from a few individuals who only send in letter format.

Complaints by location:

Adult Social Care services are configured into four quadrants providing local service delivery as follows:

North Quadrant – Colchester and Tendring

Mid Quadrant – Chelmsford, Braintree, Maldon

South Quadrant – Brentwood, Basildon, Castle Point, Rochford

West Quadrant – Uttlesford, Harlow, Epping Forest

Countywide team will assess all initial Adult Social Care referrals across all districts, offers an out of hours emergency service and focuses on safeguarding vulnerable individuals.

The above four quadrants and countywide services provide support to those in need, such as individuals with mental health problems, learning or physical disabilities, as well as vulnerable adults. Adult Social Care offers a broad range of services providing a safety net to those most at risk within the community by providing information and advice, assessing care needs, arranging short-term support or reablement, safeguarding vulnerable individuals and commissioning a large range of care services.

The volume of complaints recorded across all quadrants is fairly consistent to those for the period prior to the pandemic. Countywide teams experienced a slight increase with the main contact being in connection with initial assessment requests.

Period	2019/20	2020/20	2021/2022
North	126	83	126
Mid	121	105	95
South	132	116	144
West	74	55	72
Countywide	14	18	27
Total:	467	377	464

For analysis purposes once received the complaints are categorised. The categories and number of complaints received against each are as follows:

Themes by Quadrant:

North

		2019/20	2020/21	2021/22
Nature	Specialism	Total	Total	Total
Service Failure	Assessments	37	27	36
	Safeguarding	5	0	3
	Finance	25	26	23
	Quality of Care	24	12	25
	Staff Conduct	22	10	5
Service Request	Quality of Care	0	1	11
	Assessments	6	5	8
	Finance	4	2	15
	Safeguarding	0	0	
Information Enquiry	Finance	1	1	0
	Assessments	2	0	0
Total:		126	83	126

Mid

		2019/20	2020/21	2021/22
Nature	Specialism	Total	Total	Total

Service Failure	Assessments	28	16	26
	Quality of Care	26	23	26
	Finance	41	32	10
	Staff Conduct	17	14	9
	Safeguarding	2	7	5
Service Requests	Assessments	3	2	3
	Finance	4	1	9
	Quality of Care	0	3	5
	Safeguarding	0	0	2
Information Enquiry	Assessments	0	4	0
	Finance	0	2	0
	Quality of Care	0	1	0
Total:		121	105	95

South

		2019/20	2020/21	2021/22
Nature	Specialism	Total	Total	Total
Service Failure	Assessments	25	32	33
	Quality of Care	22	20	42
	Finance	35	28	17
	Staff Conduct	23	10	11
	Safeguarding	7	6	6
Service Request	Assessments	8	8	7
	Finance	3	5	13
	Safeguarding	2	0	1
	Quality of Care	0	3	12
	Staff Conduct	0	2	2
Total:		132	116	144

West

		2019/20	2020/21	2021/22

Nature	Specialism	Total	Total	Total
Service Failure	Assessments	13	13	19
	Quality of Care	13	19	18
	Staff Conduct	12	7	7
	Finance	22	11	9
	Safeguarding	2	2	2
Service Request	Assessments	5	1	5
	Finance	4	0	4
	Quality of Care	0	1	6
Information Enquiry	Assessments	2	1	
	Finance	1	0	2
Total:		74	55	72

Countywide

		2019/20	2020/21	2021/22
Nature	Specialism	Total	Total	Total
Service Failure	Staff Conduct	2	3	0
	Safeguarding	0	3	1
	Quality of Care	8	5	6
	Assessments	2	5	13
	Finance	2	1	7
Service Request	Finance	0	1	0
Total:		14	18	27

Of the 464 received cases during 2021/2022 a total of 349 were recorded as a service failure as perceived by the complainant and/or dissatisfaction with the service provided by the authority.

The following are typical themes of issues raised:

- Care charge disputes
- Lack of communication from social worker
- Delays in carrying out assessments
- Failings of care provider
- Financial assessment delays

- Dispute over care charges when believed to have been Reablement
- Dissatisfaction with domiciliary care provider
- Disputes over what should be considered as a Disability Related Expense
- Disputes over care home costs
- Insufficient care package
- Issues regarding Direct Payments

The social worker and care provider are likely to have the most contact with service users and their families and therefore, it is not surprising that a high percentage of issues raised are in respect of such matters. However, it is also not uncommon to establish upon review that the concerns raised are the perception of family members and not necessarily that of the service user.

