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# **Annual Report 2024/25 Adult Social Care (ASC) Complaints and Commendations**

Adult Social Care Scrutiny Commission

Date of meeting: 12/03/2026

Lead director/officer: Laurence Mackie-Jones

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## Useful information

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- Report version number: V1.3

### 1. Summary

The purpose of this report is to provide Adult Social Care's Scrutiny Commission with a copy of the Annual Report for 2024/25 produced in relation to Adult Social Care's (ASC) statutory, corporate, Local Government & Social Care Ombudsman complaints and commendations. Information within this report provides a full picture of the formal complaint contacts and commendations received across the Department and accompanying analysis.

### 2. Recommendation(s) to scrutiny:

Adult Social Care Scrutiny Commission are invited to note the contents of the 2024/25 Annual Report for Adult Social Care's statutory, corporate, Local Government and Social Care Ombudsman complaints and commendations.

### 3. Detailed report

The Annual Report 2024/25 for Adult Social Care complaints and commendations is included in full at Appendix 1 of this report.

#### 3.1 Early resolution actions

**3.2** Where possible, services across Adult Social Care proactively address and resolve the many and varied informal contacts received promptly and directly, outside of the statutory complaint process. Work is continuing within the department to ensure that any themes and trends arising from these broader contacts are usefully captured; to contribute to the department's understanding about the relevance and quality of the services being provided to individuals drawing on social care support and carers.

**3.3** Aside from the specific complaint information noted in this report, the Adult Social Care complaint team directly received 193 other general contacts in 2024/25, addressed with some further brief involvement: 66% of these contacts went on to be forwarded to a specific team in ASC for direct action, 16% were redirected for the attention of other Council services, 15% were for Leicestershire County Council, and a remaining 3% were not for the local authority.

**3.4** The details noted in the annual report are specifically in relation to the more formal enquiries, statutory, corporate, Local Government & Social Care Ombudsman complaints considered, as well as commendations received by Adult Social Care in the last year. This information is provided with some further analysis of the types of complaints received, by division and across service areas.

**3.5** The full version of the annual report is attached for information at Appendix 1.

**For the purposes of this meeting and of note from 2024/25:**

- 3.6** The number of formal statutory complaints concluded during the year was 68 (this represents approximately 1.3% of people drawing on long term Adult Social Care support.)
- 3.7** Twenty complaints were upheld (29% of total) and ten (15%) were partially upheld (44% of total).
- 3.8** Forty-nine contacts initially forwarded to the ASC complaint team were reviewed and proceeded to be actively addressed by services within the department, further to receipt, rather than being dealt with as formal complaints directly (noted as initial enquiries). The initial enquiries were varied and covered a wide range of topics such as issues around support and care provision, contact/access issues, waiting times, change in support arrangements and potential safeguarding action.
- 3.9** The most frequent matters complained about in 2024/25 related to aspects of care support and assessment (including finance matters).
- 3.10** The top reasons for making a complaint in 2024/25 were in relation to the following: challenging practice decision, lack of communication / consultation / information, followed by a delay in receiving a service.
- 3.11** Complaints with partially upheld / upheld outcomes were also concluded on the same basis above - challenging practice decision, lack of communication / consultation / information, followed by a delay in receiving a service.
- 3.12** During 2024/25, ASC noted the conclusion of nineteen Local Government & Social Care Ombudsman (LGSCO) enquiries in relation to its services. Four upheld enquiries were noted in relation to the department's actions directly. (A further complaint is also noted for adult social care with the Ombudsman's annual figures, but this complaint specifically concerned the administration elements of a disabled facilities grant, for which the related actions, complaint response and remedies were concluded directly by the Housing Division).
- 3.13** According to the Ombudsman's Review, 79% of all ASC complaint investigations undertaken across England in 2024/25 were upheld. The City's upheld rate for ASC complaints in the same year was 71%.
- 3.14** The Department receives many more commendations than it does complaints. There were fewer commendations formally logged than in the previous year but one hundred and sixty commendations were received, reflecting the good service provided. Managers have been reminded to log the positive verbal feedback that they receive, so that this can be formally reported. The commendations received have been acknowledged further within the Department and with the members of staff concerned.
- 3.15** A key part of managing complaints involves identifying learning and taking suitable actions to avoid similar issues arising again. Follow-up actions may be implemented on a departmental or service-specific basis, or isolated, in relation to an individual complaint. Some of the department's learning and associated actions in response to the complaints considered in 2024/25 is set out at section 7 of the annual report and included such actions as staff training in relation to specific areas of social care work, staff reminders issued in relation to best

practice, changes in practice/processes and further guidance or information produced.

**3.16** As noted earlier at paragraph 2.2, further work is continuing to make sure that the Department considers all sources of feedback it receives holistically (including complaint and commendation information), in conjunction with the work of ASC's Practice Oversight Board. This Board focuses on the links between wider feedback received across the department, learning and making practice improvements.

**3.17** Further to the Care Quality Commission's assessment of Leicester City's adult social care and the report published in July 2025, specific areas for improvement have been identified for further action and an improvement plan is in place for 2025-2027. It is expected that some of the specific areas noted with the action plan will result in a positive impact on the common complaint themes that arise and include:

- Improving the experience of carers
- Waiting times and timeliness
- Safeguarding

**3.18** The ASC complaints team continues to work with managers to ensure that efficient, robust and thorough investigations are undertaken for all incoming complaints. Without compromising the independence of the complaint process, the complaints team provides support that helps to avoid additional costs that could be incurred through the engagement of external complaint investigators. The team works to ensure that quality, open and transparent responses are provided to individuals in receipt of support from ASC: making sure that any corrective actions or remedies are identified and addressed as appropriate, with lessons for wider service learning also being taken forwards.

## **4. Financial, legal, equalities, climate emergency and other implications**

### **4.1 Financial Implications**

There are no direct financial implications arising from this report.

Signed: Mohammed Irfan

Dated: 21/11/25

### **4.2 Legal Implications**

I confirm that there are no specific legal implications on this annual report.

Signed: Susan Holmes

Dated: 4<sup>th</sup> December 2025

### **4.3 Equalities Implications**

The Annual Report 2024/25 details information about statutory, corporate, Local Government & Social Care Ombudsman complaints, as well as commendations that have been received by Adult Social Care during the last year. Complaints are a valuable source of information which can help to identify recurring or underlying problems and potential improvements. Having an accessible robust complaints

procedure in place ensures fair redress to dissatisfaction experienced and reported by users of services and carers on their behalf.

This process is in keeping with one of the council's equality and diversity strategy priorities areas, to design, commission and deliver services that are, inclusive and responsive to the needs of people and communities in Leicester. Analysis has been undertaken in terms of complainants' profiles, as recorded in the report, to ensure that the complaint procedure remains accessible and equitable to all. The report provides evidence to inform progress against this outcome. In addition, recording and analysis of complaints received as set out in the report enables the council to consider whether it is meeting the general Public Sector Equality Duty aims of eliminating discrimination and promoting equality of opportunity in its service provision.

Signed: Equalities Officer, Surinder Singh

Dated: 24th November 2025

#### **4.4 Climate Emergency Implications**

There are no significant climate emergency implications directly associated with this report.

Signed: Phil Ball, Sustainability Officer, Ext 372246

Dated: 24<sup>th</sup> November 2025

#### **4.5 Other Implications**

None.

Signed:

Dated:

### **5. Background information and other papers:**

The Adult Social Care complaint process adheres to the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.

The Regulations' publishing requirements for Local Authorities and complaints highlight that the following details should be made available annually:

- I. The number of complaints received within a period 1<sup>st</sup> April – 31<sup>st</sup> March.
- II. The number of complaints determined as well-founded.
- III. The number of complaints referred to the Local Government Ombudsman.
- IV. A summary of the subject matter of complaints received.
- V. A summary of any matters of general importance arising out of the complaints or the way in which they were handled.
- VI. Any matter where action has been taken or is to be taken to improve services as a consequence of those complaints.
- VII. Ensure that the annual report is available to any person on request.

### **6. Summary of appendices:**

Appendix 1 Annual Report 2024/25 Adult Social Care (ASC) Complaints and Commendations

# **ANNUAL REPORT 2024/25**

## **ADULT SOCIAL CARE (ASC) COMPLAINTS AND COMMENDATIONS**

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### APPENDIX 1

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2. Breakdown of complaint information received across the Department
3. LGSCO complaints received by service

### APPENDIX 2

Adult Social Care (ASC) complaint process in brief (chart)

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Performance indicators relating to the management of statutory complaints

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Outcomes for 2024/25 action plan

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2025/26 action plan

## 1. Executive summary

### Early resolution actions

- I. Where possible, services in Adult Social Care (ASC) are proactive and take early resolution actions to quickly address and resolve the many and varied informal contacts received, outside of the statutory complaint process. Work is continuing within the department to ensure that any themes and trends arising from such contacts are usefully captured, to help contribute to the department's understanding of the suitability and quality of the services provided to people who draw on support and their carers.
- II. The Adult Social Care complaint team directly received 193 general contacts in 2024/25 that were addressed with brief involvement (such contacts for example included more general requests for response, like a change in care call times, or a request for money from a person drawing on support – ultimately requiring redirection for action by a team or worker). Sixty-six per cent of these contacts went on to be directed to a specific team in ASC for further action, 16% were for other Council services, 15% were for redirection to Leicestershire County Council, and the remaining 3% were not for the local authority to address.
- III. In 2024/25, 49 specific contacts were noted by the ASC complaint team as 'initial enquiries' (pre-complaint matters). These contacts covered a wide range of topics such as: issues around support and care provision, contact/access issues; waiting times; change in support arrangements and potential safeguarding action. The complaints team had more in-depth involvement with these contacts and addressed some related matters directly. However, the majority still proceeded to be addressed by the responsible service, without the need for further consideration as a formal complaint.

