

ANNUAL REPORT

2024-2025

Adults Social Care

Annual Complaints & Compliments Report

Author: Sarah Birtles, Complaints, Compliance & Information Governance Team Lead

Data Collection and Analysis: Emma Barron, Results and Service Improvement Officer



Contents

Executive Summary	3
Introduction	4
Service Context	5
Complaints Received	6
• Ombudsman Referrals (2 Year Comparison)	6
• Volumes (2 Year Comparison)	7
• Stages (2 Year Comparison)	7
• Themes (2 Year Comparison)	8
• Services (2 Year Comparison)	9
• Outcomes (2 Year Comparison)	10
• Upheld Complaint Themes (2024-2025)	10
• Partially Upheld Complaint Themes (2024-2025)	11
• Learning From Complaints	11
• Response Times (2 Year Comparison)	12
Monitoring	12
• Age (2 Year Comparison)	12
• Gender (2 Year Comparison)	13
• Disability (2 Year Comparison)	13
• Ethnicity (2 Year Comparison)	14
• Religion (2 Year Comparison)	15
• Marital Status (2 Year Comparison)	15
• Sexual Orientation (2 Year Comparison)	16
Method of Contact	16
Expenditure	16
Compliments & Resident Satisfaction	17
• Compliments by Service	17
• Compliment Examples	18
• Adults Social Care Outcomes Framework Survey	19
Members Enquiries	19
• Volumes (2 Year Comparison)	19
• Volumes by Quarter (2 Year Comparison)	19
Conclusion	20
Adults Social Care Complaints Action Plan	21

Executive Summary

The 2024–2025 Annual Adults Social Care Complaints & Compliments Report presents a comprehensive overview of feedback received from residents, carers, and stakeholders, highlighting key trends, challenges, and achievements across Havering’s Adult Social Care (ASC) services.

This year marked a period of significant transformation, with the full implementation of a new complaints case management system (Case Tracker) and the consolidation of complaints handling into a single corporate service. These changes have improved consistency, transparency, and data accuracy, laying the foundation for more effective service monitoring and response.

Despite the operational transition, ASC maintained a stable volume of formal complaints, with a slight year-on-year decrease. However, upheld and partially upheld complaints accounted for 24% of cases, offering valuable learning opportunities. Key themes included financial issues, lack of communication, delays in service, and emerging concerns around inaccurate information and safeguarding.

The report also highlights positive developments, including reductions in complaints across several service areas and increased engagement in others. Compliments rose across teams, with Community Team South receiving the highest number, reflecting strong professional conduct and compassionate care.

Service user survey results showed improvements in quality of life, satisfaction, and feelings of safety, reinforcing the impact of person-centred care and collaborative working with health partners. Areas for improvement were also identified, particularly around access to information and demographic data collection.

Looking ahead, ASC will continue to build on this year’s insights through a targeted action plan focused on improving data quality, staff training, communication, and complaint resolution times. The service remains committed to learning from feedback, promoting transparency, and delivering inclusive, high-quality care that supports independence, dignity, and wellbeing for all residents.

Introduction

Local authorities are required to follow a statutory complaints process, as outlined in the Local Authority Social Services and National Health Service Complaints Regulations 2009 and supported by the Secretary of State for Health and Social Care's guidance (paragraph 3.55). This mandates that Adult Social Care (ASC) must have systems in place to receive and respond to representations made by, or on behalf of, service users.

Havering ASC values all forms of feedback—whether it's a suggestion for improvement, a complaint about a service issue, or a compliment recognising excellent service or individual performance. In line with statutory guidance from the Department of Health and best practice principles from the Local Government and Social Care Ombudsman, Havering has embedded these standards into its updated complaints procedures:

Informal Complaints: Where a complaint relates solely to a regulated service, it will be referred directly to the appropriate external agency.

Stage 1 Formal Complaints: These will be responded to within 20 working days from the point at which the complaint details are received and/or relevant consent or further information is received. If the complaint involves an external agency, the response time may extend to 25 working days. Timescales may be adjusted in agreement with the complainant.

From 2024–2025, all Stage 1 complaints—previously categorised as informal or formal—will be recorded uniformly using the new complaints case management system, Case Tracker. Complainants who remain dissatisfied after Stage 1 will be advised of their right to escalate their concerns to the Local Government and Social Care Ombudsman.

The time limit for submitting complaints remains at 12 months; however, each case will be assessed individually based on its merits.

Following the restructure in December 2023, all complaints services have been consolidated into a single corporate service. As a result, the dedicated Social Care Complaints Service has been replaced by the Insight, Information and Investigations Team, which now manages complaints across all Council services. Service enquiries are no longer recorded within this team and are instead passed directly to the relevant service area for resolution.

Service Context

Adult Social Care (ASC) plays a vital role in supporting the most vulnerable adults in our community, along with their carers, by ensuring their assessed needs are met with compassion, dignity, and respect. Safeguarding remains a core priority, and every case is approached with a personalised, outcome-focused mind-set. The service is committed to helping residents live independently for as long as possible, placing individual well-being at the heart of every decision.

ASC works with a wide range of individuals across Havering, including older adults, people with physical or sensory disabilities, those with mental health needs or learning disabilities, and carers. The service aims to promote self-sufficiency and wellness within the community, while also providing direct support to those with more complex social care needs. This includes the delivery of day opportunities for people with learning and physical disabilities.

For residents who do not meet the eligibility criteria for funded support, ASC still has a duty to provide clear information, advice, and signposting to appropriate services. The service uses a strength-based approach—known locally as Better Living—to help individuals make the most of their own abilities and community resources, ensuring assessments focus on personal assets and goals.

Collaboration is key to ASC's success. The service continues to work closely with partners such as the Integrated Care Board and wider health colleagues to support residents in staying well and active for as long as possible.

In addition to frontline care, ASC is supported by robust commissioning and brokerage functions, quality assurance, and contract monitoring of provider services. The service also manages direct payments, Appointee and Deputyship arrangements, client finances, and financial assessments to determine contributions toward care, helping to generate income for the Council.

Complaints and Continuous Improvement

The ASC complaints process ensures that individuals—and those acting on their behalf—have a clear and accessible route to raise concerns, express dissatisfaction, and seek resolution. This is a vital mechanism for maintaining accountability, improving service quality, and safeguarding the rights and wellbeing of service users.

Purpose of Annual Reporting

This annual report provides a transparent, evidence-based overview of ASC's performance over the past year. It supports accountability, informs strategic decision-making, and drives continuous improvement across the organisation. By sharing this information, ASC reaffirms its commitment to delivering high-quality, person-centred care and to learning from feedback to better serve the community.

4. Complaints Received

4.1 Ombudsman Referrals (2 Year Comparison)

	23 24	24 25
In Progress		
Maladministration (No Injustice)		1
Maladministration Injustice with Penalty	5	2
No Maladministration after investigation		1
Ombudsman Discretion		
Investigation with Local Settlement		
Outside Jurisdiction		
Investigation Discontinued		
Paused		
Premature/Informal Enquiries		
Closed after initial enquiries – No Further Action	9	3
TOTAL	14	7

The Local Government and Social Care Ombudsman has reported a national increase in both the number of complaints received and those upheld across several councils. This trend reflects the ongoing pressures on core services, particularly within Adult Social Care, as local authorities continue to respond to the growing and complex needs of vulnerable adults.

In Havering, there has been a drop in Ombudsman enquiries and investigations compared to previous years. While not all decisions are published due to confidentiality, several upheld cases have highlighted areas for improvement, including:

- Communication and record-keeping around care home charges
- Safeguarding concerns involving vulnerable individuals
- Handling of Disabled Facilities Grant (DFG) applications

The data shows a notable reduction in the total number of Ombudsman cases, falling from 14 cases in 2023–24 to 7 cases in 2024–25. This represents a 50% decrease year-on-year and marks a significant improvement in both the volume and complexity of cases being escalated to the Ombudsman. The reduced caseload suggests that more issues are being resolved effectively at the earliest stage, preventing unnecessary escalation and improving overall customer satisfaction and service responsiveness.

