



**Harrow Council**

**Adult Social Care Complaints and  
Feedback**

**Annual Report**

**1 April 2022- 31 March 2023**

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## **1. Executive Summary**

This report provides an overview of the Council's performance on Adult Social Care complaints and feedback activity between the period 1 April 2022 to 31 March 2023.

The report provides analysis and comment on all complaints managed under the Adult Social Care statutory complaint procedure.

The number of stage 1 complaints increased significantly from 6 complaints recorded in 2021-22 to 116 complaints in 2022/23. The increase in recorded complaints was mainly due to the refreshed complaints handling procedures.

All complaints are logged by the complaints team and investigated in line with the statutory complaint framework, where the issues cannot be resolved quickly and require formal investigation.

66% of stage 1 complaints were responded on time in 2022/23, which shows an improvement on the previous year (50%).

Adult social care workers and Managers received refresher awareness sessions for effective complaints handling and responding to customer feedback.

During 2022/23, regular reports detailing the analysis of complaints and representations have been shared with senior management, with a focus on improving response timescales and implementing learning outcomes from complaints.

## **2. Outcome of Key Targets from 2021-22**

The complaint response rates have improved from 50% in 2021/22 to 66% in 2022-23.

A review of the internal process for managing complaints and representations was completed, to ensure an effective and robust complaints management system is in place to support service users and our service teams.

The complaints team continued to provide refresher sessions to teams for dealing with complaints and feedback, highlighting the importance of identifying and sharing the learning from complaints.

The option to use alternative methods of complaint resolution and problem solving as appropriate, remained open with staff encouraged to resolve issues quickly where possible and not complex by their nature.

## **3. Background context**

The Complaints and Information Team are managed within the remit of the Strategy and Commissioning service in People Services. The team comprises a Complaints

Manager, which is a statutory requirement and a Complaints Officer and a Data Protection/Freedom of Information Officer.

The majority of queries regarding adult social care services will be resolved quickly where possible. The complaints process is a mechanism to consider and investigate problems and resolve issues if things go wrong or are below expectation.

The Council's Adult Social Care Statutory Complaints procedure is a two-stage process for handling social care complaints. The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 provide the legal framework, and the procedure is designed to allow Local Authorities to have flexibility to resolve complaints in the most appropriate manner.

Any adult in need of or receiving a service from Harrow Adult Social Care services is entitled to use the complaints process. Complaints are also accepted from a family member or representative acting on the individual's behalf with their consent. The must be legally able to represent the individual.

Complaints must be acknowledged within 3 working days. A stage one complaint is investigated by the relevant service with a response timeframe of 20 working days. This timeframe may be extended if the issues are complex, require more time or involve other agencies and the complainant will be kept informed of the progress.

If a complainant remains dissatisfied with the response or outcome at stage one, their complaint can be escalated to stage two review stage, which is the final stage of the complaint procedure. The complaint will be reviewed and responded by a senior manager, usually the Head of Service within a timeframe of 20 working days.

Following the completion of the complaint, the complainant can seek further advice from the Local Government & Social Care Ombudsman if they remain dissatisfied with the outcome.

The annual adult social care complaints report is a statutory requirement and is a public document.

#### **4. Summary of Activity**

Between 1 April 2022 and 31 March 2023:

- The complaints service recorded a total of 510 representations
- The service recorded 116 stage 1 complaints
- Sixteen complaints progressed to stage 2 review
- The Ombudsman made decisions on four complaints
- Additionally, 196 Member and MP enquiries were recorded
- The service recorded 64 compliments
- 106 queries were received and addressed outside the complaint process

Table 1 provides the quarterly breakdown of complaints and representations received during 2022/23. This totals 510 representations for 2022/23. There was a

total of 116 stage 1 complaints, 16 stage 2 complaints, 12 Ombudsman complaints, 106 queries, 80 MP enquiries, 116 Member enquiries and 64 compliments during this reporting year.

