

STATUTORY AND CORPORATE COMPLAINTS REPORT

SLOUGH BOROUGH COUNCIL

2021-2022

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EXECUTIVE SUMMARY

This annual report details the level of complaints received in relation to services delivered by Slough Borough Council for the last year 1st April 2021 to 31st March 2022. This is inclusive of both statutory functions (Adult and Children's Social Care) as well as Corporate Complaints. Slough Children's First produces a yearly complaints report which will be made publicly available via their website, [Slough Children's First Complaints](#) the annual report for 2021-22 is currently awaiting senior management sign-off.

The council received 854 stage 1 complaints and 44 Adults Social Care complaints in this period.

The Local Government and Social Care Ombudsman investigated 5 complaints against Slough Borough Council and upheld 4 of these complaints within this timeframe, with the other not upheld.

The Housing Ombudsman investigated 5 Complaints against Slough Borough Council and upheld/ partially upheld 3 and no fault with 2.

WHAT IS A COMPLAINT?

A complaint is defined as a written or verbal expression of dissatisfaction about the service provided by the Council.

We aim to log and acknowledge all complaints within two working days and to send a full written response within 10 working days for Corporate Complaints. Updates to Adult Social Care complaints are provided every 10 working days, for the duration of the complaint. Should the investigation proceed beyond this timescale, we will advise the complainant of any delay.

1. INTRODUCTION

The production of a complaints report is a statutory complaints requirement for adult social care to provide an overview of the complaints received and handled through the Council's statutory complaints procedure. This summary for Slough Borough Council Adult Social Care is designed to meet this requirement of adult social care and is a public document. This report provides information about adult social care complaints for the period 1 April 2021 to 31 March 2022.

The Local Authority has a duty to ensure that any individual (or appropriate person acting on their behalf) who wishes to make a complaint about the actions, decisions or apparent failings of a local authority's social care provision have access to the Adults statutory complaints procedure.

2. ADULT SOCIAL CARE STATUTORY COMPLAINTS PROCEDURE

The Council is required to operate a separate Statutory Complaints and Representations procedure, 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 (hereby referred to as 'the Regulations'). Any complaint which does not fall under these requirements is considered under the Council's Corporate Complaints Procedure. All complainants that have exhausted the Council's Statutory Complaints Procedure retain the right to approach the Local Government and Social Care Ombudsman (LGSCO).

The LGSCO are impartial and independent and act as the final stage for complaints about the Council, Social Care Providers, Care Homes and Home Care Agencies.

3. ACCESSING THE COMPLAINTS PROCEDURE

The complaints process aims to be as accessible as possible. Complaints can be made by telephone, in writing, by email or using our online complaints form on the Slough Borough Council website. [Adult social care feedback and complaints – Slough Borough Council](#)

All complaints received are aimed to be acknowledged within 2 working days and we aim respond or send an update within 10 working days. More complex complaints may be responded to within 20 working days, with the complainant being kept informed during the process.

Our principles for responding to complaints in adult social care are that all complaints are dealt with efficiently.

- Complaints are properly investigated.
- Complainants receive a timely and appropriate response.
- Complainants are told the outcome regarding the investigation of the complaint.
- An apology is given if required.
- Appropriate response is taken where necessary.

The Adults Social Care statutory procedure starts with an internal investigation. A response will be sent from the manager within the service area. In the majority of cases, if a complaint is upheld or partially upheld, an apology will be offered and information will be given to the complainant outlining actions the service will take to ensure the situation does not arise again for the complainant or individuals in the future. The apology would be given by the manager on behalf of the service area complained about.

If the complainant is not happy with the outcome of their complaint, they can refer the matter to the Local Government and Social Care Ombudsman for consideration. Representations may be made to the LGSCO at any time and any member of the public is able to complain to the Ombudsman if they feel there has been maladministration or injustice, however, the LGSCO will not normally accept the complaint until the Council has had a chance to complete the investigation internally first.