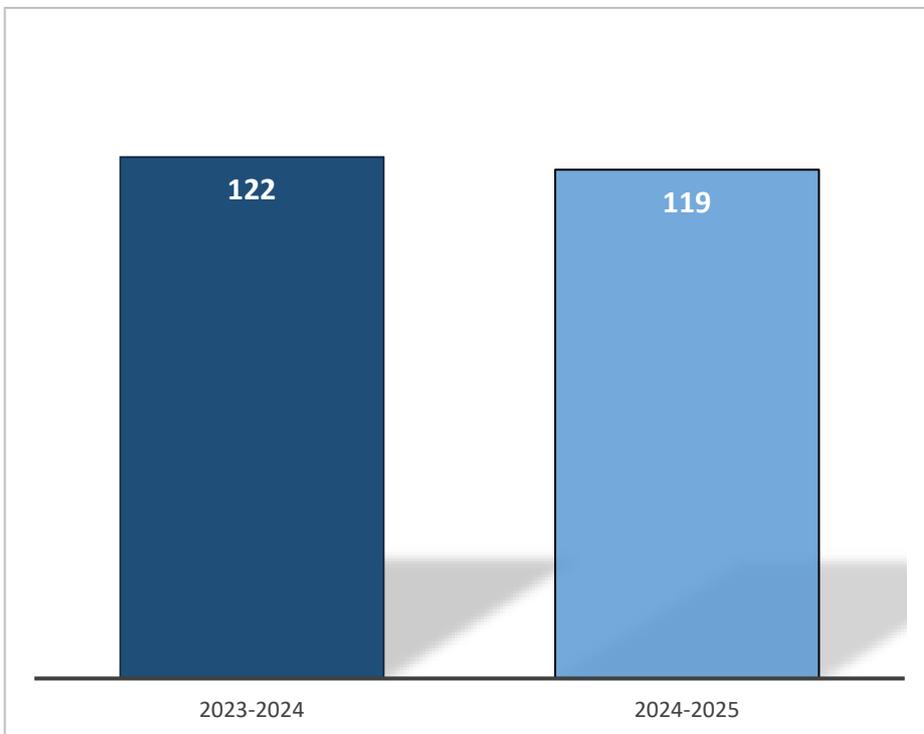
In terms of upheld findings, there has been a substantial decline in the most serious outcome category. Maladministration with Injustice and Penalty decreased from 5 cases in 2023–24 to 2 cases in 2024–25. This reduction not only reflects fewer adverse findings but also indicates enhanced decision-making, improved adherence to statutory duties, and better-quality responses during the early stages of complaints handling. The lower number of cases attracting penalties further demonstrates progress in ensuring decisions are legally compliant and proportionate.

There were no cases of “Maladministration (No Injustice)” reported in 2023–24, but one such case appears in 2024–25. While this represents a single instance, it does indicate that even where fault was found, the Ombudsman concluded that the impact was limited and did not amount to injustice. This contrasts positively with the previous year’s pattern, where faults were more likely to be associated with tangible impact.

The number of cases closed after initial enquiries with no further action has also fallen significantly, from 9 cases in 2023–24 to 3 cases in 2024–25. This decline is consistent with the overall reduction in referrals, but it may also indicate that complaints are being screened more effectively at the local resolution stage, reducing premature referrals and improving the quality of information provided to the Ombudsman at first contact.

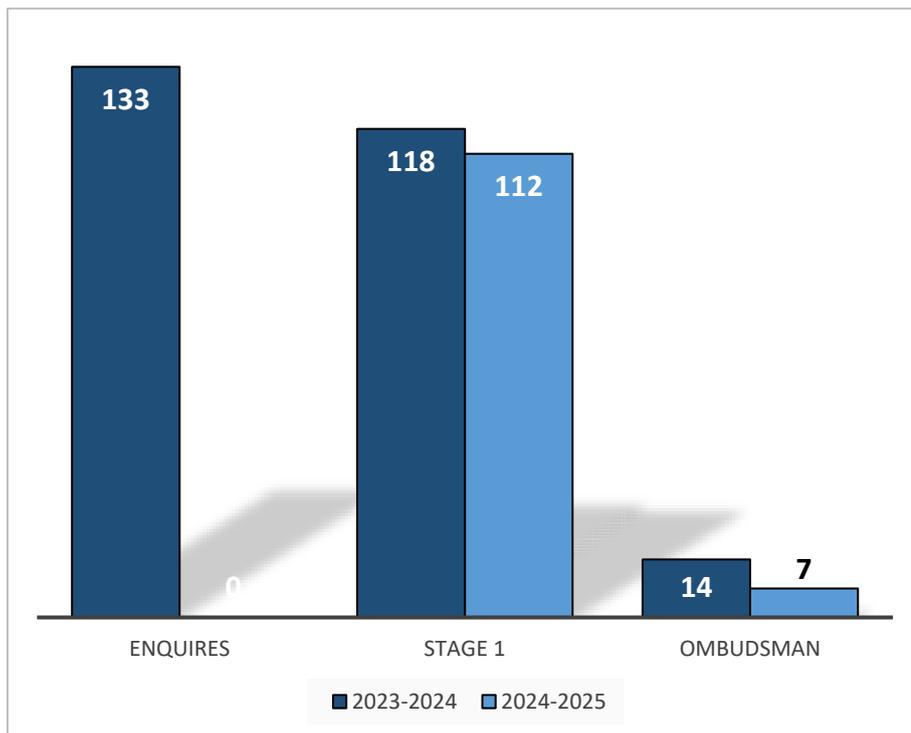
Overall, the year-on-year data indicates improved internal complaint resolution, fewer escalations requiring Ombudsman involvement, and a lower proportion of cases resulting in findings of maladministration. This trend highlights stronger governance controls, better communication with service users, and a more robust approach to early intervention. Continued monitoring will ensure that these improvements are sustained and that learning from upheld cases is embedded across the service.

4.2 Volumes (2 Year Comparison)



There is a slight decrease of 3 complaints from 2023–2024 to 2024–2025. This represents a 2.46% reduction year-over-year. Please note that this graphic does not include enquiries received in 2023–2024 and concentrates on formal complaints.

4.3 Stages (2 Year Comparison)



In 2024–2025, the Council implemented a strategic restructure of its Complaints Services, consolidating all complaints teams into a single, centralised unit. This transformation aimed to enhance operational efficiency and improve service delivery across departments. As a result of this restructure, enquiries are no longer managed or recorded by the Corporate Complaints Team, leading to a recorded figure of zero enquiries for the reporting year.

Stage 1 complaints experienced a modest decline of 5.1%.

Additionally, Ombudsman referrals were reduced by 50%, indicating a potential improvement in complaint handling and service quality at earlier stages, thereby reducing the need for external escalation.

4.4 Themes – Stage 1 (2 Year Comparison)

	2023 2024	2024 2025
Attitude/Behaviour of Staff	11	8
Change of Service	1	0
Delay in Service	11	13
Dispute Decision	21	12
Eligibility	1	3
Failure of external Care Provider	0	1
Financial Issues	38	29
Inaccurate Information	0	7
Information not Provided	2	8
Lack of Communication	11	10
Safeguarding/Welfare Concerns	3	10
Standard of Service Not Met	21	11
TOTALS	118	112

Services – Stage 1 (2 Year Comparisons)

SERVICES	2023 2024	2024 2025
----------	-----------	-----------

Adult Social Care	7	50
Client Finance	14	1
Commissioning	1	0
Community Learning Disabilities Team	0	4
Community Team North	8	4
Community Team South	9	2
External Home Care	9	0
Financial Assessments Team	34	21
Havering Access Team	2	3
HACR	14	10
Learning Disabilities	9	0
Mental Health	1	1
Occupational Therapy	2	2
Quality & Brokerage	2	4
Residential & Nursing Home	1	2
Review Team	0	2
Safeguarding	9	6
TOTALS	122	112

In 2024–2025, complaints attributed to the Adult Social Care Service increased from 7 to 50. While this represents a significant rise, it is largely attributed to the re-categorisation of complaints and the implementation of a new complaints management system introduced in Q1 (April–June 2024). This is being reviewed in 2025/2026 for improved data reporting.