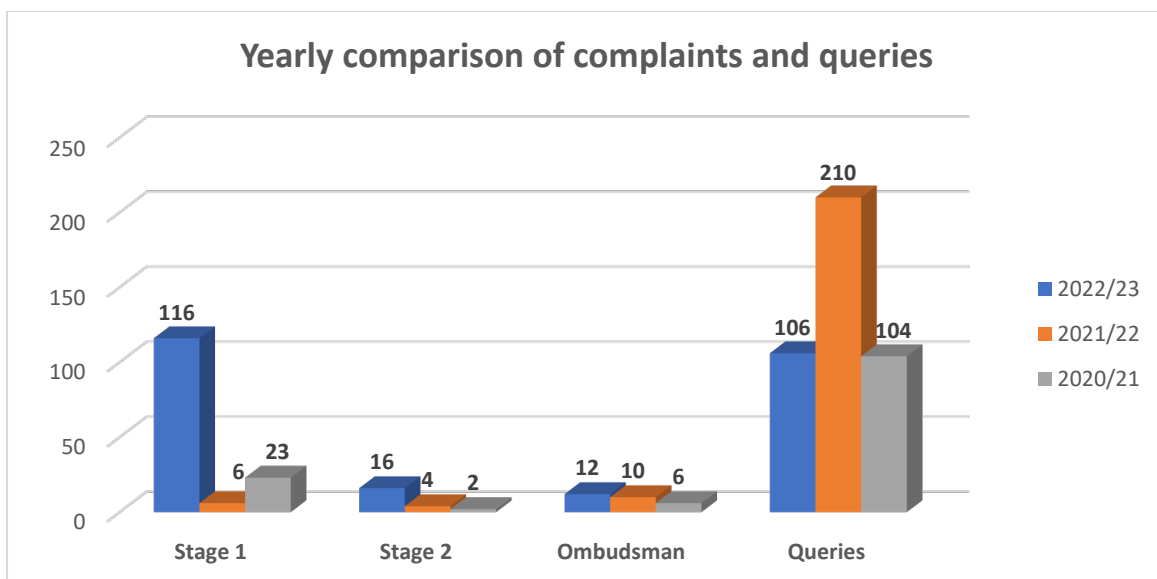
Table 1

Representation	Q1	Q2	Q3	Q4
Stage 1	24	26	23	43
Stage 2	2	2	0	12
Ombudsman	2	4	3	3
Queries	39	40	9	18
MP	21	20	24	15
Member	23	40	22	31
Compliments	9	12	15	28

The total representations received for Adult Social Care has increased year on year, as illustrated in Chart 1 below.

There was an increase of 23% of total representations in 2022/23, with 510 total representations received, compared to 414 total representations received in 2021/22.

Chart 1



As context, during 2022/23, Adults Social Care Services:

- Received 9,599 requests for social care support from potential service users.
- Provided information and advice (including referrals to other organisations that could assist) to 1,035 clients.

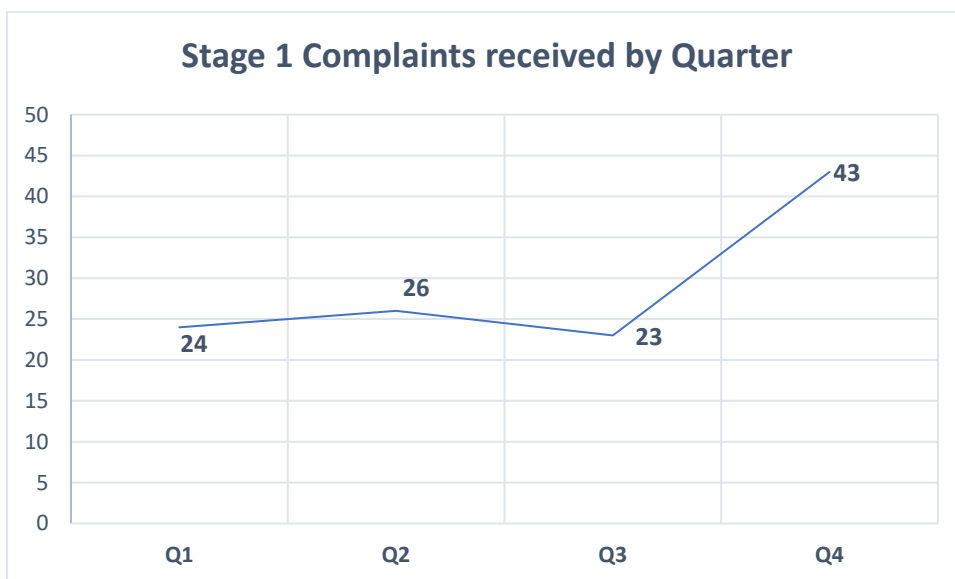
- Ensured a total of 810 clients received home based short term Reablement services.
- An additional 1,698 clients received other forms of short-term support in response to their request, this included support like mental health counselling.
- A total of 4,220 clients received some form of long-term support, which includes personal budgets, direct payments, residential and nursing care during the year. 2,820 of those clients were actively in receipt of such services on 31st March 2023.
- Assisted 451 carers during the year. This included 165 instances of information and advice, 171 direct payments to the carer and 104 temporary support packages delivered to the cared-for person (e.g. to give the carer a break from their caring responsibilities).

During 2022/23, the number of clients that received long term services was 4,220; whilst 810 clients received a short term reablement service and 1,698 clients received other forms of short-term support (such as counselling) with an additional 267 being newly supported through equipment and adaptations. Please note that some people may have been in receipt of two or more services during the year (for example - a person received reablement which ended and then they received long term services).

#### 4.1. Stage 1 complaints

Adult Social Care services recorded 116 stage 1 complaints in 2022/23, which is low given the context of the numbers detailed above for people requesting or receiving adult social care services. As detailed in Chart 2, the January – March 2023 period (Quarter 4) saw a significant spike in complaints by 87%, as a result of the updated process for logging and handling of complaints and representations.