### Complaint contacts

- IV. Complaints, as well as commendations, provide valuable feedback about the services provided by a Council. They provide an indication of the areas that are performing well and highlight where further attention should be focused to improve service delivery and practice.
- V. For those matters that are addressed formally as a complaint, it is a statutory requirement to produce an annual report under the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.
- VI. The number of formal statutory complaints that progressed to conclusion in 2024/25 was 68: 11 complaints more than the previous year. Twenty of these complaints were upheld and 10 were partially upheld (44% of the total). In 2023/24, nineteen complaints were upheld and 7 were partially upheld - 45% of the total.
- VII. For further context, the number of statutory complaints concluded in 2024/25 equates to complaints from around 1.3% of people drawing on Adult Social Care support.
- VIII. For all contacts that proceed to be formally reviewed under the statutory ASC complaint procedure, investigations at the first stage of the process are based on an allocated response timescale that may be up to 10 working days (green), up to 20 working days (amber), or up to 65 working days (red). Complaints that progress to the second and final stage of the statutory process are considered by the Local Government & Social Care Ombudsman (LGSCO).

- IX. In 2024/25 no complaints were responded to in conjunction with Health partners or the County Council, with whom Adult Social Care shares the same complaint process.
- X. The highest number of complaints received were in relation to finance related matters, care and support and care assessments.
- XI. The top three reasons for upholding complaints either partially or fully in 2024/25 were noted to be: challenging practice decision, lack of communication / consultation / information, followed by a delay in receiving a service.
- XII. The average response time for complaints to be addressed during 2024/25 was 19 working days.
- XIII. During 2024/25, ASC noted the conclusion of nineteen Local Government & Social Care Ombudsman (LGSCO) enquiries in relation to its services. Four enquiries in relation to the department's actions were upheld: a further complaint was also upheld and noted for ASC by the Ombudsman, but this was in relation to the administration of a disabled facilities grant undertaken by the Housing Division so is not included with ASC's figures in this report. No public interest reports were published.
- XIV. Some complaints fall outside the remit of the statutory complaint procedure and are addressed under the Council's corporate procedure: three such complaints were recorded in 2024/25. All three complaints were from care providers.
- XV. A breakdown of the complaints received across Adult Social Care by division and service area is included with Appendix 1 of this report.

### **Commendations**

- XVI. The Department receives many more commendations than it does complaints. There were fewer commendations formally logged than in the previous year, but one hundred and sixty commendations were received, reflecting the good service provided. Managers have been reminded to log the positive verbal feedback they receive, so that this can be formally reported. The most common message received in relation to commendations is a 'thank you,' followed by praise for a worker or a team's involvement. The commendations received have been acknowledged further within the Department and with the members of staff concerned.

## **2. Accessibility of the complaint procedure**

- 2.1 Details relating to the Adult Social Care complaint procedure and how to make a complaint are available on [www.leicester.gov.uk](http://www.leicester.gov.uk) (which also incorporates easy read advice and direct access to an online complaint form). Individuals that are new to the service are also advised of the complaint procedure by social care staff as part of initial discussions, with the assessment process.
- 2.2 Adult Social Care can also take onboard oversight for some matters where it has been involved with the support arrangements for an individual's care (i.e., for complaints in relation to residential or home care provision).
- 2.3 The majority of complaint contact arises from either the Council's web page link to making a complaint or through direct emails sent to the ASC complaints team.

2.4 Complaint information signposts individuals to advocacy organisations for support but in practice most individuals, their relatives or carers, make an approach directly. The main sources for complaint contacts in 2024/25 were:

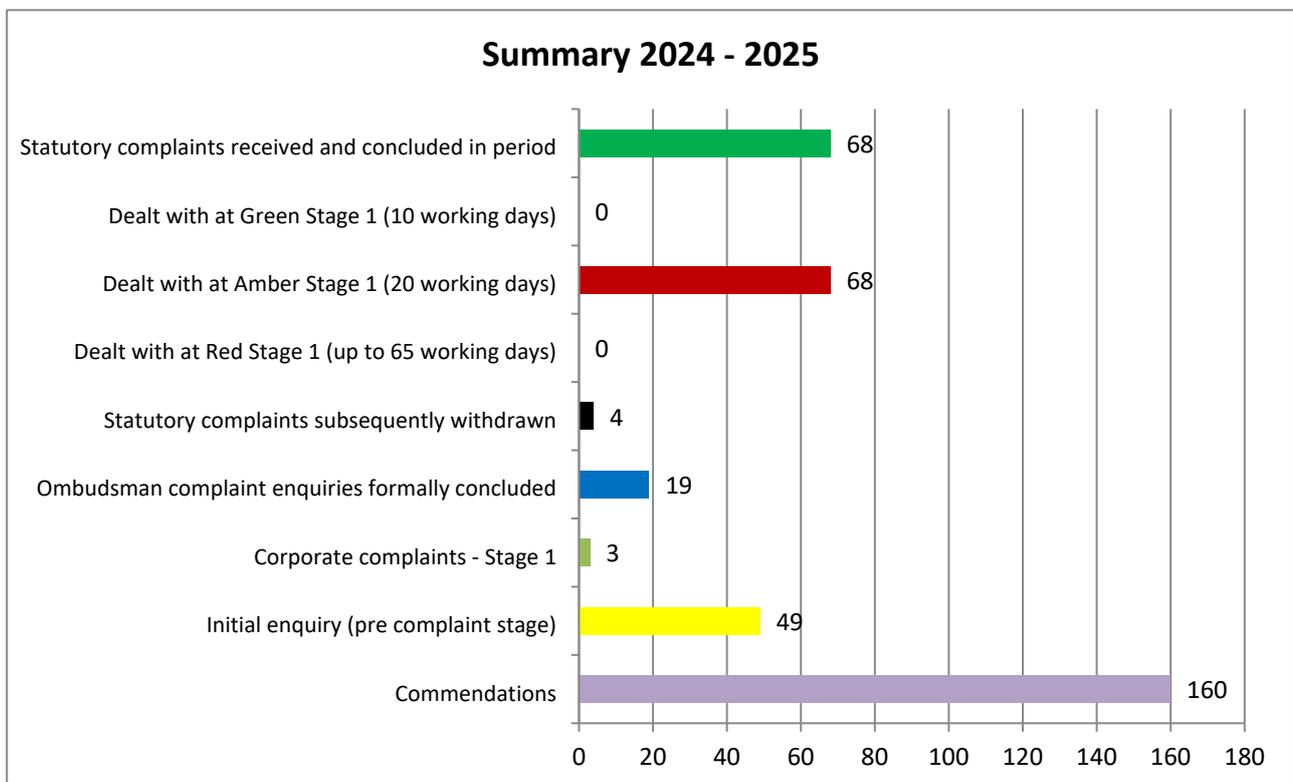
- relatives – 63.2%
- direct contact from the individual in receipt of support – 30.9%
- friend/next of kin – 4.4%
- formal representative – 1.5%

2.5 Adult Social Care encourages an open and accessible approach to complaints, which is reflected in the numbers of complaints considered by the Council each year (although the overall number of complaints received Vs the number of people in receipt of service provision remains small in comparison). With each formal complaint that is addressed, the person is advised of their right to go to the Local Government & Social Care Ombudsman and the Department may receive Local Government & Social Care Ombudsman enquiries further to this.

2.6 Complaints received concerning ASC services and other partner agencies, such as the NHS, University Hospitals Leicester, Leicestershire Partnership Trust, and Leicestershire County Council are also responded to under the same statutory complaint regulations. A locally agreed process is in place to help the experience run more efficiently and effectively for the person. No complaints were managed under these arrangements during 2024/25.

### 3. 2024/25 complaint contacts

3.1 All contacts recorded in relation to complaints and commendations received during 2024/25 are highlighted in the following chart:



To explain further:

- 3.2 All contacts noted here were formally recorded during the reporting period, either as an initial enquiry<sup>i</sup> (49) or as a complaint. Sixty-eight statutory complaints were concluded during 2024/25 and all were allocated up to a 20-working day response timescale (there are other locally agreed timescales applied for complaints that concern other organisations, such as health).
- 3.3 Of the 68 statutory stage 1 complaints that progressed to a formal conclusion, 20 complaints were upheld (29% of total) and 10 (15%) were partially upheld (44% of total).
- 3.4 Three complaints were logged under the corporate complaint procedure in 2024/25 – all were from care providers.
- 3.5 During 2024/25, ASC recorded nineteen formal enquiries concluded by the Local Government & Social Care Ombudsman (LGSCO) in relation to services. (Further details about the LGSCO complaints received are provided at section 9).
- 3.6 Regular contact is maintained with people who raise a complaint and a flexible approach is employed to address the issues being raised. On occasion, open communication between the person raising concerns and the Council encourages resolution earlier on in the complaint process (four contacts were withdrawn in 2024/25).
- 3.7 Although a decrease on the previous year's numbers (244), a substantial number of commendations were still received in 2024/25 - 160. Commendations are always welcomed by staff and the importance of sharing positive feedback has continued to be encouraged throughout the year.
- 3.8 Commendations received are highlighted in the Social Care & Education newsletter and any significant feedback is acknowledged further with the member of staff concerned, by the Director. The complaints team also flags up the positive feedback received for a service with the respective Heads of Service, for their further attention. (See Section 10 for some examples of the positive comments received).