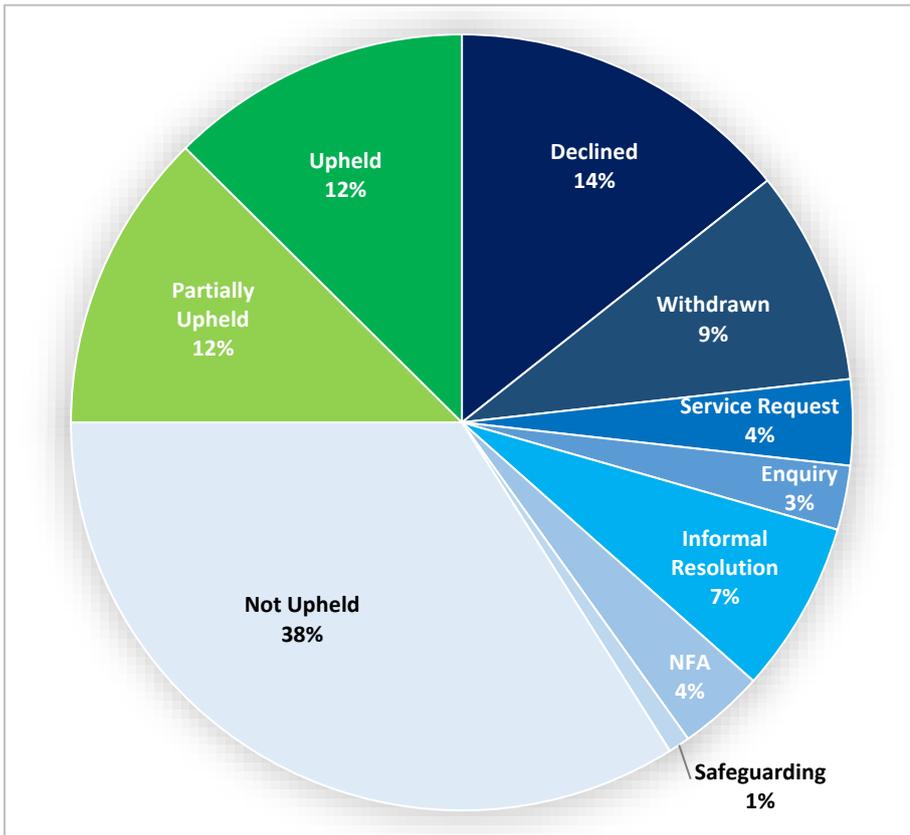
Several service areas experienced increased engagement, including Quality & Brokerage and Residential & Nursing Homes, both of which doubled their complaint volumes. The Havering Access Team also saw a modest rise.

Encouragingly, the year also recorded notable reductions in complaints across several teams: Client Finance and Community Team South saw significant decreases.

Community Team North and the Financial Assessments Team both halved their volumes

Additionally, Commissioning, External Home Care, and Learning Disabilities recorded no complaints during the year, while Mental Health and Occupational Therapy maintained consistent levels. These trends may reflect improved service delivery, clearer communication, or successful early resolution strategies within these teams.

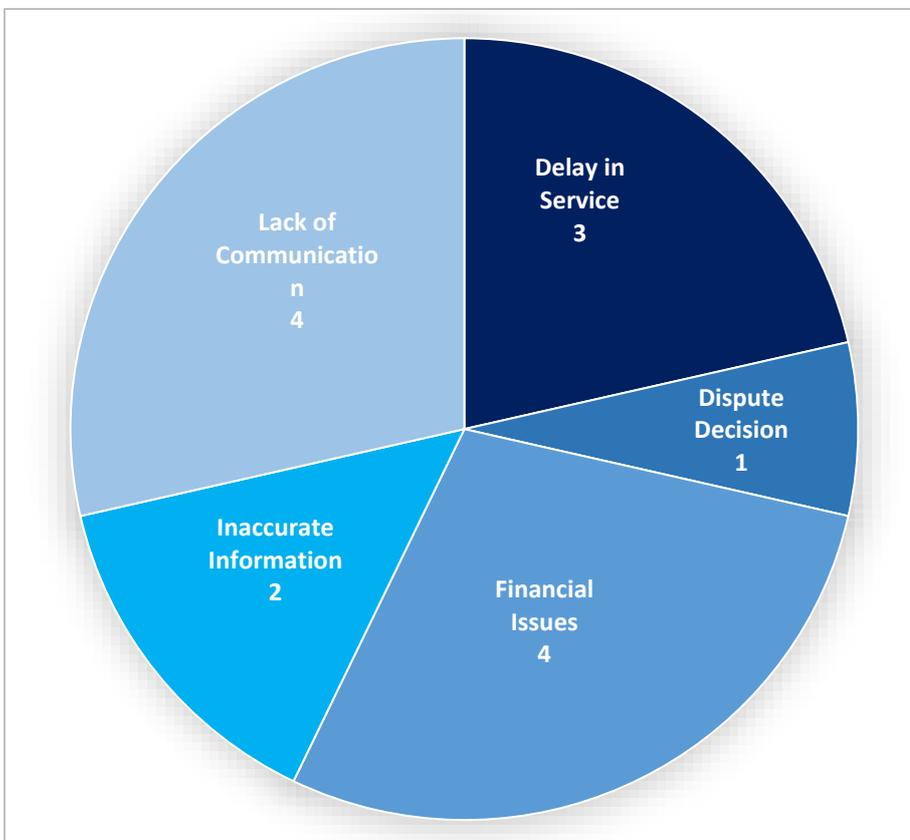
4.6.1 Outcomes (2024-2025)



In 2024–2025, the most common outcome for Adult Social Care complaints was Not Upheld, accounting for 38% of all cases. This reflects the thoroughness of investigations and suggests that, in many instances, services were delivered in line with expected standards.

A further 14% of complaints were declined. While upheld and partially upheld outcomes each represented 12% of the total. This balance indicates that the complaints process remains fair and transparent, with appropriate recognition given to cases where service improvements are warranted.

4.6.2 Upheld Complaint Themes (2024-2025)



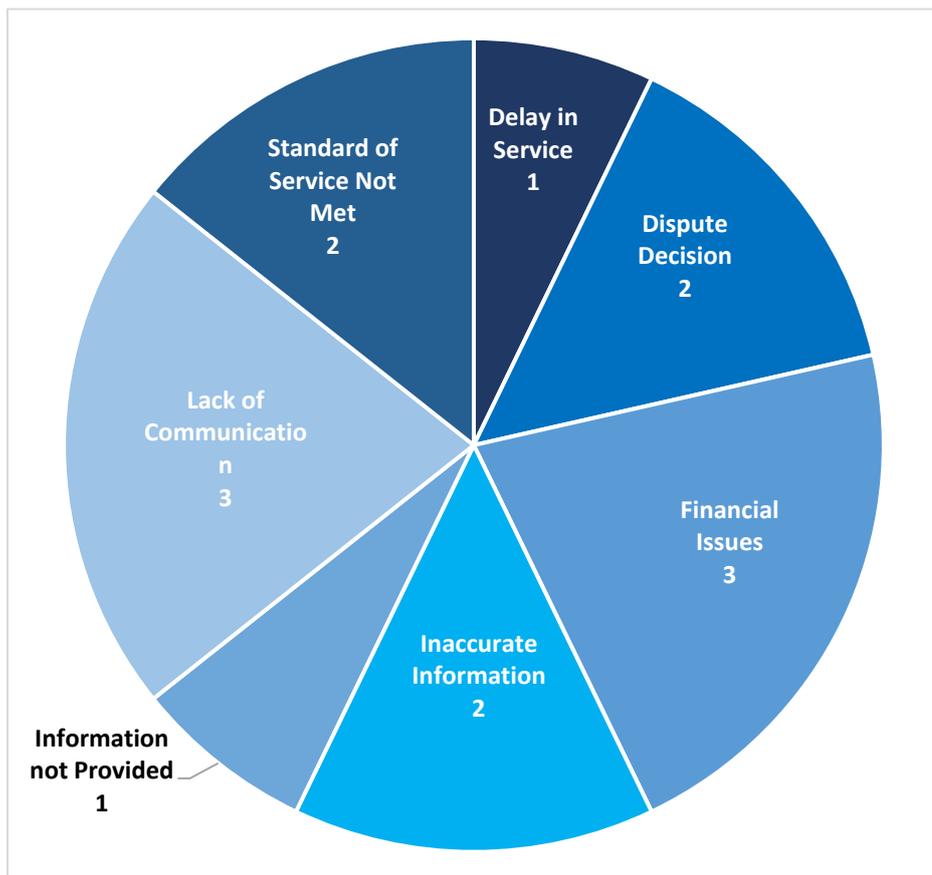
In 2024–2025, the most frequently upheld complaint themes were Financial Issues and Lack of Communication. These outcomes highlight valuable opportunities to enhance clarity in financial processes and strengthen communication pathways with service users.

