

Barnet Council

Adult Social Care

Annual Complaints Report

2021-2022

Contents

1. Introduction	3
2. Adult social care Statutory Complaints Procedure	3
3. Accessing the complaints procedure	3
4. Overview	4
5. Compliments	5
6. Complaints	7
7. Learning from complaints	14
8. Local Government Ombudsman (LGSCO)	16
9. Responding to complaints and concerns about quality relating to external service providers	17

1. Introduction

Barnet Council's adult social care service, part of the Communities, Adults and Health directorate, provides statutory social care services including individual care and support; safeguarding; information and advice; preventative services; assessments under the Mental Health Act (MHA 1983, amended 2007) and the Mental Capacity Act (MCA 2005). Social Care Direct acts as the front door for adult social care enquiries.

Comments, complaints and compliments are welcomed by the Service and are seen as a tool to help improve and develop services and practice. They provide the opportunity to learn from mistakes and to put things right for an individual when they have gone wrong.

Barnet Council is required, under statutory regulations, to report annually to the relevant Council Committee on adult social care complaints.

This report provides information about complaints for Barnet's Adult Social Care Service for the period 1 April 2021 to 31 March 2022. The report considers complaints dealt with through both the Statutory Adult Social Care and Corporate Complaints Procedures where these relate to Adult Social Care.

2. Adult Social Care Statutory Complaints Procedure

The 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 Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009. Any complaint which does not fall under these requirements is considered under the Council's Corporate Complaints Procedure.

All complainants who have exhausted the Council's statutory and local complaints procedure retain the right to approach the Local Government and Social Care Ombudsman (LGSCO). The LGSCO is impartial and independent and acts as the final stage for complaints about the Council, Social Care Providers, Care Homes and Home Care Agencies.

3. Accessing the complaints procedure

The service continually seeks to encourage people who use 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 make residents, people who draw on social care support, their family, carers and relevant organisations aware of the procedures during their interactions with them, as appropriate.
- Managers are asked to feature compliments, comments 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 by Adult Social Care from individuals, carers and/or their representatives:

- 128 compliments
- 72 statutory complaints
- 1 corporate complaint
- 17 Local Government Ombudsman enquiries

Of the 72 statutory complaints, 62 resulted in an outcome, 10 were withdrawn. Of the 62:

- 43 were not upheld
- 8 were upheld
- 11 were partially upheld

The main themes of the complaints were:

- Quality - relates to the quality of service from care homes, home care agencies or care assessments.
- Decision – disagreement with the outcome of a care needs 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.
- Conduct – behaviour, communication or conduct of staff employed by care providers or by the council.

Common improvement themes were:

- Staff – formal reflection and training.
- Systems - Updates /amendments to systems, staff training on systems or applications.
- Procedures – updates and amendments to procedures, or reiteration of procedures to staff.

5. Compliments

Compliments are just as useful as complaints in helping to improve service. By having people tell the Council when things are done well, the Council can make sure that it continues to recognise and build on its strengths. It is also important to recognise the excellent work that is being delivered.

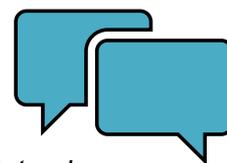
128 compliments were received in 2021/22. The table below provides an overview of compliments by service area:

Service Area	2019-20	2020-21	2021-22
Localities (Older People & Physical Disabilities)	42	43	29
Integrated Care Learning Disabilities	7	6	12
Integrated Care Quality	7	19	5
Assessment & Prevention	37	66	40
Hospitals & Health	14	9	19
Mental Health	82	68	23
Other Teams	10	13	0
	199	224	128

Many individuals who compliment staff and teams provide verbal feedback directly to individuals via face to face conversations or by phone; we do not reflect these in our annual figures.

The compliments received in the period were varied and ranged from individual messages of gratitude to specific members of staff and thank you cards to whole teams for their work.

The mental health service has in previous years included compliments received by the Network, the council's mental health enablement service. This service provides therapeutic group programmes and individual direct work for people experiencing mental health issues. The service has been unable to include all compliments for 2021/22 that were received from these group and individual meetings but will endeavour to recapture them throughout 2022/23.