4. OVERVIEW

Between 1 April 2021 and 31 March 2022, the Social Care Direct Team received: 12,018 contacts. In addition, Slough adult social care:

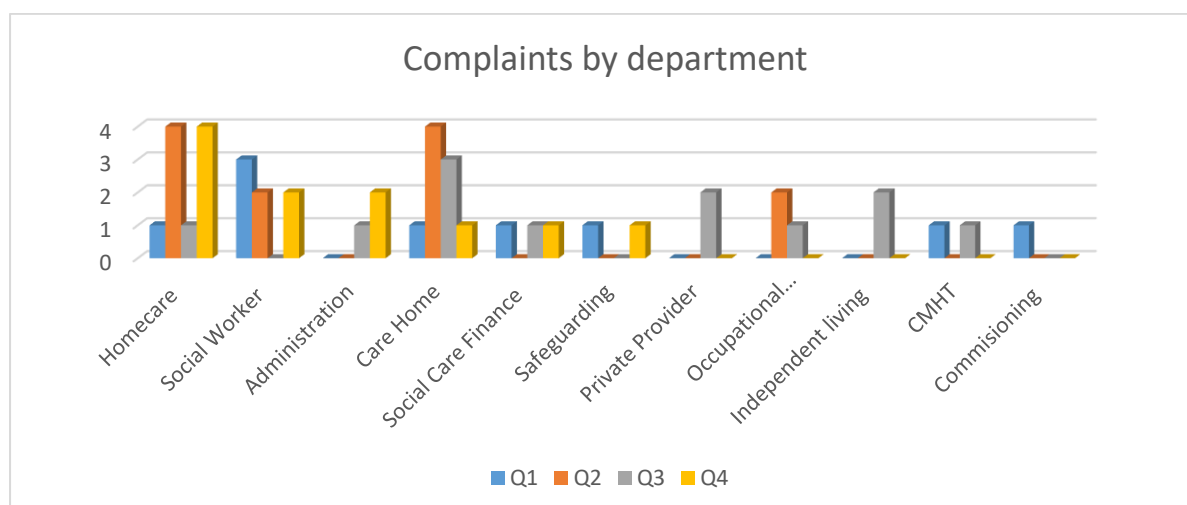
- carried out approximately 3,763 new statutory care and support assessments and approximately 721 reviews;
- investigated 251 safeguarding concerns and completed 269 safeguarding enquiries;
- supported 75 adults in residential care; 94 adults in nursing care; and 64 adults in supported living
- provided enablement to 314 people and homecare to 499 people through 758 care packages.
- supported over 1400 adults with a total of 2,501 care packages, including over 160 adults through direct payments, and 209 family carers.

The following adult social care complaints were received by the Council from service users, carers and/or their representatives. There were 44 statutory Adult Social Care complaints investigated from 1st April 2021- 31st March 2022. This represents an increase from previous years by over 50%. Table 1.below shows a representation of the statutory Adult Social Care Complaints investigated over the last 3 financial years.

Table 1. Adult Social Care complaints by tax year (2019-2022)

Year	Number of complaints	Percentage change (year on year)
2019-20	28	+ 7% (Previous year recorded 26 complaints)
2020-21	28	0
2021-22	44	+ 57%

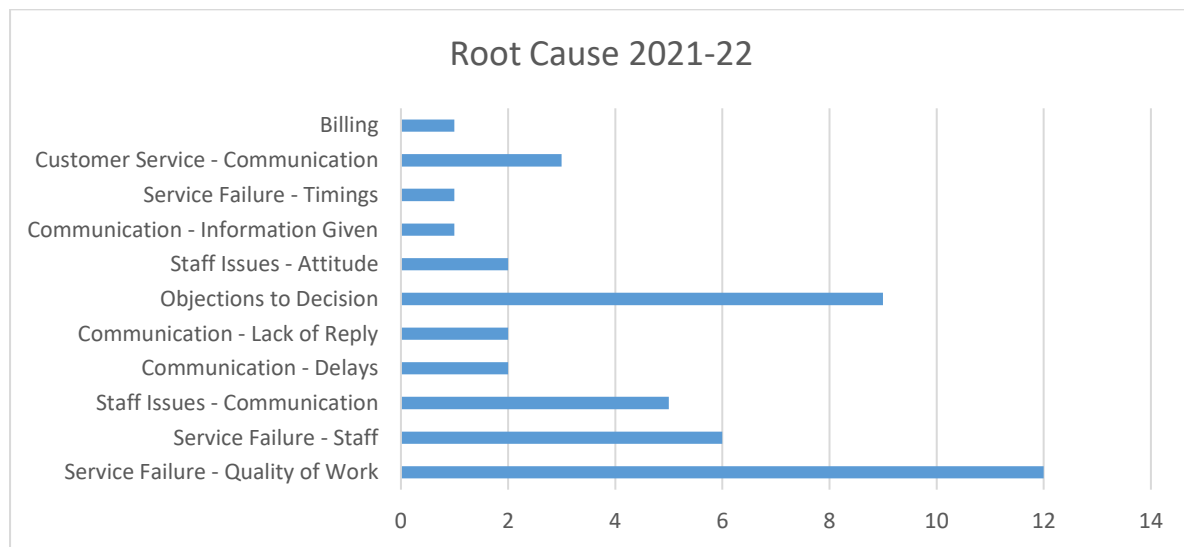
Fig 4.1 Adult Social Care Quarterly Complaints by department Apr 21- Mar 22