Delay in Service followed closely, indicating a need to review timeliness and responsiveness across relevant teams.

Additionally, Inaccurate Information and Disputed Decisions, though less frequent, underscore the importance of ensuring accuracy and transparency in service delivery and decision-making.

These findings provide a constructive foundation for targeted service improvements and reinforce the Council’s commitment to learning from feedback to drive better outcomes for residents.

4.6.3 Partially Upheld Complaint Themes (2024-2025)



In 2024–2025, the most frequently partially upheld complaint themes were Financial Issues and Lack of Communication. These outcomes reflect areas where concerns were acknowledged, offering valuable insight into service aspects that may benefit from enhanced clarity and engagement.

Themes such as Disputed Decisions, Inaccurate Information, and Standard of Service Not Met, indicate moderate levels of dissatisfaction that present opportunities for refinement in decision-making and service delivery.

Less frequent themes, including Delay in Service and Information Not Provided, highlight areas for targeted attention.

These findings closely align with those identified in fully upheld complaints, reinforcing the importance of ongoing efforts to improve communication, financial transparency, and service standards across Adult Social Care.

4.6.4 Learning from Complaints

In 2024–2025, Havering Adult Social Care continued to treat complaints as a vital source of learning and service development. While the majority of complaints were not upheld—indicating that services were often delivered in line with expectations—24% were either upheld or partially upheld. These outcomes reflect the Council’s commitment to acknowledging valid concerns and using them to drive meaningful improvements.

The most frequently upheld themes included financial issues, lack of communication, and delays in service, highlighting areas where clearer processes and more responsive engagement are needed. New themes such as inaccurate information also emerged, pointing to opportunities to strengthen data accuracy and transparency.

The Complaints service has also recognised and prioritised improvements in complaints categorisation, staff training, and system updates to ensure better tracking and resolution. The restructure and introduction of the Case Tracker system have laid the foundation for more consistent and insightful complaints handling.

These findings have informed targeted actions across teams, reinforcing the importance of listening to residents and learning from their experiences. By embedding feedback into service planning, Havering ASC continues to enhance the quality, safety, and responsiveness of care for its community.

4.7 Response Times

TIMESCALE	2023 2024	%	2024 2025	%
10 days	29	24%	29	25%
11-20 days	62	51%	26	22%
20+ days	7	6%	12	10%
25+ days	24	20%	47	39%
IN PROGRESS	0	0%	5	4%
TOTALS	122	100%	119	100%

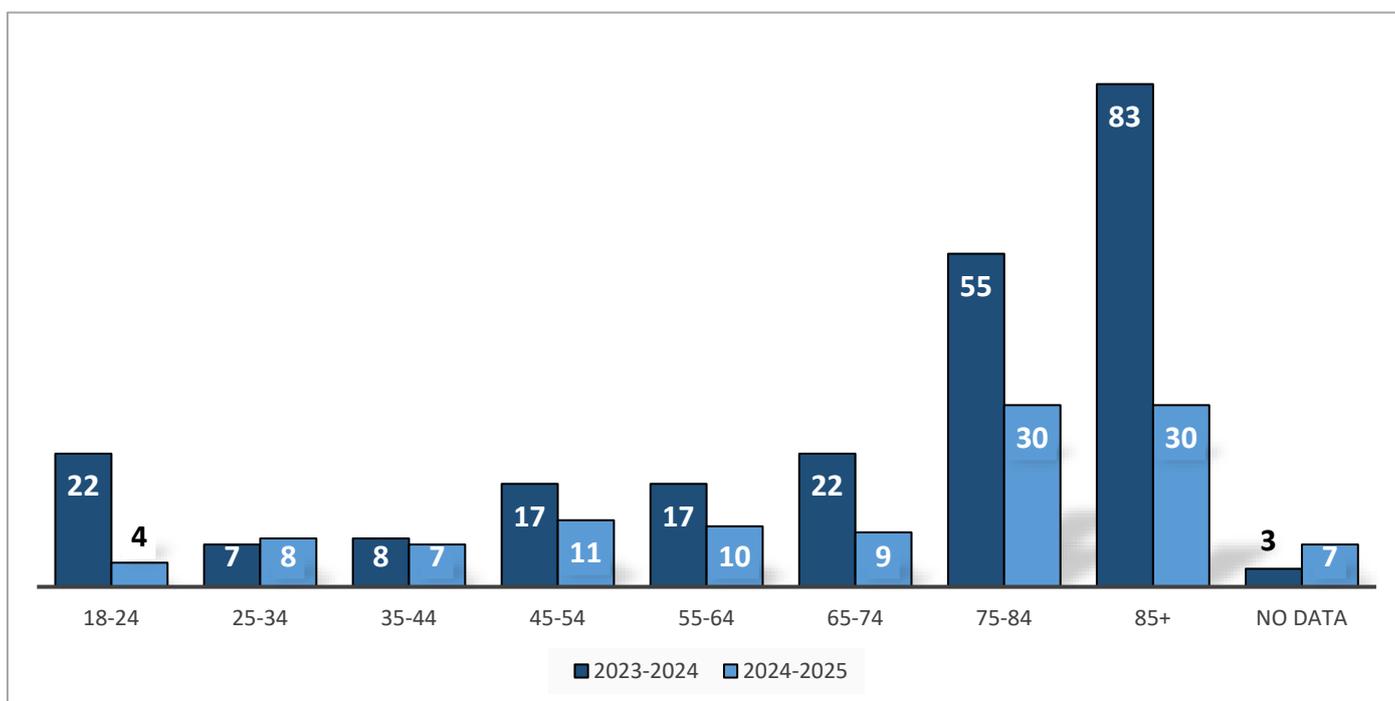
In 2024–2025, resolutions within 10 working days remained stable, with a slight improvement, reflecting continued efficiency in handling straightforward cases.

There was a 29% reduction in cases resolved within 11–20 days, which may indicate a shift in processing patterns, with more cases either being resolved more quickly or requiring extended investigation.

Notably, cases requiring 25+ days to resolve increased by 19%, reflecting a rise in complexity of casework, and some capacity pressures. This trend highlights the importance of review of capacity and case management to ensure timely and effective resolution, particularly for more intricate complaints.