Examples of compliments received in 2021-2022

“ I cannot praise xxx enough she is a wonderful OT and a wonderful human being. Not only did she help my son, but also me when I felt lost. She arrived on the scene like an angel, she is not only professional but she cares about her clients.” Compliment regarding a member of Assessment and Prevention Team.

“Thank you so very, very much for putting your heart and soul into my care and case. You really showed me how you cared not only about me but also about my daughter, which means so much to me.” Compliment regarding a member of the Localities Team.

“ I just want to say how grateful I am for your help and advice in supporting myself and my Mum whilst her ability to care for herself declines. You are so professional, thank you for listening to me. Thank you, Thank you” Compliment regarding a member of the Urgent Response Team.

“ I cannot express our thanks and appreciation to you enough. Your understanding of our situation has been incredibly compassionate and our gratitude to you is immense.” Compliment regarding a member of the Care Quality Team.

“xxx got involved and gave him hope, now he is a changed person. To feel like I wasn't fighting the battle alone anymore when xxx intervened, it was the best feeling for me too. Without being dramatic she saved his life; I can't praise her enough.” Compliment regarding a member of the Mental Health Team.

“xxx has a remarkable skill at explaining things to yyy and ensuring that yyy understands. xxx never talks over yyy, this is refreshing & commendable. She listens, has compassion and kindness. The strength of xxx's commitment is evident.” Compliment regarding a member of the Learning Disabilities Team.

“xxx was most helpful, informative and supportive. We are very impressed with the range of aftercare, it's quality and the promptness. The professional courtesy, promptness, intelligent kindness and friendliness of your staff and their 'know how' has been exemplary.” Compliment regarding a member of the Hospitals & Health Team.

“You gave me more than one thing, options, what was best for me, you listened, I felt listened to.” Compliment for a member of the Network Team.

Benchmarking data

The following benchmarking data compares the number of compliments received in 2021-22 against a selection of our nearest statistical neighbours:

Borough ¹	Compliments received	Per 100k population: ²
Barnet	128	42.1
Brent	16	6.4
Bromley	27	10.5

¹ Based on members of the group of nearest statistical neighbours identified by CIPFA (where data was available at the time of report)

² Population data based on the 18+ population according to ONS mid-year estimates for 2020

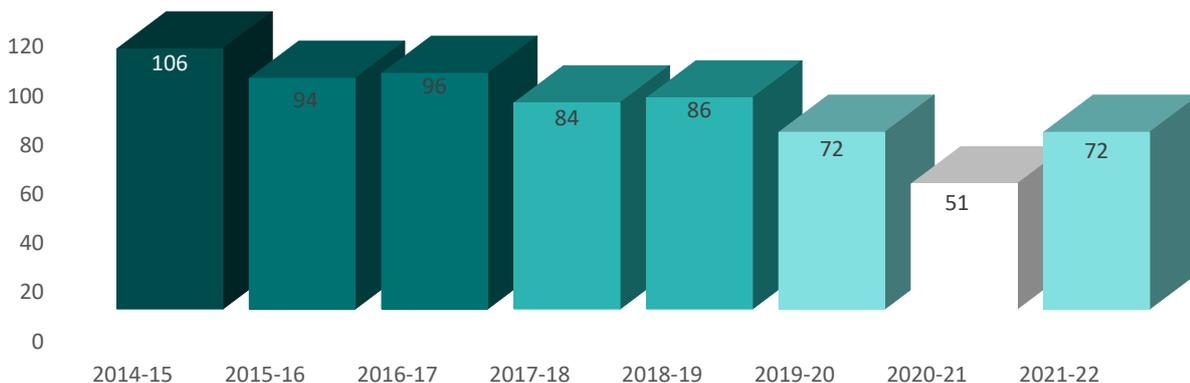
6. Complaints

6.1 Overview of performance

The number of statutory complaints for ASC returned to pre pandemic levels in 2021-22, whilst the number of corporate complaints has remained consistent. This is illustrated in the below chart (Chart 1), which provides an overview of statutory complaint figures from April 2014 to the end of March 2022.

From 1 April 2021 to 31 March 2022, Adult Social Care received a total of 73 complaints, of which 72 were statutory and one was managed through the corporate complaints procedure.