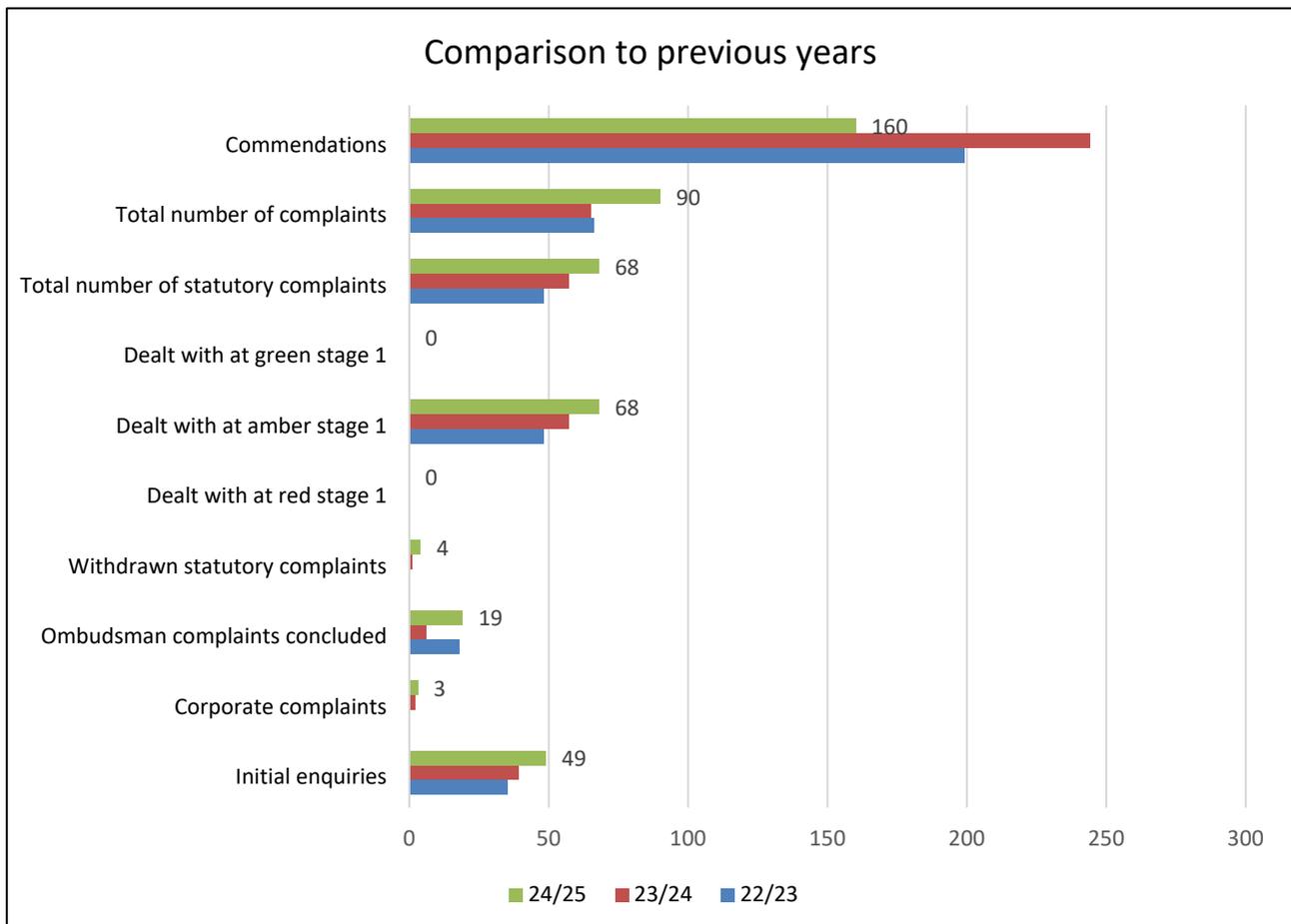
#### **4. Comparison to previous years**

- 4.1 To provide some more general information about the nature of contacts received over the past 3 years by the City Council's Adult Social Care Department, a snapshot of the type of contacts recorded by the complaints team is as follows:<sup>ii</sup>

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<sup>i</sup> An initial enquiry is a contact that falls outside the definition of a statutory complaint as it has been resolved within one working day. Additionally, a concern may be classed as an initial enquiry when clarification is pending as to whether the complaint procedure is the appropriate route for addressing the matter further.

<sup>ii</sup> Presently, there is no statutory requirement for local authorities to publish complaint information, and the data that is available from other local authorities does not always offer like for like information for benchmarking purposes. The issues/nature of services that local authorities may include under their statutory complaint process can vary.



## 5. Information in relation to people and complaints in 2024/25

- 5.1 Each complaint received by Adult Social Care is considered on an individual basis and in relation to the specific concerns raised. Any resolution actions for individual complaints are usually addressed at the point of the written response to the person.
- 5.2 All complaints are subsequently analysed further, to identify any wider lessons, themes or common issues arising. Although the overall number of complaints received represents a small percentage of the people drawing on support from ASC, further analysis has been undertaken in terms of who the complaint is in relation to, as recorded below, to ensure that the complaint procedure remains accessible and equitable to all.
- 5.3 A total of 982 individuals were deemed eligible to receive support from ASC following a completed assessment in 2024/25. From available data, 5071 people were noted to be in receipt of long-term support from ASC on 31st March 2025.

### Complaints in relation to ethnicity

- 5.4 A detailed breakdown of the ethnicity of those individuals at the heart of complaints received in 2023/24 and 2024/25 is as follows:

<b>Ethnicity of individual in receipt of support</b>	<b>2023/24 Number / percentage of people raising a complaint</b>	<b>2024/25 Number / percentage of people raising a complaint</b>	<b>Overall Number/ percentage of ASC individuals in long term support as of 31<sup>st</sup> March 2025</b>
<b>Asian or Asian British – Indian</b>	<b>12 (21%)</b>	<b>16 (23.5%)</b>	<b>1496 (29.5%)</b>
<b>Asian or Asian British – Pakistani</b>	<b>-</b>	<b>5 (7.3%)</b>	<b>93 (1.8%)</b>
<b>Asian/Asian British – Bangladeshi</b>	<b>-</b>	<b>-</b>	<b>24 (0.5%)</b>
<b>Asian/Asian British – Other</b>	<b>2 (3.5%)</b>	<b>-</b>	<b>164 (3.2%)</b>
<b>Chinese</b>	<b>-</b>	<b>-</b>	<b>10 (0.2%)</b>
<b>Arab/Arab British</b>	<b>-</b>	<b>-</b>	<b>5 (0.1%)</b>
<b>Black or Black British – Caribbean</b>	<b>4 (7%)</b>	<b>3 (4.4%)</b>	<b>146 (2.9%)</b>
<b>Black or Black British - African</b>	<b>2 (3.5%)</b>	<b>-</b>	<b>152 (3.0%)</b>
<b>Black or Black British – Other</b>	<b>1 (1.8%)</b>	<b>1 (1.5%)</b>	<b>38 (0.7%)</b>
<b>Dual Heritage</b>	<b>1 (1.8%)</b>	<b>1 (1.5%)</b>	<b>89 (1.8%)</b>
<b>White – British</b>	<b>26 (45.6%)</b>	<b>34 (50%)</b>	<b>2473 (48.8%)</b>
<b>White - Irish</b>	<b>1 (1.8%)</b>	<b>1 (1.5%)</b>	<b>53 (1.0%)</b>
<b>White – Other</b>	<b>1 (1.8%)</b>	<b>4 (5.9%)</b>	<b>162 (3.2%)</b>
<b>Other</b>	<b>-</b>	<b>-</b>	<b>38 (0.7%)</b>
<b>Not known</b>	<b>7 (12.3%)</b>	<b>3 (4.4%)</b>	<b>118 (2.3%)</b>

5.5 In 2024/25, further to the 68 complaints received:

- 57.4% of people raising a complaint were White (just above the total adult social care population for White people noted to be 53%)
- 30.8% of people complaining identified as Asian (slightly below the total Asian population drawing on support - 35%)
- 5.9% of complaints were noted to be from Black individuals (just below the 6.6% total of the Black population accessing adult social care support)
- 1.5% related to individuals of dual heritage (total population of 1.8%)
- The ethnicity for 4.4% of people was unknown.

5.6 It is difficult to draw any significant conclusions from the details noted at 5.5 above, as the overall sample size for people making complaints is relatively small (as noted, only 1.3% of the total number of people drawing on support in 2024/25 proceeded to make a formal complaint). In relation to the total number of individuals drawing on support, the number of people raising a complaint is largely comparable to the ethnicities of those drawing on support. This information continues to be noted on a year by year basis, so that any potential barriers to complaining or accessing the complaint process are considered.

5.7 The following complaint outcomes in 2024/25 were noted as follows:

Outcome	Asian	White	Black	Dual Heritage	Not known	Totals (for complaints concluded)
Not Upheld	11	22	3	1	1	38
Partially Upheld	5	5	-	-	-	10
Upheld	5	12	1	-	2	20
<b>Total</b>	<b>21</b>	<b>39</b>	<b>4</b>	<b>1</b>	<b>3</b>	<b>68</b>

5.8 The top complaint reason for either partially upheld or upheld complaints from individuals that identified as Black, Asian or Minority Ethnic was split between lack of communication / information / consultation and poor care plan / needs not met

5.9 The top complaint reason identified for partially upheld/upheld complaints from White individuals was challenging practice decision, followed by lack of communication / information / consultation.

5.10 The top primary service reason for individuals from an Asian ethnicity was physical frail/temporary ill, for Black people there was no leading reason, whereas for White groups it was mental health.

5.11 Given the small number of complaints received, the information under consideration here is not statistically significant, which makes it difficult to draw any firm conclusions in relation to information concerning ethnicity, complaints and any potential impacts arising from this. The ASC complaint process operates to robust standards which are designed to be person-focused,

open, fair, and accountable for all individuals that access it: continuous learning from complaints, whether at an individual, themed or departmental level also remains an active part of the process.

### Profile information according to age

5.12 The highest number of statutory complaints received in terms of a specific age group is a shared outcome between the 75-84 and 85-94 age ranges (14 complaints were received for each of these age groups).<sup>i</sup> The top primary service reasons recorded were physically frail/temporary ill and dementia, respectively.

5.13 The complaint outcomes determined by age groups for 2024/25 were as follows:

Outcome	18-24	25-50	51-64	65-74	75-84	85-94	95+
Not Upheld	2	6	6	6	11	7	-
Partially Upheld	0	2	2	2	1	3	-
Upheld	0	4	3	5	2	4	2
<b>Total &amp; %*</b>	2 (2.9%)	12 (17.6%)	11 (16.2%)	13 (19.1%)	14 (20.6%)	14 (20.6%)	2 (2.9%)

### According to gender

5.14 In 2024/25 the number of statutory complaints made was equally split between males and females.<sup>ii</sup>

5.15 The leading primary service type relating to both males and females at the heart of a complaint was frail/temporary illness (where details are recorded).