Chart 2



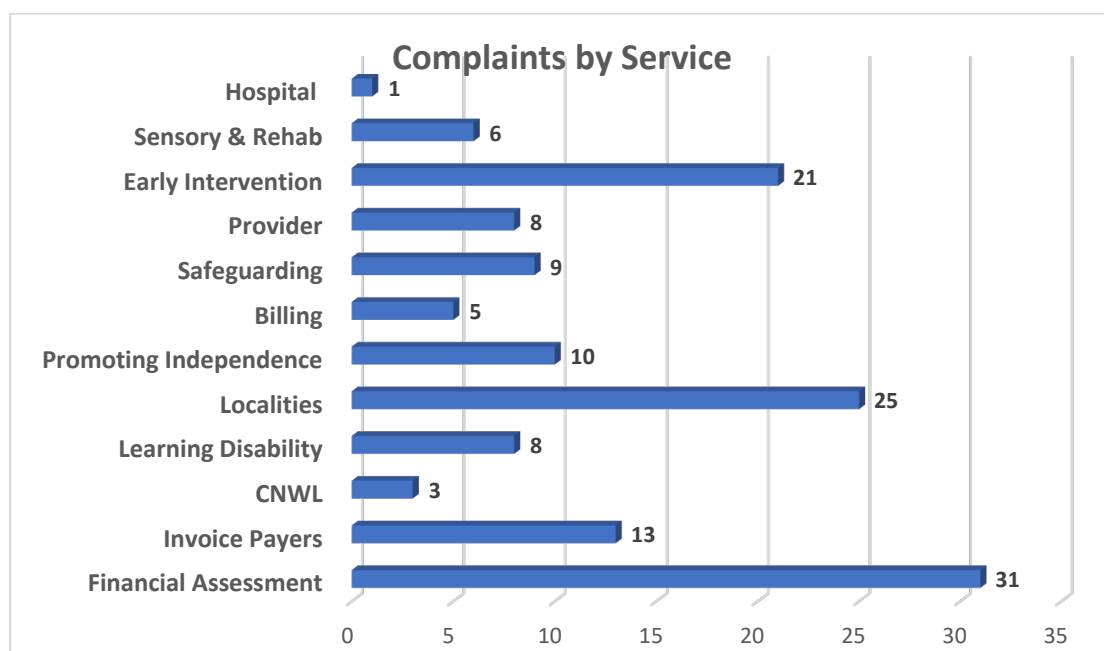
Adult social care staff will usually trouble shoot most issues directly, in order to resolve them outside the complaint process where possible. Staff signpost or refer

complaint issues to the complaints team when they cannot be resolved informally or when a person wants their complaint formally investigated.

#### 4.2. Complaints by service

As illustrated in Chart 3, the highest volume of complaints was received by the Financial Assessment and Monitoring team, Localities and Early Intervention teams. These service teams generally receive the most feedback due to the nature of their work in relation to care charges and paying for care, assessments and/or assessment decisions and concerning care provision or availability of service.

Chart 3



#### 4.3. Complaint Themes

Complaints can involve more than one issue across service teams. As detailed in Table 2, the most common reason for raising a complaint involved care charges (29%).

Complaints that involve care charges include disputes about the client contribution, concerns regarding the financial assessments and related decisions, invoices and the debt recovery process. These complaints are often the most contentious and difficult to resolve to the satisfaction of the complainant.

Adult social care support is means tested, as required under the Care Act 2014, and a significant number of people receiving care support will be making a client contribution towards their care costs.

Some of the complaints received during 2022/23, challenged the outcome of financial assessments, which are calculated in line with Harrow's Charging policy under the Care Act 2014. Other complaints queried the quality of financial advice and information received, delays in receiving the relevant financial paperwork, queries regarding the care costs and related fees, the invoicing and payment reminder letters.

The quality of care by commissioned providers made up 12% of the total complaint issues, which were in relation to care delivery under home based care. Complaints about quality of care arose in relation to care charge disputes.

The Council commissioned care providers are firstly given the opportunity to investigate a complaint in line with their own complaint procedure, which can be further reviewed by the Harrow complaints team, as necessary.

The provider complaints are also shared with the Brokerage teams as well as the Quality Assurance team for provider monitoring purposes.