Chart 1



To give our complaint figures context, there were 5,835 new requests for services in 2021/22 – 2,154 resulting from a Hospital discharge. 5,335 people received a long- term service (4,050 receiving a community service & 1,285 receiving residential/nursing services).

The complaint numbers equate to less than 1% of ASC service users, or someone acting on their behalf, raising a complaint in 2021-22. This percentage reduces further if we take into consideration all contacts into the service.

It should also be noted that the service received nine complaints which were resolved within 24 hours to the resident/person's satisfaction. In line with the statutory procedure guidelines, these are not formally recorded.

6.2 Complaints received by category

72 statutory complaints were managed in line with the Statutory Social Care Complaints Procedure. One complaint was dealt with under the council's corporate complaints procedure. This was a financial complaint received from a company.

Of the 72 statutory Complaints received:

- 57 were considered as straightforward complaints
- 15 were considered as serious and/or complex complaints
- 10 were withdrawn after being received

A comparison to historic years data is provided for comparison in chart 2

Chart 2

Category	2019 - 2020	%	2020-2021	%	2021-2022	%
Statutory Straightforward (Low/Moderate risk)	50	69%	36	67%	47	65%
Statutory Serious and/or Complex (High risk)	12	17%	3	6%	15	21%
Withdrawn	9	13%	12	22%	10	13%
Corporate	1	1%	3	6%	1	1%
Total complaints	72	100%	54	100%	73	100%

6.3 Statutory Complaint outcomes

Of the 62 complaints with an outcome:

- 43 were not upheld
- 11 were partially upheld
- 8 were upheld

6.4 Statutory Complaints by Service Area

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

Service Area	2020-21	2021-22	No of complaints DOT	No. of cases upheld (2020-21)	No. of cases upheld (2021-22)	No. of cases partially upheld (2020-21)	No. of cases partially upheld (2021-22)
Localities (Older People & Physical Disabilities)	5	16	▲	1 (20%)	0 (0%)	0 (0%)	4 (25%)
Assessment & Prevention	5	5	-	0 (0%)	2 (40%)	0 (0%)	0 (0%)
Integrated Learning Disabilities	4	11	▲	0 (0%)	0 (0%)	1 (25%)	1 (9%)
Mental Health	4	10	▲	0 (0%)	0 (0%)	1 (25%)	1 (10%)
Customer Financial Affairs	4	8	▲	0 (0%)	2 (25%)	0 (0%)	1 (13%)
Integrated Care Quality	12	4	▼	0 (0%)	2 (50%)	2 (15%)	0 (0%)
Hospitals & Health Partnerships	5	7	▲	0 (0%)	1 (14%)	2 (40%)	4 (57%)
Performance and Systems	0	1	▲	na	0 (0%)	na	0 (0%)

Complaints by Service Area

Although the number of complaints received in 2021-22 increased for the majority of services, they are broadly in line with pre-pandemic averages. There are two exceptions to this, a reduction in the number of complaints into the Integrated Care Quality Service and the increase in complaints to Mental Health teams.

The Integrated Care Quality Service witnessed a significant reduction in complaints and the lowest it has been for over five years. The two Care Quality upheld complaints concerned the quality of service received from domiciliary care providers. As these relate to the service provided by an external organisation, these were passed to providers for initial investigation. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, the Council may take further action.

Complaints requiring an investigation by the Mental Health service continue to rise, however, the majority of complaints were unsubstantiated and the service has one of the lowest upheld rates.

Complaints into the Learning Disabilities service remain lower than pre pandemic levels, and the outcomes of investigations mirror what is happening in Mental health. The service received the second highest number of complaints but had the lowest upheld rate (one out of the eleven investigations).

The Coronavirus pandemic has necessitated a significant change in how the Council operates its hospital discharge service. In mid-2020, a new national hospital discharge policy came into effect. Under this policy, most frequently referred to as 'Discharge to Assess,' patients who no longer require an acute hospital bed but may still require care services, are provided with an interim assessment and short term support to be discharged to their own home where appropriate, or to the first available community setting. This national policy change and the changes to national funding for post-hospital care were the predominant cause of complaints to the Hospitals and Health Team, with individuals expressing dissatisfaction with the discharge process.

