Adult social care
Annual complaints report 2025/2026

Stockton-on-Tees
BOROUGH COUNCIL

Contents

1. Purpose of report

The purpose of the annual report is to review Stockton on Tees Borough Council's handling of complaints related to adult social care over the twelve-month period between 1 April 2025 and 31 March 2026. The report shares information about complaints themes, and learning taken from those complaints to improve the quality of social care services.

2. Summary

This report demonstrates the Council's continued commitment to handling complaints in a fair, transparent and proportionate manner, in line with best practice and the expectations set by the Local Government and Social Care Ombudsman.

During the reporting period, complaints have continued to provide valuable insight into the experiences of people who use our services. While the majority of concerns were resolved either at an early stage or through the statutory process, the themes identified highlight areas where practice can be strengthened.

Encouragingly, there is evidence that learning from complaints is being used to inform service improvements, with actions taken to address identified issues and reduce the likelihood of recurrence. The report also reflects ongoing challenges, including managing demand and ensuring consistent application of processes across services and with our partners including health.

The Council remains committed to using complaints as a tool for learning and improvement, ensuring that feedback from people who use our services and their representatives directly informs the development and delivery of adult social care services.

It is positive that the Ombudsman decided not to investigate the 2 complaints they considered about adult social care as they were satisfied that the Council had already accepted the fault they identified and remedied the issues to prevent the faults happening for others. This reflects that our consideration of such complaints is robust and fair and officers take every opportunity to put matters right.

3. Background

The Local Government and Social Care Ombudsman (LGSCO) is an independent body which issues guidance to Local Authorities on how to handle complaints, as well as being the body to which residents can raise complaints regarding services provided by councils if they are not satisfied with how their council has investigated and responded to their complaint.

In October 2020, the LGSCO issued councils with guidance on how to handle complaints called "Effective Complaint Handling for local authorities". They state that councils should adhere to the following standards and practices to ensure complaints are dealt with effectively.

Getting it right: do simple things well, by complying with the law and following policies. Being customer focused: Make the complaints process easy to find and use, and keep complainants informed.

Being open and accountable: Processes should be transparent and be honest when things have gone wrong.

Acting fairly and proportionately: councils should explain their thinking, base decisions on sound evidence and explain clearly why they were made.

Putting things right: make amends. If something has been done wrong, councils should apologise and take steps to put right any injustice caused.

Seeking continuous improvement: complaints are a great learning tool. Councils should put systems in place to capture the lessons, which will help improve your services.

4. Profile of Stockton on Tees

In 2025/26 the Council received 16,143 requests for support with 76% coming from the community and the greatest number from people aged 75-84 years.

Of those residents who required further support, 5,395 people received short-term support, and 3,450 received long term support; of which 65% were aged over 65 years, and there were more females than males entering long-term care. We also supported over 4,093 clients with reviews to their current health and social care needs.

We have supported around 12% of the estimated 18,000 unpaid carers in the borough. The majority of carers in Stockton-on-Tees are white and female, with 37% of all the carers aged between 50-64 years. National reporting shows us that carers in Stockton-on-Tees report satisfaction with social services as one of the highest in the North East.

We currently commission with 46 care homes, of which 4% are rated by CQC as providing a service standard assessed as Outstanding, 87% are assessed Good and 9% are rated Requires Improvement. We have no care homes rated inadequate.

5. Dealing with complaints about adult social care in Stockton on Tees.

Complaints about adult social care are coordinated by the Information Governance Team, who similarly manage and co-ordinate other types of complaints. We aim to make the complaint process simple, fair, and accessible. We welcome feedback because it helps us improve the quality of care and support we provide. We will make reasonable adjustments for those who may need to access the complaints process.

The purpose of the adult statutory complaint process is to ensure that the views of those receiving social care, their carers, and families, are made known, so that those views are dealt with effectively and can inform the planning and delivery of services. The process has been developed to help us to work with our colleagues in health and the independent sector to improve the Council's listening, responding and learning from people's experiences of adult social care.

A Joint Protocol has been developed with our Health colleagues to ensure that where complaints cross health and adult social care, complainants have a single point of contact and receive a single response.