4.8 Monitoring Information

4.8.1 Age Range (2 Year Comparison)

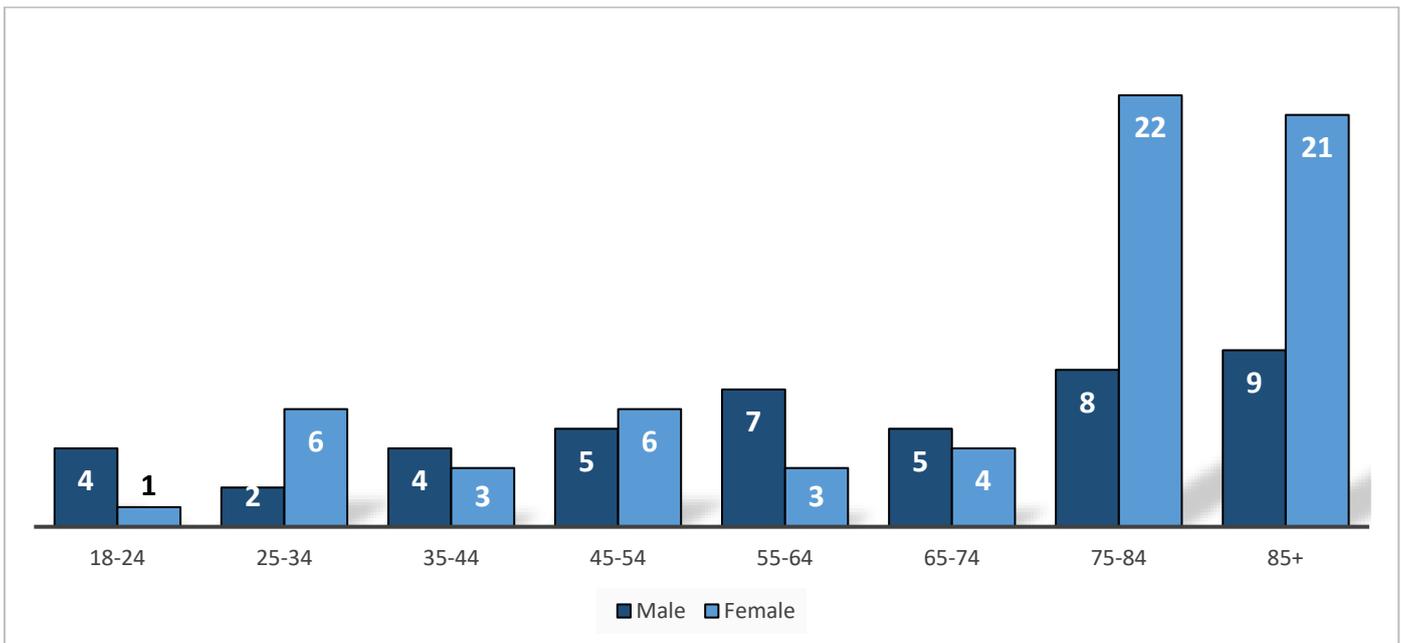


The comparative data for 2023–2024 includes both formal complaints and enquiries, whereas 2024–2025 reflects formal complaints only, following changes in recording practices. Encouragingly, the 85+ age group saw the most significant reduction in complaints, with 53 fewer cases than the previous year. This was followed by the 75–84 age group, which recorded 25 fewer complaints, and the 18–24 age group, which saw a decrease of 18 complaints. These reductions may reflect improved service delivery and satisfaction among older residents.

The 25–34 age group was the only category to show an increase, suggesting a shift in engagement or awareness among younger adults accessing services.

There was also an increase in cases where no age data was provided, which may indicate either a reluctance to disclose personal information or a need to strengthen data collection processes. This trend highlights the importance of continued efforts to improve demographic data capture to support inclusive and responsive service planning.

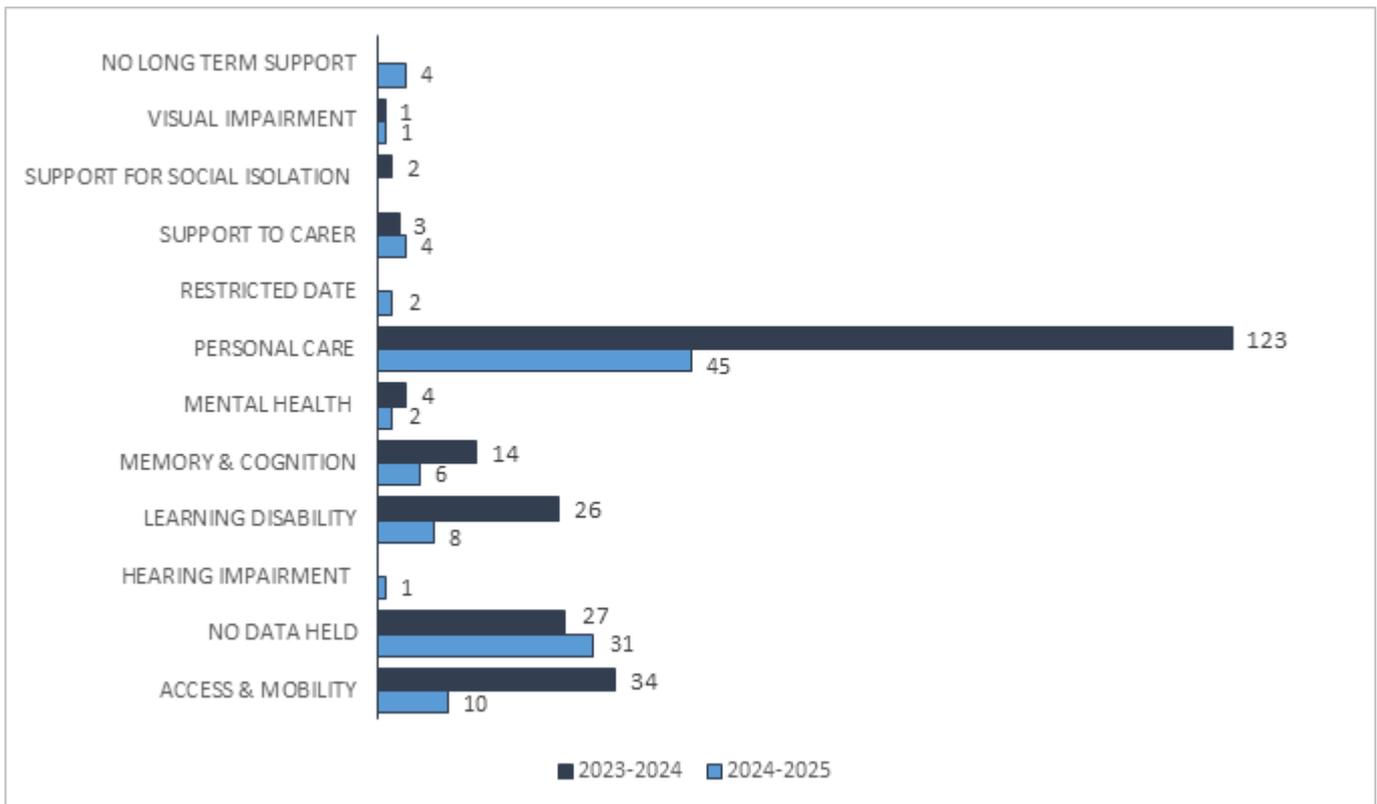
4.8.2 Age Range by Gender (2024-2025)



Analysis of complaints received in 2024–2025 shows distinct demographic patterns across age and gender groups. Among older age groups (75+), a strong female majority was observed. The 65–74 age group presented a more balanced gender distribution, reflecting equitable engagement across both male and female service users.

In middle age groups, particularly 55–64, a male majority was evident, while the 45–54 age group showed only a slight gender difference of 5%, indicating near parity. The 25–34 age range demonstrated a female majority, whereas the 18–24 group was predominantly male.