Demographics:

Demographics are defined as statistical data about the characteristics of a population, such as the age, gender, and ethnicity of the people within the population.

The choice to provide demographic information resides with the customer as the capture of this data is not a mandatory requirement to anyone wishing to make a complaint. Whilst demographic data is requested there appears to be a general reluctance to provide such details with many complainants stating that they do not feel this has any relevance to their complaint. In fact, some people have expressed concern/anxiety that they may be discriminated against due to their age, ethnic origin, religion, or sexual orientation when submitting a complaint.

The Compliance and Complaints Team recognises the importance of collecting this data and continues to make every effort to capture this information for the purpose of analysis and service improvement.

100% of complainants provided some demographic details even if this was limited to gender only. Majority of contact received is from relatives on behalf of the service user.

Contact by district (relates to where contact/representation is from and not necessarily where the service is being provided from):

District	Percentage 1920/21	Percentage 2021/22	Variance
Basildon	15%	15%	No change
Braintree	8%	5.81%	27% increase
Brentwood	5%	3.2%	36% decrease
Castle Point	5%	6%	20% increase
Chelmsford	18%	10%	44% decrease
Colchester	10%	17%	70% increase
Epping Forest	5%	6%	20% increase
Harlow	6%	3.44%	42% decrease
Maldon	2%	4.74%	137% increase
Rochford	4%	5.81%	45.25% increase
Tendring	11%	11%	No change
Uttlesford	8%	6.25%	21.87% decrease
Not Applicable/Countywide	3%	3%	No change
Total	100%	100%	

Corporate Complaints:

Non statutory complaints relating to Adult Social Care managed through the corporate complaint's procedure. Issues raised that do not meet the criteria to be considered under the Adult Statutory complaints process are handled through the Corporate Complaints process for the following reasons:

- No consent to share
- Social Services not provided by Council
- Complaints of a general nature i.e., not case/service user specific
- Anonymous complaints
- Issues raised form part of active Court Proceedings

During the period 2021/2022 a total of 38 cases were considered through this procedure which is a decrease of 36% to those considered through this process in 2020/2021. The outcomes from 2021/2022 are as follows:

- Not Upheld: 31
- Partially Upheld: 3
- Upheld: 4

The upheld cases related to the following issues:

- Mother of adult son disputing invoices
- Representative requesting an assessment for service user following delay in CHC checklist
- Sister unhappy with lack of contact from team manager regarding respite care rejection
- Son states letters still being sent to deceased father despite the Council being informed through the ‘tell us once’ service

Member Enquiries:

Adult Social Care complaints/enquiries which are sent direct to a County Councillor, MP or the Authority’s CEO are handled under the Member Enquiries Process.

Upon receipt of such enquiries the Member Enquiries team liaise with Compliance and Complaints to determine whether the issues raised meet the criteria to be considered under the Adult Statutory Complaints process. In such circumstances, whilst the complainant has written to and is expecting a response from the CEO/Councillor/MP it is important that they are made aware of and given the opportunity for their concerns to be considered through the Statutory process.

During the period 2021/2022 a total of 330 cases were received and recorded as a Member Enquiry compared to 325 cases in 2020/2021. The following is a breakdown of the types of enquiries received and responded to as a Member Enquiry during 2021/2022 with a comparison for previous periods:

Member Enquiries	2019/2020	2020/2021	2021/2022
Assessments	196	107	102
Finance	108	89	94
Quality of Care	73	90	80
Safeguarding	27	35	53
Staff Conduct	33	4	1

Grand Total	437	325	330
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Local Government and Social Care Ombudsman Investigations:

During 2021/2022 we received 45 informal enquiries from the Local Government and Social Care Ombudsman in relation to Adult Social Care with a total of 22 escalating to formal investigation.

A summary of outcomes received with comparisons for previous periods are as follows:

LGO Investigation Outcome	2019/20	2020/21	2021/22
Not Upheld - No Maladministration or Injustice	8	1	6
Upheld, where either maladministration and/or injustice was found	7	3	14

Awaiting Final Decision outcomes on 2 cases received 2021/2022

Essex County Council continues to work closely with the Ombudsman's office, learning from any failings, appropriately challenging decisions, offering viable solutions that the Ombudsman would consider to be suitable remedies to discontinue investigations and being compliant with deadlines set by the Ombudsman.

