



Customer Relations Team (Adults) Annual Report 2023-2024

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Partners:











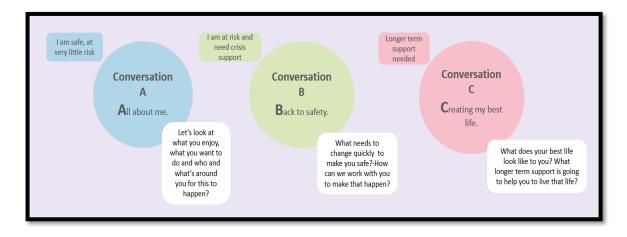




Introduction

- 1.1 This report provides a summary of the comments, compliments, and complaints received under the statutory procedures in relation to Adult Social Care provided directly or commissioned by Wigan Council during the period 1st April 2023 to 31st March 2024. It also details the enquiries made in relation to Adult Social Care by Elected Members on behalf of their constituents.
- 1.2 The emphasis on customer feedback is on openness, fairness, and transparency. Quality assurance and continuous service development are a feature of how we work. Listening to and learning from the people we support helps shape our approach and encourages our creativity and our drive to improve.
- 1.3 As you read through the report, you'll find positive feedback. These positive figures are the result of 12 years' focus on improving quality and resident experience and implementing the learning from all the compliments, comments, and complaints we receive. We continually strive to provide the very best for the people we support and their families. If someone has a concern or good new stories, we want to know. We listen, we reflect, we change and improve the service we provide.
- 1.4 Understanding what the people who live and work in the borough want from their council is core to enabling us to do a good job for our communities. We know that many people are facing difficult times and that challenges around the cost of living are unlikely to go away anytime soon. Despite this, we know people and communities are doing amazing things across our borough, and we want to play our part to support this.
- 1.5 For context, our Adult Social Care teams annually assist more than 7,000 residents. These teams support adults aged 18 and older with physical or sensory impairments, learning disabilities, mental health issues, and substance misuse problems. The teams also work with caregivers to coordinate care and help adults whose independence may be compromised by aging or frailty. Additionally, services are provided to individuals at risk of abuse or neglect and to young people preparing for Adulthood.
- 1.6 The borough's 'New Era' of 'Progress with Unity', focuses our people work with further emphasis on:
 - > early intervention

- > supporting people to live quality lives and retain their independence.
- > increasing community knowledge
- > protecting people from harm and abuse
- reducing the number of people requiring long-term care and support
- 1.7 Wigan's approach to needs assessment and care planning is based on Asset Based Conversations (ABC), focusing primarily on people's strengths and community assets. It supports our frontline teams to have three distinct and specific conversations.
 - Conversation A is All about me explores people's needs and wants and connects them to personal and community sources of support available.
 - ➤ Conversation B is Back to safety assesses levels of risk and any crisis contingencies that may be needed, and how to address these.
 - ➤ Conversation C is Creating my best life focuses on long-term needs, outcomes, planning and review and is built around what a good life looks like and how best to mobilise the resources needed and personal and community assets.



1.8 To do this we will:

- help people to regain skills and to do as much as they can for themselves.
- > outline a person's support entitlement and how it is assessed.
- help people to manage any personal budget they receive if required or give them the option of managing it themselves.
- > support a person's right to live life free from any form of abuse.

- > provide clear guidance and information on services available.
- make it easy for people to share their feedback, respond promptly and use this information to improve services.

Our Approach

- 2.1 When people have feedback on the service they have received, we listen carefully and wherever possible will negotiate and agree a course of action to resolve the issue or record good practice. We are fair and transparent, treating everyone with courtesy and respect. We value complaints as well as compliments and any comments, as they are integral to our commitment to continuous listening, learning and improvement.
- 2.2 We ensure our complaint handling complies with the statutory requirements as detailed in the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. In line with the statutory requirements the Authority is required to produce an annual complaint report made available to the public.

