

A thick green line starts from the top left, goes diagonally down to the right, then curves to go diagonally down to the right again, ending at the top right.

Annual Complaints Report Adult Social Care Wandsworth 2024-25

Nancy Kurisa
Statutory and Corporate Complaints Manager



Table of Contents

Contents

1. Introduction 3

2. Executive Summary 3

3. Legislation..... 4

4. Overview of the Statutory Adults Complaints Procedure 5

5. Approach to learning from complaints/quality assurance..... 6

6. Statutory complaint numbers..... 7

7. Statutory complaints by team 10

8. Complaints by issues and outcome..... 13

9. External Care Provider Complaints 17

10. Response times 20

11. Equalities data and categories of support..... 21

12. Corporate Complaints 23

13. Ombudsman Cases 24

14. Compliments..... 25

15. Key Achievements 2024/25..... 26

1. Introduction

- 1.1 The production of a complaints report is a statutory requirement for Adult Social Care to provide an overview of the complaints received and handled through the Local Authority's statutory complaints procedure. This report is designed to meet this requirement of Adult Social Care and is a public document.
- 1.2 Complaints are counted in the year in which they were responded to or closed: 2024-25 complaint figures include complaints that will have been initiated in the previous year (2023-24) but then closed in this reporting year.
- 1.3 The Local Authority has a duty to ensure that any individual (or appropriate person acting on their behalf with their consent or Power of Attorney) who wishes to make a complaint about the actions, decisions or apparent failings of a local authority's social care provision has access to the Adults statutory complaints procedure.
- 1.4 The Complaints Team sits within the remit of the Resident Engagement Service. There is a statutory requirement to have a complaints manager in post. The Complaints Team is led by the Corporate and Statutory Complaints Service Manager who reports to the Head of Resident Engagement. The Complaints Team comprises of two operational managers: an Adult and Children's Complaints Manager and a Corporate and Ombudsman Complaints Manager, and five complaint officers.
- 1.5 The Complaints Team provides an important corporate function within Richmond and Wandsworth Councils Chief Executive's directorate. Its role is to support the service partnership to ensure that both Councils have effective and efficient complaints procedures, harmonised across the two councils in line with best practice and statutory requirements. The Complaints Team also train and support Council officers to respond effectively to complaints and ensure learning from complaints feeds directly into service improvement.

2. Executive Summary

- 2.1 This year, learning has focused on strengthening communication, improving Social Worker handover processes, improving communication about charging and Direct Payments, improving the quality of assessments and transitions, and providing refresher training on complaints handling.
- 2.2 84 complaints were responded to this year which is 33% higher than the 63 complaints in 2023/24. Alongside the 84 formal complaints, in liaison with Adult Social Care teams, the Complaints Team swiftly resolved 51 low level concerns that had the potential to become formal complaints without this intervention.
- 2.3 The Complaints Team also handled 142 enquires/representations which were mainly matters that fall outside of the formal complaints procedure. These are listed in Table 2.

Adult Social Care Annual Complaints Report – Wandsworth 2024-25

- 2.4 Most complaints were for the Locality Teams although this only accounted for 29 of the 84 complaints; complaints were evenly distributed across most teams so there are no areas of concern.
- 2.5 Delays were the most raised principal issue of complaint, followed by Quality of care in relation to external care providers and then finance. Analysis is provided in Section 8.
- 2.6 36% or 29 complaints were partially upheld, 23% or 19 complaints were upheld, and 43% or 36 complaints were not upheld. Where complaints are partially upheld, this means that some mistakes were made but not all the issues complained about were substantiated.
- 2.7 19 formal complaints raised issues about external care providers such as care homes, domiciliary care providers and supported living which is only slightly higher than the 16 complaints last year. However, the Quality Assurance and Contract Monitoring Team successfully managed 159 service concerns which had the potential to escalate to formal complaints.
- 2.8 For the 55% of complaints that were responded to within the 25-day ambitious internal target, the average time for completing the complaint from start to finish was 37 days which is approximately the same as the average of 34 days last year.
- 2.9 Data on equalities and the type of support provided to residents who draw on services is detailed in section 11 of the report.
- 2.10 Adult Social Care do not receive many corporate complaints as most complaints are investigated through the statutory complaints process. Wandsworth teams responded to 10 corporate complaints this year compared to 1 last year. However, only 1 of the 10 stage 1 corporate complaints escalated to stage 2, which is the same as last year.
- 2.11 In 2024-25, a total of 8 LGSCO enquiries were closed compared to 7 last year. None of these resulted in a formal investigation.
- 2.12 Adult Social Care regularly receives compliments from residents who draw on services or their family members and professionals from partner organisations. Section 14 provides examples of these compliments which evidence the good quality services that are being provided.
- 2.13 Section 15 of this report sets out key achievements this year including the Complaints Team winning Team of the Year for 'Leading by Example' at the annual Staff Awards.

3. Legislation

- 3.1 There is a legal requirement for the Local Authority to have in place a complaints procedure, in accordance with The Local Authority Social Services and National

Health Service Complaints (England) Regulations 2009 for the management of social care complaints.

- 3.2 The Regulations cover Adults social care and Health services and/or any of its commissioned services and/or independent services.

4. Overview of the Statutory Adults Complaints Procedure

- 4.1 The complaints procedure is a single stage process for both Health and Social Care services. The Local Authority has a total of six months to resolve a complaint from start to finish. Within this single stage, a complainant may receive a further investigation if not satisfied with the initial response or be offered the opportunity to meet to discuss their complaint.
- 4.2 Internal performance indicators aim to provide the complainant with a first response within 25 working days. Any further response must be completed by the six-month statutory timescale. The complaint can be progressed to the Local Government and Social Care Ombudsman (LGSCO) following the final response from the Local Authority or at any time.
- 4.3 Complaints should be recorded and monitored by the complaints team. All complainants are offered the opportunity to discuss their complaint with a complaints officer and are assessed for risk by the complaints team in liaison with the relevant social care team. Complaints that are deemed very high risk will be referred to the appropriate investigation route such as invoking safeguarding procedures.
- 4.4 A complaint is defined as “an expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority’s adult social services provision that requires a response”.
- 4.5 Complaints can be made by a resident or carer receiving a direct service from Adult Social Care or by a person on their behalf such as an advocate or family member where the person has provided their written consent, and they are deemed to be acting in the person’s best interests.
- 4.6 Where a service is provided by a contractor on behalf of the Council, a complaint can either be made directly to the provider service or to the complaints team at Wandsworth Council. Whilst the complaints team will encourage a provider to firstly attempt resolution through its own procedures, if this is not possible, the Quality Assurance and Standards team will investigate.
- 4.7 Residents who self-fund their care for services that are regulated by the Care Quality Commission do not fall under this procedure but can still make complaints about the adult social care teams if they have been involved in assessing their level of care need and helping to arrange placements.

- 4.8 Complaints will be considered if they are made within 12 months of an incident although the Council can apply their discretion to waive this time limit.