(Brief summaries of the Ombudsman Decisions received during 2021/2022 detailed in Appendix 2)

5. Compliments Analysis

During 2021/2022 a total of 146 compliments/positive comments were recorded by the Complaints team in relation to Adult Social Care. Typical themes from compliments received:

- Driven
- Professional
- Thoughtful
- Goes above and beyond

- Supportive
- Caring
- Understanding
- Sympathetic
- Compassionate

Recording compliments received highlights the good work being carried out across all teams within Adult Social Care and gives the service the opportunity to see what good looks like. Positive feedback is reviewed alongside complaints to achieve a balanced understanding of service performance.

Compliments received highlight the hard work being undertaken and show staff that they are valued and appreciated by those people they are supporting.

A summary of some of the positive feedback received from service users and their families expressing their thanks and appreciation to members of staff within Adult Social Care is set out below:

“It was lovely to see you too and we meant every word of what we said being a huge thank you for everything that you have done for X (and us)! Again, thank you for everything”

“Thanks for supporting X’ transition to her new placement to Sussex since the request by her family and thanks for your cooperation and understanding at what has been an anxious time”

“I am writing to thank your team for all the help that you have provided to me and my father in the last few weeks. In particular, i would like to praise and express my gratitude to X, who was wonderful and very supportive throughout this sad period. I have dealt with several social workers in the last 10 years with regards to care for both my parents and I have to say that X deserve the award for "the best". She is a true professional and a credit to your team. Could you kindly pass on my thanks to her”

“I wanted to compliment the staff of adult social care, especially X, who patiently went through options available to me regarding the future care of an elderly relative”

“I want to say thank for your help and support in the matter of my mum over the last few weeks, and in particular for the period of her time in hospital and discharge after her fall and broken arm”

“Please could pass on my sincere appreciation to X, X and X- I can't think what state

my mum or I would be in if it had not been for the kind help from each, I cannot stress enough how grateful I am to each of them”

“It is with great pleasure to inform you of my positive experience with social worker X. His communication qualities are very rare since I was involved with social care for many years. The professional quality of X is being thoroughly person-centred of which all his communication to me I have perceived his empathy, unconditional positive regard and even in challenging times we are able to reach a mutual agreement. X and I have mutual respect for each other which enables me to feel I can trust him to support me with meeting the needs of my disabled adults. Whenever I have any concern and need some support, I can be rest assured that X will promptly respond to my email or voice message”

“Just a short note to say how much I appreciate all you have done to help X. It is a big burden off our shoulders, and I want to say a big thank you”

“I just wanted to email you to say how grateful my mum X, myself and my family were for X as my mum’s social worker. Her dedication, passion, support, kind words and common sense made all the difference, when navigating through an extremely complex, anxious, worrying, and stressful process. My mum at all times was treated with dignity and respect”

“X is one in a million, and her resolve to see things through to the end providing a professional informative service was second to none. X even kept us informed on her non-working days, her annual leave, after hours and at weekends when it was important to keep us in the loop. Essex social services are very lucky to have X working for them”

“Me and my family would like to thank you for making it possible for my husband X to be able to go to X. X settled in so well, such a lovely place for him to go 3 days a week. The work you and your team are doing is fantastic”

“Thank you so much for getting this sorted for nan it’s absolutely wonderful news. If this wasn’t an official email, I’d send you a string of hearts and flowers emojis. Thank you so much”

“We write to you to express our appreciation for all the hard work and professionalism shown by X towards helping X and myself. We have 20 years of experience in dealings with social workers and x has stood out for us as one of the best. She is a real asset to your organisation”

“I am writing to advise you that your social worker X has been very professional in her work with X and X. X has taken a challenging situation with two people who are awkward and suspicious of any sort of authority and is making a difference to their lives. I would like to commend her in her patience, efficiency, and professionalism”

“On behalf of my mum (and dad when he was alive) myself and my siblings, we would like to thank you very much for how you have supported our family, helping things to go smoothly when things were a little rocky in the early days”

“It gives me some glimmer of hope that there are wonderful people like you, who generally cared about mum and us, and what you did to help us try to give mum some sort of quality and dignity that my amazing mum should have been entitled to. I know things move on, but I would like you to know that I will never forget what you did for us”

6. Next Steps

The mission of Compliance and Complaints is to work in collaboration with operational services to deliver a seamless experience for those customers that need us. Listening and acting on what they tell us and use learning to help improve and evolve service delivery. Our objective is to recognize where we have failed, seek suitable resolutions within agreed timescales and ensure our obligations are fully met in line with the formal complaints process and Local Government and Social Care Ombudsman expectations.

