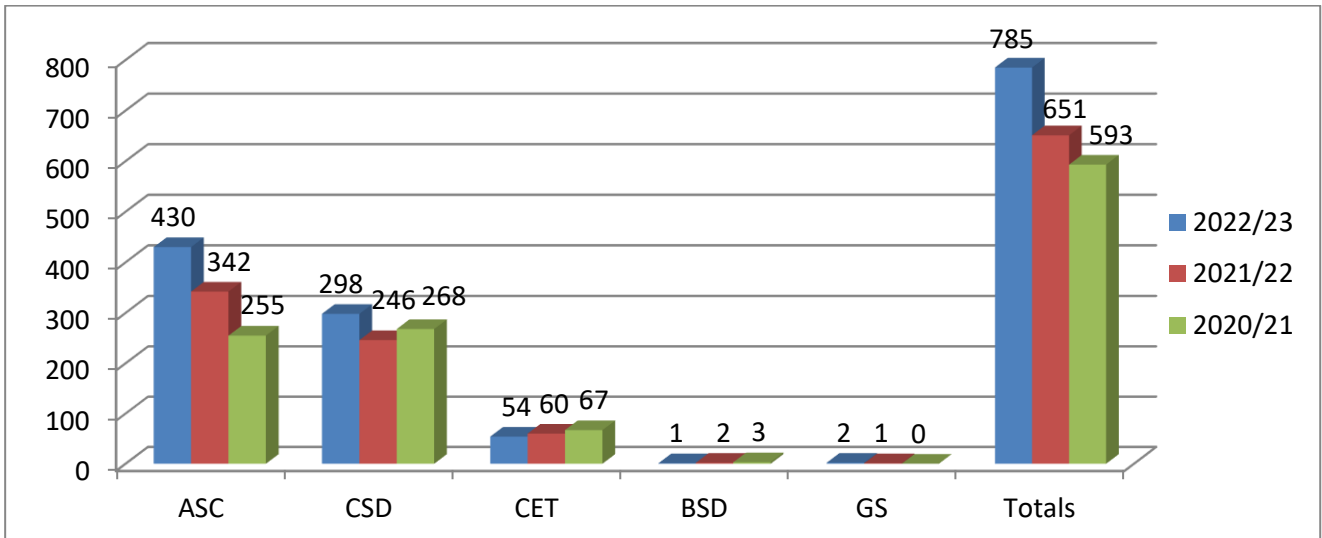


1. Summary

1.1 ESCC received 785 complaints in total in 2022/23 compared to 651 complaints in 2021/22 which represents an increase of 21%. The following chart shows the number of complaints received in 2022/23 by department compared with 2021/22 and 2020/21. Please note comparisons of complaints and compliments between departments are not valid due to the nature of the different services provided by each department.



1.2 The following table presents the total number of Local Government & Social Care Ombudsman (LGSCO) complaints for ESCC where decisions were made, and the percentages of upheld complaints compared to similar authorities for the last three years.

Year	Investigated	Upheld	Not upheld	Not investigated	Total	ESCC uphold rate %	Average County Council uphold rate %
2022/23	26	20	6	58	84	77%	80%
2021/22	38	25	13	51	89	66%	71%
2020/21	30	21	9	38	68	70%	71%

1.3 For upheld complaints for ESCC where there were remedies to carry out, ESCC received 100% satisfaction with compliance. The following is a breakdown of the remedies provided:

- Apology (19)
- Financial Redress (23): avoidable distress / time / trouble (14), quantifiable loss (4), loss of service (5)
- New appeal, review or reconsidered decision (3)
- Procedure or policy review / change (11)
- Training and guidance (8)
- Services / Information / advice to person affected (3)
- Services /information to others affected (2)
- Add or correct records (1)
- Reassessment (1)

2. Adult Social Care and Health

	Change	2022/2023	2021/22	2020/21
Number of complaints received	↑26%	430	342	255
Number of complaints upheld/partially upheld	↑7%	218	146	102
Number of compliments	↑59%	1,512	950	823

2.1 Summary

2.1.1 Adult Social Care (ASC) recorded a total of 430 complaints during the reporting period, an increase of 26% from last year. We have also seen an increase in the complexity of cases, which is defined by the number of services and organisations involved. Complaints have generally included a financial component, with an emphasis on the impact of delays in undertaking social care and financial assessments and then disputing the charges for services, particularly if the service has fallen below expectation. Communication with teams and across teams has also featured as an element of dissatisfaction within many of our complaints.