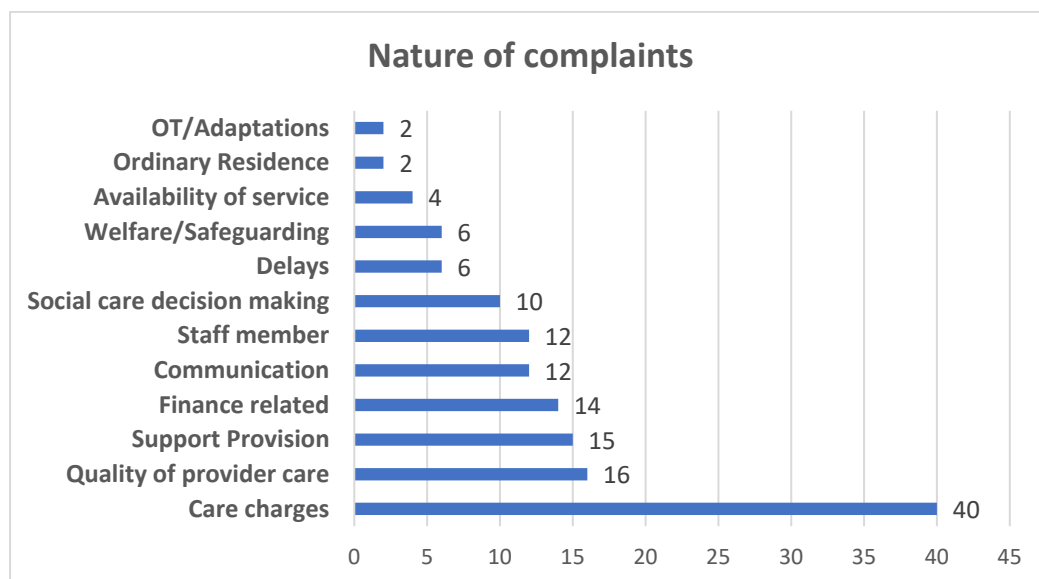
Table 2

<b>Complaint Themes</b>	<b>Number</b>
Care charges	40
Quality of provider care	16
Communication	12
Delays	6
Support provision	15
Availability of service	4
Staff member	12
Welfare/safeguarding	6
Social care decision making	10
Finance related*	14
Ordinary Residence	2
OT/Adaptations	2
<b>Total</b>	<b>139</b>

\*complaints regarding alleged fraud, personal budget payments, banking issues, funding additional care, delayed payments.



Chart 4



The quantity and themes of complaints are regularly shared with Adult Social Care Managers, to ensure wider awareness of the issues is disseminated to all teams.

### Examples of complaints received:

#### Communication

*It is frustrating that you are not able to keep the communication open with me and you leave me very little choice but to escalate each time. I really don't understand what is holding up the decision to simply increase her care hours.*

#### Finance Related

*Harrow social services are refusing to release my late mother's money as they got a court protection order in 2018 without my knowledge, they also closed my mother's account now my mother has passed away, they are still refusing to release my mother's money*

#### Decision making

*My primary issue is that Harrow council care team has failed in its duty to communicate the case being closed to us on a timely basis and also to explain the reasons for closing the case. We are now being asked to re-start the whole process, which could take weeks or months of time and may not arrive at a satisfactory outcome for my elderly Mother.*

#### Delay

*I would like an explanation as to why it took your team over a month to contact me despite the fact that I had initially raised this as urgent, fully explained the extent of my husband's condition and frail state not to mention my inability to assist him, I not only find this really frustrating but extremely concerning.*

## Lack of support

*I am writing to express my deep disappointment in the service provided by with Harrow Adults Social Care and feel extremely let down due to the lack of support and communication when I applied for financial assistance during a difficult time with my father's care needs.*

## Care charges

*At no stage ever was anyone in the family informed that there would be charges, or even quoted what the fees would be. None of us agreed to these charges and never signed any agreements or contracts in this regard. These fees were dumped onto us without any consultation.*

## Quality of care

*I don't think they care - it's just a moneymaking scheme - the hours they must have charged does not reflect the hours they bothered to attend.*

### **4.4. Complaint Response Times**

Under the statutory complaint regulations, a complaint should be completed in its entirety within six months. The Council operates a two-stage adult social care complaint process, with 20 working days as the timeframe for response at both stages.

The regulations allow scope for flexibility in handling a complaint and allowing joint working between agencies where response timescales may be agreed as necessary. The complainant is kept updated regarding the progress of their complaint in such instances, and where the investigation requires more time.

Response times are closely monitored by the complaints team and there is an ongoing focus on improving response times. Most complainants prefer their complaint to be carefully considered and investigated, over a rushed response that is primarily focused on meeting a response deadline and if they are kept informed of the progress, the timeframe is not a huge concern. It should be noted that staffing pressures across adult social care services during 2022-23 did impact service delivery, which included complaint responses.

There were 82 complaints completed during 2022/23, and the complaint outcomes are detailed in Table 3.

It is noted that 66% of completed complaints were responded on time and 34% of complaints were completed out of time. Late responses were mainly as a result of investigating complex complaints which required more time, work caseloads and staffing (resource pressures and/or leave)