The Localities Team has seen an increase in the number of complex complaints, many of which involved complex family situations and or multi-agency input. The service sought legal advice in all cases to aid a resolution and in a small number of cases employed an independent investigator to ensure that appropriate and proportionate action was taken in response to concerns raised.

The number of complaints into the Assessment and Prevention Team continue to remain low. Of the five complaints received, two cases were upheld, both relating to staff conduct.

Complaint figures for Customer Financial Affairs returned to pre pandemic levels. Of the eight complaints received, three cases were substantiated. Two of these cases related to funding/invoicing issues and the third to a deferred payment agreement.

6.5 Complaints by category

The table below identifies complaints by subject and the investigation outcome

	Category	Upheld	Partially upheld	Not upheld
Decision (8)	Care Assessment - Assessment disagreement (including unhappy with decision)	1	1	3
	Care Home - Assessment disagreement (including unhappy with decision)	0	0	1
	Care Agency- Assessment disagreement (including unhappy with decision)	0	0	0
	Finance - Assessment disagreement (including unhappy with decision)	1	0	1
	Total	2	1	5
Conduct (10)	Staff Conduct - Conduct of council employed staff (attitude/behaviour)	2	2	5
	Care Agency - Conduct of staff (attitude/behaviour)	0	0	0
	Care Home - Conduct of staff (attitude/behaviour)	0	0	1
	Total	2	2	6
Quality (19)	Care Agency - Quality of service	1	0	3
	Care Assessment - Quality of service	0	1	2
	Care Home - Quality of service	0	0	2
	Care Assessment (process)	0	0	3
	Finance - Quality of service	1	1	1
	Hospitals – Discharge Process	1	3	1
	Total	3	5	12
Timeliness & Delays (5)	Care Assessment - Assessment delay (including delay in making a decision)	0	1	2
	Financial assessment/charging – Timeliness	1	0	1
	Total	1	1	3
Communication (4)	Care Assessment - Lack of communication	0	0	3
	Finance - Lack of communication	0	0	1
	Care Home - Lack of communication	0	0	0
	Care Agency – Lack of Communication	0	0	0
	Total	0	0	4
Other (15)	Total	0	2	13

Decision

Eight complaints were received due to dissatisfaction with a decision reached by the Council or a care provider. Three were either upheld or partially upheld.

Two related to the outcome of a care assessment and one in relation to a financial/charging decision.

The five complaints that were not upheld, related to a statutory duty concerning either; financial charging, national care legislation, regulations or policy, where the council cannot influence the outcome. Where complainants are unhappy with the outcome of an assessment, the council can offer a reassessment or take into consideration changes of circumstance where relevant.

Conduct

Training, formal reflection and staff reminders are used to address complaints concerning the behaviour or conduct of staff.

Quality

The largest number of complaints received were due to dissatisfaction in regard to the quality of services provided directly from Barnet or its providers. Two complaints regarding Barnet's services were upheld and five were partially upheld. These were addressed through further training and a series of learning events, the implementation of additional auditing and procedural amendments. The upheld case concerning care agency services was addressed through contract management procedures, with lessons learned fed into the work of the Integrated Care Quality team to shape the work it does with providers, thus improving the quality of provision across the social care market.

Delays & Timeliness

This category relates to the time taken to conduct an assessment or provide a service. Waiting times for care assessments and financial reviews are the main cause of complaints relating to timeliness. Adult Social Care always seeks to avoid delays in assessing or reviewing clients and targets resources to ensure the most urgent cases and people with the highest levels of need are prioritised. However, any delay may understandably still be dissatisfying for members of the public whose assessments have not been prioritised.

Communication

Four complaints relating to communication were received in 2021-22.

6.6 Timeliness of responses to statutory complaints within the internal 20 working day target

It is important to note that the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 Statutory Complaints guidance allows six months (commencing on the day on which the complaint was received) for the resolution of Social Care statutory complaints.

Adult Social Care are committed to help resolve as many complaints as speedily and efficiently as possible.