### Repeat complaints

5.16 The complaint process remains open to individuals wishing to raise concerns and there may be some occasions when individuals find it necessary to raise more than one complaint during the year, as interactions between individuals and ASC progress. However, some individuals do opt to revisit the complaint process on a more routine basis, turning to this as the first port of call for a concern. On occasion, and as appropriate on receipt of such contact, the complaints team will attempt to redirect concerns to the relevant service to be followed up and addressed outside of the complaint process.

5.17 According to the merits of the situation, the Department sometimes considers the resources being called upon to keep addressing an individual's contact. There are times when the Department feels that it is necessary to consider special measures for addressing complaints that have been ongoing, or if it appears that contacts have become inappropriately persistent or vexatious in nature: this may also include occasions when officers have been presented with

<sup>i</sup> March 2021 Census data for Leicester City - the average age of Leicester's population in 2021 was 33 years.

<sup>ii</sup> March 2021 Census data for Leicester City - 50.6% females, 49.4% males

abusive or threatening behaviour. The Department's response to such situations addresses the circumstances at hand but may include a review of the individual's contact with the Department for a specific period or advising that the Department will not keep responding to the same issues it considers have been reasonably addressed already.

## **6. Complaint reasons**

6.1 Some of the more common themes for making a complaint concerned the following in 2024/25:

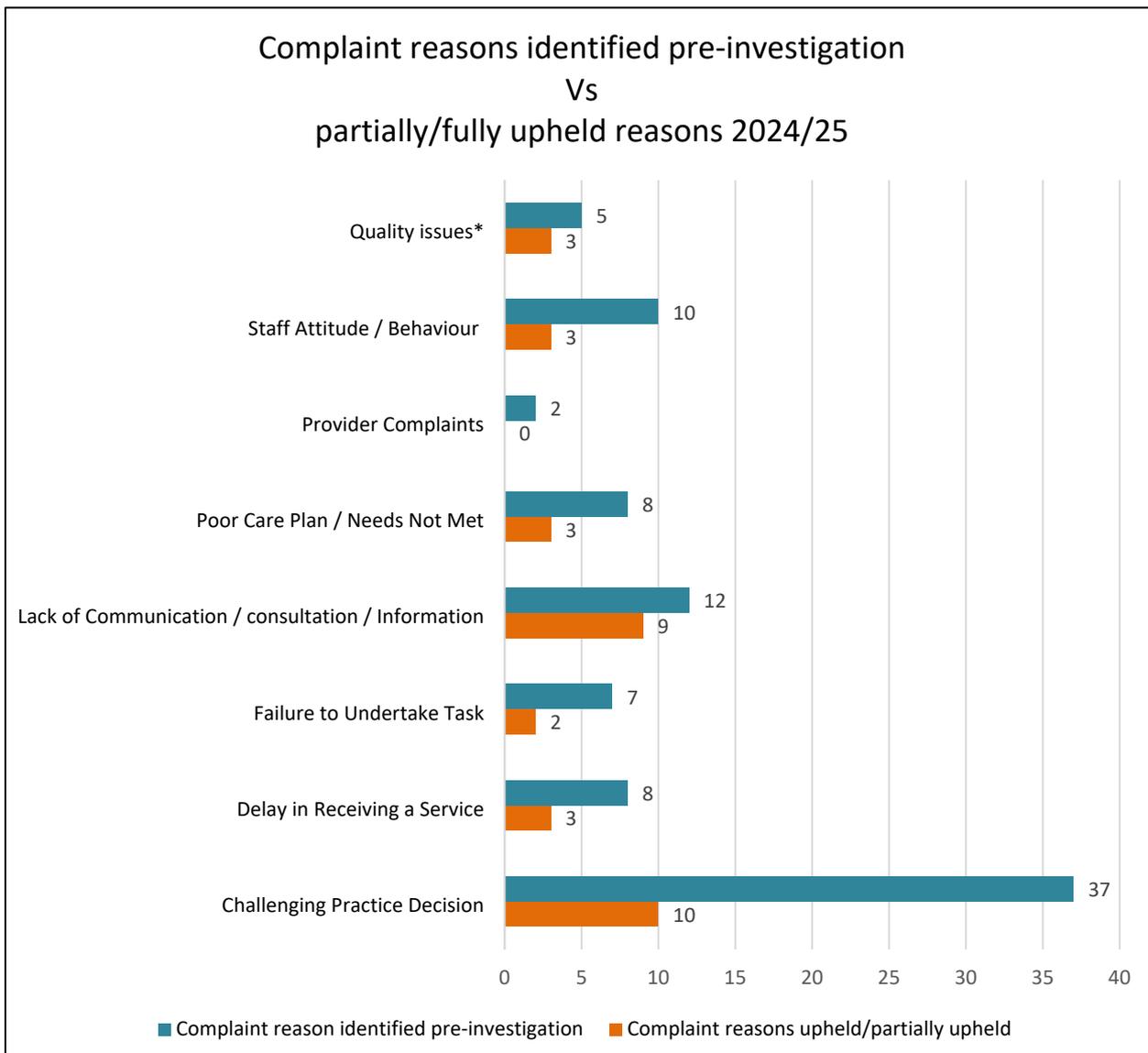
- i. Delay in assessment/support provision
- ii. Poor communication
- iii. Financial charges and transparency of related processes
- iv. Appointeeship role
- v. Carer's assessment not offered or delayed
- vi. Quality and accuracy of assessment
- vii. Staff attitude and behaviour
- viii. Care planning and suitability of support
- ix. Safeguarding – delayed report and perceived bias

6.2 Adult Social Care's statutory complaint database currently notes 8 specific reasons for raising a complaint: more than one reason per complaint may be identified. The principle reasons behind any complaint are recorded at the point of receipt by the complaints team and full consideration is given to all points raised, whether a major or more incidental part of the complaint.<sup>i</sup> The complaint points noted at the start of the process are then reconsidered on completion of the investigation to establish whether the initial reasons for complaint were upheld or not.

6.3 The following chart shows a more detailed breakdown of the complaint reasons identified on receipt (i.e., pre-investigation) during the last year, together with a picture of those complaint reasons that then went on to be partially or fully upheld after investigation.

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<sup>i</sup> Adopting an approach to encompass all reasons can drive-up the numbers recorded against a specific complaint at the start of the process.



\*Quality issues noted concerned recording standards and quality of explanation regarding a person’s complex financial arrangements.

- 6.4 As a further fail-safe, where particularly high numbers of the same complaint reason arise, action is taken to explore why such concerns may be arising and to see if there are any underlying issues to address as part of a trend or theme. During the latter part of the year, the complaints team reviewed those complaints that noted a higher number of similar concerns being raised, to try and get a better understanding of the trigger for such complaints and to see if there were any common issues at the root of these matters.
- 6.5 Some of the highlighted reasons noted – for instance ‘challenging practice decision’, (i.e., disagreement with an action or a decision), or ‘failure to undertake task’ have a clearer rationale for being raised, as well as the reasons why they then proceed to be upheld or not. The reasons noted under this category cover a wide range of actions and decisions made by different services.
- 6.6 Several complaints were noted with issues in relation to communication, consultation and information sharing. Some of these complaints highlighted the importance of:
- Providing timely, direct responses when issues are raised.
  - Making sure that essential information regarding care charges is noted with people.

- 6.7 Complaints that fall under the umbrella of ‘staff attitude/behaviour’ often cover a broad range of issues and this year included matters such as:
- Disagreement with the worker’s suggestion regarding a person’s future care needs and how to meet these for the best
  - Worker’s approach to the person’s assessment
  - Member of staff perceived as being rude in conversation or during a specific interaction
  - Supported person not feeling listened to/communicated with well by the worker
  - Points relating to an individual worker’s practice.
- 6.8 Complaints arising from specific exchanges in communication can be much more difficult to investigate in retrospect, compared to those more self-evident issues, like a delay or a failure in service of some sort. However, with any complaint concerning a specific member of staff’s actions, the issues raised are always explored further and considered directly between the member of staff involved and a manager.

## **7. Learning and actions identified from complaints received in 2024/25**

- 7.1 At the point that a complaint is addressed, immediate actions are taken to remedy any issues that may have arisen through fault. For those complaints that were upheld, the person received an apology and an explanation around the circumstances that had arisen in response, as a minimum. Other common actions to remedy matters included a further assessment or review being undertaken, or a change in allocated worker.
- 7.2 The following are further examples of specific actions taken to implement the learning identified from complaints received and upheld during 2024/25 and some broader themes that are currently being considered further in the context of ‘8’ below (Putting learning from complaints into further action).
- Staff training in relation to financial assessments and links to care planning (department-wide action).
  - Reimbursement or recalculation of charges where communication was unclear (individual action).
  - Repayment plans offered to resolve delayed or incorrect invoicing (individual action).
  - Finance appeal process revisited when not followed correctly (individual action).
  - Appointeeship team reminded to provide regular account statements to DWP to prevent overpayments (service specific action).
  - Staff training introduced for working with neurodivergent individuals (e.g., ADHD) (department-wide action).
  - Emphasis given to staff on seeking family/carer views during assessments to ensure holistic understanding (service specific action).
  - Information circulated in relation to emergency repairs and protocol to follow (e.g., broken key safe – service specific action).
  - Staff reminded of timescales and standards for recording notes (department-wide action).
  - Formal arrangements introduced for documenting changes (e.g., personal needs allowance updates) (department-wide action).
- 7.3 Further work continues to make sure that the Department considers all sources of feedback received holistically (including complaint and commendation information), in conjunction with the work of ASC’s Practice Oversight Board. This Board focuses on the links between the many sources of feedback and details received, learning and making practice improvements. A specific feedback and engagement working group has also recently been set up to consider

how all feedback received across the department can be drawn together and managed better.

