Adult Social Care and Health

Annual Complaints Report

2024 - 2025

THE ROYAL BOROUGH OF KENSINGTON AND CHELSEA

Table of contents

Key snapshots

67 Statutory complaints received

97% Complaints answered within 10 working days

Ethnicity snapshot

45% White

19% Black

10% Other Ethnic Group

8 Upheld

42 Not Upheld

17 Partially Upheld

36 Compliments received

0 Local Government and Social Care Ombudsman Full Investigations

About this report

This report presents a comprehensive analysis of complaints, compliments, and investigations conducted between April 2024 and March 2025. It evaluates the performance of various Adult Social Care (ASC) services, assessing their adherence to the key principles established in the Local Authority Social Services and National Health Complaints (England) Regulations 2009, as well as the formal complaints procedure.

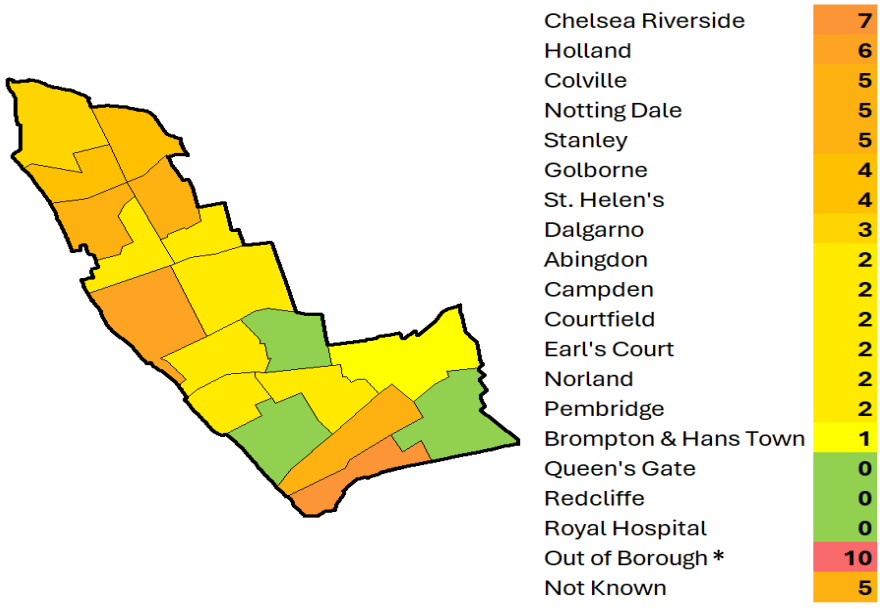
Ethnicity profile

Kensington and Chelsea is home to 147,500 residents and is the smallest London borough both in terms of size and population. Despite its size there is great diversity. It is densely populated with a high proportion of single-person households. Whilst the number of children living in the borough is expected to decline, the number of people aged 65 or over is expected to increase by almost 40% in the next 20 years. There are 105,300 residents aged 16-64 (71%). 36% of residents identify themselves as from a Black, Asian or other non-white ethnic background.[1]

Kensington and Chelsea is characterised by significant social and cultural diversity, alongside pronounced disparities in income, employment, and skills. The borough includes some of the most deprived areas in London, with Golborne ranked as the most deprived ward in the city, followed closely by Notting Dale and Dalgarno. These inequalities are reflected in the types and frequency of complaints received, particularly in relation to housing conditions, access to services, and support for vulnerable residents. Understanding these localised challenges is essential for shaping responsive and equitable service provision.

Of the 67 complaints received by Kensington and Chelsea, 30 (45%) were submitted by individuals identifying as White. This was followed by 13 complaints (19%) from individuals of Black heritage, and 7 complaints (10%) from individuals belonging to other ethnic backgrounds, including those identifying as Arab. Figure 1 also includes a heat map that shows where complaints live.

Figure 1 –Heat Map Illustrating Complaints Across Wards



[1] https://www.jsna.info/sites/jsna.info/files/Kensington%20and%20Chelsea%20JSNA%20Borough%20Story%20-%20Spring%202025.pdf

*Out of borough relates to residents placed in residential or nursing homes

About the complaints process

Our streamlined statutory complaints process aligns with the *Local Authority Social Services and National Health Service Complaints (England) Regulations 2009*, as well as the accompanying guidance issued by the Department of Health and Social Care (DHSC). All complaints are formally recorded and acknowledged by the Customer Engagement (CE) Team within three working days. Despite there being no official timeframe for completion of ASC complaints with the Care Act 2014 and its associated regulations the council aims to resolve complaints within 10 working days; however, if additional time is required, this is discussed and agreed with the complainant.