4.8.3 Disability (2 Year Comparison)



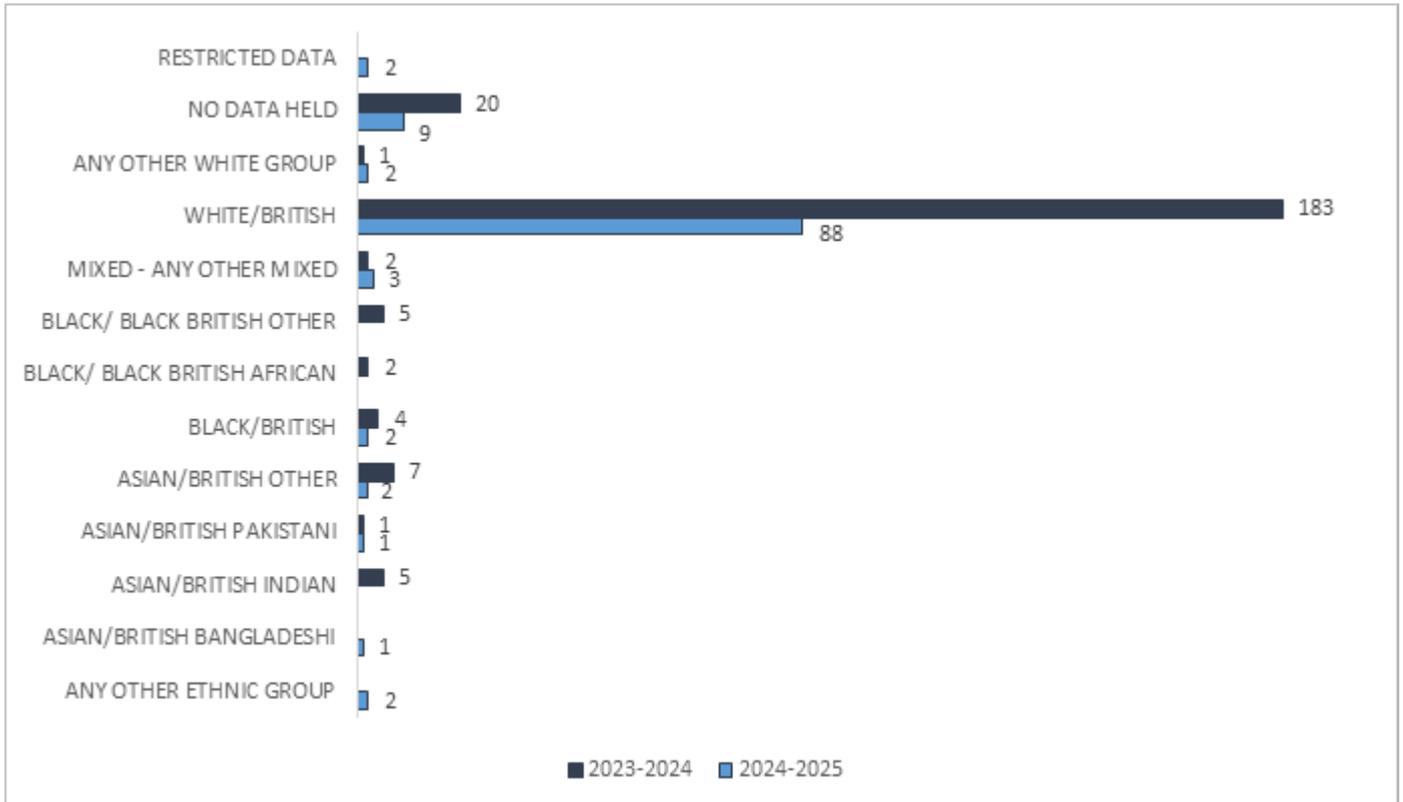
In 2024–2025, Personal Care remained the most frequently recorded category, though volumes decreased by 63%. Significant reductions were also seen in complaints related to Learning Disabilities and Access & Mobility, which fell by 69% and 70% respectively. A 33% decrease in Support to Carer complaints was also recorded. These reductions may reflect improved service delivery and responsiveness, as well as the impact of newly introduced complaint categories within the updated management system.

Conversely, Mental Health complaints doubled, and those related to Memory & Cognition rose indicating increased awareness and engagement in these areas.

There was a 15% rise in complaints where no disability data was recorded, highlighting the need to strengthen data collection and recording practices. Addressing this will support more accurate monitoring and ensure services remain inclusive and responsive to all residents.

Please note that when considering comparisons, the data for 2023-2024 in this graphic includes enquiries as well as formal complaints.

4.8.4 Ethnicity (2 Year Comparison)

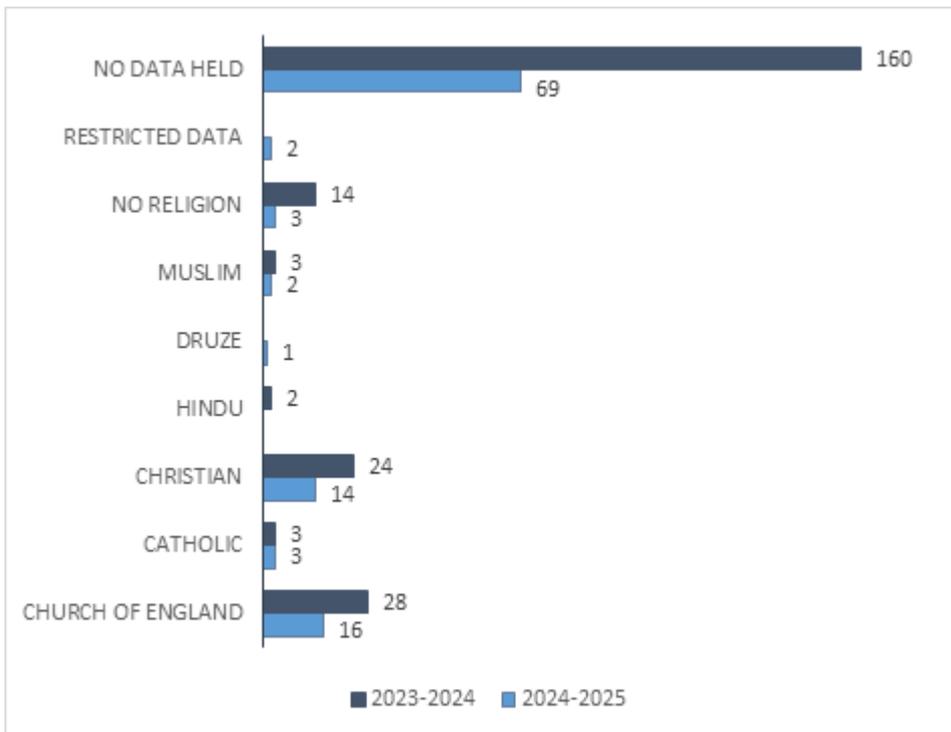


In 2024–2025, complaints from individuals identifying as White/British decreased by 52%, which may reflect improved satisfaction or reduced need for escalation within this group. Notably, complaints from Black/Black British – Other and African categories were not recorded this year, suggesting a shift in engagement patterns or resolution at earlier stages.

Encouragingly, Asian subgroups—including Indian, Pakistani, Bangladeshi, and Other—were represented in 2024–2025, having not appeared in the previous year’s data. This may indicate increased accessibility and awareness of the complaints process among a broader demographic.

There was also a reduction in cases with no recorded ethnicity data, reflecting a modest improvement in data capture. Continued focus on inclusive engagement and accurate demographic recording will support equitable service delivery and better understanding of community needs.

4.8.5 Religion (2 Year Comparison)

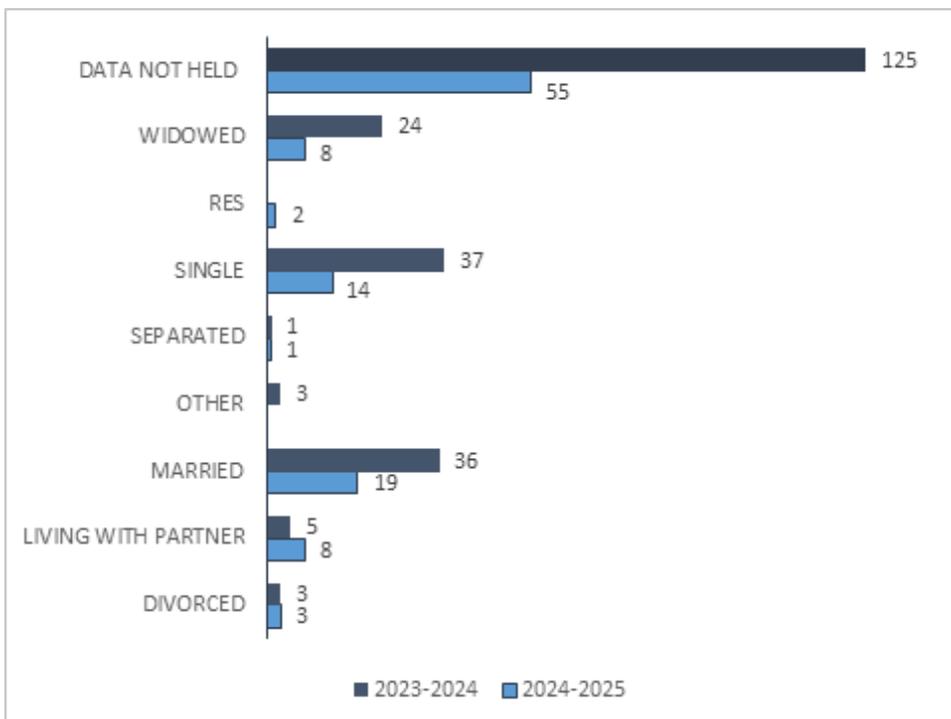


In 2024–2025, complaints with no recorded religion data fell by 57%, showing progress in demographic data collection. However, this group still represents the largest volume, highlighting the need to further encourage disclosure.

Most religious groups saw a decline in complaints, except for the Muslim category, which rose by 33%, while Catholic representation remained stable.