5. Approach to learning from complaints/quality assurance

- 5.1 Learning from the experience of people drawing on services helps identify where services, policies and procedures can be improved, keeps senior management informed of issues that are important to people, improves communication and strengthens relationships.
- 5.2 Adult Social Care continuously explores innovative methods to enhance service delivery, to ensure people's needs are met effectively whilst working tirelessly to reduce the pressure on services and improving overall outcomes.
- 5.3 The Complaints Manager holds quarterly meetings with the Adult Social Care Professional Standards team led by the Principal Social Worker. These meetings are an opportunity to triangulate learning from complaints with practice improvement being undertaken by the Professional Standards Team.
- 5.4 Examples of key learning this year is set out below:

Delays

- Monitoring of task throughput for part-time staff and during staff leave is being improved to prevent delays.
- The timeliness of Support Plans and assessments has been improved to ensure they are sent promptly to avoid oversight.
- Increased supervision and team meetings are being used to manage workload and prevent delays in services, including ensuring there is prompt case reassignment when social workers leave to ensure continuity of care.

Finance

- Apologies were issued for miscommunication during financial assessments with an emphasis placed on empathy and clarity.
- Financial Assessment Officers were reminded to escalate queries appropriately.
- Staff in social care teams were reminded about funding agreement processes, terminology, and the importance of timely and comprehensive information for high-cost cases.

Quality of Provider Care

- Providers committed to improving communication with both people who draw on services and their families to prevent future misunderstandings or concern
- The importance of prompt incident reporting including informing next of kin, and professional communication was reinforced
- Work was undertaken with the equipment service to make improvements to the community equipment service, addressing concerns and working together on solutions.

Communication

- There was a strong emphasis on clearer, more sensitive, and timely communication with people who draw on services and families.
- Staff were reminded to record family preferences and requests clearly in service user records.
- The use of interpreters was recognised as essential for effective communication.
- The need for clearer explanations of team roles, especially in complex or cross-borough cases was highlighted.
- The hospital social work teams and NHS worked together on improving communication around discharge pathways.
- Staff were encouraged to identify and respect service users’ preferred methods of contact.

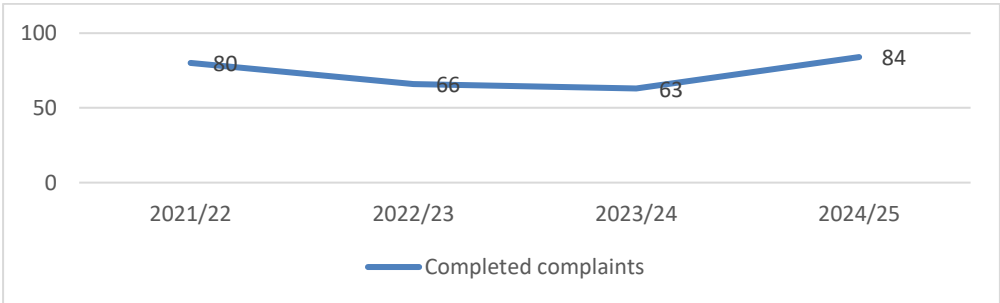
Quality of Assessments

- Staff were reminded to ensure draft assessments reflect the latest family input.
- Training was delivered to improve thoroughness and appropriateness of assessments.
- Families will be informed of all assessment visits, even if they are not attending, to ensure they remained involved and informed.
- Support plan quality was addressed through training and supervision.

6. Statutory complaint numbers

- 6.1 The department completed 84 complaints which is 33% more than the 63 complaints¹ completed last year. Alongside the 84 formal complaints, in liaison with Adult Social Care teams, the Complaints Team swiftly resolved 51 low level complaints that had the potential to become formal complaints without this intervention.
- 6.2 **Table 1 and chart 1** details the complaints received over the last 4-year period. There has been a moderate increase in the number of formal complaints this year.

Chart 1: Statutory complaint numbers by year 2021/22 – 2024/25



¹ 11 of the complaints completed in the first and second quarter of this year were carried over from last year (2023-24). In total 93 new complaints were received this year. Seven of these remain open at the end of the financial year and will be carried forward and completed in the first quarter of next year (2025-26). The 93 new complaints received is 43% increase from the number received last year (65).

Table 1: Wandsworth Adult Social Care complaints by year

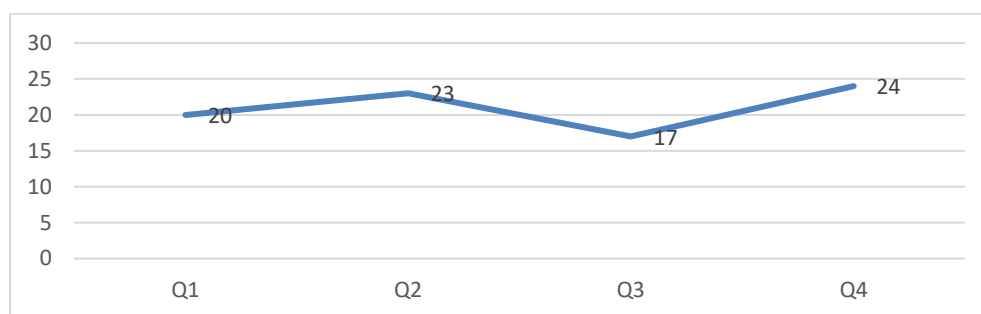
2021/22 Comple ed	2021/22 Receive d	2022/23 Comple ed	2022/23 Receive d	2023/24 Comple ed	2023/24 Receive d	2024/25 Comple ed	2024/25 Receive d
80	79	66	65	63	66	84	93

- 6.3 Wandsworth is a large borough with a population of 327,500 and the volume of complaints should be set in context by looking at the overall level of contact and interaction Adult Social Care has with residents. During 2024/25, 93 complaints were received and 84 were closed but that is a low number given that the department handled approximately 38,308 contacts (telephone and email) and provided long-term social care support to 4,073 people during the year. Also, whilst the Finance Assessment team led on 6 formal complaints, this year the Team were responsible for carrying out 2799 financial assessments².
- 6.4 The Quality Assurance and Contract Management team received 159 service concerns for processing about adult social care external providers. This compares to 257 last year.
- 6.5 Wandsworth Adult Social Care and Public Health Directorate responded to 304³ Member enquiries this year in addition to the formal complaints. Member enquiries, either through local MPs or Councillors are a way for residents and members to raise questions or concerns with the Council about local services or the community and in particular for this Department, for the welfare of neighbours. The Complaints Team works closely with Adult Social Care to identify Member enquiries that raise issues that require a response through established complaint procedures.
- 6.6 **Chart 2** details the complaints received for each quarterly period. Complaint numbers were lowest in quarter 1.

² Last year the department handled approximately 36,740 contacts, supported 3,932 people and undertook 1,852 financial assessments.

³ The 304 Member enquiries are 10% lower than the 336 Member Enquiries in 2023-24.