### **Repeat complaint themes identified between 2023/24 & 2024/25**

- 7.4 In relation to the overall number of people that draw on Adult Social Care's support, the number of complaints received in 2024/25 remains relatively low. Whilst there is limited information to draw common themes from, any complaint issues that have arisen on a more regular basis have been considered.
- 7.5 Aspects of communication continues to remain one of the key reasons for complaining. Other, repeated reasons include:
- delay and waiting times
  - quality of assessment and advice
  - inadequate care support and provision
  - transparency in relation to financial matters
  - disputed assessment outcomes
  - interactions with workers

The details above are reported within the department, as described in more detail at section 8.

## **8. Putting learning from complaints into further action**

- 8.1 As noted, it is expected that appropriate actions are undertaken 'locally', at the point where a matter first arises in a timely way, to remedy individual concerns as part of the complaint process. Generally, the investigating Service Manager is responsible for identifying and overseeing such action.
- 8.2 Further to a complaint investigation that highlights specific findings of failure or error, the Service Manager is also asked to consider and provide an update on the actions that may have been taken within their service area or more widely across the Department, demonstrating how any changes have been implemented following complaint feedback. This information is then also discussed with Service Managers, with further reporting on any actions to ASC's Leadership Team and Lead Member.
- 8.3 All complaints received are also reviewed by the complaints team, to establish whether there are any common trends or issues emerging across the Department and to see if any previously identified themes continue to be repeated (see 7 above). This wholesale review of complaints is intended to provide the Department with a broader awareness of the issues that arise concerning its services and to further identify the impact that our actions have on individuals, to help identify any wider improvements that may need to be taken.
- 8.4 Wider changes for the department, relating to learning activity identified from complaints, may be in relation to the following (not an exhaustive list):
- new policy introduced or change made to existing policy
  - new practice introduced or change made to existing practice
  - creation of new staff guidance or revision to existing staff guidance
  - staff briefing/information on specific matter shared

- review/revision of publicly available information (website pages etc)
- targeted learning event/workshop
- staff training

8.5 In practice, most learning points from complaints received in 2024/25 resulted in discussions with a staff member as part of reflective practice or supervision or further staff/team training and staff reminders being issued.

8.6 The correlation between learning and any follow-up actions, as well as the impact of such actions, are also explored further in conjunction with the work of the Practice Oversight Board with the aim of establishing how, as a department, we are clearly demonstrating the way in which key feedback is translating into practical and tangible service improvements or actions. This is an area that remains under development still. (See 7.3 above)

8.7 Key feedback identified from complaints, as well as commendations, is also considered alongside other sources of departmental feedback, to establish any other evident shared themes. Progression of these issues are managed through other departmental improvement mechanisms such as the Practice Oversight Board, Operational Leads meetings or the Manager’s Forum. The complaints team also provides feedback to the wider department managers and staff, as part of ongoing activity in relation to complaints.

8.8 Further to the Care Quality Commission’s assessment of Leicester City’s adult social care and the report published in July 2025, specific areas for improvement have been identified for further action and an improvement plan is in place for 2025-2027. The following areas noted with the action plan will also have a positive impact on some common complaint themes that arise and specifically includes a review of:

- Improving the experience of carers
- Waiting times and timeliness
- Safeguarding

## 9. Contact with the Local Government & Social Care Ombudsman (LGSCO)

9.1 The LGSCO receives contacts in relation to all Council services and although reported with their own statistics, not all contacts are directed to the Local Authority for further attention. Consequently, there is usually a slight difference in the data sets published by the LGSCO and the City Council for that year.

9.2 Approximately 24% of the total number of Ombudsman enquiries received for the **entire** City Council<sup>i</sup> in 2024/25 were in relation to Adult Social Care.

9.3 In 2024/25, Adult Social Care had an upheld rate of 71% noted (the upheld rate for ASC complaints across England is 79%.)

9.4 From ASC’s records, **nineteen** complaints were formally determined against the Department by the LGSCO during 2024/25.

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<sup>i</sup> Source - Local Government & Social Care Ombudsman’s website [www.lgo.org.uk](http://www.lgo.org.uk) – figures here exclude LGSCO enquiries that were classed as incomplete, where advice was given or those matters that were referred to the authority to investigate in the first instance.

The enquiries in relation to ASC's actions in 2024/25 were concluded with the following outcomes:

Upheld; fault and injustice	3
Upheld; fault, no injustice	1
Not upheld, no fault	2
Closed after initial enquiries; no further action	9
Closed after initial enquiries; outside of jurisdiction	2
Invalid decision	1
No complaint decision	1

- 9.5 The four complaints upheld against ASC's actions directly required formal recommendations to be agreed and met, with associated actions confirmed to the Ombudsman's office on completion.

A summary of these individual complaints and the recommendations - since met - are as follows:

**i. Complaint Ref: 23 011 736**

**Outcome - Upheld: fault and injustice**

Complaint that social care's support to relative after leaving hospital took too long in relation to assessing needs and helping them return home. Also complained that care home fees were invoiced for, before a financial assessment. Significant care fees were owed and at the time of complaint, the person was in a care home without a plan to return home.

As part of the remedy, the Council was asked to apologise for any distress from the delay in reassessing the person's needs, the delay in completing a financial assessment and invoicing.

A payment of £200 was requested to recognise the distress caused by receiving a large invoice for care and the offer of an affordable payment plan. The Council was also asked to review its processes for monitoring outstanding care assessments and ensuring that financial assessments were completed in a timely way.

**ii. Complaint Ref: 23 014 962**

**Outcome - Upheld: fault and injustice**

A complaint was made by a care provider in relation to previous funding arrangements for a person they had been providing care to. The care provider's request for additional funding for support did not result in further approval. The complaint was considered jointly by the Parliamentary & Health Services Ombudsman and the Local Government & Social Care Ombudsman.

The Council was requested to apologise for the financial shortfall and pay an amount in relation to extra care provided for a specific, brief period by the provider (prior to Continuing HealthCare funding being agreed).

The Council was also asked to apologise for a missed opportunity to reduce the risk of harm caused by its failings in funding and safeguarding. A reminder was given to staff in relation to the importance of carrying out safeguarding enquiries when care home residents are at risk of harm.

### **iii. Complaint Ref: 24 003 874**

#### **Outcome - Upheld: fault and injustice**

Complaint that the person's finances and Disability Related Expenditure commitments were not fully considered with the financial assessment and appeal process.

The Council was asked to reassess the person's maximum weekly charge, with regard to the limit on the amount of incontinence pads the NHS would provide free of charge.

The Council was asked to apologise for any identified higher charge and for the injustice caused by not following its appeal process. It was also asked to reimburse any difference that may arise from a lower maximum charge calculation and for this to be backdated to a suitable date.

### **iv. Complaint Ref: 23 000 772**

#### **Outcome – Upheld: Fault, no injustice**

This was a complaint that covered the involvement of Adult Social Care's Occupational Therapy Service and the Housing Division.

The complaint was in relation to the City Council's policy concerning the non-provision of a ramp to a person using a scooter, rather than a wheelchair.

The outcome was that the Housing Division was to remind relevant staff that council tenants can apply for a Disabled Facilities Grant, and to ensure that any guidance to staff is clear on this.

- 9.6 Some of the Ombudsman's most common areas of complaint upheld against ASC services in England in 2024/25 related to assessment and care planning, charging issues, residential care, safeguarding and home care. Leicester City's ASC complaint themes in 2024/25 were particularly around care and support (including financial matters).
- 9.7 The Ombudsman's office publishes most decision statements in anonymous form on their website. These can be searched for by local authority, subject matter or reference number. They also provide a regular public summary bulletin that notes all decisions found, by authority.
- 9.8 The ASC complaints team has continued to take on a proactive role with the preparation of responses to all LGSCO enquiries. It is considered that this action has been of benefit to the Department, providing additional support to service areas that would otherwise be involved in addressing time-consuming enquiries. This action also allows for a further 'independent' overview of complaint issues to take place, prior to any response being returned to the LGSCO, as well as supporting timely responses.

## **10. The good things people drawing on our support tell us**

- 10.1 Another side to the complaints team's work involves capturing the positive feedback and commendations that come in across the Department, for further acknowledgment and for sharing. In those situations where staff have clearly gone above and beyond their duty, the recognition of the individual's work is shared and acknowledged further in writing by the Director.

- 10.2 Details of those individuals that have received commendations, acknowledging the value of their work on behalf of the Department, have been reported in the Department’s newsletter. Service Managers are provided with the positive reports received for their respective areas, to help determine how to share good news stories more widely within their own service.
- 10.3 Many more comments, often personal to the individual or the family’s experience, have been received within the Department - confirming the importance and the value of ASC’s work within the City. Commendations normally reflect the good people skills demonstrated by staff, notably:
- good and clear communication
  - empathetic and caring nature
  - humility
  - the ability to reassure or put the person at ease
  - politeness

They also reflect those instances that have resulted in a positive difference to an individual’s life. The receipt of useful equipment or guidance is often mentioned.

- 10.4 Positive feedback is recorded and analysed further and reported via the Practice Oversight Board. Regular reports in relation to commendations (as well as complaints) help to add a further perspective for all the comments that the department receives and considers about its staff and services.
- 10.5 Positive comments received in 2024/25 have also been considered in relation to I Statements noted as part of the work of Think Local, Act Personal and the ethos of ‘making it real’ - a key driver behind Adult Social Care’s approach to working and supporting people as well as possible, in partnership. I statements reflect what people drawing on the support of social care wish to see happen in relation to their life and support<sup>1</sup>: I statements set the bar in terms of the best outcome that personalised care can achieve.
- 10.6 Most commendations received during the year can be aligned to the following theme:  
Workforce – The people who support me - I have considerate support delivered by competent people
- 10.7 Some of the positive experiences that we have been told about and that link to some of the I statements and themes noted as part of Think Local, Act Personal were reflected in the following feedback:

**Flexible and Integrated Care and Support**  
**My support, my own way**

- **I have care and support that is coordinated and everyone works well together and with me**

“I would like to say a huge thank you for visiting my parents ..... You assessed them and their living situation.