Referrals to the Customer Relations Team 2024-2024

3.1 The data below provides an overview of Adult Social Care interventions for 2023-2024, aligned to the Customer Relations contacts.

4247 people accessing long term support

1416 received reablement support

3463 people benefited from Assistive Technology

5426 Early Intervention and **7923** social care assessments (new & reviews)

Total: 22,475 Social Care interventions, up from 17,327 during 2023/24

425 points of feedback were logged which represents **1.9%** of the total of interventions.

There were **71** formal complaints which required full investigation and a written response, an increase of **12** from 2022-23.

162 informal complaints (those which can be resolved quickly without an in-depth investigation). An increase by **1** from last year.

15 complaints were made to the Local Government and Social Care Ombudsman = 3% of the complaints received within the year.

177 enquires were received from MPs and councillors, an increase from **25** last year.

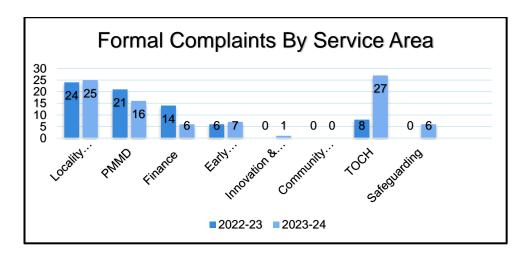
602 compliments received: **402** recorded on mosaic (ASC System). **110** were sent directly to the Customer Relations Team, as they were not linked to a customer. **90** were recorded via the Wigan Safeguarding Adults Board, following training delivered.

- 3.2 To facilitate the recording and collection of customer feedback, a draft leaflet is being prepared for distribution. This leaflet will be available in various formats to ensure accessibility for all contacts. Teams will also be encouraged to disseminate this information and include a QR code in their email signatures to emphasize the importance of feedback.
- 3.3 Despite a rise in operational complaints and those submitted through the ombudsman, the proportion of complaints upheld remains low, as will be detailed later in the report. In 2023-24, Adult Social Care has experienced a 24% increase in compliments from customers satisfied with the service they received.
- 3.4 The high standard of complaint investigations and responses, combined with senior management's willingness to meet with complainants, has led to a reduction in costly independent investigations, with none being commissioned in the last 9.5 years.

Service Areas

4.1 Adult Social Care is provided by a diverse array of closely integrated teams: Wigan, Ashton, and Leigh Locality Social Work Teams; Early Intervention and Prevention (encompassing Adaptations, Occupational Therapy, and the Sensory Team); the Transfer of Care Hub (including Better at Home, Reablement, Moving and Handling, and the Integrated Community Equipment Stores); Provider Management and Market Development (covering homecare, care homes, supported living, etc.); Community Accommodation Support Services (Finance); and Innovation and Partnership (including the Project Team and People-Powered Technology). The Community Adult Front Door (CAF) Team transferred in-house in late January 2024, to support customers contacting Adult Social Care to receive the right information at the right time, where they are supported via prevention, or to navigate the system of care and support.

4.2 The table below provides a breakdown of the operational complaints received by service area:



4.3 It should be noted that complaints about Adult Services often pertain to multiple areas and may involve external providers or partner agencies. Therefore, the data in the above table may exceed the number of operational complaints received. Formal complaints to the Locality (social work) teams have increased slightly from last year by one. Interestingly, complaints related to finance have decreased, while those concerning the Transfer of Care Hub (TOCH) have risen by 29%. The Innovation and Partnership team received one complaint, and the Safeguarding team received six. There has also been a slight decrease in complaints related to our Provider Management and Market Development Team.

How do we receive complaints?