Chart 2: Number of Adult Social Care Complaints completed by quarterly period 2024/25



- 6.7 Adult Social Care welcomes complaints and all types of feedback and the moderate increase in complaints demonstrates the openness and transparency of the Adult Social Care complaints process. Adult Social Care teams strive to resolve lower-level issues quickly at first point of contact but welcome formal complaints as an opportunity to improve services.
- 6.8 **Section 14** of this report provides examples of compliments which evidence the excellent social care practice taking place across Wandsworth Adult Social Care.
- 6.9 In addition to the 84 formal complaints, during the year the Statutory Complaints Team dealt with an additional 193 enquiries over a wide range of low-level complaints or issues/concerns that did not fit within the remit the statutory complaints procedure. Combined with formal complaints the Complaints Team handled 277 issues for Wandsworth Adult Social Care.
- 6.10 Low level complaints are issues that have been resolved informally and quickly to prevent escalation to the formal complaints process. Issues or concerns are other matters that residents have sent directly to the Complaints Team for triaging, signposting, or redirecting to another team or process, for example, housing complaints or safeguarding issues. These numbers are included in table 2 below to demonstrate the breadth of the work undertaken by the Complaints Team.

Table 2: Representations, issues or concerns handled by the Complaints Team in 2024-25

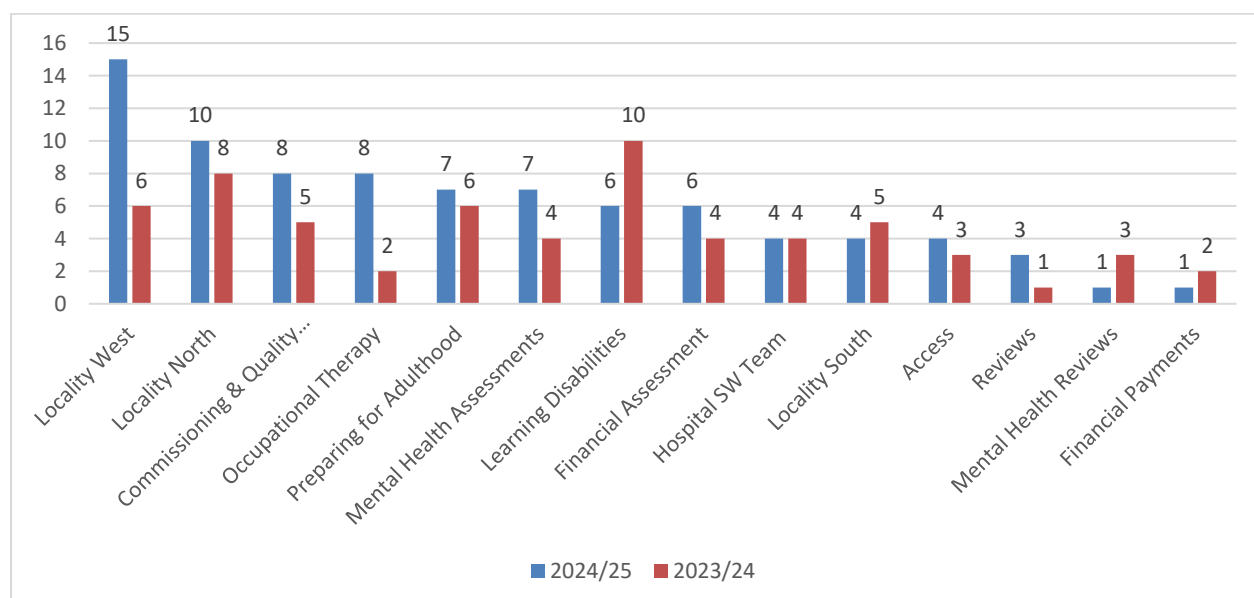
Type of case	Number
Formal statutory complaints.	84
Low level complaints sent to Adult teams for quick resolution.	51
Statutory complaint requests rejected (redirected) or no consent.	13
Non-statutory complaints/issues directed to other Council services or directorates.	52

Adult Social Care Annual Complaints Report – Wandsworth 2024-25

Non-statutory complaints directed to the Council's Housing Department.	36
Issues directed to external partners/agencies.	5
Data Protection/FOI requests/Right to Rectification, redirected to Information Governance Processes.	3
Safeguarding concerns directed to Adult Safeguarding procedures.	11
Insufficient information to progress.	8
Issues directed to the Council's legal/insurance services.	3
Restrictions under the Unreasonable Complainant Behaviour Policy	0
Complainant Disengaged	11
TOTAL	277

7. Statutory complaints by team

Chart 3: Number of Adult Social Care Complaints by lead teams 2024-25 compared to 2023-24



7.1 Chart 3 and Table 3 illustrate the number of complaints received by the teams with these service areas during the reporting year compared to last year. The most notable change is the increase in complaints for Locality West, however given the general increase in complaint numbers and the fact that Locality West covers the

Adult Social Care Annual Complaints Report – Wandsworth 2024-25

largest number of residents this is expected. There has also been a small increase in complaints for Occupational Therapy.

Table 3: Number of Adult Social Care Complaints received by teams and Quarter 2024-25

Team	Q1	Q2	Q3	Q4	Total
Locality West	1	5	4	5	15
Locality North	4	0	2	4	10
Commissioning & Quality Assurance	1	4	1	2	8
Occupational Therapy	4	3	0	1	8
Preparing for Adulthood	2	3	1	1	7
Mental Health Assessments	2	1	0	4	7
Learning Disabilities	2	3	0	1	6
Financial Assessments	0	1	1	4	6
Hospital social work team	2	0	1	1	4
Locality South	1	1	2	0	4
Access	0	0	3	1	4
Reviews	1	1	1	0	3
Mental Health Reviews	0	1	0	0	1
Financial Payments	0	0	1	0	1
Total	20	23	17	24	84

- 7.2 In total 19 complaints raised issues about external care providers. The Quality Assurance and Contracts Team led on 8 of these complaints (36%). The remaining 9 complaints were led by social care teams, often in liaison with the Quality Assurance and Contracts Team, as the primary issues in the complaints were about social care support.

Case Study: Balancing Perspectives: Communication and Accuracy in Adult Social Care Reviews**Background**

A complaint was submitted by a family member regarding the handling of a care review for their mother by Adult Social Care. The complainant raised several concerns, including a failure to notify all Lasting Powers of Attorney (LPOAs), lack of incorporation of their feedback, inclusion of unverified information from a family friend, misrepresentation of their input, and the absence of a final opportunity to review the report before it was submitted to the Court of Protection.

Investigation Findings

The investigation confirmed that while the social worker had verbally informed the complainant of the review date, this was not followed up in writing, which may have contributed to feelings of exclusion. However, it was clarified that this was not intentional. The complainant's feedback was incorporated into the draft assessment and the section referencing a family friend was amended to correct factual inaccuracies, demonstrating that feedback was considered and acted upon. Regarding the final report submission, the Council confirmed it followed Court of Protection directions and was not required to seek approval from involved parties prior to submission. The complainant had the opportunity to raise concerns through their legal representative. The complaint was not upheld, but the Council acknowledged the complainant's dissatisfaction and apologised for the distress caused.