You were so patient and kind and considerate towards them. And had spoken about support items for them in the house and garden and offered direction for support with walking aid clinics etc.

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<sup>1</sup>Individual I statements are set out under six main themes [Six themes of Making it Real - About - Making it Real - Think Local Act Personal](#)

You have actioned all the suggestions and now their home is in a safer condition. With items fitted. They would like to extend a huge thank you to you and the team.”

### **Workforce**

#### **The people who support me**

- **I have considerate support delivered by competent people.**

“I want to send sincere thank you for all that you had done to ensure my Mum’s discharge from hospital went well.

I think you went above and beyond. A big thank you from me and my Mum.

I feel supported 100% now she is at home in the community thanks to your understanding and your experience to communicate with hospital and outside organisations to help,

This time on my Mum’s discharge has been a really positive experience. Without your support this would not have been possible. Thank you so much.”

### **Flexible and Integrated Care and Support**

#### **My support, my own way**

- **I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and personal goals.**

“I have just finished working with [worker]. I would just like to say she has been a brilliant social worker. I didn’t think she could make much of a difference, but she has. She has helped me overcome a range of hurdles including not being so isolated and helping me to address my needs.

Struggling with anxiety, depression & often feeling overwhelmed, [the worker] has helped me tackle things bit by bit and sign posted me to other agencies. She never judges me & lets me make decisions at my own pace.”

### **Information and advice**

#### **Having the information that I need when I need it**

- **I can get information and advice that is accurate, up to date and provided in a way that I can understand**

“I must commend [the worker] for her professionalism, knowledge, listening skills, helpfulness and personal manner (courtesy, respect, sensitivity, friendliness) in which she conducted herself in our face to face assessment interview.

The questions asked, explanation of procedures, the information given, guidance and support were clearly communicated. As such the timescale and follow up calls were prompt which deemed [the person’s] eligibility for local authority services assistance ....”

- 10.8 The ASC complaints team has also adopted the following ‘we’ statement, in relation to the role it plays, working with individuals who draw on social care support and their carers.

“we work in partnership with others to make sure that all our services work seamlessly together from the perspective of the person accessing services”



**making it real**  
how to do personalised care and support

## 11. Report contacts

For more information relating to this report please contact:

Joanne Tansey, Customer Feedback & Complaints Manager

Social Care & Education

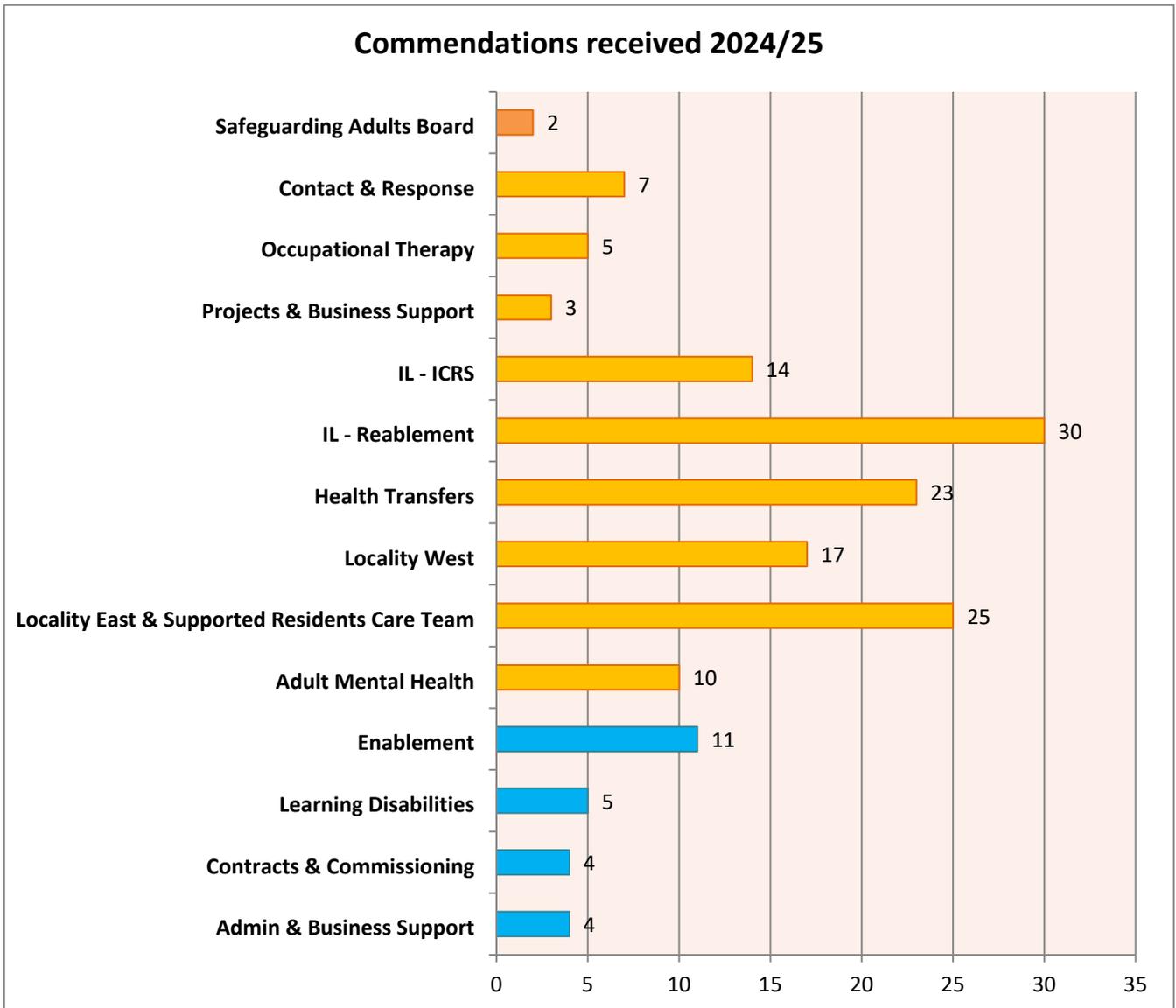
Email: [Adultsocialcare-complaints@leicester.gov.uk](mailto:Adultsocialcare-complaints@leicester.gov.uk)