Complaints received should always be viewed as an opportunity to learn from any failings and make necessary improvements and should never be considered a nuisance or an interruption to the delivery of services. We must embrace complaints to improve services and respond to these openly and honestly.

Complaints do not only highlight failings as upon review these also show very good examples of good practice and therefore, we should also not lose sight of what we do well.

The following points highlight areas for improvement going forward:

- Repetitive trends to be monitored and regularly shared with Adult Social Care to prevent recurrence
- Continue to be responsive, listen to concerns and act on any failings

- Avoid any lack of communication complaints by continuing to engage with the service user/representative throughout any process
- Compliance and Complaints to continue to work in collaboration with Adult Social Care identifying any working practice improvements benefitting both service areas
- Compliance and Complaints to continue to ensure the sustainability of all aspects of the performance of complaint handling
- Compliance and Complaints to identify opportunities that reduce avoidable demand, time and effort and improve the customer experience
- Further complaint training opportunities made available to all staff within Adult Social Care to ensure thorough and transparent complaint investigations are carried out.
- Continue to make best use of resources to deliver on our statutory obligations whilst continuing to embed the vital learning culture to manage demands, improve services and ensure better outcomes for all our customers and service users.
- Continue to work closely with the Local Government and Social Care Ombudsman, ensuring any Ombudsman enquiries are responded to within the timescale given, all recommendations are actioned promptly and any learning from the Ombudsman complaints are disseminated across the service area.

Appendix

Appendix 1 Complaints Procedure

The way we deal with representations and complaints relating to Adults Social Care is set down by Central Government. As a result, the process and timescales for dealing with them may vary dependent upon the type of complaint or representation being made.

Who can use this process?

- a person who receives or has received services from Essex County Council; or
- a person who is affected by, or likely to be affected by, the action, omission, or decision of Essex County Council.
- by a person acting on behalf of a person mentioned above who:
 - has died
 - is a child
 - is unable to make the complaint themselves because of physical incapacity or lack of capacity within the meaning of the Mental Capacity Act 2005

If the complainant has a private arrangement with a social care organisation or provider, they will need to raise their complaint with them.

Our complaints policy cannot change decisions made by a court of law. We may not be able to help if the event you are complaining about occurred longer than 12 months ago.

Step 1 – Local resolution

Most problems are resolved by speaking to the person you are dealing with or their manager. If you are not able to resolve it this way, please tell us the details of your complaint. We will investigate the complaint quickly and thoroughly and give you a detailed response, this will:

- summarise the nature and substance of the complaint
- describe our investigation process and summarise its conclusions and findings; and,
- include any apology, remedy, outcome or explanation or planned action

If the complaint is about both health and social care, we will work with our health colleagues and the complainant to try to reach a resolution. To do this we will need the complainant's permission to share the details of their complaint.

Everyone who funds their own care, including those using a direct payment, have the right to refer any complaint to the Local Government and Social Care Ombudsman, once the residential home or domiciliary care agency has had an opportunity to investigate and resolve the complaint. Although any complaint can be referred to the Ombudsman at any time for their consideration

Local Government and Social Care Ombudsman

If the complainant is dissatisfied with the outcome of the recommendations of the Council's complaints process, it remains open to them to make a formal written complaint to the Ombudsman: <http://www.lgo.org.uk/>

The Local Government and Social Care Ombudsman (LGO) is independent, impartial and gives a service which is confidential and free of charge. The Ombudsman has the same powers as the High Court to require people to provide information or produce documents for investigation.

Any member of the public can complain to the Ombudsman if they feel there has been maladministration or injustice. However, the Ombudsman usually suggests that the complainant should first exhaust the local complaints procedure, as detailed above.