The Information Governance Team works with the relevant managers to assess each complaint to determine the most appropriate way for them to be addressed. All complaints are recorded and

acknowledged, and attempts are made to resolve them as quickly as possible, staying in regular contact with complainants to keep them up to date about its progress. If we cannot quickly resolve the issues, we will agree a plan of how we will deal with the complaint. The complaint plan will say who will respond to the complaint, identify any support the complainant needs during the process, and how long it will take to provide a response.

Complaints are only shown to those people that need to know about the matter in order that we can resolve the problem. The officer investigating the complaint will review records, speak with staff and gather all necessary information. They may contact complainants to clarify details or discuss progress. Complainants will receive a written response that explains our findings, decisions, and any actions we will take because of the complaint. We keep all complaint information confidential and only share it where necessary to investigate or resolve concerns.

6. What is a complaint?

The Department of Health defines a complaint as:

> 'An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's Adults Social Services and the National Health Service provision which requires a response'.

If a complaint highlights that an adult may be at risk of abuse or neglect, this may lead to consideration within the safeguarding adults' procedure. Under these circumstances, we will not investigate the same concerns in the complaints process. Once the safeguarding enquiry has finished, and if a complainant remains dissatisfied, the council can consider the best way to progress the outstanding concerns.

7. Who can make a complaint?

Adult social care services cover personal care and practical support for adults aged 18 and over who need help due to age, illness, disability, or other circumstances. Complaints can be made by the person receiving care, their representative, or others affected by the service provider or council's actions.

8. Information and Accessibility

We are committed to making sure that everyone has equal access to all our services, including the complaints procedure. To help make sure the complaints procedure is easily accessible we have produced two leaflets, one general leaflet and one easy to read leaflet. All new users of adult social care are provided with a copy of the leaflet and further copies can be requested from key workers and the Information Governance Team. Information about the complaints process is available on the Council's website and can be requested in other formats or languages.

There is also an electronic form which people can use to make a complaint or pass comment on Council services. People may make a complaint in any format they wish. This can be in writing, by email, via the web, over the phone, in person or by any other reasonable means. Complainants can be signposted to advocacy services where they require support.

9. Review of complaints received in 2025/2026

Table 1 – Complaints received by service area

	2024/2025		2025/2026	
Service area	**Number of complaints**	**% of total complaints**	**Number of complaints**	**% of total complaints**
Adult Social Care	14	40%	22	65%
Adults Mental Health	8	23%	7	21%
Client Financial Services	6	17%	2	6%
Client Property & Affairs	-	-	2	6%
Deprivation of Liberty Team	-	-	1	3%
Learning Disabilities Team	1	3%	-	-
Commissioning	5	14%	-	-
Rosedale Rehabilitation and Assessment Centre	1	3%	-	-
Total	35		34	

Although the number of complaints received in 2025/26 was of a similar number to 2024/25, there have been some change to the services that are the subject of complaint. The highest number of complaints relate to the adult social care teams, with the percentage of complaints in this area increasing from 40% to 65% since the previous year.

No complaints were received about services commissioned by the Council (such as residential care, day care or home care), although one complaint about adult social care did include concerns about a supported living provider. This would suggest that our providers are resolving these without the need for recourse to the local authority, which is our aim. There has also been a positive reduction in the number of complaints about client financial services (who support clients in receipt of social care services with financial assessments, direct payments, and clients who are not able to manage their own financial affairs).

10. Themes of complaints

Complaints often cover more than one theme, and the following captures the types of issues complained about:

Theme	**24/25**	**25/26**
Care planning and assessment	9	10
Service accessibility and availability	5	5
Communication and information sharing	8	3
Decision-making	5	4
Financial matters	9	4
Attitude or behaviour of officers	3	2
Safeguarding of vulnerable adults	2	5

Quality of Care	7	2
Health and Safety	0	1
Transitions and Discharge	2	0
Dignity and Respect	1	0
Complaints Handling	1	0
Advocacy and Support	1	0

Complaints are typically varied by their nature. Some complaints may seem straightforward and easy to fix – such as a miscommunication or a delay with a service. However, complaints can also be extremely complex and sensitive. Themes have been reviewed and amended this year to align with those within Care Quality Commission's themes.

Care planning and assessment is the most complained about theme. Table 2 below reflects that a high percentage of these complaints were resolved early with either an amendment made to an assessment or a reassessment offered.

Communication and information sharing often feature in complaints received but there has been a notable reduction in complaints with this included, as well as a reduction in complaints that include financial matters. There has been an increase in complaints regarding safeguarding of vulnerable adults, where faults were identified in relation to those complaints, learning has led to the service improvements shown later in Table 3.