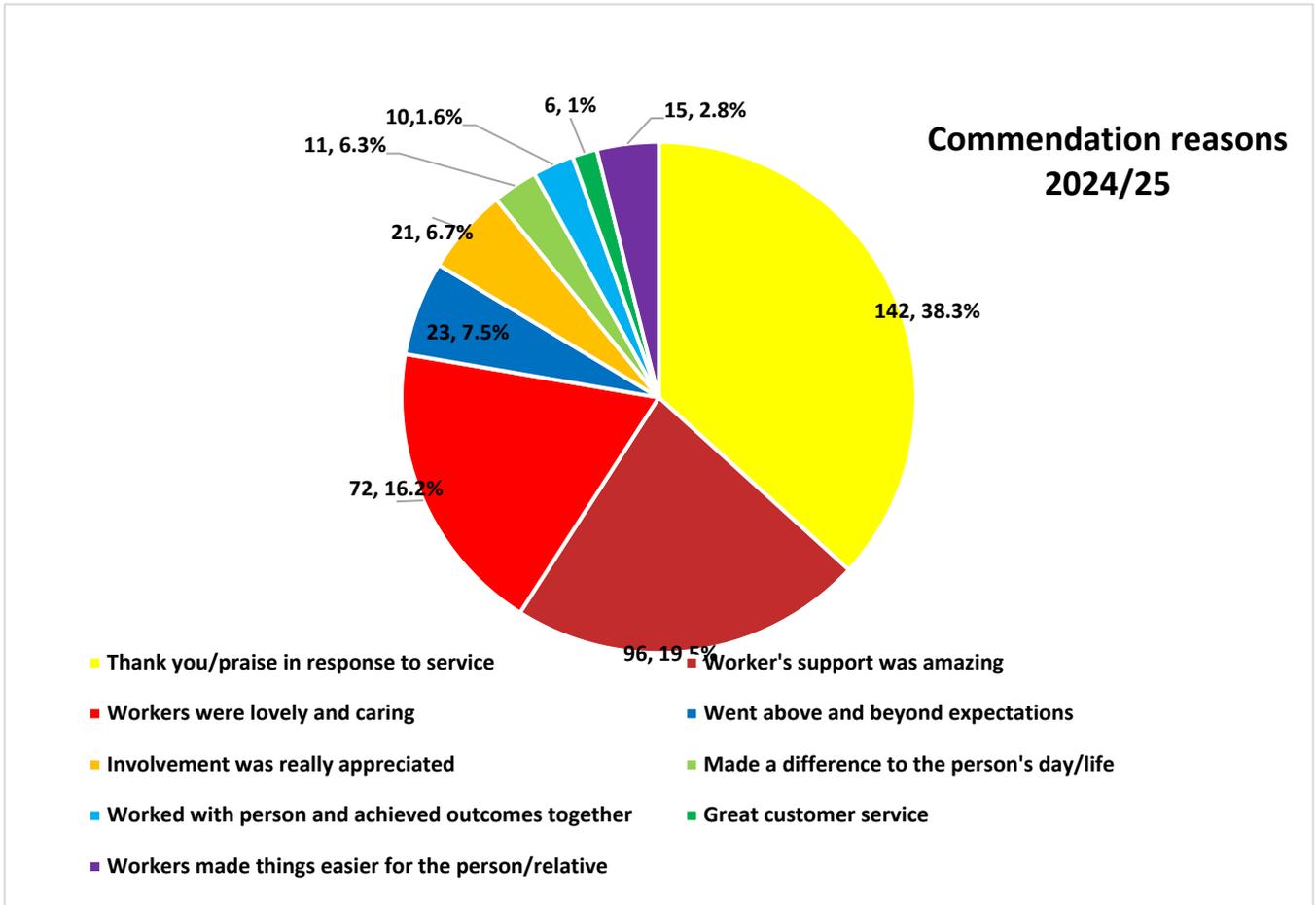
Tel: 0116 454 2470

# APPENDICES

## APPENDIX 1

### 1. Commendations by service area



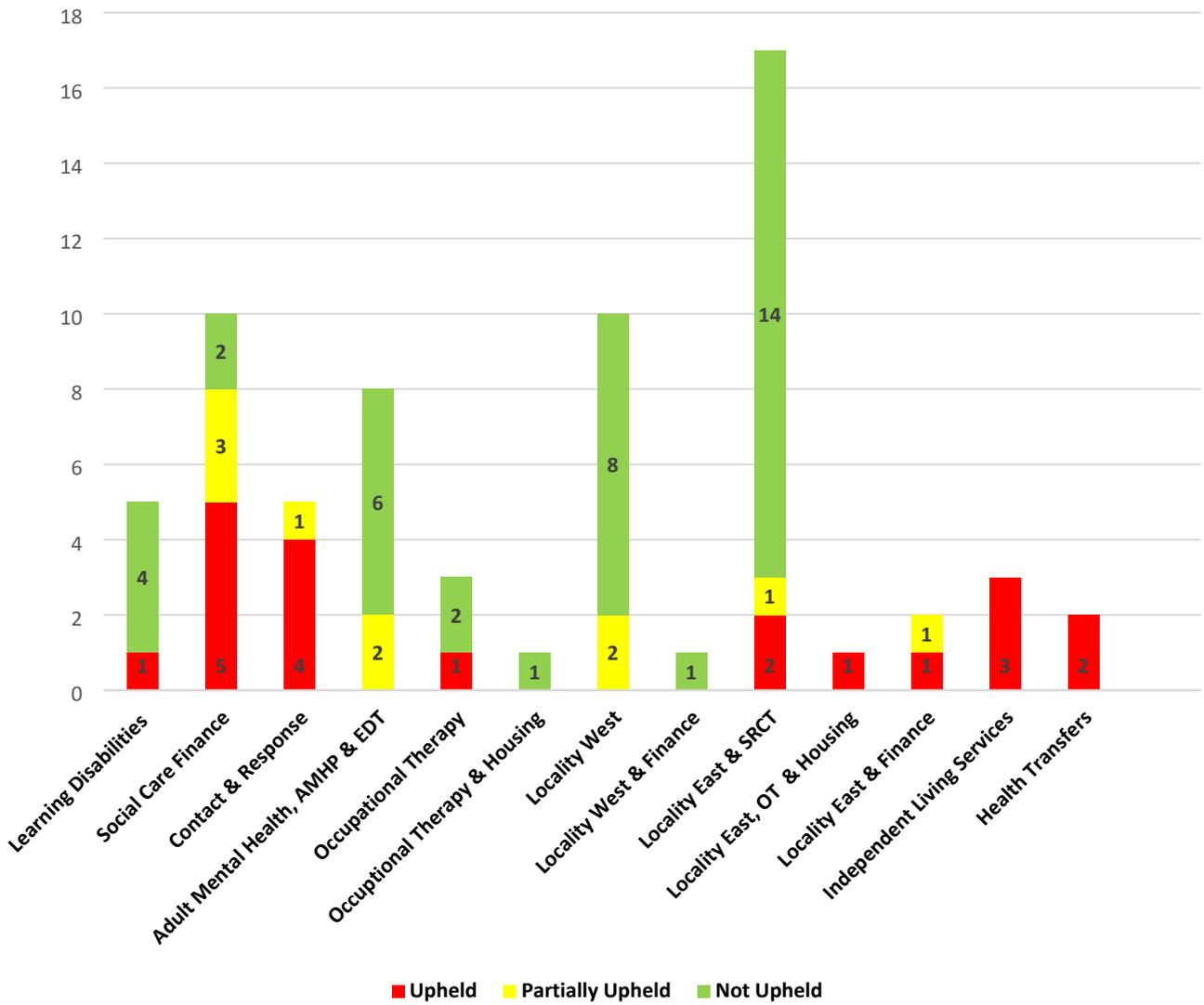


Commendations may include more than one message.

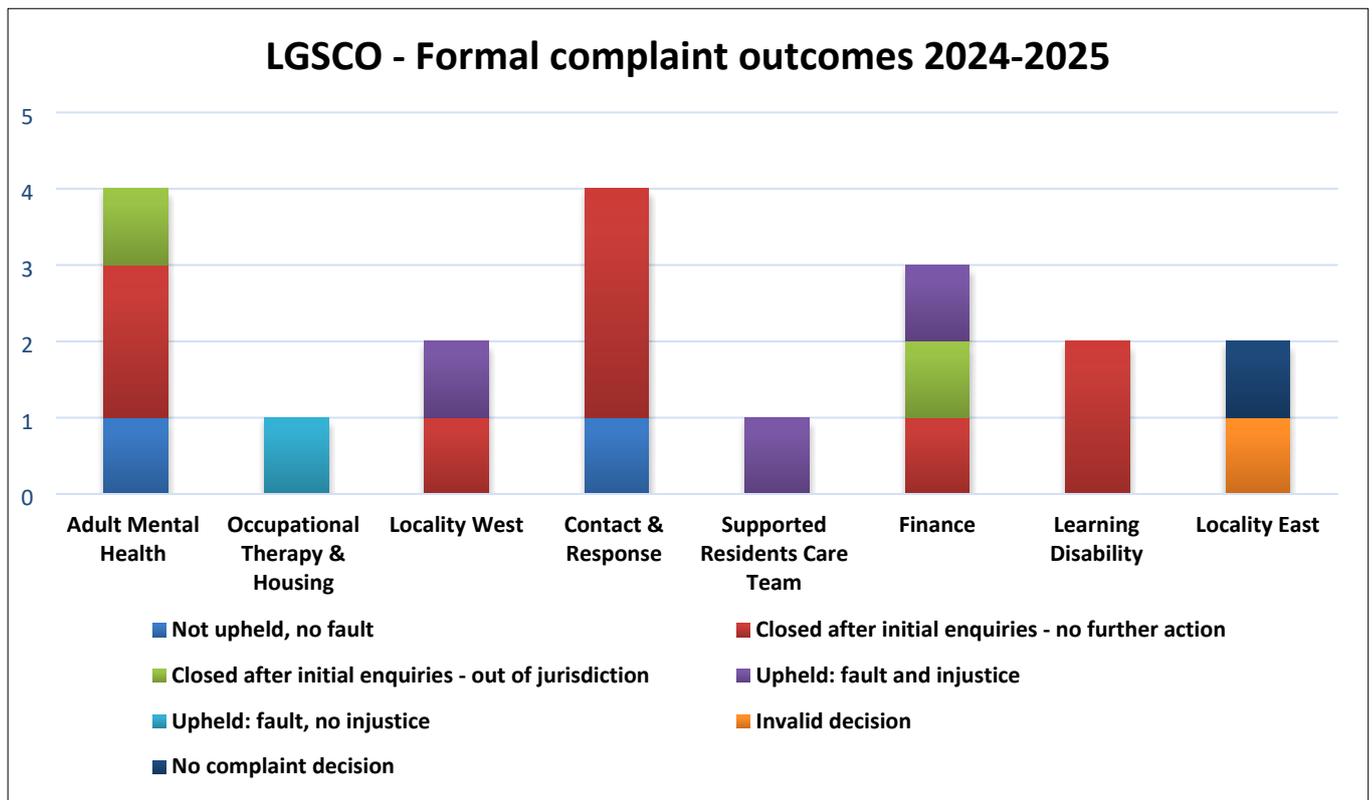
## 2. Breakdown of complaint information received across the Department

- 2.1 It is perhaps worth noting that teams receiving a higher number of complaints are not necessarily ones providing a poorer service than others. Higher numbers of complaints may indicate that staff are aware of their responsibilities in terms of recording and formally reporting matters, helping to ensure that the complaint procedure remains open and accessible to all. A clearer picture of the Department’s ‘health’ rests with issues that go on to be upheld and where common patterns of concern arise.
- 2.2 The ratio of complaints received to individuals in receipt of ASC services remains relatively small.
- 2.3 The distribution of statutory stage 1 complaints received in 2024/25 across ASC was as follows:

## Complaints received by Adult Social Care 2024/25



### 3. LGSCO complaints received by service<sup>i</sup>



#### 3.1 Comparison information in relation to some of Leicester City Council’s statistically nearest neighbours – LGSCO outcomes for ASC in 2024/25:

<sup>i</sup> Details of the individual complaints upheld are noted at section 9 of the main report.

Authority	Total complaint enquiries decided <sup>i</sup>	Initial investigation – Closed after initial enquiries	Initial investigation – Not upheld	Initial Investigation – Upheld	Upheld rate <sup>ii</sup>
Leicester City Council	21	14	2	5	71%
Coventry City Council	8	3	1	4	80%
Derby City Council	10	7	0	3	100%
Nottingham City Council	10	7	2	1	33%
Sandwell Metropolitan Borough Council	10	8	0	2	100%
Kingston Upon Hull City Council	4	3	1	0	0%
Rochdale Metropolitan Borough Council	10	5	2	3	60%

3.2 Given the small number of complaints under consideration against each local authority, minor changes in numbers significantly impact the upheld rate. (Last year’s upheld rate for ASC was 67% when 2 complaints were upheld and 1 was not upheld).

3.3 Some of the key complaint themes noted in the Local Government & Social Care Ombudsman’s Annual Review of Adult Social Care Complaints 2045 - 25 were in relation to:

- Assessment and care planning (75% upheld rate)
- Charging (81% upheld rate)
- Residential care (83% upheld rate)
- Safeguarding (63% upheld rate)
- Home care (89% upheld rate)

3.4 Some of the Ombudsman’s most common areas for upheld complaints against ASC services in England are noted at 3.3 above. Leicester City’s ASC complaints also reflect these same themes, but in 2024/25 these particularly related to aspects of care support and assessment (including finance related matters).