Learning from the Complaint

This case highlighted the importance of clear and consistent communication, particularly in sensitive legal and care planning contexts. As a result, staff are being reminded to ensure that draft assessments accurately reflect the most current input from families and to avoid anticipatory statements that may cause confusion. Additionally, social workers are encouraged to provide written confirmation of review appointments to avoid misunderstandings. These learning points will be shared with relevant teams to improve practice and prevent similar issues in the future.

8. Complaints by issues and outcome

- 8.1 Adult social care complaints can be complex and raise multiple issues, sometimes across more than one team or service area. Each complaint has been classified by a single principal issue, which is the overarching theme or trigger of the complaint. Also, to provide a broader analysis, data has been provided for every issue raised across all formal complaints completed this year.
- 8.2 **Chart 4** sets out complaints by principal issue this year and **Chart 5** sets out complaints by principal issue in 2023-24. Both charts show that despite fluctuations, the main complaint issues remain consistent: quality of care, finances due to chargeable adult social care, and service delays. Most notably complaints about delays in services has increased but these complaints are about a broad spectrum of services which is to be expected given the number of people supported.

Chart 4: Number of Adult Social Care Complaints received by Principal issue 2024-25

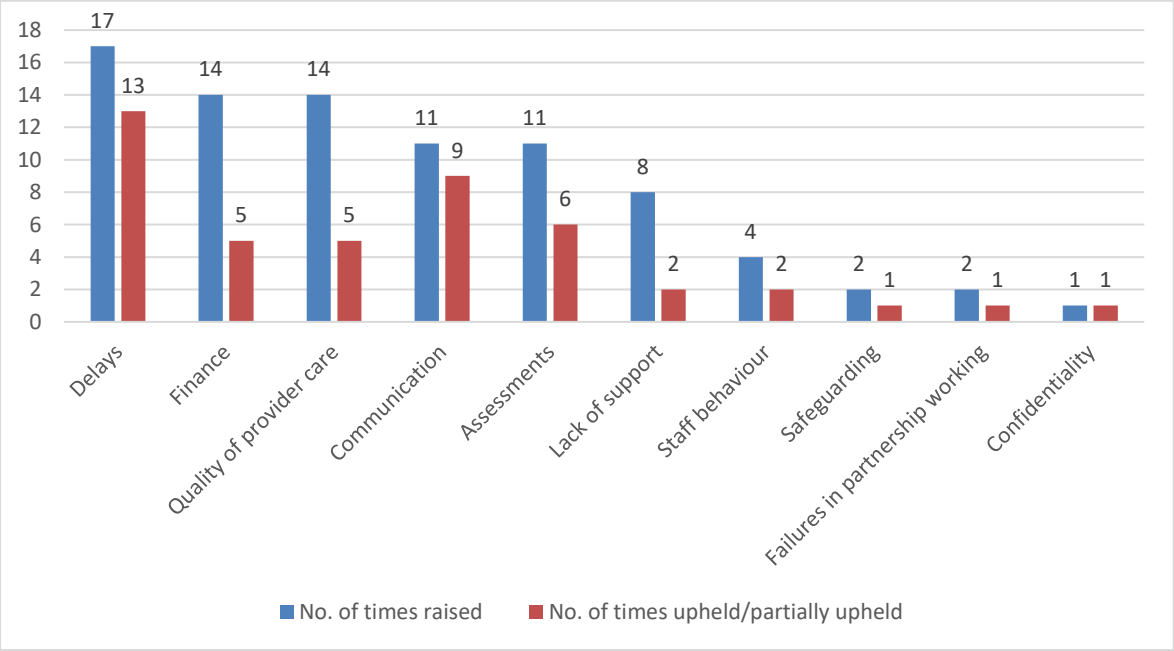
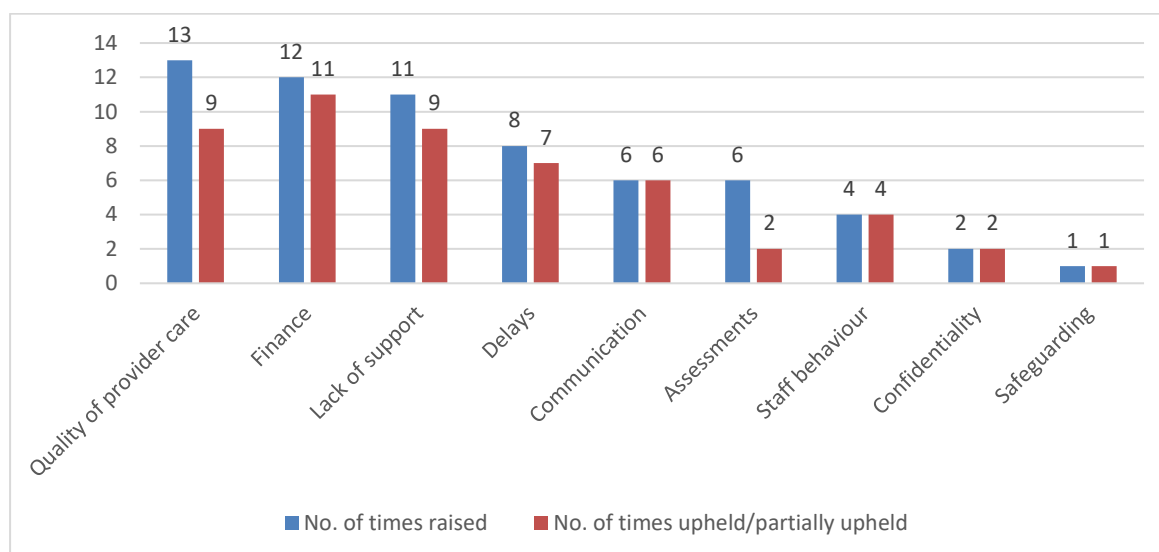


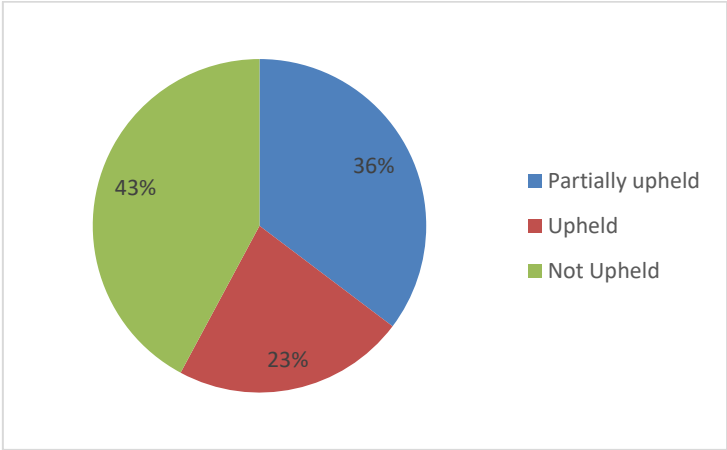
Chart 5: Number of Adult Social Care Complaints received by Principal issue 2023-24