Anyone who has received, is currently receiving, or is seeking a service from the Council is eligible to submit a statutory complaint. This includes individuals affected by the Council's decisions regarding social care, including services delivered by external providers on the Council's behalf, such as family members or representatives of the service user. The Council is committed to conducting a thorough and impartial investigation into all concerns raised, ensuring a detailed written response that outlines clear findings and recommendations. Complainants are also informed of their right to escalate their concerns to the Local Government and Social Care Ombudsman (LGSCO) if they remain dissatisfied with the response.

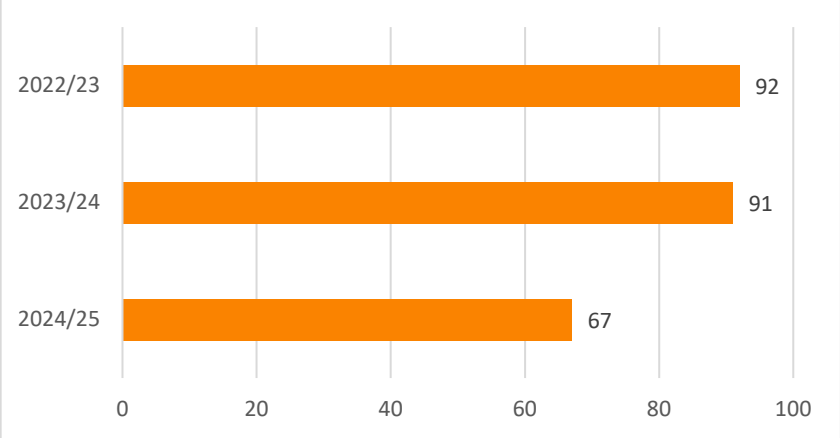
The statutory complaints guidance requires that the method and timeframe of response be proportionate to the seriousness of the complaint, with all investigations concluded within six months. The Council prioritises timely resolution and, where no specific timescale is prescribed, applies an internal standard of 10 working days, ensuring ongoing consultation with the complainant throughout the process.

Volume of complaints

In 2024/25, the Customer Engagement (CE) Team recorded and investigated 67 complaints, representing a 31% decrease from the 91 complaints received in 2023/24, as shown in Figure 2.

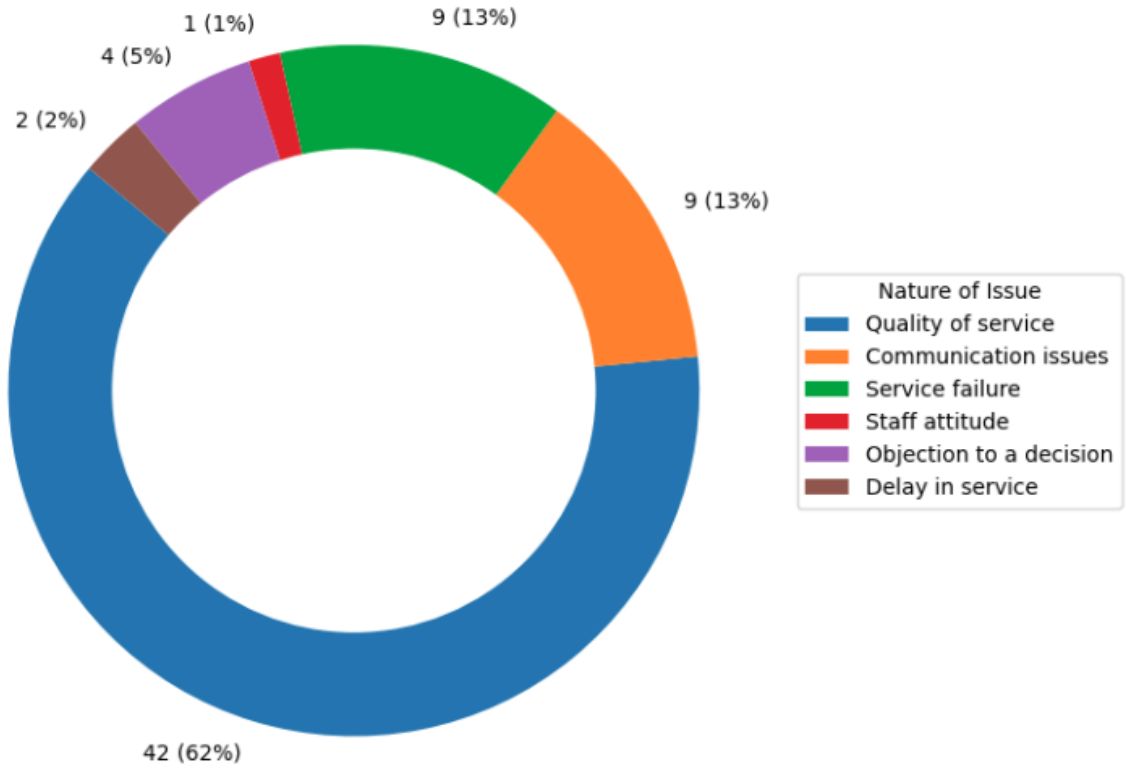
The reduction in complaints is attributed to a number of factors to include fewer reports concerning our commissioned partners for community equipment, improved responsiveness to low level informal issues before they become complaints.