These changes may reflect improved accessibility and engagement with the complaints process.

4.8.6 Marital Status (2 Year Comparison)

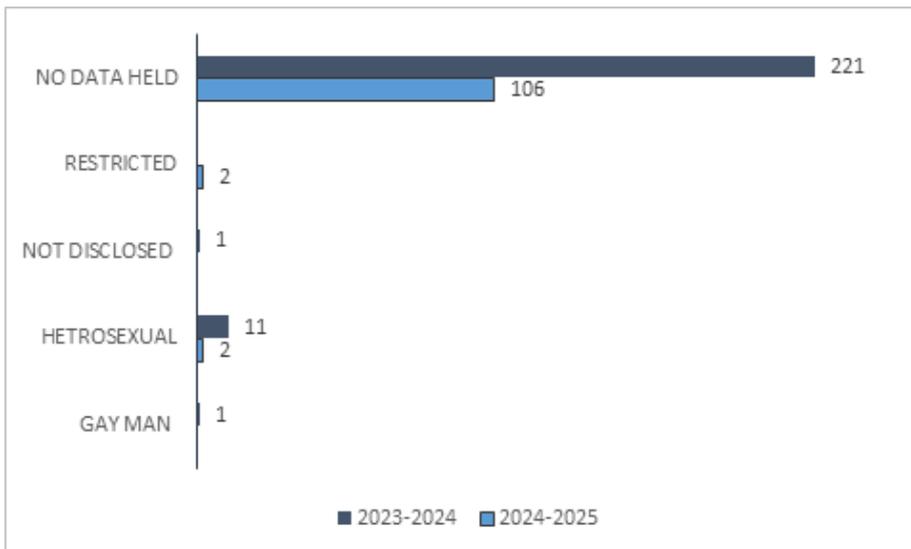


In 2024–2025, complaints with no recorded marital status fell by 56%, though this group remains the largest by volume.

All other marital status categories saw decreases, except Living with Partner, which rose by 60%. The most significant drops were among those Widowed (66%) and Single (62%), with Married complaints down by 47%.

Note: 2023–2024 figures include both enquiries and formal complaints.

4.8.7 Sexual Orientation (2 Year Comparison)

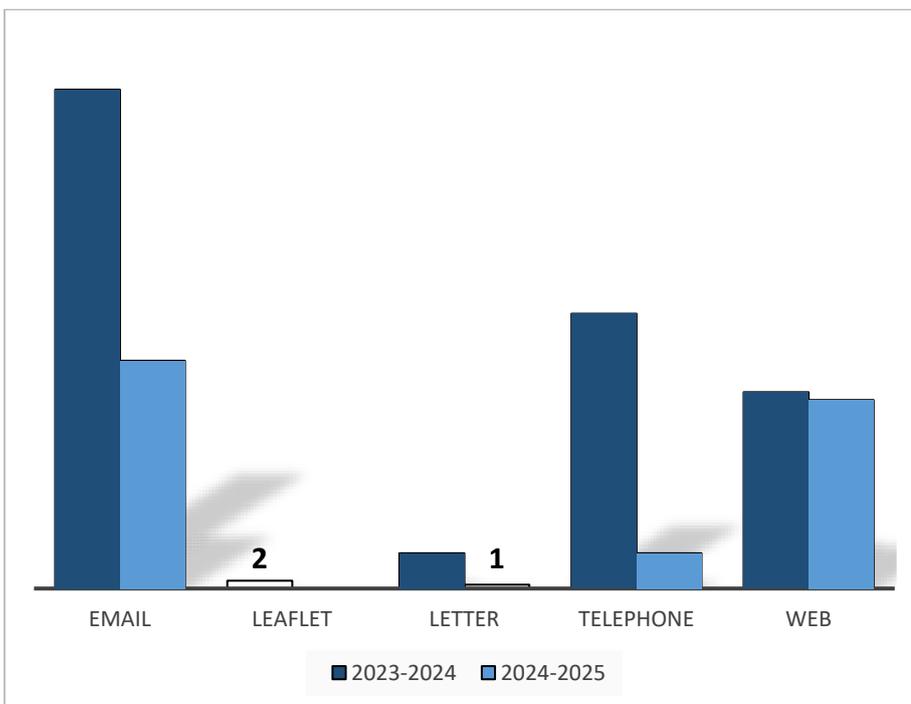


In 2024–2025, complaints lacking sexual orientation data dropped by 52%, showing progress in demographic recording.

However, this remains the largest category, indicating ongoing challenges in encouraging disclosure.

Similar patterns across ethnicity, religion, and marital status suggest further improvements are needed to enhance data quality and service inclusivity.

5. Method of Contact



Email remained the most used contact method, though its usage dropped significantly from 127 to 58 instances. Web contact stayed stable, with a slight decrease from 50 to 48. Telephone usage saw a sharp decline from 70 to just 9 instances. Letter correspondence also fell from 9 to 1, and leaflet distribution ceased entirely after only 2 instances in the previous year.

These shifts suggest evolving user preferences, highlighting opportunities to adapt engagement strategies to better meet expectations—particularly by enhancing digital channels and reassessing traditional communication methods.

6. Expenditure

	OMBUDSMAN	GOODWILL PAYMENTS	TOTAL
2023 2024	£4250.00		£4250.00
2024 2025			

Due to the implementation of a new case tracking system and the wider restructure of the complaints service, the system used for Adult Social Care was not configured to record financial remedies or payments associated with complaints.

This gap has been identified as a priority for improvement and is now part of the service’s forward planning. Enhancements are being made to ensure that from 2025–2026 onwards, all payments and financial outcomes linked to complaints are accurately recorded and monitored. This will support greater transparency, improve data quality, and strengthen the Council’s ability to learn from complaints and deliver better outcomes for residents.

7. Compliments & Resident Satisfaction

7.1 Compliments (2024-2025)

	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Total	PROFESSIONAL COMPLIMENTS
		1	1					1					3	
		1	1		6	1		3	1		1		14	2
CLDT			1										1	1
External Home Care Agencies							1	1	1				3	2
External Res/Nursing Homes			1		1				1				3	
HAT Team - Havering Access Team	2	1				1	1						5	2
Havering Community Assessment Team		1	3				1						5	
Occupational Therapy Team (OT)	1						1						2	
Quality Assurance Team														1
TOTAL	3	4	7	0	7	2	4	5	3	0	1	0	36	8

In 2024–2025, Community Team South received the highest number of compliments, with a total of 14. June emerged as the top month for positive feedback, with compliments received across multiple teams. A total of 8 professional compliments were recorded during the year, with Community Team South, External Home Care Agencies, and the Havering Access Team each receiving 2.

These acknowledgements reflect the continued dedication of teams across the service and highlight areas of excellence in professional conduct and customer engagement.

Community Team South

I have read through your reassessment of mum's care and just wanted to say thank you for such a thorough review.

The discussion with mum appears to have accurately captured all pertinent issues.

I believe it is important to let people know when the services they provide are truly appreciated, so thank you again for your support.

HaVering Access Team

Oh thank you so much. It certainly will help me enormously.

You have all been so supportive to me. I cannot thank you enough!

HACR

I writing to provide some feedback about my experience in connection with the care of my mother.

The care manager has been managing the care provision following her stays in hospital. I have found her to be extremely professional and she has shown great empathy and understanding with our situation as I am sure you know situations like this are very difficult for families and to have the support of someone like her is incredibly reassuring.

The care package put in place with Outreach has really helped me and I am very grateful for the services we are receiving.

External Residential Care Homes

Just want to say a massive thank you for all the care and attention given to my mum at Langley House. Your staff Harry are a credit to leadership providing a warm and welcoming environment not only to the residents but the family too. The food and variety deserves Michelin stars.

From mum not ever wanting to go into residential care to saying I would love to return when the time is right is one massive achievement and I am truly grateful. You and the staff are amazing people and I can't thank you enough for your care and kindness. Thank you

Occupational Therapy

I had an interview this morning from 10.30-11 am. After the interview, they said they will get back to applicants within 3 days. I got a call around 12.30, they said they would like to offer me the job, if I want it. IF I want it?! I want it!!!