8.3 A summary of the themes raised in top 5 principal issues of complaint is below:

- Delays:** A number of complaints received were related to delays in service delivery across various stages of the support process. Common concerns included waiting times for receiving outcomes on Disabled Facilities Grant (DFG) decisions following Occupational Therapy (OT) assessments, as well as delays in the social care assessments and subsequent reviews. A small number of complaints also reported frustration over the time taken to allocate a social worker and to arrange necessary services. Additionally, disruptions caused by staff absences further contributed to dissatisfaction.
- Finance:** Common issues included perceived direct payment discrepancies in the amounts received, disagreements regarding outstanding debts and the calculation of care contributions, with disagreements about the thresholds used to determine their financial responsibilities. Disputes also arose over the amount of funding allocated for care.
- Quality of Provider Care:** Complaints were received regarding the quality and standard of care provided, whether by individual carers or by home care agencies as a whole. Complainants also raised concerns about the timing of care visits and poor communication from care providers.
- Communication:** Complainants broadly expressed dissatisfaction with the standard and timeliness of communication. A small number of complaints raised related to failure to use individuals' preferred contact methods and difficulty to obtaining contact details for their allocated social workers.
- Assessments:** Assessment-related concerns featured prominently in the complaints received during this period. Some complainants were dissatisfied with how their or their family members' care needs were evaluated, citing disagreements with the outcomes and the level of support offered as a result. One complainant felt that assessments overstated the level of existing support, which in turn created barriers to accessing appropriate services. Others raised

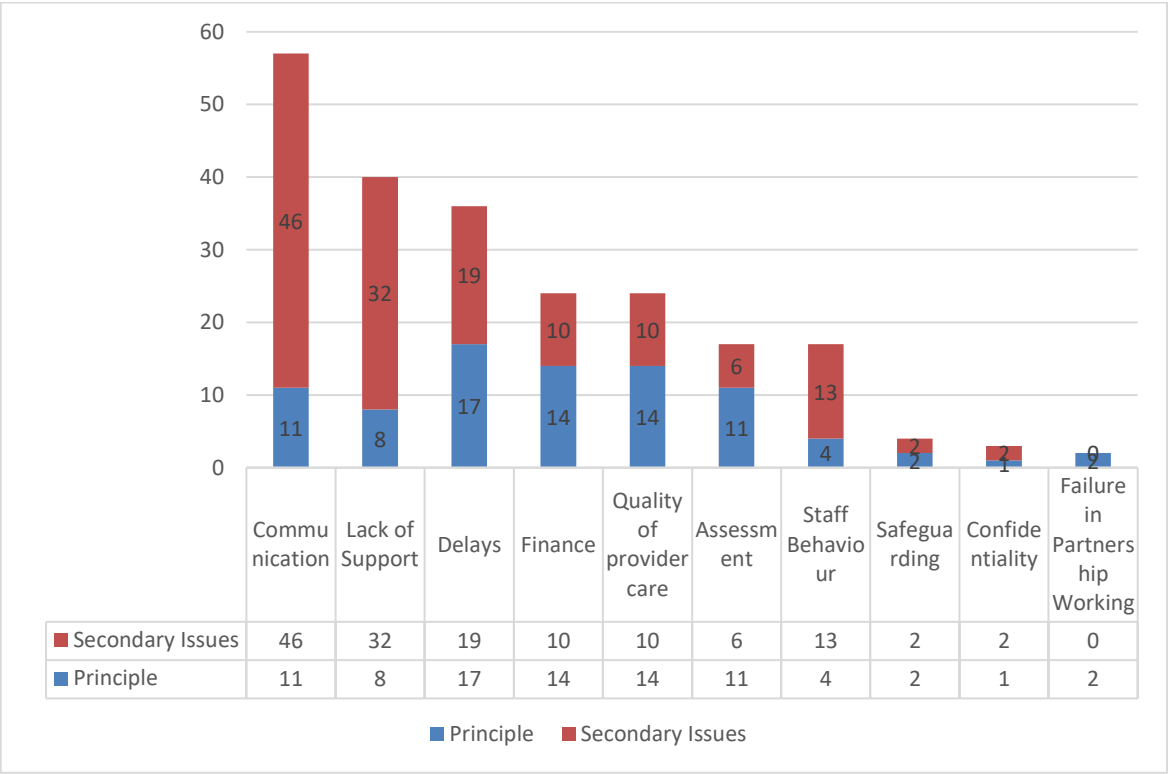
objections to the methods used during occupational therapy assessments, or disagreement with the equipment recommended. There were also disputes over eligibility decisions and reductions in support hours.

Chart 6: Number of complaints by all outcomes 2024/25



- 8.4 This year, 45% or 36 complaints were not upheld, 32% or 29 complaints were partially upheld, and 23% or 19 complaints were upheld. This is illustrated in **Chart 6**. Where complaints are partially upheld, this means that some mistakes were made but not all the issues complained about were substantiated.
- 8.5 Whilst **Chart 4** has set out the primary issues for each stage 1 complaint, Chart 7 below sets out each issue raised within the 84 stage 1 complaints. Across the 84 stage 1 complaints a total of 224 issues were raised, demonstrating the complexity of adult statutory complaints. Determining the primary motivation behind a complaint can be challenging, as issues such as communication and delays are often pervasive throughout the complaint, while the complainant's desired outcome may be to have an assessment amended or a professional decision changed.

Chart 7: Number of Adult Social Care Complaints received by issues 2024-25



Case Study: Clarity, Compassion, and Accountability: Lessons from a Complex Hospital Discharge Case

Background

A complaint was submitted by a family member regarding the handling of their parent's discharge from hospital and subsequent care arrangements by Adult Social Care. The concerns included delays in funding decisions, miscommunication about care funding responsibilities, lack of clarity in communication pathways, and poor communication by the assigned social worker. The complainant expressed distress over the confusion and emotional impact caused by these issues, particularly during a sensitive period following their parent's passing.

Investigation Findings

The investigation revealed several procedural and communication improvements. The funding request for high-cost one-to-one care was not submitted with sufficient information, leading to delays in approval. Although the request was fast-tracked to senior management, the use of the term "panel" by the social worker caused confusion about the process. Miscommunication also occurred regarding Section 117 Mental Health Act funding, where the complainant was incorrectly asked to contribute financially. Additionally, the social worker did not use out-of-office notifications and did not maintain consistent communication, contributing to the complainant's frustration. The social worker's also lacked professional empathy.