Breaking with the noticeable trend of the previous years where most complaints received and investigated were in the latter half of the year. The last financial year saw a more evenly spread of complaints with an average of 11 per quarter received. The most complained about departments/areas were Home Care (10), Care Home (9) and Social Worker (7). This is somewhat reflective of the previous years, as Homecare continues to be the leading source for complaints to the service. A notable change from previous year is that complaints relating to staff has increased once more with 7 of the 44 (16%) being with reference to social workers.

Fig 4.2 represents the trends of the complaints received over the 2021-22 period.

Fig 4.2 Complaints by Root Cause



To better understand and implement learnings to complaints it is helpful to know what triggers them being received in the first instance and thus we consider the causal factors. Although the root cause of the complaints received were varied, the main trend for complaints in 2021-2022 was Service Failure – Quality of Work 27% (12). A total of 19 (43%) of the 44 investigated complaints were attributed to service factors. A further, 20% (9) were attributed to an objection to decisions made and also notable is that 23% (10) were attributed to staff related factors (attitude, customer service and communication). The remaining 14% (6) were related to communication (5) or billing (1).

Fig 4.3 Response time by working days (Adult Social Care Complaints)



Of the 44 complaints investigated in 2021-22, 31% (14) were responded to on or after 20 working days. This timing was necessary as there were complex investigations required. 5 of these in particular exceeded 30 working days with 1 taking more than 100 days to be satisfactorily resolved.

31% (14) were responded to by the 10th working day, with 11 of these (25% of the total) being responded to in under 10 working days- the council's internal timescale for a response. Over 60% of the complaints were responded to after 10 working days, and whilst there isn't a specified timing for these to be responded the council's aims for responses within 10 working days was not met on most occasion and is reflective of the current challenges being faced by the Local Authority in recent years.

There are an increasing number of complaints which deal with integrated care; these are joint Adult Social Care/NHS complaints, and therefore require a multi-agency approach. This can have a detrimental impact on the Council's performance against its internal response target as the co-ordination of responses means that the Council may be obliged to work to the Statutory Social Care and National Health Service timescales, which allow a six-month timeframe for complaints to be investigated and responded to.

It is however standard practice to send holding replies prior to the target response date, to inform complainants of any anticipated delays and to advise of any revised deadlines. Investigating managers maintain communication with complainants (with their agreement), informing them of progress throughout the investigation of their complaint and offering support, guidance and advice prior to formal complaint resolution.

PROVIDER COMPLAINTS

Complaints regarding a commissioned service received directly by the council, are logged and processed in accordance with the statutory complaints procedure and referred to the Adult Social Care management. These are then either signposted to the provider's internal complaints process or managed through our complaints procedures on behalf of the

complainant. We do ask partner organisations to work within our timeframes; however, the Council has limited power to enforce this.

These do not include complaints by 'self-funders' who are able to complain directly to the care provider and/or Local Government & Social Care Ombudsman.

There were two complaints in relation to the service and communication of care providers.

COMPLAINT OUTCOMES

Fig 4.4 Outcome of complaints (Adult Social Care)