- 5.1 As per point 3.2, work is being undertaken to support the facilitation of customer feedback and will be available in various formats to ensure accessibility for all contacts.
- 5.2 In 2023-24, complaints were received in the following formats, last year's data has remained in the table below, by way of comparison:

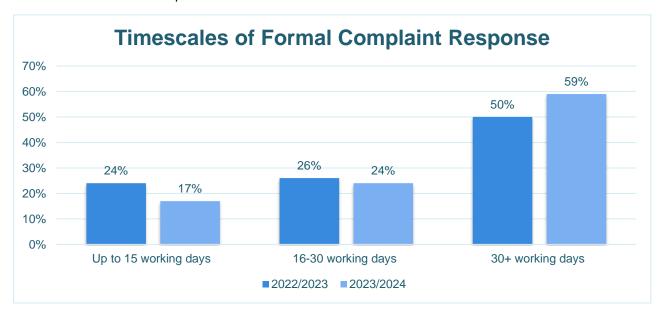
Year	Letter	Telephone	Email	Leaflet/Web form	Not Recorded
2022/23	5%	25%	14%	50%	5%
2023/24	9%	25%	21%	45%	0%

5.3 Contacts made to the Customer Relations Team remain like last year, with the use of email and the web form most popular, however there has been a slight increase in contact made via letter.

Response Rate

- 6.1 The Customer Relations Team is considerate of how individuals may feel when they reach out and strives to respond promptly. All contacts are acknowledged, typically on the same day they are received, but always within three working days. Telephone messages are checked twice a day, and there is a message-leaving facility available outside of working hours.
- 6.2 The team aims to resolve informal complaints within 5 working days dependent on the issues involved and this timescale can be extended with the agreement of the complainant.
- 6.3 For formal complaints requiring an investigation and written response, we aim to respond within 15-20 working days to complaints involving one or two issues. For complaints involving multiple areas or partner agencies, which require a more in-depth investigation, we work within a 30-working-day timeframe. For the most complex complaints or those involving the Health Authority, we aim for a response time of 30+ working days.
- 6.4 Under the legislation there is no specific timescale set although it is expected to complete an investigation and provide a response within 6 months if possible. The key element being keeping the complainant updated throughout.

6.5 The table below, provides an overview of the timescales of response to formal complaints in 2023-24:



6.6 There has been an increase in the number of complaints requiring more than 30 working days to resolve. This is due to the complexity of the issues raised, involvement of multiple teams, demand for services investigating, and the need for joint responses with external partners, such as Patient Advice Liaison Teams. Extensions to the timescales are always discussed with the complainant, and they are kept informed of progress throughout the investigation. The team is committed to ensuring complainants receive a thorough and robust response.

Outcome of Investigations

7.1 The table below demonstrates the number of formal complaints upheld, partially upheld and not upheld:

Year	Formal complaints Upheld	Formal complaints partially upheld	Formal complaints not upheld	Outstanding
2022/23*	11	24	23	Not Recorded
2023/24	9	17	38	7

^{*} One complaint was withdrawn

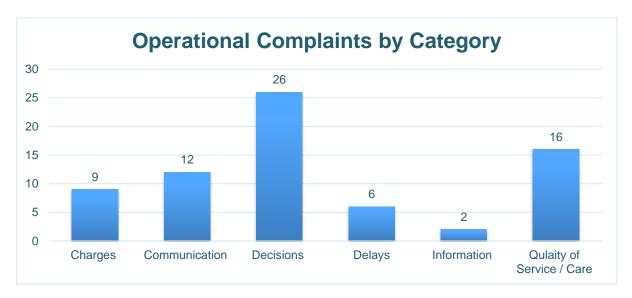
7.2 As documented in point 3.3, the number of complaints not upheld

has decreased by 53% compared to the previous year. While we aim to manage complaints informally whenever possible, the increased time taken to investigate formal complaints, as shown in the table above, has positively impacted the number upheld. This indicates that thorough and robust investigations are being conducted.

- 7.3 When a complaint is upheld, either fully or partially, an apology is provided to the complainant and an outline of the actions to be taken to address the issue and, where possible, prevent others from having the same experience. Learning from each complaint is added to the Learning outcomes Framework and added to the improvement action plan for the following year.
- 7.4 Remedies in line with the ombudsman guidance may also include financial compensation, such as waiving charges or providing payments to acknowledge the distress caused or the time and effort spent by the individual in pursuing the complaint.