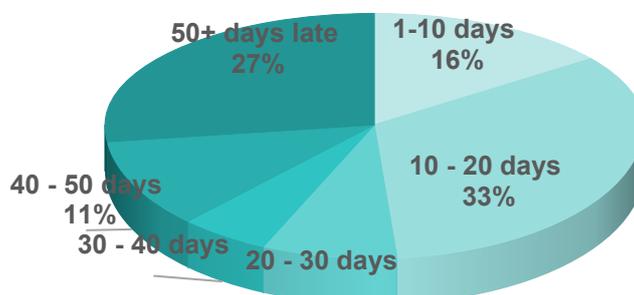
Our internal procedure is to maintain an internal target of 20 working days for straightforward complaints and 25 working days for more complex or serious complaints (or within an extended period of up to 65 working days) throughout the pandemic period. However, all complainants were advised in their acknowledgement that due to the pandemic (COVID-19) the council's response to their complaint may be delayed due to urgent operational matters taking priority.

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.

In 2021/22, all cases were closed within the statutory six month period. 40 percent of cases

were closed within the internal deadline. There has been an overall deterioration in performance when compared to 2020/21, when 54 percent were responded to within the internal deadline..

The following chart provides a breakdown of the 37 cases that were responded to beyond the internal deadline and the number of additional days the service required to fully resolve the concerns raised.



The complaints process is intended to be resolution focused and offer complainants the option of discussing their concerns in face-to-face meetings, family meetings and mediation where appropriate.

When a complaint was likely to exceed our initial target response date, we endeavoured to keep complainants informed of the case progress.

The cases in the 50+ days range involved multifaceted investigations where the depth of the investigation and the time needed to investigate were proportionate to the seriousness of the complaint; examples include where legal advice on a case was required, changes in circumstances/ongoing developments, waiting for the outcome of CAFT, safeguarding & CQC investigations.

Another factor which contributes to delays is the need to co-ordinate responses with the NHS, which means that the Council may be obliged to work to the statutory Social Care and National Health Service six-month timeframe.

Complaints about providers being received through the complaints process, must be either signposted to the provider's internal complaints process or managed through our internal procedures on behalf of the complainant. We do ask partner organisations to work within our timeframes, however this is a request and is not enforceable.

Adult Social Care Statutory Complaints – Benchmarking

The following benchmarking data has been collected to compare the number of statutory complaints received against figures for a selection of our nearest statistical neighbours identified by CIPFA.

Borough ³	Statutory complaints received in 2021-22	Per 100k population ⁴
Barnet	72	23.7

³ Based on members of the group of nearest statistical neighbours identified by CIPFA (where data was available at the time of report)

⁴ Population data based on the 18+ population according to ONS mid-year estimates for 2020.

Brent	74	29.6
Bromley	54	21.0

7. Learning from Complaints

Learning from our complaints provides an opportunity to gain a deeper understanding of what is not working so well and ensures opportunities for improvement are realised and that future instances can be prevented, where possible.

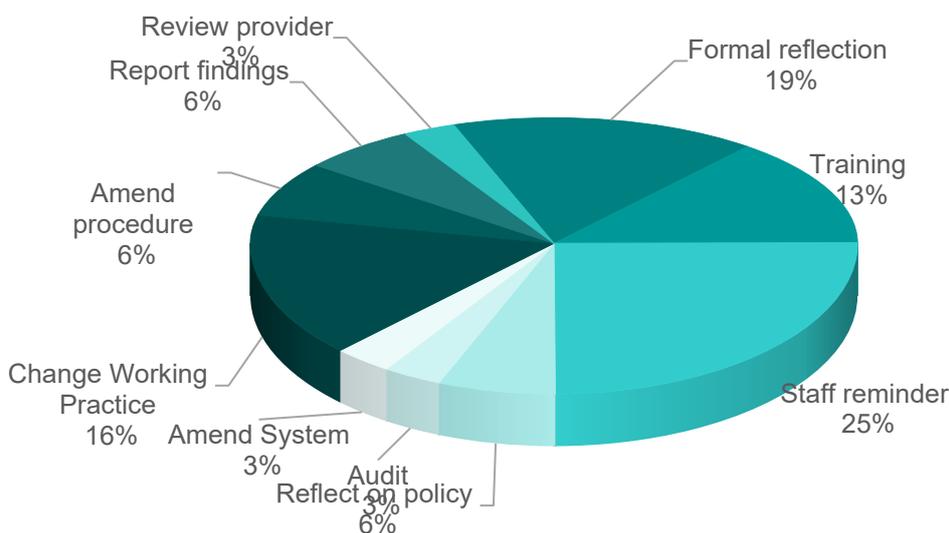
In some cases, outcomes to complaints are case specific and there are no general learning points that would influence policy or procedure. Individual issues and staff/team specific learning is addressed through training, reflection, supervision and team meetings.