Remedies

In most cases if a complaint is upheld or partially upheld, an apology will be offered and information will be given to the complainant as to what action the service will take to ensure the same situation does not arise again, for the complainant or future service users.

The apology should be given by the manager on behalf of the service complained about, although this can also be sent from a senior officer within the Compliance and Complaints Team

If a case has been poorly handled causing an injustice to the individual, consideration will be given as to whether a financial remedy would be appropriate.

Appendix 2 – Local Government and Social Care Ombudsman case summary of decisions received during 2021/2022:

Closed after initial enquiries – April 2021– Assessment and Care Plan
The Ombudsman will not investigate Ms X's complaint. This is because the Parliamentary and Health Service Ombudsman is better placed to consider her complaint.
Upheld – May 2021 – Assessment and Care Plan
Mr B complained about the Council's decision on how much of the fees his service (the Service) charges it will allow as disability-related expenditure (DRE) for Ms C and Ms D's financial assessments.
Upheld – May 2021 – Discharging
The Ombudsman found a Trust failed to appropriately assess and record the needs of a young woman with entitlement to aftercare services under Section 117 of the Mental Health Act 1983 before discharging her into the community. The Trust will apologise to the complainant and pay a financial remedy in recognition of the impact of this fault on her. The Trust, Council and CCG will also review relevant policies and procedures to prevent similar problems occurring in future.
Upheld – May 2021 – Assessment and Care Plan
Mrs G complained about funding decisions affecting her late aunt, Mrs B's, residential care. We have not upheld the complaints about Basildon and Brentwood Clinical Commissioning Group or about Essex County Council's actions relating to free aftercare. We have upheld some of Mrs G's complaints about the way the Council provided information about Mrs B's care arrangements. The faults caused Mrs G avoidable time, trouble, and frustration. The Council accepted our recommendation of an apology and financial remedy for Mrs G. We have therefore completed our investigation.
Upheld – June 2021 – Direct Payments
Ms X complains the Council failed to meet her sister's needs after she went to live with her mother in November 2019, until she moved to another care home in August 2020. There is little evidence of fault by the Council. However, it needs to bring its policies on direct payments into line with the Care Act 2014 and the Care and Support Statutory Guidance.
Upheld – June 2021 – Assessment and Care Plan

We will not investigate Ms B's complaint about the actions of her sister's Ms C's social worker. This is because the Council has acknowledged its failings, apologised, and offered to reassess Ms C care needs. We are satisfied the injustice caused to Ms C by the actions of the Council has been remedied.

Upheld – July 2021 – Charging

We will not investigate Miss X's complaint about the Council's failure to confirm the amount she would have to contribute towards the cost of her care between September 2020 and January 2021. This is because the Council has agreed to write off the charges and this provides a suitable remedy for the complaint.

Not Upheld – July 2021 – Assessment and Care Plan

Mrs X complained about how the Council has supported her. We find the Council was not at fault.

Upheld – July 2021 – Assessment and Care Plan

We found fault with the way a Council and NHS Trust handled the discharge planning process for Mr Y after his admission to hospital in April 2019. The Council and Trust agreed to apologise to Mr Y's daughter and pay a financial sum in recognition of the distress this caused her. They will also review relevant policies and procedures to prevent similar problems occurring in future. We found no fault by another NHS Trust that cared for Mr Y during later hospital admissions in July 2019 and April 2020. Similarly, we found no fault by a GP Practice that provided care to Mr Y in the community.

Upheld – July 2021 – Charging

Mrs X complains the Council has failed to consider a discretionary property disregard for her mother's property after Mrs X's daughter turned 18 and has failed to progress a deferred payment agreement, leaving her mother paying for all her care and her daughter at risk of losing her home. The Council failed to give proper consideration to a discretionary property disregard but has now corrected that error. It is not at fault over the deferred payment agreement, as Mrs X has not accepted one for her mother.