Learning from the Complaint

This case highlighted the need for clearer communication, accurate use of terminology, and professional sensitivity. In response, the Council committed to reinforcing training on the funding process, including the correct use of language and the rules surrounding Section 117 top-ups. Staff were also reminded of the importance of using out-of-office messages and maintaining clear communication pathways. Professional boundaries training was reinforced to ensure staff respond appropriately in emotionally sensitive situations. These actions were implemented through the Learning and Development and Professional Standards teams, with the aim of preventing similar issues in the future and improving the overall quality of service delivery.

9. External Care Provider Complaints

- 9.1 The Quality Assurance and Contract Monitoring Team, that sits within the Commissioning Service, investigates complaints about care providers for Adult Social Care. This includes residential and domiciliary care services. Complaints regarding a commissioned provider service, received directly by the Complaints Team, will be logged and processed in accordance with the Statutory Complaints

Procedure and referred to the Quality Assurance and Contract Monitoring Team to investigate and monitor as required. Some complaints that raise issues about external providers are led by other teams if there are other aspects to the complaint, such as financial issues or care planning. In these complaints, social care teams liaise with the Contract Monitoring Teams to ensure that issues relating to quality of care are addressed.

- 9.2 If the care provider service has not had the opportunity to investigate the complaint through its own process, the Complaints Team may ask the complainant if they agree to firstly attempt local resolution with the care provider. If the complainant does not feel local resolution is possible, or they have attempted to resolve their complaint with the provider, the Council will investigate.
- 9.3 This does not include complaints by 'self-funders' who are able to complain directly to the care provider and/or the Local Government and Social Care Ombudsman (LGSCO). Whilst complaints received by self-funders will be signposted to the relevant provider and/or LGSCO, information received by self-funders about the quality of provider services will be passed to the Quality Assurance and Contract Monitoring team to inform the wider quality monitoring of services.
- 9.4 For this reporting year, 19 formal complaints were completed that were fully or partially about external care providers which is slightly more than the 16 complaints last year. 8 of these formal complaints were led by the Quality Assurance and Contract Monitoring Team as the complaints were primarily about the quality of commissioned care provision. The remaining 11 complaints were managed by social care teams, sometimes in collaboration with the Contract Monitoring Team, as the primary focus of the complaints involved communications with Adult Social Care teams, while issues with providers were considered secondary.
- 9.5 14 complaints were about domiciliary care providers for older people, 2 were about learning disability community support services, 2 were about care homes for older people, 1 was about the community equipment service.
- 9.6 These low numbers of complaints should be set in the context of the number of service concerns that have been dealt with by the Quality Assurance and Contract Monitoring Team. This year, 159 service concerns were raised about external care providers which required processing by the Quality Assurance and Contract Monitoring Team.
- 9.7 Service concerns are a quick and effective way of dealing with issues as an informal complaint and prevent issues escalating. The Quality Assurance and Contract Monitoring Team aim to provide an outcome on these concerns within seven working days. Residents who draw on services are always provided with information about the formal complaints process, but the benefits of the service concerns process are that it provides a rapid response for the resident and intelligence to the Quality Assurance and Contract Monitoring team about the performance of external providers.

Case Study: Missed Visits, Missed Opportunities: Ensuring Timely and Reliable Home Care Support"**Background**

A complaint was raised by a family member regarding the care provided to their parent, an end-stage renal patient, by a commissioned care agency. The concerns centred around a missed and delayed care visit on a bank holiday, which resulted in the complainant's father being late for a critical dialysis session. The complainant also highlighted communication failures, lack of contingency planning, and concerns about prioritisation of care during the holiday period.

Investigation Findings

The investigation confirmed that the carer from the agency arrived significantly late due to public transport delays, missing the scheduled care window. As a result, the complainant had to step in to support their parent with essential personal care and ensure they reached their dialysis appointment. Although the carer eventually arrived and provided partial support, the delay and lack of full care provision were acknowledged as unacceptable.

The agency's communication protocols were found to be ineffective. Despite the carer notifying the out-of-hours team early in the morning about the delay, no direct contact was made with the service user or the complainant to inform them or arrange alternative support. The agency's failure to escalate or act on this information in a timely and proactive manner was a key concern. Additionally, although there was no evidence that other people receiving services were prioritised over the complainant's parent, the agency did not attempt to send an alternative carer or consult the family due to unsuccessful contact attempts. The complaint was upheld in most areas, with partial agreement on the issue of prioritisation.

Learning from the Complaint

This case highlighted the critical importance of robust contingency planning, especially during holiday periods when staffing and transport disruptions are more likely. The council committed to working with the care agency to review and improve scheduling practices, particularly for service users with time-sensitive medical needs like dialysis.

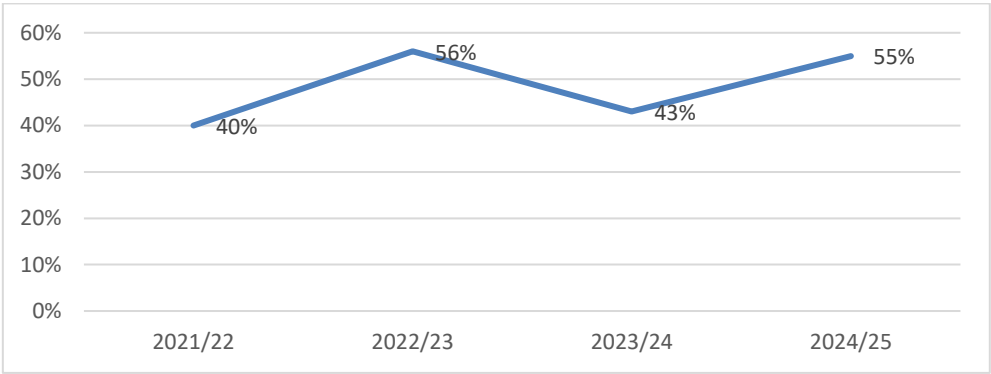
The agency will also be required to review and strengthen its communication protocols, ensuring that all contact details are up to date and that staff are trained to exhaust all available options to notify service users and their families of delays. These improvements aim to prevent similar incidents and ensure that vulnerable individuals receive timely and appropriate care, even during periods of operational strain.

10. Response times

10.1 Adult Social Care teams work towards a local target of 25 working days to respond in writing to formal complaints. As the complaint regulations allow flexibility, within the six-month statutory timeframe, this local target can be changed with the agreement of the complainant who is always kept fully informed. Therefore, whilst we measure against 25 working days to manage our internal performance, no complaints breached the statutory six-month timescale⁴. Also, where complaints have been extended past 25 days, complainants have been consulted throughout and have not raised concerns about delays.

10.2 For this reporting period, Wandsworth received 93 complaints but completed 84 complaints. Timescales were measured for the 84 complaints closed during this year within the 25-day local target.

Chart 8: Percentage of complaints responded to within 25 working days 2021/22 – 2024/25



10.3 Of those, 46 complaints (or 55%) were closed within 25 working days and 38 (45%) exceeded this timeframe. **Chart 8** details response times for the last four years which shows that less complaints this year were completed within 25 days.