What are the key causes of complaints?

8.1 The key areas of complaints generally fall into 6 main categories, sometimes more than one, the table provides a breakdown of causes for 2023-24 for operational complaints:



8.2 As the graph shows, most complaints relate to decisions, aligning with the table in 4.1, as TOCH received the highest number of complaints. This service involves hospital discharges and decisions on whether a person should return home or move to a care home. Many complaints come from family members who disagree with

the decision for their relative to return home, believing they need 24-hour home care.

- 8.3 However, TOCH are working in line with guidance via Central Government under 'The Home First' approach, which provides patients with support at home or intermediate care. Wherever possible, patients should also be supported to return to their home for assessment. Evidence available on local.gov.uk and gov.uk suggests that this can help with the over-prescription of care, which often happens when patient assessments are undertaken in hospital.
- Implementing a Discharge to Assess Model (D2A) where going home is the default pathway (with alternative pathways for people who cannot go straight home) is more than good practice it is the right thing to do.D2A was introduced as best practice in 2016 by NHS England, the model involves providing short-term care, rehabilitation and reablement, where needed, and then assessing people's longer-term needs for care and support once they've reached a point of optimal recovery. This may be in people's homes or using 'step-down' beds to support the transition from hospital to home. This means that people do not wait unnecessarily in hospital where there is a higher risk of acquiring infections or deconditioning. Assessing people out of hospital in the most appropriate setting and at the right time for them supports people's independence and long-term outcomes.
- 8.5 Complaints relating to quality of service and care primarily relate to providers, whether this be care at home or home care. The Provider Management and Market Development (PMMD) are working with key providers to complete quality assurance visits and embed key recommendations from the learning from complaints.
- 8.6 The next highest category of complaints pertains to information and charges. Customers have reported not being informed about charges or kept updated on the allocation of social workers and the progression of care and support plans. To address this, we have developed a toolkit to enhance teams' skills in 'Good Customer Service' and 'Case Recording', ensuring that customers are well informed, and this is clearly documented in the system.

Local Government and Social Care Ombudsman

- 9.1 The Local Government and Social Care Ombudsman (LGSCO) investigates complaints from the public about councils and other public service providers in England, including registered Adult Social Care providers. It serves as the final stage in the complaints process for individuals who have first given the council or provider an opportunity to resolve the issue but feel that their concerns have not been adequately addressed or resolved to their satisfaction.
- 9.2 In 2023 -2024, there were fifteen referrals to the LGSCO, an increase of eight compared to last year. Seven of the referrals were not accepted by the LGSCO and eight were taken for investigation.
- 9.3 A brief of the referrals that were investigated are provided below, four of which are awaiting a final decision, therefore not included in the table:

Complaint	Case	Final Decision	Agreed Action
Mrs X complained about the standard of care provided for her late uncle, Mr. Y, by the care provider and its poor communication with the family. She also complained about the care provider's refusal to take Mr. Y back into the care home after he was discharged from the hospital in March 2022.	1	There were some faults with the care provider, with the standard of care it provided to Mr. Y, its record - keeping and its poor communication with Mr. Y's family. This caused injustice to Mr. Y and his family, including Mrs. X. The Council	Pay £2,000 financial remedy previously offered to Mrs X. This is to acknowledge the distress and uncertainty the care provider's identified faults caused to her and Mr Y's family. Within two months of the final decision: provide the