Figure 2 - Number of complaints received over the last 3 years



Nature of complaints

Figure 2 – Complaints by nature of issue for 2024/25



The reasons for complaints received in 2024/25 are summarised in the chart above, with accompanying figures and percentages. The most prominent category was "Quality of Service," which accounted for the highest number of complaints. This broad category captures a variety of concerns, including instances where carers were late, dissatisfaction with the conduct or responsiveness of social workers, and issues related to the provision or suitability of equipment. All complaints received were of low level concern in terms of risk and none reached the threshold of a safeguarding concern. However, as part of the findings many did have the involvement of the Quality Assurance Team. A full breakdown of complaints by service area is shown in Table 1.

Complaints activity by team

Table 1 – Number of complaints by area in 2024/25

	Area	Total no of complaints	% of total complaints	No of cases fully or partly upheld	% of cases upheld against total complaints	LGSCO cases (none upheld)
Arranging Social Care	Assessment & care planning	28	42%	11	17%	1
	(Complex SW Teams)	(8)	(12%)	5		
	(Learning Disability Team)	(4)	(6%)	2		
	(Information and Advice)	(13)	(19%)	2		
		(3)	(5%)	2		

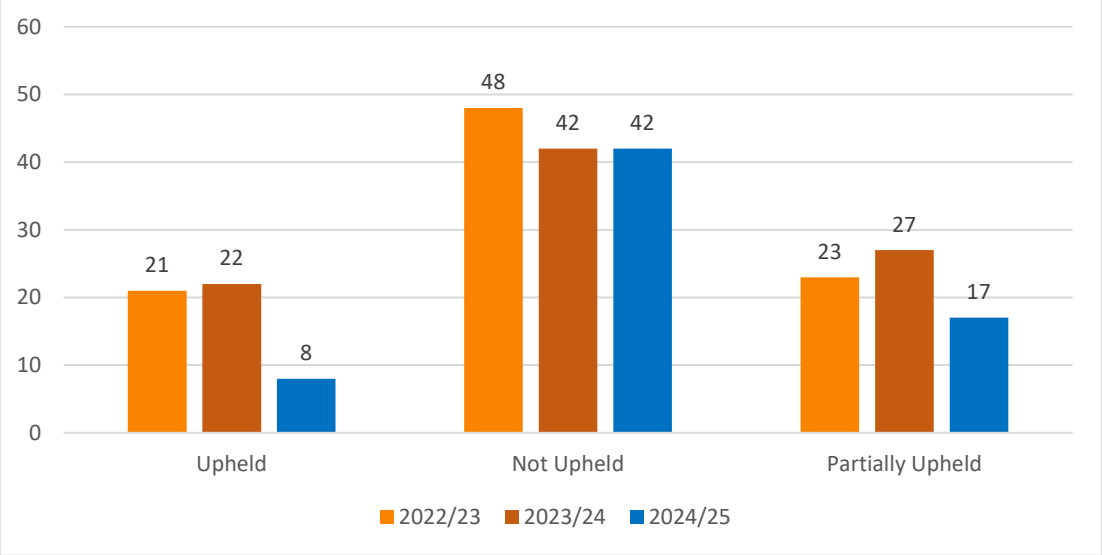
	(Review Team)					
	Safeguarding	1	2%	0	0%	
	Charging/Finance	4	6%	1	1%	
	Hospital Social Work Team	5	8%	1	1%	
	Mental Health Social Work Team	14	21%	4	6%	3
	Occupational Therapy	5	7%	2	3%	
Providing Social Care	Homecare	8	12%	5	8%	
	Accommodation service	1	2%	1	1%	
	Day service	1	2%	0	0%	1
TOTAL		**67**	**100%**	**25**	**37%**	**5**

Outcomes

In **2024/25**, **8** complaints **(11.9%)** were fully upheld, and **17** complaints **(25.4%)** were partially upheld. Where complaints were upheld, the Council or its commissioned partners provided appropriate apologies, outlined actions for service improvement, explained any delays, and addressed communication issues where relevant. In addition to written responses, complainants were offered the opportunity for an in-person meeting to discuss the findings of the investigation.