10.4 For the 45% of complaints that exceeded the 25-day internal timescale, the average time for resolving the complaint from start to finish was 37 days which well within the statutory six months target. Positively, no complaints exceeded the six-months statutory timeframe this year. Adult Social Care complaints often involve multiple teams, requiring additional time for a thorough investigation.

10.5 Where complaints take longer than 25 days, extensions are agreed with the consent of the complainant and complainants are kept informed at all stages. As Adult Social Care complaints can be complex, sometimes it is necessary to use additional time to provide a comprehensive investigation. No complaints were received about the length of time taken to complete an adult statutory complaint.

⁴ Six months is calculated as 182.5 days although this includes non-working days.

11. Equalities data and categories of support

11.1 This year 45 complaints (54%) were from or on behalf of residents of working age; between the ages of 18 and 64. A further 39 complaints (46%) were complaints from, or on behalf of older adults (or over 65).

11.2 This year 52 complaints concerned females, and 32 complaints concerned males. The reported numbers exceed the number of complaints as some complaints relate to multiple residents.

11.3 For the 45 complaints from or on behalf of residents of working age:

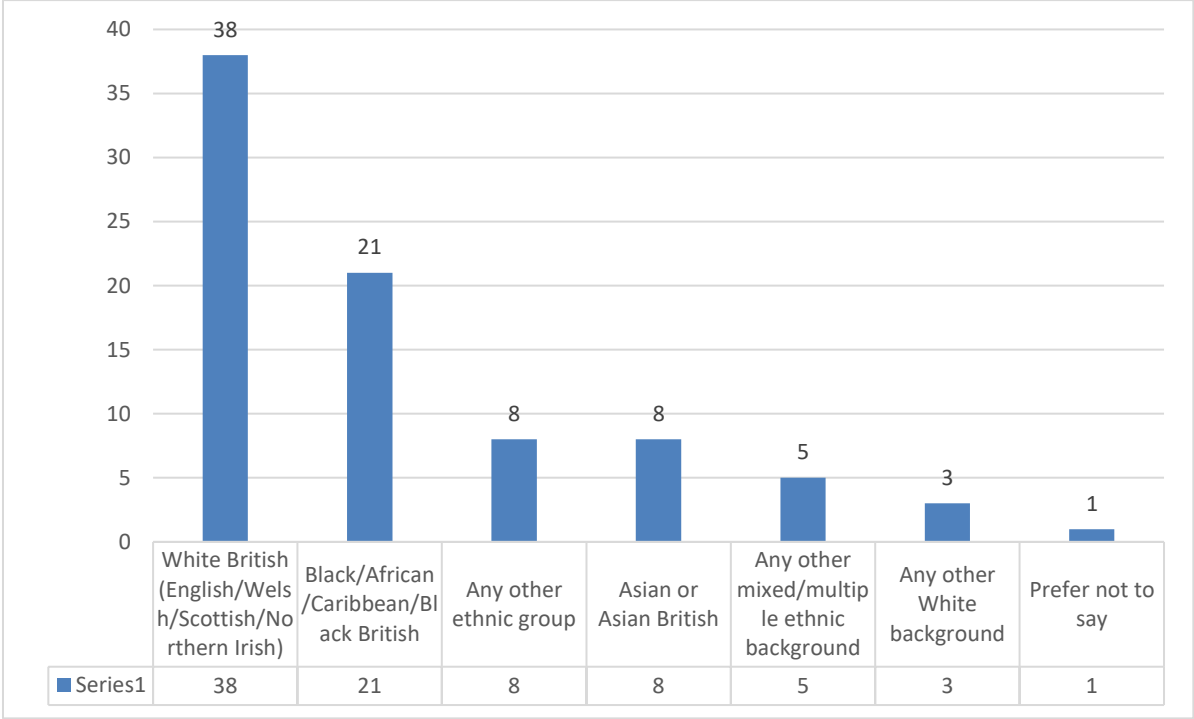
- 38% were in receipt of support for physical support which includes personal care and mobility and/or personal care.
- 31% were in receipt of support for learning Disabilities.
- 11% were in receipt of support from the Mental Health Teams.
- 9% (4 people) were in receipt of social support for substance misuse, social isolation or support to a carer.
- 4% (2) were in receipt of support for learning disabilities and SNAS communication and interaction.
- 4% (two people) were in receipt of sensory for visual impairment or multiple Sensory support.
- 2% (one person) was in receipt support from mental health and physical support.

11.4 For the 39 complaints from residents in the older people's category (65 plus), where known:

- 44% were receiving physical support as well as support for hearing or dual Impairment, social isolation or support for memory and cognition.
- 41% were receiving physical support personal care, which is unsurprising given the demographics.
- 8% (or 2 person) were receiving physical and social support.
- 5% (or 2 people) were receiving support for mental health.
- 3% (or 1 person) was receiving sensory support.
- 3% (or 1 person) was receiving social support.
- 3% (or 1 person) was receiving support memory and cognition.
- 3% (or 1 person) was receiving support mental health and sensory support.

11.5 Where known, **Chart 9** provides ethnicity data for residents drawing on services who made complaints or had complaints made on their behalf. The majority of service users were from a White background (41 or 49%). In Wandsworth, 51% of Adult Social Care services users are from a White background. Black, Asian and Minority Ethnic Groups represent 49% of service users.

Chart 9: Ethnicity Data 2024-25



Case Study: Supporting Seamless Transitions

Background

A parent submitted a statutory complaint regarding the transition of their daughter, a young adult with disabilities, from Children's Services to Adult Social Care. The complaint focused on two main issues: the delay in receiving agreed Direct Payments and the decision by Adult Services to not continue funding alternate weekend residential care at her school, which had previously been supported under Children's Services. The family expressed frustration over the lack of communication, delays, and the emotional toll caused by the uncertainty during this transition period.

Investigation Findings

The investigation upheld the complaint regarding the delay in Direct Payments. This delay was attributed to the social worker not submitting the necessary financial and legal documentation in a timely manner. The social worker was newly qualified, and the incident raised learning about the adequacy of supervision and support provided. The second part of the complaint, concerning the withdrawal of weekend funding for residential care, was not upheld. The investigation confirmed that the arrangement had been a time-limited agreement under Children's Services and that Adult Services had clearly communicated that such funding would not continue post-transition, as it fell outside their policy. Despite this, the case was reviewed multiple times by the funding panel, and the decision to discontinue the funding was deemed appropriate and consistent with policy. The family was informed of their right to formally appeal the decision.

Learning from the Complaint

The Council acknowledged the need for improved oversight and training for newly qualified social workers, particularly in managing Direct Payments. In response, the Preparing for Adulthood Service has conducted training sessions with the Direct Payments Team, updated guidance materials, and implemented measures to strengthen supervision practices. These steps aim to prevent similar delays and ensure that families experience a smoother transition process. The case also highlighted the importance of clear communication and managing expectations when transitioning between service areas, especially for families supporting individuals with complex needs.