		will take action to remedy the injustice caused.	Ombudsman with evidence of the implementation of the service improvements provided by the Council in its enquiry response
Mrs X complains the Council invoiced her for six weeks care home fees when her late husband was in hospital and then in a short-term NHS funded nursing placement, and not resident in the care home.	2	The Council is at fault for applying residential care fees for a five-day period Mr X was in hospital and awaiting a reassessment of his care needs.	The Council should reduce the outstanding charges for Mr X's care by five days.
Mr. X was an inpatient in a hospital, prior to being in hospital he lived in his own home. Mr. X moved into a Care Home when he left hospital. Ms. P his daughter complains: 1. Hospital staff inappropriately forced her to leave the hospital when Mr. X was admitted. Ms. P said her leaving really upset Mr. X.	3	Ms. P's wider complaint also involves the actions of Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust (the Trust). The Trust has not yet finished considering all Ms. P complaints under its complaint's procedures. In this case, the view is that it would be beneficial for this to happen before the Ombudsmen consider any aspect of Ms. P's complaint further.	Referred to Parliamentary and Health Service Ombudsman.
2. The hospital unreasonably moved Mr. X between five different wards within 24 hours shortly after he was admitted. Ms. P had received an invoice for Mr. X's care fees, although hadn't previously			

been informed it was a chargeable placement.			
Mrs X complains the Council delayed carrying out a social care assessment and a financial assessment of Mr Y. She says but for the delay, Mr Y would have been eligible for funding from the start of his respite care placement.	4	The Council should, within four weeks of the final decision: 1) apologise to the family for the failings, refund the total amount of third-party top-fee paid for Mr Y's respite care stay and during the 12-week. disregard period.	The Council acknowledged the delay in allocating Mr. Y a named social worker. It also failed to correctly fund Mr Y's residential respite stay and the period of a 12-week property disregard.

What have we learned from complaints?

10.1 All Customer Feedback is vital to celebrate what is going well and help identify areas requiring improvement. We share insights with all managers across Adult Social Care through our complaints and compliments update, and a learning outcome framework is established, to monitor progress, with the updates provided via the governance structure. Here are a few examples of the learning:

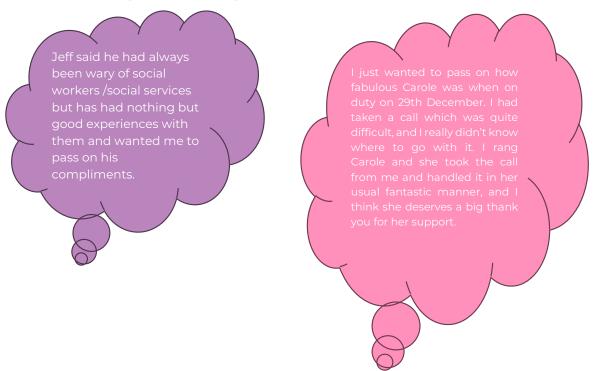
Area of Learning	Outcome
Record keeping	It is crucial to maintain accurate and timely records, documenting any discussions with service users and/or family members. Case records serve as a vital source of information and evidence when responding to complaints, underscoring the principle: "If it isn't documented, it didn't happen." This importance has been communicated to all staff through the Complaints and Compliments Updates and is emphasized in the current Receiving, Investigating, and Responding to Complaints training. A tool kit has also been developed, which will hopefully be launched in the next few months, with some key tips on recording keeping, and published on the website, to support the workforce.
Correct Information held on systems.	Discussions have taken place with teams, to verify information when sending correspondence, things such as home address, contact number, next of kin etc, should be reviewed on every contact. A notification will also be published in the next newsletter to teams.
Charges for Care whilst in hospital.	A briefing and agenda item will be added to the next care home forum, to ask providers to support with key messages. A review and development of

	the Fact Sheets provided on hospital admission and discharge has also been undertaken.
Communication	Communication is key to developing and maintaining positive working relationships and a lack of or poor communication is often at the root of complaints or contributes to them being escalated. Training on the complaints process and expectations has taken place with frontline staff to ensure all feel confident dealing with issues. Further training is currently being delivered on best practice in Customer Service and Managing Challenging Behaviours and Receiving, Investigating and Responding to Complaints.
Right information at the right time.	A review of the fact sheets and webpages on ASC and charging is taking place. The introduction of CAF has provided support with the right information, from the initial contact. The toolkit on recording discussions will support teams to understand what has been discussed with a person and what needs to be verified.

Examples of compliments: it's good to be appreciated.