The table below categorises the learning themes and the number of lessons learnt that fell into each category. The table identifies the types of actions the Council and our providers and partners have taken to try and mitigate any further complaints of a similar nature.

Theme	No of lessons identified	Action
People Issues relating to the behaviour or conduct of a member of staff	18	<ul style="list-style-type: none"> Formal reflection Training Staff reminder
Policy Review or amendment of a formal policy to reflect the need for change	3	<ul style="list-style-type: none"> Reflect Audit Amend policy
Systems Preventative updates /amendments to system/s, staff training on systems or applications	4	<ul style="list-style-type: none"> Amend system Change working practice
Procedure Changes to current procedures and working practice as a preventative measure	4	<ul style="list-style-type: none"> Change working practice Amend procedure Cultural change
Provider Work with a provider to review working practices, procedures, policies and contract compliance	3	<ul style="list-style-type: none"> Report findings to provider Review contract Suspend provider

The chart below (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.

Chart 3



Examples of some of the learning from our complaint investigations:

Lesson Identified	Outcome
The importance of social care staff working on hospital discharges to have an accurate understanding of recently changed care funding arrangements and how to communicate this effectively.	A series of learning workshops delivered to all staff, learning points raised with relevant managers, audit process implemented to check on progress regularly.
Importance of listening and taking into consideration service resident preferences.	Brokerage officers were reminded of the importance of giving our residents as much choice and control over how their care needs are met by homecare providers.
Ensuring that historic information is checked and revalidated.	A formal process has been developed on the council’s adult social care database to prevent a reoccurrence of this nature.

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.

8.1 Complaints and enquiries dealt with by the LGSCO 2021-2022

A complainant has the right to raise a complaint with the Local Government Ombudsman at any time. However, the Ombudsman will usually refer back a complaint to the council if it has not previously been considered under the council’s procedures. Such complaints are described as premature.

The table below (Table 1) presents the total number of new LGSCO enquiries received by Adult Social Care, for the period 1 April 2021 to 31 March 2022.

To allow authorities to respond to the Covid-19 pandemic, the LGSCO did not accept new complaints and stopped investigating existing cases between March and June 2020. This reduced the number of complaints received and decided in that year. This needs to be considered when comparing data across the years..

	2018-2019	2019-2020	2020-2021	2021-2022
Enquiries	20	19	12	17

Of the 17 enquiries sent to the LGSCO in 2021/22:

- 7 cases were premature and referred back for a local resolution
- 4 cases were upheld - evidence of fault was found or we accepted fault early on
- 3 cases were invalid or incomplete
- 2 cases were closed by the ombudsman after initial enquiries
- 1 case was withdrawn by the complainant

In 100% of cases the Ombudsman were satisfied that Adult Social Care had successfully implemented their recommendations about what we needed to do to put things right.

8.2 LGSCO Benchmarking

Borough	Upheld social care complaints 2021-22	Per 100k population:
Barnet	4	1.31
Brent	4	1.60
Bexley	2	1.04
Bromley	7	2.72
Hillingdon	9	3.84

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

The Council is responsible for ensuring its contracted providers meet the exacting 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 new 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 complaints procedure. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, the Council may take further action, through the complaints process if this is the most appropriate route.

The Council 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 Council 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.

Monitoring Care Quality – quality alerts

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

- Quality Assurance visits, which include a review of complaints management by the provider.
- 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.
- Quality alerts, which are written / telephone / electronic communications alerting us to an issue or shortcoming in the delivery of a service by a care provider.

The table below provides a breakdown of quality alerts that were passed to providers to investigate:

	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
Quality alerts	94	85	73	117	92

The increase in the number of quality alerts in 20/21 and 21/22 relate to the impact of the pandemic. For example, the Council has seen a significant increase in the number of people receiving homecare services, so proportionately the increases in quality alerts are not as large as would appear. However, the care market continued to experience an incredibly challenging period during the pandemic, which is likely to have led to an increase in quality alerts received.