Table 3 Complaint Response completion

Responses On Time	54
Responses Out of Time	28
<b>Total</b>	<b>82</b>

Chart 5

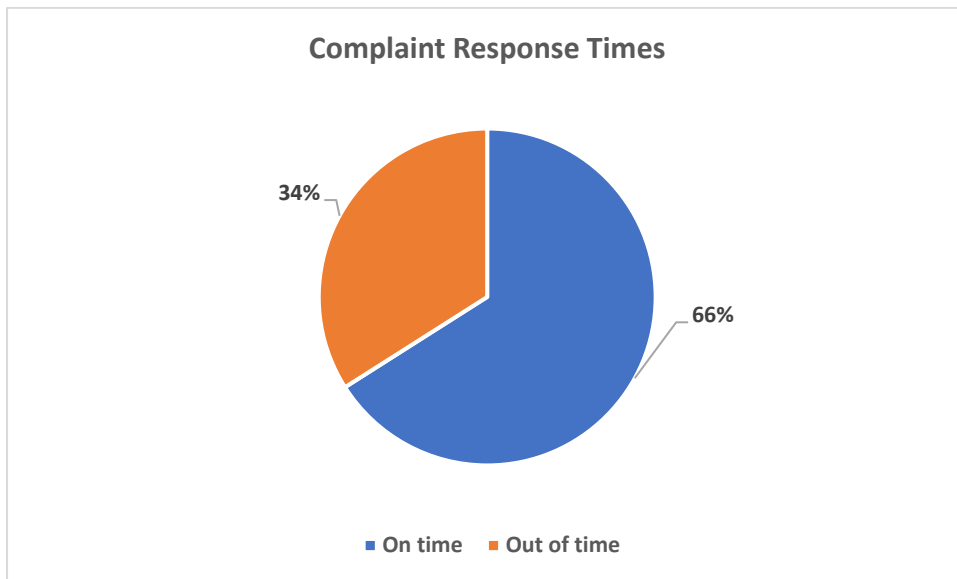
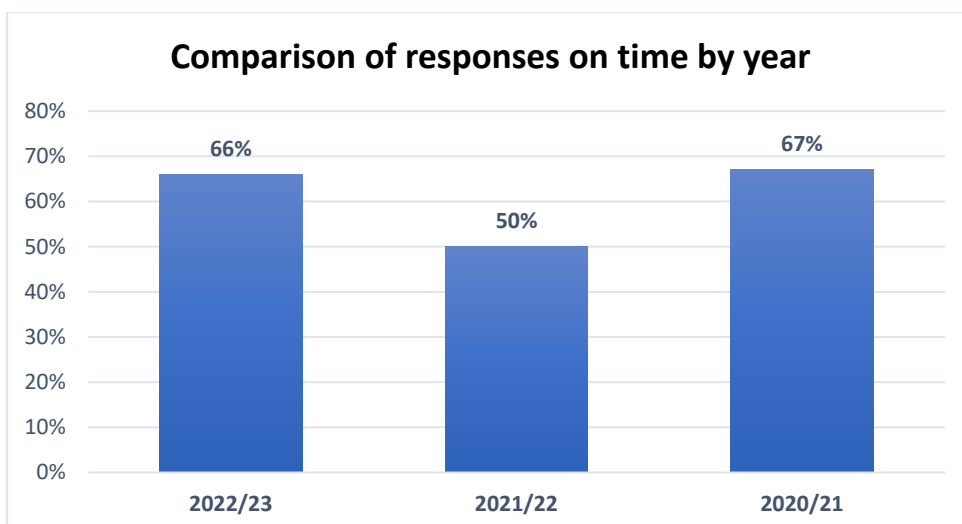


Chart 6 below provides the annual trend for complaint response times and shows an improvement on the previous year, when 50% of complaints were responded on time.

Senior Managers receive a weekly update on the open complaints and enquiries for their services, which are shared within the relevant teams to ensure complaints are tracked and responses are completed in a timely way. There is a strong commitment across the directorate and supported by the senior leads, to continue the good progress in improving timely responses.

Chart 6



## 4.5 Complaint Outcomes

The majority of the 82 completed complaints were not upheld (52%), as detailed below in Chart 7.

Chart 7

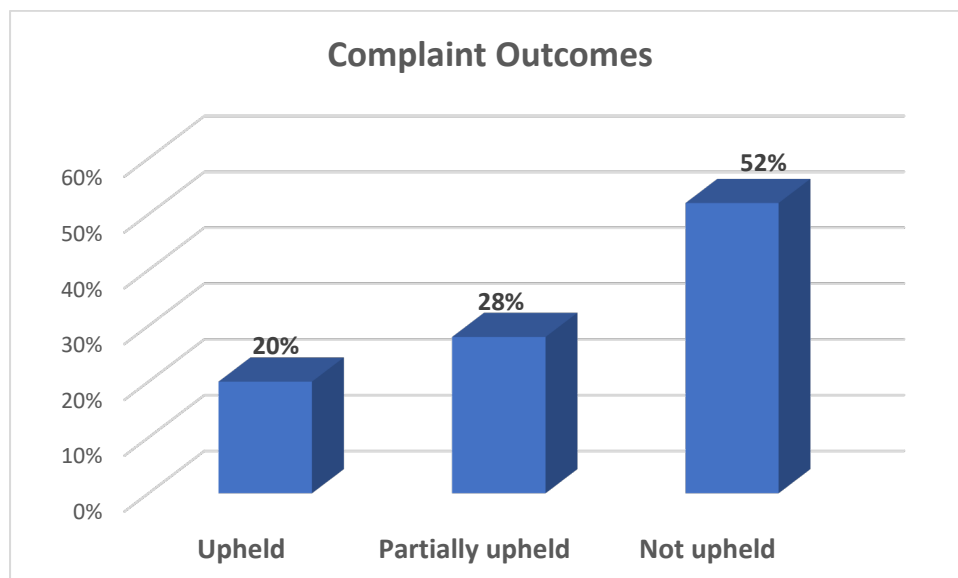


Table 4

Complaint outcomes	Number
Upheld	16
Not Upheld	43
Partially Upheld	23
<b>Total</b>	<b>82</b>

Complaints either upheld or partially upheld were for reasons including delays in service delivery and lack of contact, staff not returning calls/emails in a timely way, errors in administrative processes, incorrect information/advice to individuals and their families in relation to care provision and care charging.