12. Corporate Complaints

12.1 This report provides a brief overview of Corporate Complaints closed by Adult Social Care. Detailed reporting on Corporate Complaints is within Wandsworth Council's Corporate Complaints Report 2024-25.

12.2 Adult Social Care completed 10 stage 1 corporate complaints this year compared to 1 last year. Only 1 escalated to stage 2 which is the same as last year.

- 12.3 Adult Social Care do not receive many corporate complaints. The Corporate Complaints process handles complaints from individuals who have interacted with Adult Social Care but are not receiving or been assessed for statutory services. Often, these are relatives making complaints about communication or information sharing for themselves, rather than on behalf of a person drawing on services.
- 12.4 7 out of the 10 complaints (70%) were completed on time. Unfortunately, the 1 stage 2 complaint was sent late.
- 12.5 Corporate complaints for Wandsworth Council are analysed in more detail within the Wandsworth Annual Corporate Complaints Report 2024-25.

13. Ombudsman Cases

- 13.1 This report provides a brief overview of Local Government and Social Care Ombudsman (LGSCO) closed by Adult Services. Detailed reporting on Corporate and Ombudsman Complaints is within Wandsworth Council's Corporate Complaints Report 2024-25.
- 13.2 A complainant reserves the right to refer their complaint to the Local Government and Social Care Ombudsman (LGSCO) at any time. However, in most cases, the LGSCO 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.
- 13.3 In 2024-25, a total of 8 LGSCO enquiries were closed compared to 7 last year. None of these resulted in a formal investigation. Details of the LGSCO **table 4** below.
- 13.4 Outcomes and status of the cases are in Table 4 below:

Table 4: Ombudsman cases by team and outcome

Quarter	Service Area	Subject	Outcome
1	Mental Health Assessments	Mental health services provided when detained under the Mental Health Act	LGSCO did not investigate as rights to appeal the decision were used via the Tribunal process
2	Learning Disability	Unhappy with the level of support being provided whilst out in the community	LGSCO did not investigate as that matter was being considered through ongoing court proceedings
3	Learning Disabilities	Concerns about how best to meet social care needs in day services provision	LGSCO did not investigate as the Court of Protection was the correct place to settle the matter

3	Locality Team South	Family unhappy with lack of involvement in safeguarding proceedings	LGSCO did not investigate as there was not enough evidence of fault and some issues were being considered by the Court of Protection
4	Mental Health Assessments	Complaint about inaccurate recording when relative being detained under the Mental Health Act	LGSCO did not investigate as they assessed that an investigation would not anything further to the Council's response
4	Preparing for Adulthood	Complaint about behaviour of social worker	LGSCO did not investigate as it is unlikely they would be able to provide a different outcome than already achieved
4	Hospital Team and NHS	Complaint about alleged failure to provide adequate care at home after hospital discharge	LGSCO did not investigate as it is unlikely they would be able to provide a different outcome than already achieved
4	Locality Teams	Complaint about how the council managed their transfer of care from another authority and management of Direct Payment Card	LGSCO did not investigate as it is unlikely they would be able to provide a worthwhile outcome

14. Compliments

14.1 Positive feedback regarding staff or service delivery is another way in which the department can learn how well services are being delivered. Compliments remind us of the excellent practice within services and reinforce that the promises made to learn from complaints are sincere. Staff are reminded to report compliments they receive so we can record as much positive feedback as possible to evidence the commitment to good social care practice.

14.2 Examples of compliments received from both service users and partner organisations are outlined below:

- *One of the clients said 'thank you' to [name] a number of times for the support she has provided to him over the years and said 'being in extra care has changed my life' which was really lovely to hear. He seemed very pleased to be living independently, and it was very clear how well [name] knows his case and what's important to him, checking if the care provider has progressed with*

supporting him to meet his goals of getting out into the community, to the gym etc. (Locality South)

- *"[name] has been nothing but supportive, sympathetic, understanding. Not to mention professional. [name] not only helped my mother massively, But also helped me as I am the only family member looking after my mum. [name] made the process so much more less stressful. Thank you for your invaluable professionalism. [name] provided a good customer experience on both levels". (Locality North)*
- *"[name] was incredibly thoughtful in helping us try to respect [name's] wishes while assuring her safeguarding. Because both of us reside outside of the UK, he was considerate and recognised the time difference when arranging conference calls with us. He was extraordinarily patient with us as our perspectives on care for our mother evolved, even when we sometimes changed our minds. He guided through the agency's evaluation process of cases such our mother's". (Locality West)*
- *"During a telephone conversation with [name] she asked me to pass on her thoughts with regard your recent assessment visit. [name] said you were like a breath of fresh air coming into her home, she said you were very helpful and has helped her hugely with the advice and equipment provided". (Sensory Team)*
- *" My experience of the discharge from hospital service run by WBC is that it is very thorough and very effective. They have arranged for me to have the equipment that I need to manage at home (delivered within 4 hours of being ordered), have input home care straight away, have arranged physiotherapy immediately and in all respects I can say that the system works. All of this has been arranged within 24 hours of my discharge from hospital. In terms of marks out of 10, I would score it as 10." (Hospital Social Work Team)*
- *"[name] said to another worker in CAST she found [name] a very helpful and very easy to talk to. She also said that it was great that [name] had listened to her and actually made all the referrals she said she was going to. Her exact words were, "You need more people like her in your organisation..." (First Contact)*

15. Key Achievements 2024/25

- 15.1 This year, the Complaints Team has demonstrated a strong commitment to ensuring the council remains fully compliant with the Complaints Handling Code jointly developed by the Local Government and Social Care Ombudsman (LGSCO) and the Housing Ombudsman Service (HOS). Through continuous review and refinement of internal processes, the team has worked diligently to embed the principles of fairness, transparency, and accountability into every stage of complaint handling. Regular training,

a new Corporate Complaints Policy, adding complaint handling responsibilities to all new job descriptions, improving induction information on complaints practice, and collaborating with service areas have fostered a culture of learning and improvement. The Complaints Manager also held a session with the Think Bigger Network to look at complaints through the perspective of storytelling, to further embed a positive complaints culture that prioritises listening to our residents. As a result, the council is better equipped to respond to complaints effectively and in line with national standards, reinforcing public trust and driving service excellence.

- 15.2 This work led to the Complaints Team being honoured with the Team of the Year award at the December 2024 Staff Awards for exemplifying the organisational value of Leading By Example. This value recognises that leadership is not confined to roles or titles - it's about stepping up, taking responsibility, and setting a standard that others aspire to. Throughout the year, we consistently demonstrated dependability, professionalism, and a commitment to continuous improvement. We tackled complex and sensitive complaints with empathy and integrity, supported each other and staff through challenging cases, and proactively refined processes to improve outcomes for residents. Beyond our own performance, we played an important role in supporting services across the organisation to improve their own complaint handling. Through tailored guidance, collaborative briefings, and constructive feedback, we have helped further embed a culture of learning and accountability, enabling services to respond more effectively, robustly, more confidently and compassionately to residents' concerns.