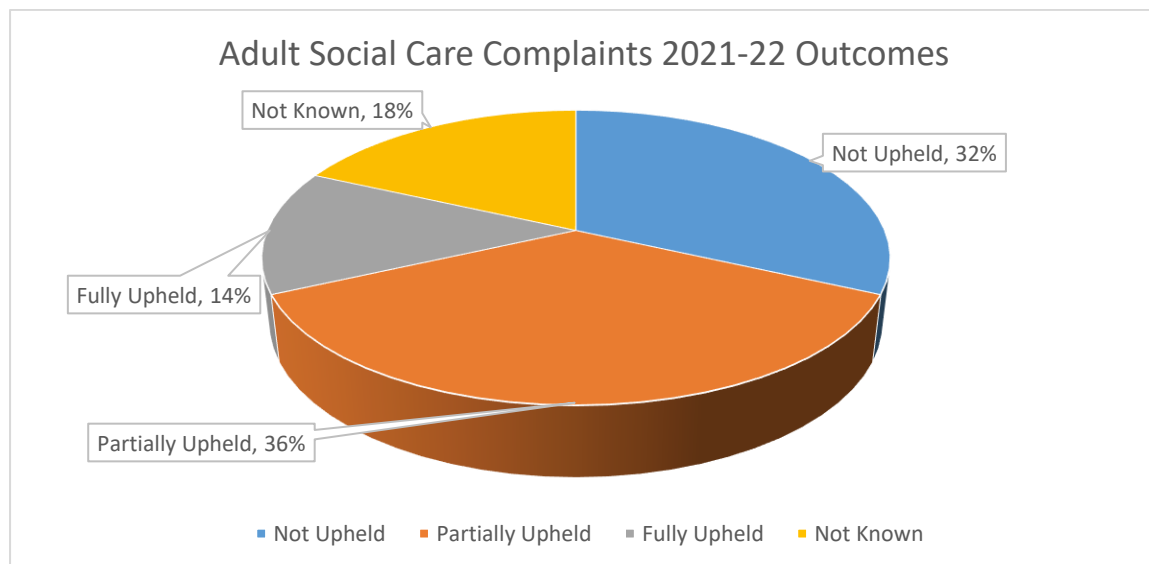


Fig 4.4 shows that 50% of the complaints received in 2021-22 were fully/ partially upheld, this represents a 15% drop on the previous year where 65% were fully/partially upheld. It also indicates that despite an increase by more than fifty percent in the number of complaints received, the authority's actions pertaining to these complaint in several instances was appropriate, thus being unable to accept fault. 32% were not upheld and 18% closed with no defined indication as to whether upheld or not.

LOCAL GOVERNMENT & SOCIAL CARE OMBUDSMAN COMPLAINTS

A complainant reserves the right to refer their complaint to the Local Government and Social Care Ombudsman at any time. However, in most instances, the Ombudsman will seek to ensure that the Local Authority has been provided with the opportunity to respond to the complaint in accordance with the Council's statutory complaints process.

Slough Borough Council received 3 Adult Social Care enquiries & complaints from the Local Government & Social Care Ombudsman in 2021-22; 1 was classed as a premature and 2 were closed by the Ombudsman after their initial enquiries.

5. CORPORATE COMPLAINTS

COMPLAINTS PROCESSES

Slough Borough Council have 3 complaints procedures they work under. These are Corporate, Social Care and Neighbourhood Services. Children's Services complaints fall under the responsibility of Slough Children's Services Trust.

CORPORATE PROCESS:

Stage One: The complaint will be sent to the manager of the service that is being complained about.

Stage Two: The stage two complaint needs to be in writing, stating which aspects of the previous response they are not happy with and what more they think we should do. This will then be sent to the relevant service lead or director for a response.

Stage Three: If the customer remains unhappy with their stage 2 response, they can ask for the chief executive to review and respond to their complaint.

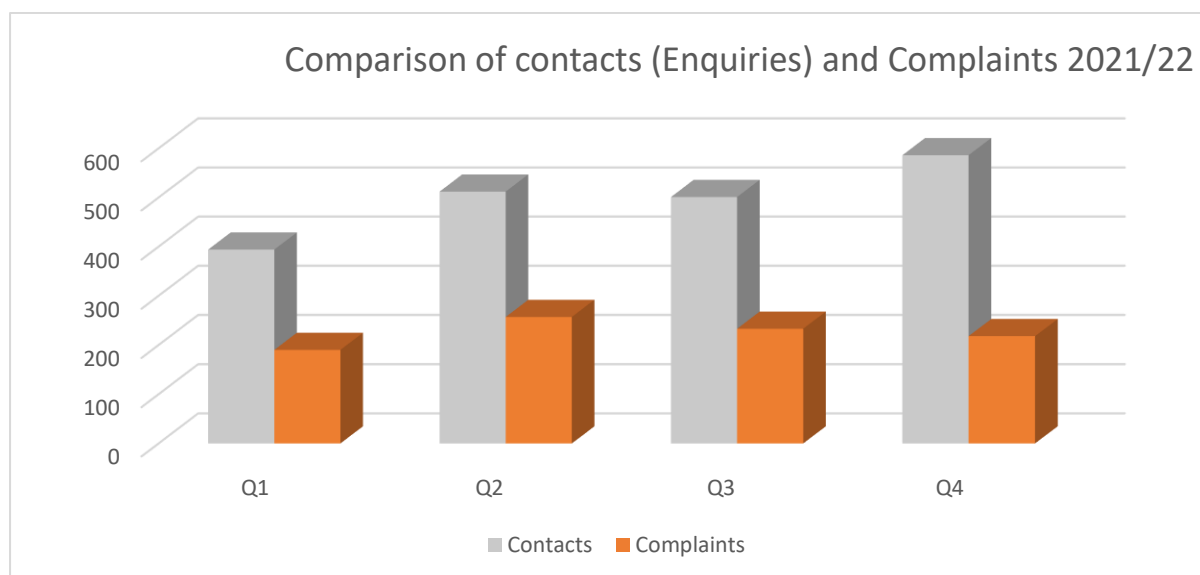
- Complainants who are unhappy with the internal complaints process are entitled to seek a further review by contacting the Local Government and Social Care Ombudsman (LGSCO) or the Housing Ombudsman.
- During 2021/22, the council had recently concluded an organisational wide restructure which commenced in the 2nd half of 2020 and culminated in Q1 of 2021, resulting in a reduction in overall resourcing, and a recruitment freeze.