3.5 From ASC’s records, **nineteen** complaints were formally determined by the LGSCO during 2024/25 in relation to the Department’s direct involvement. The enquiries in relation to ASC’s actions in 2024/25 were concluded with the following outcomes:

<sup>i</sup> Information published by the LGSCO – 2024/25. Not all complaints reach the initial investigation stage and are often subject to other outcomes, for example ‘Advice given’ or ‘incomplete’. The number here reflects those enquiries that were subject to formal decisions. One upheld complaint noted in the table above will be reported further in relation to the Housing Division’s activity, as the complaint was in relation to the administration of a Disabled Facilities Grant.

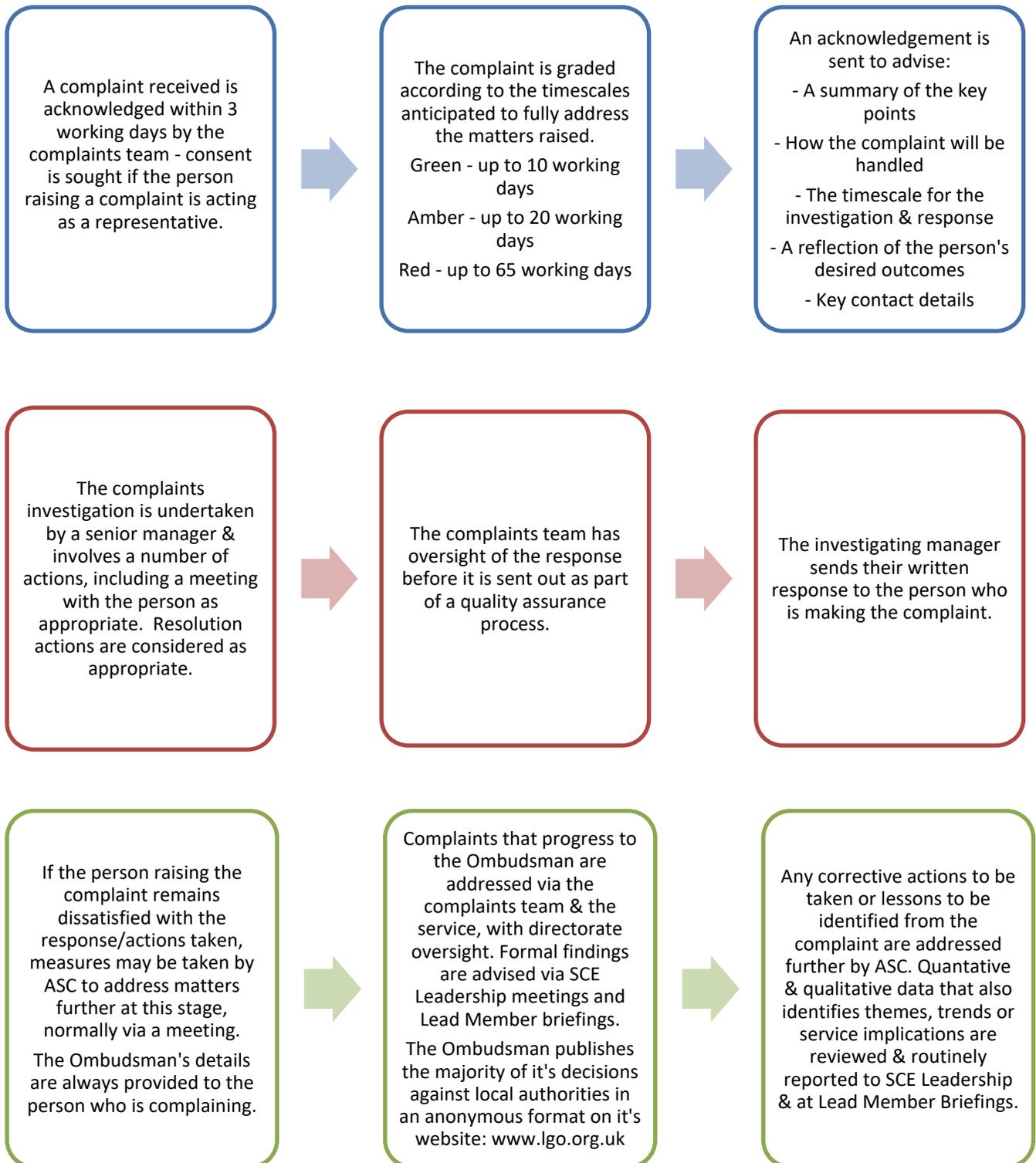
<sup>ii</sup> Upheld rate = this is based on the % of upheld complaints from the sum of ‘not upheld + upheld’ (does not take into account other complaint findings)

Upheld; fault and injustice	3
Upheld; fault, no injustice	1
Not upheld, no fault	2
Closed after initial enquiries; no further action	9
Closed after initial enquiries; outside of jurisdiction	2
Invalid decision	1
No complaint decision	1

## APPENDIX 2

### Adult Social Care (ASC) complaint process in brief (chart)

Verbal complaints that are resolved to the person's satisfaction within one working day fall outside the complaint procedure.



## APPENDIX 3

### Performance indicators relating to the management of statutory complaints

INDICATOR	2023/24	2024/25	Target for 2025/26
% Completion of Stage 1 complaints within 10 working days (Green)	N/A	N/A	100%
% Stage 1 complaints completed within initial timescale of 20 working days <sup>i</sup> (Amber)	65%	78%	85%
% Stage 1 complaints completed between 21-25 working days <sup>ii</sup>	10%	19.1%	-
% Stage 1 complaints completed between 26-30 working days	5%	0%	-
% Stage 1 complaints completed at 30+ working days or over	20%	2.9%	-
Average complaint response time	23 working days	19 working days	N/A

<sup>i</sup> Excludes complaints that were responded to jointly with other organisations as different timescales apply.

<sup>ii</sup> Complaint responses that exceed the initial timescale advised are usually acknowledged with the person raising the concerns.

**APPENDIX 4 Outcomes for 2024/25 action plan**

<b>Action identified</b>	<b>Outcome</b>
<p><b>Ensure business continuity and performance in meeting core tasks and targets. Focus on complaint response times.</b></p>	<p>Performance continued to be measured throughout the year with reports to the Practice Oversight Board and reports to Social Care &amp; Education’s Leadership Team. Meeting target response times remains a competing priority.</p>
<p><b>Encouraging better communication with people raising a complaint.</b></p>	<p>With each complaint allocated for investigation the responding manager was encouraged to ensure that they made initial contact with people making a complaint and maintained communication throughout the complaint process.</p>
<p><b>To encourage direct resolution actions.</b></p>	<p>Each complaint was considered on its merits and at the point of concluding an investigation, responding managers were asked to consider any potential actions for resolution – outside of a written response – to address those situations where a difference of view was still held, to try and bring about an agreeable resolution if possible.</p>
<p><b>Build on current report produced for Practice Oversight Board concerning feedback received across the department and messages highlighted when this information is brought together.</b></p>	<p>Several activities continue to take place to draw together feedback received across adult social care as a whole.</p> <p>Complaints received are reviewed on a quarterly basis and discussions take place with Operational Leads to consider whether any further, service wide actions are required (for example, a policy change, revision to practices, issuing of guidance/briefing for staff).</p> <p>As part of the ongoing relationship with the Practice Oversight Board, details relating to complaint and commendation feedback are presented on a regular basis and aligned with other sources of feedback and improvement activities that are being undertaken across the department. A feedback and engagement working group has been established to review aspects of managing feedback further to help find a more systematic way of recording and utilising information, for departmental improvement.</p> <p>Repeated complaint themes are reviewed year on year.</p>

## APPENDIX 5 2025/26 action plan

Action identified	Action required	Anticipated outcome	Timescale
<b>Ensure business continuity and performance in meeting core tasks and targets. Focus on complaint response times.</b>	Continuous performance monitoring against timescales to take place: proactive approach employed to ensure responding managers are aware of requirements and timescales and prompted to meet these.	Measurable actions are addressed within specified timescales.	Specific detail of the targets worked to is outlined in the table at Appendix 3.
<b>Encouraging better communication with people raising a complaint.</b>	Service Managers to ensure contact with individuals at the start of the investigation process to discuss concerns being raised directly and to ensure open communication is maintained throughout the process.	That further direct engagement with the person making a complaint encourages a more satisfactory resolution and better outcome for all parties.	Required on a continuous basis – but to be considered further with each quarterly review of complaints.
<b>To encourage direct resolution actions.</b>	When it is apparent that matters remain unresolved/disputed for people who are making a complaint, Service Managers to be reminded of options open to attempt further resolution.	Alternate dispute resolution actions can influence a more positive outcome for complaints and prevent further escalation.	Alternate dispute resolution actions to be considered with each complaint.
<b>Participate and contribute to the work of the Feedback and Engagement Working Group - introducing a departmental system for collating and managing feedback well.</b>	To continue developing a system for all feedback that is gathered so that it can be drawn together in a helpful way and allow for further analysis that will inform the department's actions/activities.	Provides a further perspective on what people think about the support they receive and how well this is working for them (or not). Link this feedback to direct services/practice to inform any further actions.	A project schedule is in place for this work.

<p><b>Revise current guidance available to staff and complaint literature – to compliment the online presence about complaints on <a href="http://www.leicester.gov.uk">www.leicester.gov.uk</a></b></p>	<p>Review and work further on details currently available that advise people about the complaint process and in relation to providing comments or commendations.</p>	<p>New information produced for circulation.</p>	<p>End of March 2026.</p>
<p><b>Review the current processes around staff commendations to include improvements in communication and overall celebration of successes.</b></p>	<p>Review how effective details of commendations are being communicated to individuals receiving them and encourage ways of opening up further celebrations around positive communication.</p>	<p>Implement any new, improved processes identified.</p>	<p>End of March 2026.</p>