11. Outcomes of complaints

Table 2 – Complaint findings

Outcome	**2024/2025**	**%**	**2025/2026**	**%**
Resolved at Early Resolution	16	46%	19	56%
Uncontactable/ Withdrawn	4	11%	0	-
Upheld	4	11%	2	6%
Partially Upheld	8	23%	8	23%
Not Upheld	1	3%	4	12%
Referred to Safeguarding/ Care Provider	1	3%	0	-
Inconclusive	0	-	0	-
Not investigated	1	3%	0	-
Active	0		1	3%
Total	35	100%	34	100%

Over half of complaints received were resolved early, with 6 of those being resolved by the offer of either an amendment to an assessment, a new assessment to be undertaken, or a new service to be considered. 2 complaints were resolved with the provision of explanation about decisions made or the service role.

Where there is sufficient information to indicate that an individual has suffered injustice and there is fault with the Council, the complaint will be either upheld or partially upheld. We upheld 2 complaints in full and 8 in part in 2025/26. Remedies were offered where possible and the learning taken forward to improve the service provide and prevent future recurrence. Details can be found in Tables 3 and 8.

12. Joint Protocol complaints

In 2025/2026 the Council received 2 complaints that related to services provided by both the Council and Health. Both complaints related to North Tees and Hartlepool NHS Foundation Trust, who led the investigations.

1 complaint related to the quality of care provided to the complainant's father during the final months and weeks of his life and to the Council's role in managing the risk under our safeguarding process. The Council have cooperated with the Trust's investigation and await their final response to this complaint.

The second complaint related to the complainant's son's discharge from hospital and subsequent care plan. The Council have cooperated with the Trust's investigation and provided our response to the issues relating to the Council.

We are required to work together with health colleagues to resolve cross organisational complaints, but each organisation can determine their own timeframes for response to complaints. In the case of both complaints, the Trust's timescales for response exceeded the Council's target response time.

13. Learning and Service Improvements as a result of complaints

We use the data and learning from complaints to drive service improvements, update procedures, and provide feedback to staff to prevent future recurrence of the issues complained about, so that issues do not happen again.

Table 3 – Learning & Service Improvements

Below is a summary of learning that has been identified from the complaints that have been investigated.

What you told us	What we did
Family members felt our advice that they should apply to manage their relatives' finances was unnecessary and put pressure on them to take on that role.	We gave our officers guidance to ensure that family members are fully informed about potential costs and expected timescales when applying to manage their relative's finances. We have reviewed the support provided to individuals throughout the Court of Protection process. We will ensure that we communicate the rationale behind Council decisions clearly and transparently