HEADLINE FIGURES – COMPLAINTS RECEIVED

In the period 2021/22, 1993 contacts/enquiries were received via the Complaints team from the public; to express dissatisfaction with the services they had been provided. Of these, 898 were formally investigated via the complaints process, with the remaining 1095 being handled as service requests (enquires) through early resolution. This equated to 55% of all contacts received.

The substantial increase in contacts received from the end of quarter. We are continuing to see a variation in the number of contacts being resolved informally to the customer's satisfaction, with 317 (28 %) of these being related to the Place & Community Directorate which handles all housing and neighbourhoods related matters. This high volume of contact/enquiries being resolved informally confirms that there needs to be a continued focus placed on early resolution of cases. The following graph Fig 5.1, shows the total number of complaints received in 21/22, the number of contacts received in 21/22 and the number of those contacts entering the formal complaints process.

Fig 5.1 Contacts/enquiries and complaints by quarter 2021/22



Tables 2 and 3 below shows a three year “like for like” comparison of complaints received by the Council but excludes complaints relating to Slough Children’s First. Complaints usually have to go through each stage of the councils complaints process, though in some cases may, be dealt with at a later stage, usually at the direction of the Local Government & Social Care Ombudsman.

Table 2. Complaints by Tax year (2019-2022)

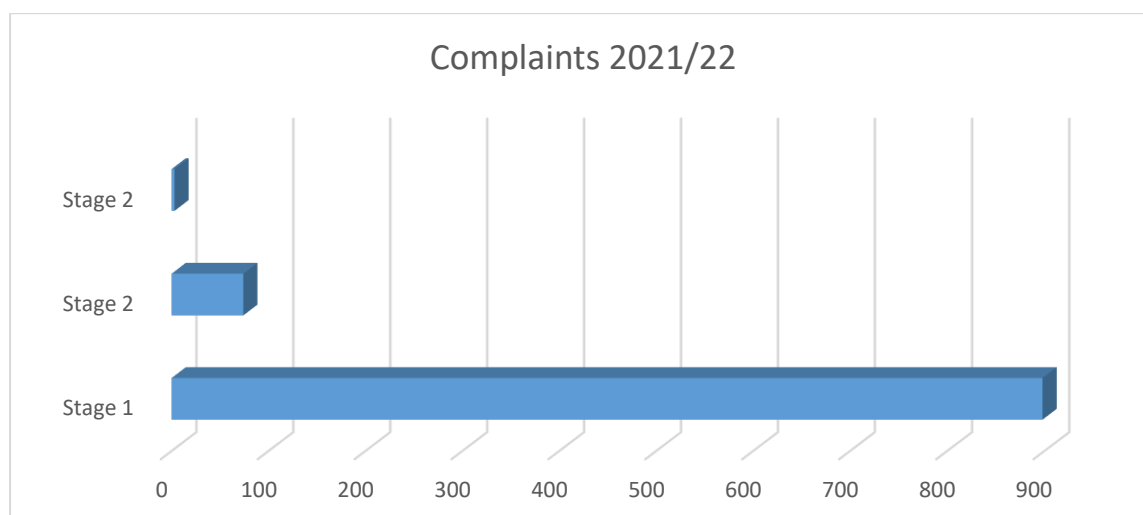
Year	Number of complaints	Percentage change (year on year)
2019-20	663	+ 18% (Previous year recorded 561complaints)
2020-21	701	+5.7%
2021-22	898	+ 28%

Table 3. Complaints by stages (2019-2022)

	2019/20	2020/21	2021/22
Stage 1	663	701	898
Stage 2	75	62	74
Stage 3	14	7	3
Total Complaints handled	752	770	975

The number of complaints handled has increased significantly from the previous year by over 28%, this is likely as a result of limited resourcing in some areas. Of the 898 Complaints investigated, 74 progressed to a stage 2 and only 3 of these progressing to a stage 3, a notable reduction from previous years.