For complaints that were not upheld, the response still explained for clarity, what happened and why a decision was taken.

## 4.6 Stage 2 Complaints

Stage 2 review is the final stage of the adult social care complaints process, which ensures that there is a further opportunity to consider a complaint and provide closure on any outstanding issues.

Sixteen complaints escalated to stage 2 review during 2022/23, with 12 of the sixteen review requests received in quarter 4. These were as a result of reviewing historical

complex complaints. The complaints mostly related to disputed care charges but also concerned social care decisions, issues regarding communication and the quality of support/care provision.

The stage 2 reviews are responded by the lead for the service, usually the Assistant Director. This ensures that there is senior level oversight of escalated complaints.

Following the completion of the stage 2 review response, the complainant is informed of their right to refer their complaint to the Ombudsman.

Twelve stage 2 review complaints were completed and responded during 2022/23, with four reviews in progress at the end of this reporting period.

Table 5 Stage 2 response times

<b>Response times</b>	<b>2022-23</b>	<b>2021-22</b>	<b>2020-21</b>
On time	9	2	1
Out of time	3	3	1

The outcomes of the completed reviews are detailed in Table 6 below.

Table 6 Stage 2 complaint outcomes 2022/23

<b>Stage 2 Complaint outcomes</b>	<b>Number</b>
Upheld	3
Not Upheld	7
Partially Upheld	2
<b>Total</b>	<b>12</b>

Table 7 Stage 2 outcomes by year

<b>Stage 2 outcomes</b>	<b>2022-23</b>	<b>2021-22</b>	<b>2020-21</b>
Upheld	3	0	0
Not upheld	7	3	1
Partially upheld	2	2	1

The summary outcomes for complaints that were upheld or upheld in part during 2022-23 with learning identified were as follows:

- In recognition of the delays in arranging the personal budget and an urgent reassessment, the family received an apology and were reimbursed the periods of care which were funded by the family during the relevant period. Staff received a reminder to ensure assessments and social care actions were completed in a timely way.
- An apology was provided for the administrative error in an invoice the family received and for not providing clear advice regarding the 12-week property

disregard for care charges. As a gesture of goodwill, a sum was deducted from the outstanding charges due for payment.

- An apology was provided for not providing clear and timely information on care charges to the family regarding the free period of care following the person's discharge from hospital. The disputed care charges were waived for the relevant period and staff were reminded of the need to ensure families had a clear understanding of care charges for the care.
- In recognition of the time and trouble taken in making the complaint and the delays caused in the appointeeship process, an apology was provided with a financial payment to the complainant.
- An apology was provided for the delay in addressing the complainant's concerns.

## **5. Care Provider complaints**

For commissioned care services, which include both home-based and residential/nursing care, providers are given the opportunity to investigate and respond to a complaint in accordance with their own complaint procedure. The Council can also decide to investigate or review a complaint regarding a commissioned service.

By law, a Council remains accountable for the actions of care providers they commission to provide a service. The Ombudsman will name the commissioning authority in their decisions for care provider complaints. The Quality Assurance team monitors complaints feedback regarding commissioned care providers.

There were 16 complaints recorded for commissioned care providers in 2022/23.

The complaints concerned the quality of service for home-based care and were investigated by the care providers. Two complaints were reviewed further by the complaints team to ensure the complaint outcome was fair and reasonable.

The complaints related to carer visits and the timings of the visits, the quality of care delivered, conduct of care staff and discrepancies in the care recording.

For complaints upheld or partially upheld, the outcomes included waiving the disputed care charges, reminders to carer regarding their logging of care calls and staff training.

Self-funders can complain directly to the care provider and Local Government & Social Care Ombudsman. These complaints will be signposted to the relevant care provider.

## **6. Ombudsman Complaints**

The Local Government & Social Care Ombudsman (LGSCO) is the final stage of the complaint process, following the completion of the Council's own complaint procedure, although a person can make contact at any time during the progress of their complaint.

Twelve complaints were received via the Ombudsman during this period, which is a slight increase on the number received in the previous year (10).

The Ombudsman will refer to ‘maladministration’ should a fault be found on the Council’s part. They will also consider whether the fault has had an adverse impact on the person involved in the complaint.

Of the 12 complaint enquiries received, eight complaints were handled as investigations. Two of the investigated complaints were not upheld. The upheld cases are summarised below.

Table 8

Summary complaint	Decision	Remedy
1. Council delayed arranging a capacity and needs assessment.	Upheld	Apology Council agreed to arrange the assessment and remind staff of the importance of timely assessments. Learning was implemented as detailed in section 8 of this report.
2. Council did not clearly explain the client contributions and top up fees when resident placed in care home, resulting in care charges	Upheld	Apology Resident’s care charges were adjusted, and compensation was paid each to both family members Information on care charges was reviewed, as detailed in section 8 of this report.