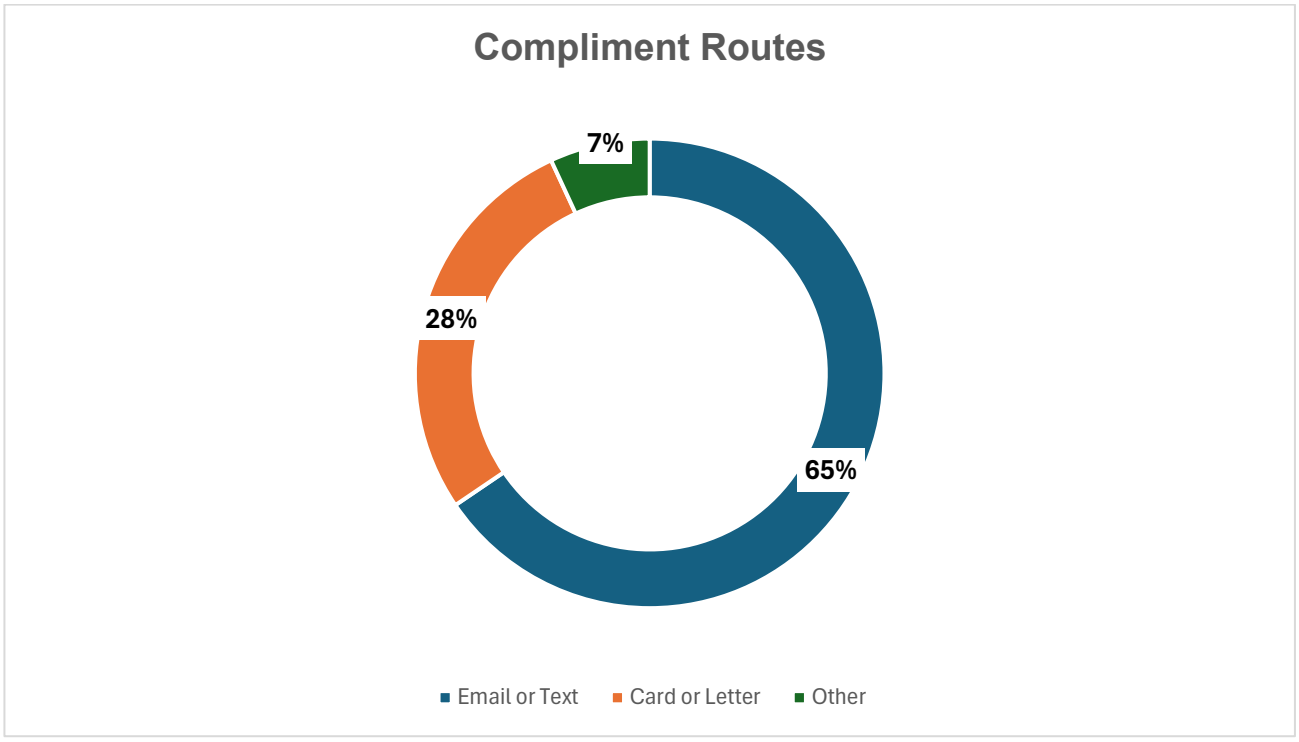
The complainant felt that we unlawfully deprived their friend of their liberty while they were residing in residential care, and that we should have consulted with them when making decisions about their friend.	The Council was limited in the information we could share with the complainant as he did not have authority to act on behalf of the person in receipt of our services. Full details of actions were shared with the individual's advocate who was satisfied with the Council's actions and chose to not raise a complaint on their behalf. The complaint prompted us to make improvements to how we record legal information, and a deprivation of liberties champion has been appointed. Refresher training was also arranged for officers involved
The family felt we failed to consult with them adequately during the Community Deprivation of Liberty Safeguards (DoLS) process and the Court of Protection application	Our social workers will ensure that all relevant individuals are consulted to identify anyone willing to act as the individual's representative. All willing individuals have been considered, and the most suitable person will be selected. The decision will be clearly communicated and documented to ensure transparency. Social Workers will consult on any alternative care options with all individuals involved in an individual's care or who have an interest in their welfare during the DoLS process. Social workers will ensure those involved in an individual's care or who have an interest in their welfare receive clear and timely information regarding the Court of Protection application. This includes details about the nature and purpose of the application, as well as their rights to respond and participate in the process.
The One Call personal alarm system failed to respond when activated.	The issue arose due to a server failure. Various steps have been taken to address this, and the company's procedures have been updated to ensure a similar incident could not happen again
Family complained that when their son presented as homeless, we failed to offer him the support he needed.	We missed an opportunity to follow up a social care referral and there were faults in fulfilling our statutory homelessness duties. These failures created avoidable uncertainty and distress during an already very difficult time. We have reinforced our statutory requirements under the Homelessness Reduction Act with all frontline staff, including the need to complete assessments regardless of anticipated local-connection outcomes. We have strengthened internal communication procedures so that social care referrals are routinely followed up promptly. We also offered a financial remedy to recognise the distress caused.

We instigated the adult safeguarding process regarding alleged financial abuse when care home fees were not paid. The family felt this was not necessary and caused distress.	Officers will be mindful of language used to ensure it does not minimise the seriousness of allegations of financial abuse but considers the impact this might have on families. We will ensure that concerns around the payment of care home fees does not automatically result in family members being removed as the representative of their relative. We shared the lessons learned from this complaint with the Best Interests Assessor, the Deprivation of Liberty's Team and the forum for all Best Interests Assessors, as well as with the wider adult social care workforce.
Family complained that the deferred payment process was not carried out correctly in respect of their mother's care home fees. This placed them in an unfair and avoidable position when handling their mother's financial affairs after she passed away. The family requested that the care home fees were written off.	We found an administrative error in our application of the deferred payment and completed an audit of all deferred payment arrangements to ensure that legal charges are registered where required. Our internal processes and oversight have been strengthened and all relevant officers have received refresher training on the process and procedures.
When the Council was approached for information about a relative, we were not clear why this information could not be shared.	When someone who uses our service asks us to not share information with their relative, we will ensure that the reasons that we cannot share information are clearly explained to the relative.
We did not tell a family members when their relative's care home fees account went into arrears.	More proactive contact will be made with relevant family members when care home fees are not paid to ensure ant issues are resolved at the earliest opportunity. Officers have been given guidance on this and procedures and practice have been reviewed.
The complainant's relative was being discharged from residential care, the family said we did not plan the discharge well and raised concerns relating to mental capacity assessments undertaken, how safeguarding concerns were handled, the availability of advocacy support and transparency of communication.	The Council has allocated a new social worker, committed to clearer and more proactive communication with families, improved transparency around Deprivation of Liberty Safeguards decisions, shared learning with therapy staff, and escalated concerns about delays in accessing advocacy services with commissioners.