2.1.2 51% of the complaints we received were upheld or partially upheld, representing a 7% increase from last year, when 44% of complaints were upheld or partially upheld.

2.1.3 ASC has however continued to receive significantly more compliments (1,823) about our services than complaints (430). The ratio per compliment to complaint is 4.2 compared with 2.8 last year.

2.2 Action taken to improve the service

2.2.1 The Direct Payments process for care and support was reviewed. The review considered the information shared with people to ensure it is provided at an earlier stage in the process and is informative and accessible. It has also improved how teams worked together to achieve outcomes in a more timely and smooth way.

2.2.2 The Homes for Ukraine Scheme created a new guidance document advising sponsors what to expect and what they need to do, with a guideline around timescales. The process for claiming and receiving thank-you payments was also made simpler and clearer. A policy was also developed to deal with situations where a decision needs to be made on a host's suitability.

2.2.3 A commissioned service providing an alarm care system recruited additional staff to ensure a more responsive service.

2.2.4 Financial Services reviewed its internal processes and procedures to identify improvements to managing incoming work to reduce timescales and provide a timelier outcome to financial assessments. This is ongoing, and so far, some of the changes have resulted in a significant reduction in time to complete a financial assessment. A new letter was also implemented to improve the information provided about how financial assessments are completed.

2.3 Compliments

2.3.1 We have received 1,823 compliments. These sincere expressions of gratitude show how much services are valued by our clients, their families, and their friends. This year people have particularly praised our Joint Community Rehabilitation Service (698), Milton Grange our older peoples directly provided service (124) and Support with Confidence Scheme (116).

2.4 Local Government & Social Care Ombudsman (LGSCO)

2.4.1 The table below sets out the LGSCO findings for complaints about ASCH.

Year	Investigations		Closed after initial enquiries	Invalid/incomplete	Referred back	Advice given	Total
	Upheld	Not upheld					
2022/23	6	3	8	3	7	1	28
2021/22	17	4	7	4	6		38
2020/21	10	6	6	2	4	1	29

2.4.2 Further analysis for ASCH of the LGSCO complaints will be provided in the department's Annual Complaints Report. The report will be available later in the year and published on the Council's website: [Comments, compliments and complaints annual report](#). This report is provided under the Local Authority Social Services and National Health Service Complaints (England) Regulations, 2009.

3. Children's Services

	Change	2022/23	2021/22	2020/21
Number of complaints received	↑ 15%	298	246	268
Number of complaints upheld/partially upheld	↑ 12%	153	97	84
Number of compliments	↑ 2%	332	326	335

3.1 Summary

3.1.1 Children's Services received a total of 298 complaints during the reporting period, up from 246 complaints received in 2021/22. Complaints from adults on behalf of children rose from 246 to 289, an increase of 17%. The number of complaints from children and young people increased from 1 to 9. The sample size is too small to be of statistical significance, although we do know that whilst formal complaints from young people are rare, our children's residential settings receive and resolve lower-level issues outside the regulated process. In 2022/23, 51% of complaints were upheld/partially upheld, last year 39% of the complaints were upheld/partially upheld.

3.2 Action taken to improve the service

3.2.1 Children's Services continues to use the learning from complaints and how people contact us as a tool in improving the services offered by the department and in improving our digital offer through our website. We have continued to track key themes and complaint types to make enhancements to our call and complaint handling process. Since the last report we have implemented a new system for regularly meeting senior managers and quality assurance leads across Children's Services to share complaints information, identify key areas of learning and improvement, and follow up on previous corrective actions agreed as a result of complaints.

3.2.2 Actions taken to improve services in 2022/23 include the following:

Social care practice

- The main themes of complaints about social care teams were communication and delay. Families complained that some emails, calls and texts to social workers went unanswered. The importance of setting expectations around communication with families at the start of involvement has been shared with social care managers across Children's Services. Social workers now consistently explain to families that, while they may not be able to respond to every email or call, all information will be read and acted upon.