Fig 5.2 Complaints by stages 1st April 2021-31st March 22



For all services, complaints which have been found to be either fully or partially upheld, have been analysed further to determine if there are any common factors which can be improved for future service provision. It is these cases that are now being used to make recommendations to services, on areas which require work and improvement. Appendix A shows a breakdown of complaints received by departments and highlights the areas which received the most complaints within the period 1st April 2021- 31st March 2022.

Fig 5.2 shows that more than 40% (375) of the complaints received in the period 1st April 2021- 31st March 2022 were relating to Osborne's, our Housing Repairs Management partners. Of these, 191 of the 375 (50%) complaints received for this area, had a causal factor which centred on delays to either communication or service, and a further 15% (55) were attributed to the quality of work completed. 72% (271) of all complaints received for this area were fully or partially upheld.

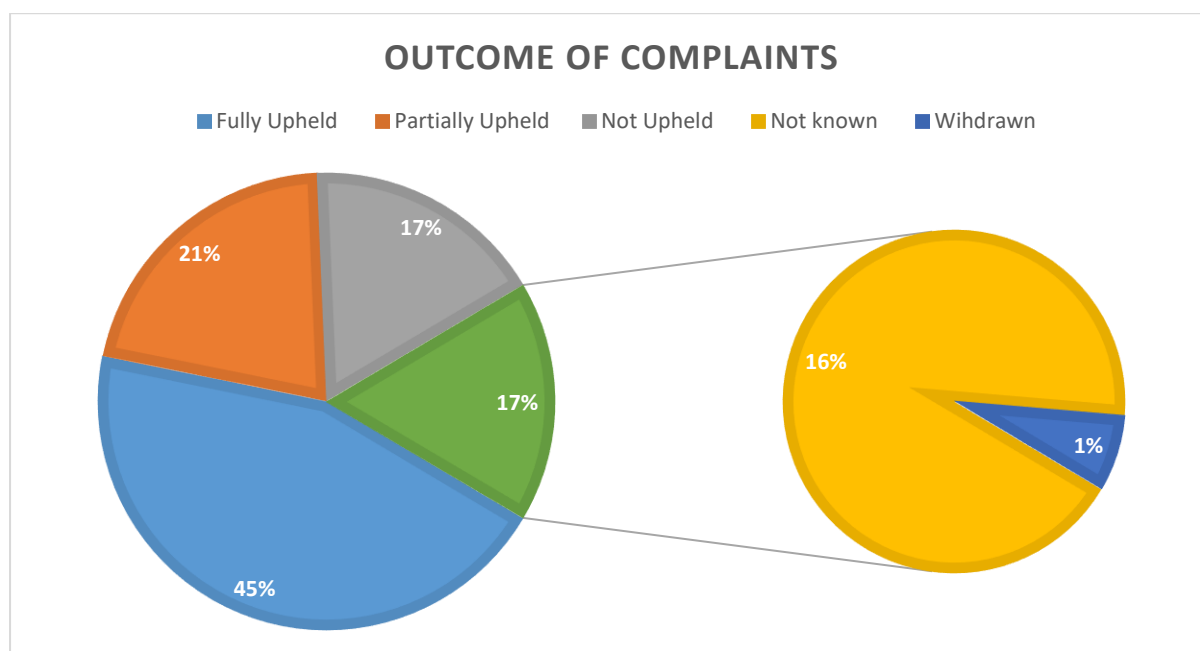
Revenues and Benefits- the second highest area to have received complaints saw 65%. 88 of the 136 complaints being fully or partially upheld, again the root causes centred on communication or service delays, although some 20% were in objection to the decisions made.

Environmental Services- Having received 7% of complaints over the last year. As anticipated the main causal factors unlike other areas mentioned were with reference to the quality of service being received with 40% of their complaints being as a result of this.

Within Customer Services the causal factors were once more with reference to delays. This is largely related to the Call Centre element of the service. Customer's complaints were as a result of the long wait times being experienced. Whilst much was done to inform the public of the delays in this area through social media platforms and the council's website.

The following shows the overall outcomes of all formal complaints in 21/22.