THANK YOU AND THE TEAM SO VERY MUCH FOR YOUR SUPPORT THROUGH THE DARK YEARS. THERE ARE NO WORDS TO EXPRESS MY GRATITUDE

7.2 Adults Social Care Outcomes Framework – Survey (2024-2025)

SERVICE USER SURVEY	2023 2024	2024 2025
Social care-related quality of life	18.7%	19%
The proportion of people who use services who have control over their daily life	75.1%	72.6%
	43.3%	48.5%
Overall satisfaction of people who use services with their care and support	60.9%	63.4%
The proportion of people who use services who find it easy to find information about services	65.3%	60.6%
The proportion of people who use services who feel safe	69.7%	73.5%
	86.4%	86.1%

Quality of Life: The social care-related quality of life score saw a slight improvement, rising from 18.7% to 19%, indicating a positive shift in overall wellbeing.

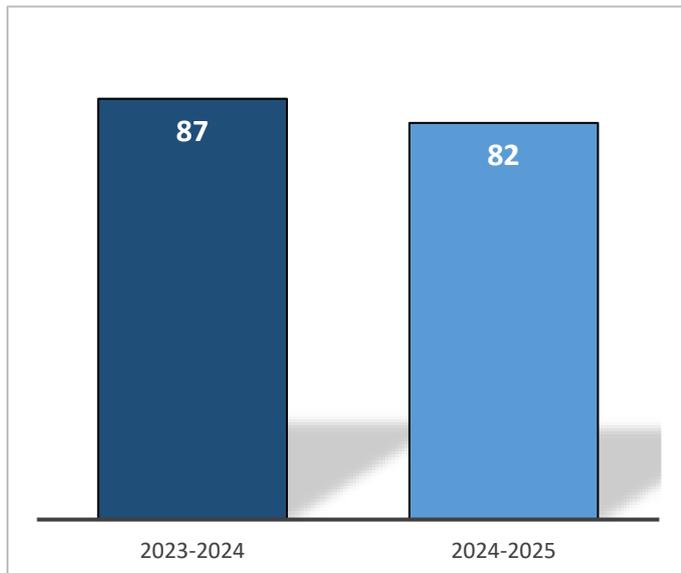
Social Contact: There was a notable increase in the proportion of people who reported having as much social contact as they would like, rising from 43.3% to 48.5%. This reflects ongoing efforts to reduce isolation and promote community engagement.

Satisfaction with Care and Support: Overall satisfaction increased from 60.9% to 63.4%, demonstrating progress in delivering responsive and supportive care services.

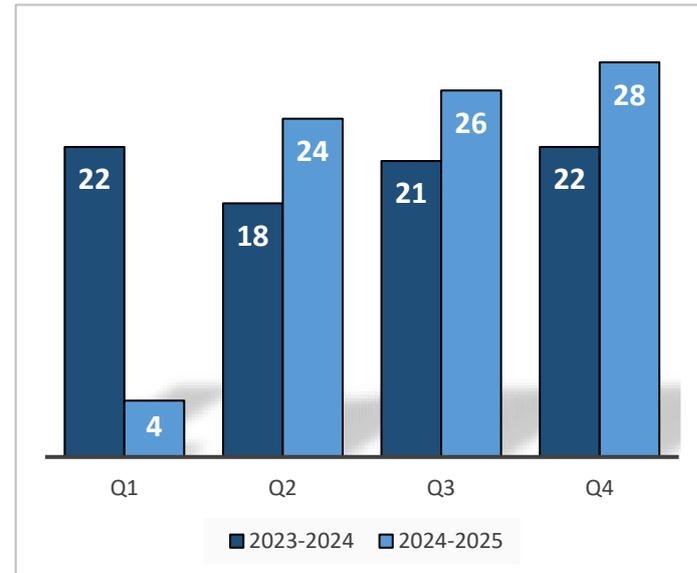
Feeling Safe: The proportion of people who feel safe increased from 69.7% to 73.5%, reinforcing the importance of safeguarding and secure service environments.

8. Members Enquiries

8.1 Volumes (2 Year Comparison)



8.2 Volumes by Quarter (2 Year Comparison)



In 2024–2025, Members’ Enquiries related to Adult Social Care showed a slight overall decrease, largely due to transitional changes following a complaints service restructure and the introduction of a new case tracking system in April 2024. While data from the first quarter may be incomplete, the remaining three quarters saw an increase in recorded enquiries.

The Insight, Information and Investigations Team began centralising Members’ Enquiries using the new system, addressing previous gaps in data collection. This improvement will support more accurate reporting and better service responsiveness in future years.

9. Conclusion

The 2024–2025 Annual Report reflects a year of significant transition and development for Havering Complaints Service for Adult Social Care. Amidst a major restructure and the implementation of a new complaints case management system, the service has remained focused on delivering high-quality, person-centred care while strengthening its approach to feedback, accountability, and continuous improvement.

Despite the operational changes, the service maintained a stable volume of formal complaints. The introduction of the Case Tracker system has enhanced the consistency and transparency of complaints recording, laying the foundation for more accurate data and better service oversight in future years.

The analysis of complaint themes has provided valuable insights. While financial issues and communication remain areas of concern, the emergence of new themes such as inaccurate information and safeguarding highlights the evolving nature of service user expectations and the importance of clear, timely, and empathetic engagement. The Council has responded by prioritising improvements in staff training, data accuracy, and complaint categorisation.

Encouragingly, the report also highlights reductions in complaints across several service areas, suggesting that targeted improvements and early intervention strategies are having a positive impact. Compliments received throughout the year, particularly from Community Team South and External Home Care Agencies, demonstrate the dedication and professionalism of staff and the value placed on compassionate, effective care.

Service user survey results show positive trends in satisfaction, safety, and social contact, reinforcing the importance of ongoing engagement and support. These outcomes reflect the Council's commitment to promoting independence, dignity, and wellbeing for all residents.

Looking ahead, Havering Adult Social Care will continue to build on the learning from this year, refine its systems and processes, and work collaboratively across teams and with partners to ensure services remain inclusive, responsive, and resilient. The insights gained from complaints and compliments will continue to shape service delivery and drive improvements that make a meaningful difference in the lives of those we support.

10. Adult Social Care Complaints Action Plan

1. Strengthen Data Accuracy and Recording

- Action: Ensure the Case Tracker system is fully configured to record all financial remedies, including Ombudsman-directed payments and goodwill gestures.
- Outcome: Improved transparency and accountability in complaint resolution.
- Lead: Insight, Information and Investigations Team

2. Improve Complaint Categorisation and Analysis

- Action: Provide refresher training for staff on accurate complaint categorisation and theme identification.
- Outcome: More consistent reporting and better identification of service improvement areas.
- Lead: ASC Service Managers and Corporate Complaints Lead

3. Enhance Communication and Information Sharing

- Action: Develop clearer guidance and communication protocols for frontline staff, particularly around financial processes and care decisions.
- Outcome: Reduction in complaints related to financial issues and disputed decisions.
- Lead: ASC Operational Leads

4. Address Emerging Themes

- Action: Review cases involving inaccurate information and safeguarding concerns to identify root causes and implement corrective actions.
- Outcome: Increased trust and safety for service users.
- Lead: Safeguarding Team and Quality Assurance

5. Improve Timeliness of Responses

- Action: Monitor and manage complaints requiring over 25 days to resolve, identifying bottlenecks and resource gaps.
- Outcome: More efficient complaint handling and improved user satisfaction.
- Lead: Insight, Information and Investigations Team

6. Strengthen Demographic Data Collection

- Action: Introduce prompts and training to encourage accurate recording of service user demographics (e.g. age, ethnicity, religion, sexual orientation).
- Outcome: More inclusive service planning and better understanding of community needs.
- Lead: ASC Data and Performance Team

7. Promote Positive Feedback Culture

- Action: Continue to encourage and capture compliments across all service areas, with a focus on recognising professional excellence.
- Outcome: Boost staff morale and highlight areas of best practice.
- Lead: ASC Team Leads and Communications

8. Review and Refine Complaint Themes

- Action: Conduct quarterly reviews of complaint themes to identify trends and adjust service delivery accordingly.
- Outcome: Proactive service improvement and reduced recurrence of issues.
- Lead: Insight, Information and Investigations Team