Ombudsman complaints with open investigations at the end of 2022/23:

Case 1 - Complaint with the CNWL Trust regarding the level of care support provided and recovery action for the outstanding charges.

Case 2 - Complaint that the family did not receive appropriate care support for their family member in line with the Care Act duties.

Case 3 – Complaint that the Council is demanding payment of contributions for supported living accommodation.

Case 4 – Complaint regarding care charges and disputing that the family did not receive the care and support plan detailing the weekly contribution.

## 7. Joint NHS and Social Care complaints

Two complaints were recorded and are included in the stage 1 complaint figures for this reporting year. Both complaints concerned the joint involvement of the Central and North West London Trust (CNWL) and Adult Social Care in the care and support of the person concerned. The services responded jointly to the issues raised.

The complaint regulations are designed for joint working between Health and Adult Social Care to address complaints where a complaint overlaps both services.

## 8. Learning from Complaints

Complaints are a valuable source of information, which identify lessons that can be learnt as a means of service improvement. When things go wrong, services should use the learning to reduce the likelihood of the same mistake happening again.

The Operational and Service Managers meet regularly to discuss and review internal processes to improve service delivery.

The key learning themes as a result of a complaint in 2022/23 were:

### **Effective Communication** and providing **timely responses**

- Better communication between teams to ensure accuracy in the care billing and information from families is updated on the case system (address for contact etc)

**Clearer information** regarding care charges, such as cost of a care package and assessment process

- Clearer information regarding financial charging and funding responsibilities to families is being reviewed.
- If a care provider requires a cancellation period, the relevant team reminded that this should be clearly stated in the contract and information provided to the care user/family at the start of the service, to avoid incurring charges.

**Avoiding delays** in arranging care package (previously as a result of staff shortages and recruitment issues) **and** occurring in processes such as Appointeeship, Deputyship, funding panels outcomes

Ensuring the **case recording system is accurate and updated**, for example: to avoid incorrect billing and accurately recording suspensions of care - for example, when a person is admitted to hospital.

- Staff are regularly reminded in team meetings and supervision.

**Following due process** - such as ensuring the care and support plan is provided to care user and it is recorded on the case system

- Feedback has been provided to staff to ensure that our duty to obtain consent from the referred for person, is clearly communicated to the referrer so that the next steps are made clearer to them.

The learning implemented from the upheld Ombudsman complaint:

- Staff were reminded within supervision and team meetings, to ensure they completed timely assessments when a person was identified as in need.
- A review was undertaken of the information provided to potential care home residents about how care home funding works, to ensure it adequately explains about client contributions and third party top up fees.
- Staff were reminded of the importance of ensuring residents and family members considering paying a top-up, understand that any top-ups are on of any client contribution and apparent misunderstandings corrected about this at the earliest opportunity.
- A review was completed of the collection and payment of client contributions and top ups for residents where the Council arranges care home placements. Practices are



in line with the statutory guidance so that, the Council pays the full fee to the care provider and collects the client contribution from the resident.

### **Examples of what we put right as a result of complaints**

*Complaint - delay in assessing a person's needs and ensuring they had the appropriate care provision.*

What we did - The care needs reassessment was completed, and the care resident transferred to a permanent care placement. The care resident and family were happy with the placement and care provided as all care needs were being met in the care placement. Staff were reminded to provide timely assessments when a resident with the appearance of needs requires an assessment.

*Complaint - not receiving an outcome regarding request for increase in care and arranging this via the personal budget and payment for increased support*

What we did – the care hours were increased, and payments processed accordingly, together with support payment to the family.

*Complaint – the resident was being billed incorrectly when they were paying for their care privately and had informed the Council.*

What we did – identified that the case system had not been updated to reflect that the resident was paying for their care privately, following a period of reablement. This was updated and the care agency provided a refund, and the Council cancelled the care package and all contributions. The monies were refunded to the resident.

## **9. MP and Member Enquiries**

During the reporting period, a total of 196 enquiries were recorded (80 MP enquiries and 116 Elected Member enquiries).

Table 9 provides the comparative data by year, which shows an upward trajectory of enquiries received each year. There was an increase of 17% received on the previous year 2021/22.

Table 9 Enquiries received by year

<b>Year</b>	<b>MP and Member enquiries</b>
2022/23	196
2021/22	168
2020/21	91

The Council's corporate timeframe to respond to an MP and Member enquiry is 5 working days. It should be noted that social care enquiries are often complex by their nature and will require more time to consider and respond.

In People Services, teams will strive to respond to 'low level' easy to address enquiries within 5 working days. For all other enquiries, the standard response

timeframe is usually 10 working days, unless the issues require a formal complaint investigation.