Fig 5.3 Outcome of complaints (1st April 2021- 31st March 2022)



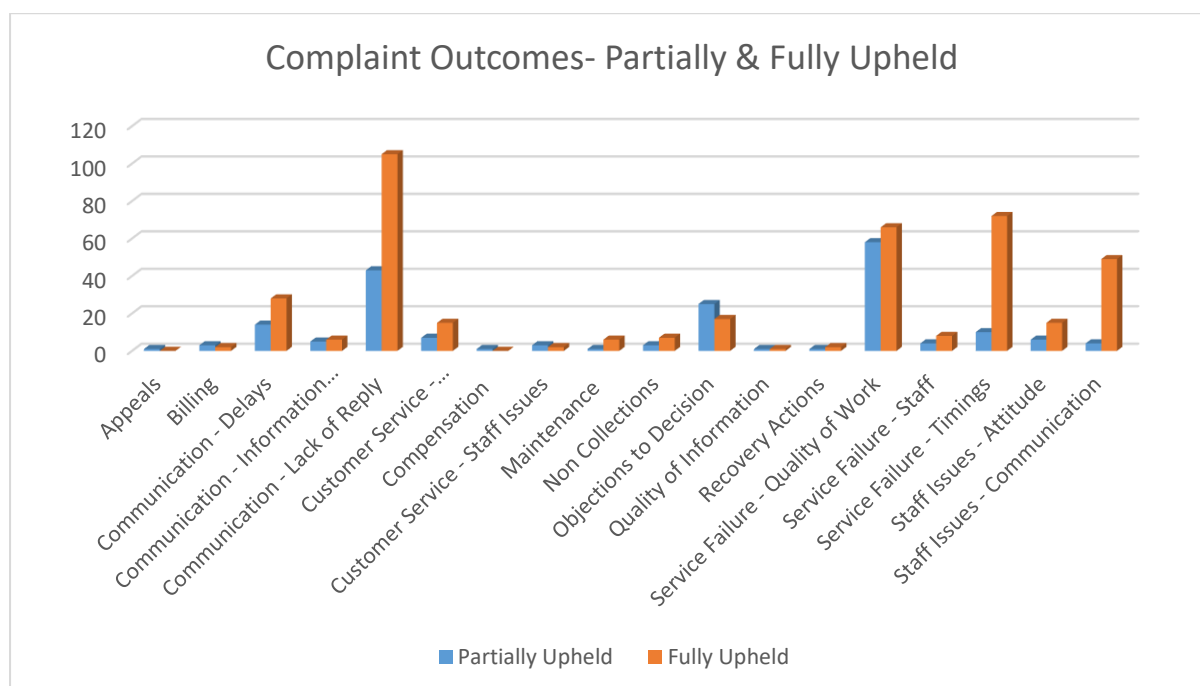
There were more complaints upheld this year than in previous years reported, with 45% of the complaints investigated in the period that this report covers being fully upheld compared to just 17% being not upheld. A further 21% were partially upheld and 1% withdrawn.

Table 4. Root Cause of Complaints

Root Cause/ Reasons for Complains	Number of Complaints
Appeals	1
Billing	12
Communication - Delays	59
Communication - Information Given	25
Communication - Lack of Reply	192
Customer Service - Communication	36
Compensation	2
Customer Service - Staff Issues	11
Maintenance	9
Non Collections	14
Objections to Decision	86
Quality of Information	5
Recovery Actions	6
Service Failure - Quality of Work	169
Service Failure - Staff	34
Service Failure - Timings	112
Staff Issues - Attitude	39
Staff Issues - Communication	86

The causal factor of the complaints received highlighted above, demonstrates that greater work needs to be done to address the lack of, and delays to communications, as well as delays to service delivery. Another outlier and area for improvement is with the quality of work. The following shows where fault was found in complaints that were upheld and the founded aspects of those complaints partially upheld and reflected the established trend noted above.

Fig 5.4. Complaint Outcomes- Partially and Fully Upheld (2021-22)



- Delays & Timeliness- Most complaints relating to timeliness have been Upheld. This category relates to the time taken to carry out a service. The Council always seeks to avoid delays in service delivery however as many of the services we undertake are demand led, this is not always possible. Although each service would seek to prioritise more urgent areas or ensure the most urgent cases and people with the highest levels of need are prioritised, this can understandably still be dissatisfying for members of the public whose concerns are not prioritised.
- Communication- A high number of complaints due to lack of communication have been Upheld or Partially Upheld. These are generally between officers, teams or departments within the Council. Where it is established, the council accepts fault and both acknowledge and apologise for any inconvenience caused.
- Quality- These complaints relate to services provided directly by Council staff or relate to the quality or conduct of staff employed by service partners. Quality issues within any area services are addressed through the relevant line managements. Quality issues with provider services are addressed through the Council's contract management procedures.