- 11.1 There has been a large increase in compliments received and expressions of gratitude for teams from supported individuals, their families, colleagues, and partner agencies.
- 11.2 It is always recognised how important complaints are in highlighting when things require improvement and as sources of learning and compliments are equally as important.
- 11.3 Compliments reveal what individuals and their families value in our services and staff, highlighting what works well. They also provide insight into the emotional stress people face, often feeling overwhelmed by their situation, decisions, and new information. This underscores the importance of clear communication and explanations. Kindness, patience, respect, and giving people time to express their feelings are essential, reflecting our asset-based approach.
- 11.4 Just as we share themes from complaints with all team members, we also share compliments and discuss the lessons learned from them. Understanding what constitutes good, empathetic, and caring service helps us deliver it effectively.

Below is a snapshot of compliments received in 2023-2024:



Thank you so very much for your kind words, you do try to ward off calls to duty by giving the caller advice which you are very good at doing, admin work very close with whoever is on duty and that allows duty to run smoothly so a big thank you to you also.

I just wanted to pass on my thanks for the amazing work you've clearly done supporting the 2 students on the attached story. Your work was highlighted in Workforce Development Board yesterday with about 20 directors and service managers so has not gone unnoticed!

'm sure it's taken a lot of effort to make it so rewarding for them but will pay off in the ong run when we get well prepared and motivated young people coming through nto the workforce of the future.

For the past 12 months Jack Rowbotham has been our family link in relation to my dad who is elderly and has multiple challenges including blindness, dementia, and mobility issues. I understand you are Jacks Line Manager so wanted to take the opportunity to let you know how efficient, professional, supportive, and approachable Jack has been including meeting dad face to face. During face-to-face meetings Jack has been so respectful and person centred.

As a direct result of Jack working with dad and our family on a bespoke care plan dad is still at home rather than in residential care. Thanks to Jack, dad attends Central Day Care 3 times per week which is allowing him to thrive again and at the same time provide my mum as dads main carer time to re charge her batteries. Dad also has Excel carers in 3 times a week which has not been an easy service to navigate sometimes, but with Jacks support carers are still in place.

Thank you both so much for the time you spent with Trevor, myself, and

Sheel yesterday afternoon. We both thought it was a very productive meeting and it is inspiring to know such professional caring people. Your explanation of events going forward has certainly helped to put our minds at rest regarding Sheel's future.

Sheel is obviously very happy, and it is certainly what we wanted for her and to know that help is at hand when she needs it. Our sincere thanks once again and

we hope to meet you again in the not-too-distant future.





realise you are in different parts off the Council, but I'd like to express my thanks all round for your patience.

Sarah, Betty's daughter said, mum had been dreading the visit/assessment but following the visit she said she'd had such a lovely afternoon, that you are a lovely lady and she'd had a nice chat. I think that's because of the rapport you had with her. I liked how you didn't just ask questions in order and how you allowed the conversation to flow naturally. I also liked how at the end of the assessment you went back to something from the beginning that hadn't been answered. It was such a great visit as mum had been neglecting herself and wouldn't ask for help or know what was available to her and you were able to instigate the contact with her doctor on her behalf to get her help.

Moving Confidently Forward and Sharing Learning

- 12.1 As part of our commitment to service improvement and ensuring our feedback processes and practices are the best they can be, we have a delivery action plan which will focus on ensuring that complaints and lessons learned are shared with Adult Social Care staff. This will be delivered through:
 - Monthly management meetings across Adult Social Care.
 - Quarterly Complaints and Compliments Report
 - > Training on the Adult Social Care Complaints process, the legislation which underpins it and the expectations for those involved with investigating and responding to complaints.
 - ➤ Delivery and updates of the action plan via the Business Delivery Board.
- 12.2 We are dedicated to delivering exceptional services and ensuring that everyone in the borough can lead their best life. We will keep challenging ourselves to improve and shape our services. We welcome thoughts, comments, and suggestions whether this be through the "Be a Voice for Care" initiative, Customer Relations Team, or any team within Community Services.