Table 10 Issues raised

<b>MP issues*</b>	<b>Number</b>	<b>Member issues*</b>	<b>Number</b>
Social care support	26	Social care support	23
Welfare/safeguarding concerns	7	Welfare/safeguarding concerns	17
Mental Health/LD provision/support	7	Mental Health/LD provision	7
Care charges	26	Care charges	14
Financial Assessment	10	Financial Assessment	9
Anti-social behaviour	3	Anti-social behaviour	2
OT assessment/ adaptations/equipment	6	OT assessment /adaptations/equipment	12
Health related	1	Other finance	4
Housing related	10	Housing related	10
Care provider	4	Care provider	3
<b>Total</b>	<b>100</b>	<b>Total</b>	<b>101</b>

\*Enquiries can relate to more than one issue

It is positive to note that 73% of MP enquiries were responded within 5 -10 working days and 68% of Member enquiries were responded within 5 -10 working days in the final quarter period of 2022/23.

Teams understand the importance of addressing enquiries as quickly as possible and this is monitored closely by the complaints team.

## 10. Compliments

Adult Social Care teams proactively share their compliments, and it is important to recognise the good work that is being delivered by the service teams.

The Directorate reported 64 compliments in 2022-23. Some examples of the positive feedback are detailed below.

Thank you to yourself and your colleagues for the SGA conference meeting. I found you all to be extremely professional and I was so grateful that you allowed my voice to be heard as I feel it has not been heard these last two months by those responsible for funding. **Adult Safeguarding Team**

I would like to say B is a real treasure for helping my brother. He feels comfortable and so do I knowing that B is helping. B is kind, considerate, professional and compassionate. B is powerful in getting good things done. B helped save my brother's life two years ago and I will never forget it. **Locality Team**

I just wanted to say a very big thank you to you and the others (for such a lovely meal!! It was also really nice to have a chance to meet up with the other Carers and

Harrow Council staff to chat too !!Thanks again, look forward to the next Event. What a great idea " munch and mingle " for Carers to meet and help alleviate the loneliness that we can experience at times.

**Carers Lead**

I am writing this to you to inform you of the excellent service and assistance we had recently received from your colleague, L who dealt with our issues professionally and with care. She was very proactive in dealing with everything and can't thank her enough for her support. L also kept us updated regularly and managed to resolve everything quickly, and we are extremely grateful to her for taking the time to help us when my mother required immediate help. She was extremely polite, knowledgeable and very helpful in trying assist us with our concerns and needs.

**Early Intervention and Support Team**

I would just like to mention that A's support with the inspection this week has been amazing. She's very understanding, made the whole team feel valued and appreciated, her knowledge of care and support has been greatly appreciated. She has been a great support and she is a credit to the council. Thank you for providing her to us. **Quality Assurance Team**

Thank you so much for your kindness to myself and my husband on our stay in Northwick Park hospital. My husband was admitted with chest problems He has advanced vascular dementia. Several days after his admission, I was also admitted with a heart problem. After a week he was ready to go home but I caught Covid while in the Coronary Care Unit in Ward. You came to see me and visited him too. You could see I was upset at not being able to see him nor being home to care for him, so you took a video on your phone of him saying hello to me. Then gave me your mobile number and sent me the video via WhatsApp. That was so thoughtful, and I felt so much better. By this time, I was moved to an isolation room. You found him a place for 3 weeks respite care. He was safe, warm, and secure there and I was able to be discharged home with heart medications and to recuperate until I tested negative for Covid. I feel very strongly that you went above and beyond your job description. The personal touch of the video made such a difference to my well-being. Thank you! **Northwick Park Hospital Team**

Thank you for guiding us throughout this matter. You have been very helpful and I'm very glad to have this resolved now. Thanks to your help! **Billing Team**

To whom it may concern, very happy with Harrow services never have an issue. Always helpful whenever I need to talk to them regarding my father. Very happy **Adult Social Care Services**

I would like you to know that I am very pleased with the support J has given my brother. Her assessment and understanding of X is most accurate. I have not been too well for some time. So, it is a great relief to know that J is supporting X to ensure he lives in a safe and secure environment. I thank her for the quality time she is giving to J. **Learning Disability Team**

I just don't know how you do it, you are literally AMAZING!!!

You surprise me every time getting the care arranged so quickly and you keep us updated at every point. You're a true star!!! **Northwick Park Hospital Team**

Ms S has carried out a thorough care needs assessment on our father. She listened to all his concerns and the family's concerns and presented this appropriately together with the evidence to the Panel members. Thank you for allocating an understanding person like Ms S at a time when many doors were shut to my father. She acted very fairly and attentively when assessing his care needs.

**Early Intervention Support Team**

E is very professional...I have worked with E for years and neither my Mum nor myself have a wrong thing to say about E...She always has the best interests of the carers and the people they support at heart.!

**Shared Lives Team**

## **11. Key Targets for 2023-24**

Adult Social Care services are committed to improving our performance activity across all areas of our complaint process in responding to complaints and enquiries.

Adult social care teams will continue to resolve complaints and queries at the earliest stage.

The complaints team will remain focused on robust monitoring of response times and quality responses.

Adult Social Care services have set up a working group to implement the learning from complaints for practice development which meets on a monthly basis.

Response times have improved, and this will remain a priority in the new reporting period. The Directorate will aim to ensure 75% of complaints are responded on time.

Staff training on effective complaints handling will be provided to Managers throughout 2023/23, to ensure high quality responses to complainants.

The complaints team will continue to work closely with the senior management team to identify areas for improvement from the complaints.