6. LEARNING FROM COMPLAINTS

Slough Borough Council welcome and recognise the importance of complaints and all customer feedback. Learning from the complaints we have received provides us with an opportunity to ensure that improvements are made.

We seek to capture lessons learnt from complaints which are partially or fully upheld. Any learning or training needs identified are followed through with relevant actions to be

implemented to prevent further occurrences. Below are some identified themes, where learning was drawn.

Table 5. Identified themes from learning.

	Theme	Actions
People	Issues relating to the behaviour or conduct of a member of staff	Formal reflections completed with staff, conducted additional training where a need was identified. Provided staff with reminders both individually and in team meetings, Reminded staff of Standard Operation Procedures (SOP) and expectations when communicating with members of the public.
Procedures	Changes to current procedures and working practice as a preventative measure	Changed working practice, Amended procedures, Cultural changes made (see next section; What have we Learnt below)
Process and Performance	Issues relating to performance and processes	Accepted/Acknowledged when fault was found with any of our processes and remedial steps taken to ensure that this isn't repeated, with an established learning shared departmentally. Monetary compensation in some instances where multiple failings were noted.
Provider	Work with providers/ partners to review working practices, policies and contract compliance where applicable	Reported findings to providers (e.g. Enforcement Agents, Care Providers), reminded them of expected SOPs Improvement to Contract management through increased communication and engagement, (Osbornes)

WHAT HAVE WE LEARNT?

Some specific examples of these learnings in action as it pertains to individual departments are listed below;

Osbornes- As a result of the high number of complaints received within this area, it was noted that there were concerns around staff capacity. This has resulted in steps being taken by Osbornes to improve complaint response through the hiring of 2 additional complaint handlers as well as a specific multi-skilled operative to respond to complaints quicker. The Key Performance Indicators measure has been review with new targets aimed to measure quicker responses. The team have also implemented weekly team meetings to discuss outstanding cases, and have feedback issues from all complaints through operative tool box talk sessions.

Revenues & Benefits - Where administrative delays were established, fault was acknowledged and the teams reminded of the need to ensure issues are fully investigated and resolved when identified and to escalate these, where unable to resolve individually.

In instances where complaints were raised as result of enforcement actions, these were investigated and if there was any doubt or an established fault, steps were taken to remind them of their responsibilities to ensure that standard operating procedures are complied with.

There has been a change of culture in relation to how we view debt recovery within council tax, with staff being encouraged to improve the customer journey through engagement and an emphasis on conversations that will result in a win-win scenario outcome.

Environmental Services- Where several complaints were received regarding bins not being correctly replaced, the management created a quick reference refresher training guide referred to as a 'toolbox talk' which included - good and bad examples that can be referred to in the course of completing their work.

Customer Services – Having received complaints regarding the premature closure of enquiries reported, it was established that an incorrect status was being used on Jadu CRM (Customer Relationship Management). The system was updated to include a new status that could be used in instances where a query was being passed to a new department and a script communicated to staff that can be used to inform residents of the next course of action which will be taken.

Several departments (Highways, Transport, Customer Services, and Environmental Services) were suffering from a lack of capacity and greater effort has been made to increase resourcing through recruitment. They also sought to place a greater effort on transparency in communication and managing resident expectations in their interactions with residents. This has meant that these key departments had to be clear on the significance of resource prioritisation in addressing the most problematic areas or concerns.

As a result of the learnings, departments are looking at the way forward and how they can improve or do better to engage and resolve concerns promptly. As an example, the Planning department has advised that they are considering changes to the way they communicate, which will include updating the website with more information to allow for a greater level of automation and transparency to the planning process.

7. CONCLUSION

It is of note that there is an increased focus in respect of the provision of public services. Whilst we strive to bring down the dissatisfaction with services being delivered, the increase provides additional data from which we are able to learn and improve as an organisation. As a result of the figures, and as mentioned earlier in this report, it is vital that a renewed focus be placed on early resolution of concerns. Whilst historically not included within reports an area currently being monitored is timescales in responding to complaints being met. This has not been an area of concern previously as compliance rates have been extremely positive. However, with difficulties faced this year, this compliance has seen a steady decline and is being monitored closely, with a drive to improve this figure. Currently this data is being shared with relevant heads of service in order to achieve this. Should this area continue to see a decline in figures information will be provided in future reporting, given this is an area where the LGSCO or Housing Ombudsman are able to find fault with the council.

APPENDIX

APPENDIX A- COMPLAINTS BY AREA/DEPARTMENT (1ST APRIL 2021- 31ST MARCH 22)