Upheld – July 2021– Direct Payments

There was fault by the Council. It failed to deal with Miss B's request to increase direct payments for her daughter's care for over two years, despite her repeated contact to resolve this. This caused Miss B prolonged and significant distress as she became more fearful that her daughter's care would be terminated. The Council should

<p>apologise to Miss B and her daughter, make a payment to her, and review how it can prevent the fault recurring.</p>
<p>Closed after initial enquiries – July 2021 – Care Home – Covid-19</p>
<p>The Ombudsmen will not investigate a complaint about a care home's restrictions on visiting and sharing of information with relatives during the COVID-19 pandemic. This is because we are unlikely to find fault causing injustice with the actions of the care home.</p>
<p>Closed after initial enquiries – August 2021 – Charging</p>
<p>We will not investigate this complaint about the support provided by the Council to the complainant. This is because we could not add anything further to the previous investigation by the Council.</p>
<p>Upheld – September 2021 – Domiciliary Care</p>
<p>Miss X complains about the service provided to the late Mr Y by care workers arranged by the Health Service. Also, the way it handled her safeguarding concerns about this. Miss X and Mr Y were distressed, and Mr Y sustained an injury which caused significant pain. The Ombudsman finds fault by the Council. It has agreed to apologise, pay Miss X £350, and take action to prevent similar faults in future.</p>
<p>Closed after initial enquiries – September 2021 – Domiciliary Care</p>
<p>We will not investigate Mrs X's complaint about the Council changing her domiciliary care agency. We are unlikely to find evidence indicating fault</p>
<p>Upheld – September 2021 – Discharge to Access</p>
<p>Ms X complained the Council arranged an emergency placement for her mother, Mrs M, under the government's 'discharge to assess' guidance and then wrongly charged her for that placement. Ms X also complains the care home to which the Council discharged Mrs M was unsuitable to meet her needs. The Council was at fault when it charged Mrs M for her placement. It has now said it will waive that charge. This is appropriate to remedy the injustice it caused. There was no fault in the Council's actions when it discharged Mrs M to the care home.</p>
<p>Upheld – September 2021 - Charging</p>
<p>Mr X complained that the Council did not apply the full 12-week property disregard to Mrs Y's financial assessment and did not provide enough information. He also complained that it did not agree to arrange a council contract with the care home. He says this was stressful for the family and would like the Council to apply the disregard</p>

<p>in full and backdate a contract. The Council has now agreed to apply the disregard in full and this will remedy any injustice.</p>
<p>Upheld – October 2021 – Residential Care</p>
<p>Mr X and Mrs Z complained about the end-of-life care Mrs Y received in Alexandra House nursing home. They said this caused her to be thirsty, and in unnecessary pain. It also caused her distress, and the family depression and lack of sleep. We found the Care Provider was at fault. The Council has agreed to arrange an apology from the Care Provider and pay the family £400. Also, to provide us with evidence that the Care Provider has made the changes.</p>
<p>Not Upheld – October 2021– Assessment and Care Plan</p>
<p>Mr C complained to us that the Council should have concluded, much earlier than it did, that his mother needed permanent residential care. He says this resulted in his mother having to contribute more towards the cost of her residential care during most of 2020. We did not find fault with the Council's actions.</p>
<p>Upheld – October 2021– Disability Related Expenses</p>
<p>The Council was at fault when it failed to consider Mr X's requests on behalf of his sister, Ms S, for disability related expenditure. This caused Ms S an injustice because there is uncertainty over whether those requests should have been granted. The Council has agreed to reconsider these requests and provide Mr X with a decision on each one together with its reasons.</p>
<p>Upheld – October 2021 – Residential Care</p>
<p>Mrs X alleges neglect of her mother at a care home and also complains about the attitude of care home staff. There was fault with the recording of health matters involving Mrs X's mother by the care home. However, the identified failings did not cause Mrs X's mother an injustice that now warrants further pursuit of the complaint by the Ombudsman.</p>
<p>Closed after initial enquiries – October 2021 – Safeguarding</p>
<p>We will not investigate Mr B's late complaint about the way the Council considered his complaint about Mrs C's Care Provider. This is because there is not enough evidence of the Council's actions causing a significant injustice to either Mr B or Mrs C to warrant an Ombudsman investigation.</p>
<p>Upheld – November 2021 – Assessment and Care Plan</p>