Figure 3 below illustrates the outcomes of all complaints received by Adult Social Care since 2022/23. While the number of not upheld complaints has remained relatively consistent, we are happy to report that the performance has improved. 63% of the total complaints were noted as not upheld. In contrast to last year's 54% this year only 37% were partially or fully upheld.

Figure 3 – Complaint outcomes over the last 3 years



The Department of Health and Social Care's statutory complaints regulations require that responses be proportionate to the seriousness of the complaint and completed within six months. The CE team aims to resolve complaints as promptly as possible. In the absence of a prescribed timescale, the team adopts an internal target of 10 working days, in consultation with the complainant.

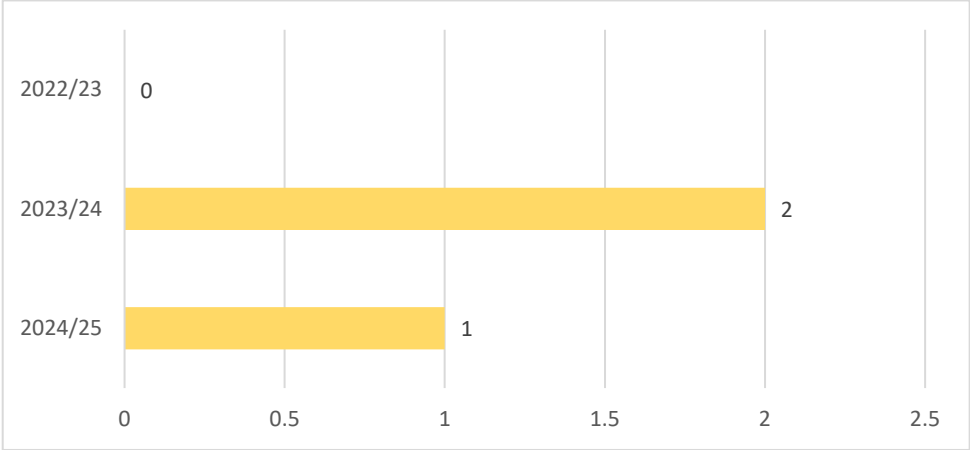
In 2024/25, 97% of complaints received a response within 10 working days. Two complaints required more than 10 working days due to their complexity and multi-agency involvement. These were resolved successfully within 20 working days.

The CE Team remains committed to timely and effective complaint resolution. Where it is not possible to meet the 10-working-day target, complainants are kept informed of progress and advised of revised timescales. Delays may occur due to:

- The complexity of the case
- Joint investigations with health partners or commissioned providers
- The need to provide supplementary or follow-up responses
- Limited availability of key staff involved in the investigation

Local Government and Social Care Ombudsman (LGSCO) Investigations

Figure 4 – LGSCO investigations in the last 3 years



In 2024/25, the Council received a total of five enquiries from the Local Government and Social Care Ombudsman (LGSCO). None of these proceeded to a full investigation, however, for one of the cases, the LGSCO did uphold aspects of the complaint and made a recommendation to the Department to apologise and complete a remedy payment for £100. These actions were completed, and the case was closed.

As illustrated in the figure above, the number of cases investigated by the LGSCO has shown a slight decrease compared to the previous year. However, the overall number of investigations remains low in proportion to the total volume of complaints received (67 in 2024/25). This trend reflects the department's continued emphasis on resolving complaints locally and at an early stage. All complainants are clearly informed of their right to escalate their concerns to the Ombudsman should they remain dissatisfied with the outcome of the local resolution process.

Member enquiries

Member Enquiries are defined as formal enquiries submitted by Elected Members of the Council or Members of Parliament (MPs) on behalf of their constituents. In 2024/25, the Customer Experience (CE) Team facilitated a total of 68 Member Enquiries, a slight decrease from 77 in 2023/24.

Of these:

- 61 enquiries (89.7%) were submitted by Elected Members concerning constituents' requests for care and support, or regarding existing care arrangements within Adult Social Care and Mental Health services.
- 7 enquiries (10.3%) were received from Members of Parliament requesting for care and support, or regarding existing care arrangements within ASC.

This data reflects the continued engagement of elected representatives in advocating for residents accessing adult social care services.