- Complaints about miscommunication or no communication with families resulted in changes in social care procedures, including key conversations being followed up in writing, teams ensuring that contact details were correct, and families given more notice of upcoming meetings.
- Leaflets explaining what would happen during a Family Assessment period were not being consistently shared with families, resulting in some complaints from people who did not understand the process or timescales. Senior Managers reviewed the information which is being shared with families at the start of Children’s Services involvement. Senior managers are now working to ensure that clear information is shared consistently with families.

ISEND

- The Inclusion, Special Educational Needs and Disability (ISEND) Assessment and Planning team received most complaints about communication and delays during the Education, Help and Care (EHC) Plan process. Customers complained that they did not receive timely responses and were not kept up to date with what was happening. Unfortunately, Assessment and Planning have experienced significant staffing shortages and staff changes during the past 18 months which have impacted on the service. Staff have been given training and guidance on responding to families in line with the East Sussex Customer Promise.
- Customers complained about delays in statutory processes around EHC plans, especially the time it has taken to name a school. When a child has multiple and complex needs or disabilities that could not be easily met, ESCC consults concurrently with several schools which may include maintained specialist schools, academy status schools, mainstream schools with a specialist learning centre and appropriate independent schools, in order to find the most appropriate placement. This approach enables the Council to make a considered and appropriate choice in line with the Code of Practice 2015 and from the options available.
- During a consultation process, any delay in schools responding to the Council influences the timescale. Whilst the Council is ultimately responsible for meeting statutory deadlines, it has been recognised and explained to customers that some factors are out of our control. It has also been explained to customers at the start of the complaints process that Assessment and Planning have experienced significant staffing shortages, and this has led to longer response times. This is not an excuse but an explanation of why responses may have taken longer, and an acknowledgement of how frustrating delays can be.

3.3 Compliments

3.3.1 In addition to the complaint-related contacts received, we also logged 332 compliments. This is 2% higher than the 326 compliments received in 2021/22. This increase indicates that despite the rise in complaints, there remains an appreciation of the work staff are doing with children and families.

3.4 Local Government & Social Care Ombudsman

3.4.1 The table below sets out the LGSCO findings for complaints about Children’s Services:

Year	Investigations		Closed after initial enquiries	Invalid/incomplete	Referred back	Advice given	Total
	Upheld	Not upheld					
2022/23	11	2	15	1	10		39
2021/22	8	9	11	2	7	1	38
2020/21	8	2	3	1	7	1	22

3.4.2 There is further analysis of these complaints in the Children’s Services Annual Complaints Report. The report has been published on the council’s website: [Children’s Services Annual Complaints Report](#). This report is required under The Children Act 1989 Representations Procedure (England) Regulations 2006.

4. Communities, Economy & Transport (CET)

	Change	2022/23	2021/22	2020/21
Number of complaints received	↓ 13%	54	62	67
Number of complaints upheld/partially upheld	↓ 1%	15	18	28
Number of compliments	↓ 5%	409	430	510

4.1 Summary

4.1.1 There were 54 complaints received in CET in 2022/23 compared to 62 complaints in 2021/22 and 67 in 2020/21. The number of complaints continue to be low, which reflects how successful staff have been in effectively managing a huge number of enquiries, challenges, and informal complaints from customers.

4.1.2 Of the CET complaints received in 2022/23, approximately two thirds (66%) were in relation to customers voicing dissatisfaction with decisions and delivery of services based on Council policy, a trend which remains year on year. Of the 54 complaints received in 2022/23, 15 were fully or partly upheld which was 28%, compared to 29% of complaints received in 2021/22. The number of complaints fully or partly upheld continue to be low.

4.2 Action taken to improve the service

4.2.1 Actions taken to improve services in 2022/23 include the following:

4.2.2 For complaints received in 2022/23, the highest number of fully or partly upheld complaints were in relation to communication (6) the remaining categories were quality (5), policy (2) and staff behaviour (2). The numbers are very low compared to the numbers of complaints and number of enquiries that are handled by the services in general.