<p>The Council failed to properly consider Ms Y's disability related expenditure. It acknowledges its failings and has agreed to complete a fresh financial assessment and backdate the expenditure to the date Ms X raised it with the Council.</p>
<p>Upheld – November 2021 - Charging</p>
<p>Mrs A complains the Council delaying arranging a payment plan for her mother's care fees. This caused her distress and uncertainty during a difficult period, and meant her mother accumulated a large debt. The Ombudsman finds fault with the Council for delaying arranging a payment plan, and for failing to carry out the actions agreed in the complaint response. This caused Mrs A further distress and delayed resolving the complaint.</p>
<p>Closed after initial enquiries – December 2021 - Charging</p>
<p>We will not investigate Mr X's complaint that the Council overcharged his mother for the cost of her care between October 2018 and February 2019. This is because the complaint is late.</p>
<p>Closed after initial enquiries – December 2021 - Charging</p>
<p>We will not investigate this complaint that the Council disregarded its duty under section 18 (4) of the Care Act 2014 to arrange care for the complainant's mother. That is because there is not enough evidence of fault in the Council's decision-making process to justify investigating.</p>
<p>Closed after initial enquiries – December 2021 – Care Home</p>
<p>We will not investigate this complaint about the alleged operation of a care home in the complainant's road and the impact it has on his amenity. This is because the complaint does not meet the tests in our Assessment Code on how we decide which complaints to investigate. The issues raised are not administrative functions of this Council.</p>
<p>Upheld – December 2021 – Assessment and Care Plan</p>
<p>Ms X complained about the way the Council assessed her mother's needs for homecare support. Ms X says this resulted in distress and a delay in her mother's discharge. We found fault with the way in which the Council responded when Ms X and the care home raised concerns about the proposed support at home. The Council has agreed to apologise for this.</p>
<p>Upheld – January 2022 – Domiciliary Care</p>

We find fault with an NHS Trust and Council regarding the discharge planning process for the late Mr Y when he left hospital. The NHS Trust also failed to ensure Mr Y continued to receive treatment for a fungal infection. The Council failed to assess Mr Y's care needs and its care provider failed to properly assess and meet Mr Y's needs. The Council failed to properly investigate the safeguarding concern raised when Mr Y was readmitted to hospital and did not notify Mr Y's daughter, Ms X, of the outcome. This meant Mr Y did not receive the care and support needed after his hospital discharge. The organisations have agreed to apologise to Ms X and make a symbolic payment to acknowledge the distress this caused her. The organisations have also agreed to take action to prevent a recurrence of the faults identified.

Upheld – January 2022 – Charging

the complainant, Ms X complained the Council failed to honour its commitment to fund her mother's care in a care home the Council arranged for the family. This led to the family incurring a large debt. The Council said it provided the family with full details of the charges, outlined them in its financial assessment and so it believes they knew they must pay the care charges. We found the Council acted with fault in not making this clear. However, the service user's financial assessment would always show she must pay a contribution to her care costs limiting the injustice. The Council agreed to apologise and pay £200 in recognition of the confusion and distress caused.

Closed after initial enquiries – January 2022 – Charging

Mr X says the Council charged his late father for palliative care even though he was told the Council would not charge for the care. Mr X also says his father was charged for periods when he returned home from hospital and should have received charge free care under the reablement programme. No further action is needed as the issue is not one the Ombudsman can deal with.

Upheld – February 2022 – Care Charges

Mr B complained the Council wrongly and repeatedly sent invoices to his mother, Mrs C, for care charges she did not owe, leading her to take her own life. We uphold the complaint, with the Council having acknowledged that it wrongly failed to identify Mrs C's case as one that should have benefitted from funding it received during the COVID-19 pandemic. While we cannot say the invoices led Mrs C to take her own life, we find they caused her unnecessary distress. Mr B was caused distress in turn. The Council

accepts these findings and at the end of this statement we set out the action it has agreed to take to remedy his injustice.

Upheld – March 2022 - Other

Mr X complained the Council failed to fix a specially adapted toilet in his home after a care worker broke it several months ago. He said this situation has caused him stress and inconvenience. there was fault in the Council's failure to source a plumber to visit Mr X's property within a timely manner. Mr X did not find the plumber suitable to carry out the work and so there is no significant injustice.

Upheld – March 2022 - Safeguarding

There was some fault in the way the Council investigated safeguarding concerns into Mrs C's care at the care home. The Council has agreed to apologise to Mr B.

This information is issued by:

Essex County Council

Contact us:

www.essex.gov.uk/complaints

www.essex.gov.uk

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