During the 2024/25 reporting period, 100% of Member Enquiries were addressed within the Council's corporate standard of five working days. This represents a notable improvement from the 68% compliance rate recorded in the previous year.

In instances where enquiries are particularly complex, require consent, or necessitate input from multiple Council departments, response times may exceed the standard timeframe. In such cases, Members are proactively informed of the delay and provided with an anticipated date for resolution.

Compliments

Customers and their representatives are encouraged to share their positive experiences with the Council, whether they are satisfied with the care they receive or wish to recognise excellent service. Feedback can be provided by completing a feedback form or by contacting the relevant social care team directly.

A total of 36 compliments were recorded during 2024/25, representing an increase of 11 compared to the 2023/24. The highest number of compliments received were attributed to operational services.

Below are a few examples of the positive feedback we've received from service users and their families, reflecting their appreciation for the care and support provided.

From the daughter of a service user about their care; "I would like to thank you for your support and advice. You really helped me by providing all the necessary information regarding my mother's care. You have always been there, answering my calls and emails. You are such a fantastic social worker. I would also like to thank the social services for all the services they provide for my mother... You have lifted a big burden off my shoulders. I can't thank you and the social care services enough. Such a responsible team. Excellent service."

From the son of a service user about their carer; "My family and I are highly grateful for all you've done for us... in the short amount of time you've been with us, you've helped us and gotten way more done such as the mouse infestation issue, we had which in now sorted. Also, the people are coming to do the bathroom, making the living space more comfortable for my mum. Thank you very much, God bless!"

From the daughter of a service user; "My mum had an assessment some time ago with a lovely staff member. They were very helpful and put a Care Package in place for my mum which included Day and Home Care visits.

Learning for continuous service improvement

Learning from complaints offers valuable opportunities to enhance services by drawing on the experiences of those who use them. Staff and managers responsible for handling complaints are expected to identify lessons that can lead to meaningful service improvements. For more complex complaints, a Learning Outcome Action Plan is completed to ensure that key insights are captured and acted upon. Regular discussions and constructive challenge between Heads of Service and operational teams support continuous improvement in the quality of social care practice.

Key learning themes from complaints are:

- **Enhancing communication** – ensuring information is clear, timely, and shared early enough to support informed decision-making
- **Improving the quality of service and care delivery**
- **Strengthening care delivery** – addressing gaps in service provision and responsiveness

Examples of service improvement resulting from complaints learning were:

- Carers were engaged in discussions on the use of technology to support communication, with an emphasis on both verbal and non-verbal methods to help overcome language barriers.

- The quality of care and communication provided by homecare agencies continues to be monitored regularly by the Quality Assurance (QA) team.

- Staff were also reminded to routinely check their junk and spam email folders to prevent missed correspondence and to maintain effective communication with service users.

You said: there was lack of response from one of our Learning Disability Team staff members.

We: listened and investigated the issue and found the staff member failing to address email correspondence from the resident as it had gone to the junk folder. We remind all staff to always check their junk mail.

You said: the carer does not help at all and has not showed up to care calls and was still getting charged for care hours.

We: investigated and upheld the complaint, deducted care calls from outstanding invoice, provided an apology and supervised the carer to ensure they adhered to the correct scheduled calls.

You said: there is a lack of response to emails and follow up calls regarding a potential increase to the hourly rate for direct payments.

We: listened and investigated the issue and found the staff member was on leave for some time and this should have been communicated. We have acknowledged the DP hourly rate increase and backdated this. We shared lessons learned for all staff to ensure they communicate effectively.

Our priorities for 2025/26

In 2025/26, in addition to providing ongoing support to service teams and partner providers in managing an effective and robust complaints and feedback service, the CE Team will focus on:

- Reshaping and refreshing our complaints framework, leaflets and online access to complaints.
- Partnering with the Quality Assurance Team, Principal Social Worker, and Senior Managers to support the development of an open, learning-oriented, and responsive culture. A newly introduced Learning Pathway process will promote best practice and drive service improvement through robust monitoring and reporting, shared widely via learning forums and drop-in sessions.
- Developing and growing the customer engagement role i.e. working with our service users/residents to improve services and prevent complaints.
- Collaborate with the Principal Social Worker, Principal Occupational Therapist, and the Learning and Development Team to design and deliver effective training focused on complaint resolution and managing challenging interactions.

CET Contact Details

The CE Team can be contacted using the details below if there are any questions or suggestions about this report.

E-mail: ASCCustomerEngagement@rbkc.gov.uk
Phone: 0800 587 0072