4.2.3 All six complaints related to lack of communication were partly upheld. This is a common theme for our complaints and potentially avoidable and there is a high level of scope to improve and to get things right for customers. We continually monitor communications issues to identify where we can improve the customer experience and effectiveness of service delivery. To remedy these complaints, apologies were given, and full responses provided. It is noteworthy that all were partly upheld meaning the delivery of the service (the reason for the contact in the first place) was correctly carried out.

4.2.4 There has been a decrease in complaints fully or partly upheld regarding the poor quality of work or services in 2022/23. However, of these upheld, they covered administrative errors, delay in payment, and not following up after investigations. In all cases, apologies were given, and corrective actions were carried out to remedy the errors. Due to low numbers and the cases being across different services, there were no themes to draw out of these complaints. However, improvements to service delivery were made by further staff training on business procedures and processes, and processing personal data of customers. For one service, the team introduced quality checks of responses to improve communications and information provided to customers. In another case, where a complaint raised issues around poor delivery of training, a review was carried out both internally and externally by the third-party training company. Improvements were made to

the delivery of the training and additional measures were put in place to ensure the courses provided are inclusive to all needs of the attendees.

4.2.2 Compliments

4.3.1 There were 409 compliments logged in CET in 2022/23, compared to 430 compliments in 2021/22. Compliment numbers overall continue to be high, which indicates that staff continue to deliver high quality services and show their commitment to customers. This year almost half of the compliments were about the customers' appreciation of help from Council and contracted staff and for the quality of the service being delivered by the staff. Customers showed gratitude to the staff for the quality and commitment to the services they provide.

4.4 Local Government & Social Care Ombudsman

4.4.1 The table below sets out the LGSCO findings for complaints about CET:

Year	Investigations		Closed after initial enquiries	Invalid/incomplete	Referred back	Total
	Upheld	Not upheld				
2022/23	2	1	11			14
2021/22	0	0	8	1	1	10
2020/21	2	1	7		3	13

4.4.2 There were two upheld complaints in relation to CET services. There were no themes to draw from such a low number of upheld complaints. One complaint was regarding flooding of a customer's land and all remedies were carried out. The other upheld complaint was regarding noise reduction measures the customer was eligible for in their property and the suggested financial offer to the customer made by ESCC satisfied the Ombudsman as a remedy to resolve the complaint.

5. Business Services

	Change	2022/23	2021/22	2020/21
Number of complaints received	-	1	2	3
Number of complaints upheld/partially upheld	-	1	1	1
Number of compliments	n/a	n/a	n/a	26

5.1 Summary

5.1.1 There was one formal complaint for Business Services in 2022/23, which was partly upheld due to lack of communications with the customer. An apology was given, and the service provision provided. There were no themes to draw out from the one complaint for Business Services.

5.2 Compliments

5.2.1 No compliments from external, individual customers were reported departmentally for Business Services in 2022/23.

5.3 Local Government & Social Care Ombudsman

5.3.1 There were no LGSCO complaints investigated about Business Services in 2022/23.

6. Governance Services

	Change	2022/23	2021/22	2020/21
Number of complaints received	-	2	1	0
Number of complaints upheld/partially upheld	-	0	0	0
Number of compliments	-	n/a	n/a	n/a

6.1 Summary

6.1.1 There was two complaints logged for Governance Services in 2022/23 and both were not upheld. There were no themes to draw from such a low number of complaints.

6.2 Compliments

6.2.1 No compliments were recorded in 2022/23.

6.3 Local Government & Social Care Ombudsman

6.3.1 The table below sets out the LGSCO findings for complaints about Governance Services:

Year	Investigations		Closed after initial enquiries	Invalid/incomplete	Referred back	Total
	Upheld	Not upheld				
2022/23	1					1
2021/22						0
2020/21						0

6.3.2 One complaint in relation to Governance Services was investigated by the LGSCO and was upheld. The complaint was regarding the failure to provide a recording of a coroner's inquest as required by government service standards. All remedies were carried out including a written apology, a payment to recognise the distress caused, and a review of the inquest recording system to ensure it was fit for purpose.

7. Chief Executive's Office

7.1 Customers often address their complaints to the Chief Executive (CE) or Leader and so they are received through the CE Office. However, the complaints are about issues with services provided by departments rather than the CE Office itself, so these are recorded by the relevant department and form part of their figures and analysis.