14. Compliments

A new process was introduced in June 2026 to record and learn from the positive feedback we received about adult social care services. The process was introduced in response to feedback from the Care Quality Commission (CQC) that we did not have a formal system in place for recording these that allowed for a global view of these. The new system directly addresses this.

Since the process was introduced, including retrospective recording of historic compliments, 29 compliments have been recorded, for the period 1st April 2025 to 31st March 2026. The majority were received from people who draw on services, their families and unpaid carers. While this provides a useful baseline, the number recorded is likely to underrepresent the positive feedback received across services, reflecting both the newness of the process and the lack of a formal recording mechanism previously. This is reinforced by the fact that more compliments (68) were recorded for the first quarter of 2026/2027 than for 2025/2026. Further work will be undertaken with staff and managers to strengthen understanding of what should be recorded as a compliment on the system, ensuring meaningful positive feedback and examples of exceptional practice are consistently captured. The chart below shows the source of the compliments recorded:



Initial data paints an overwhelmingly positive picture across the Adult Social Care Service.

- **Most compliments relate to whole individuals** (66%), followed by praise for teams/services (34%). There are colleagues who have been mentioned several times, from across operational teams and direct services.
- **Services being frequently recognised** through compliments (Rosedale Rehabilitation and Assessment Centre was praised most often for this reporting period)

- **Recurring themes** These include staff kindness and compassion and empathy; professionalism and expertise; good communication and listening; going above and beyond expectations; building confidence and independence; quick responses and co-ordinated support and making people feel safe and reassured.

We will continue to promote and embed the new compliments process across Adult Social Care, ensuring that feedback is regularly reviewed and used to recognise good practice, understand what matters most to people, and identify opportunities for improvement. We will undertake regular thematic reviews of feedback, and use learning to inform service development, workforce development and the sharing of good practice. Findings will be reported through existing governance arrangements to support continuous improvement, supported by a compliment performance dashboard.

15. The Local Government and Social Care Ombudsman

Each year the Ombudsman publishes its annual letter and summary of statistics on the complaints and enquiries it has received about Stockton-on-Tees Borough Council and the decisions made. The Council has received the latest report for the financial year 2025/2026.

Of the 51 complaints and enquiries responded to by the Ombudsman in 2025/26, 7 were progressed to investigation, with all 7 of the complaints being upheld. 2 of the 7 complaints related to adult social care. Although the Ombudsman upheld both complaints, in both cases, the Ombudsman decided not to investigate the matters themselves as they were satisfied that the Council had already accepted the fault they identified and remedy the issues and prevents the faults happening for others. The Ombudsman felt they could not achieve anything further for the complainants by investigating matters. The learning from the 2 complaints is reflected in table 3 above.

16. Timescale Performance

Table 4 – Early Resolution

	2024/2025	2025/2026
Number of complaints received	29	34
Resolved at Early Resolution	16	19
Progressed to Adult Statutory Process from ER	2	2
Progressed to Corporate process from ER	0	0
Uncontactable	1	0
Withdrawn	2	0
Not appropriate for ER	8 (1 dealt with at corporate, 7 at adult statutory)	13 (2 dealt with at corporate, 11 at adult statutory)

We aim to resolve complaints at the earliest opportunity, but some complaints require a full investigation so are not suitable for early resolution.

Table 5 – Early Resolution Response Rates

Resolved within timescales	Took over 5 Working Days	% resolved within timescales
19	2 (availability of service)	90%

Table 6 – Complaint plans timescales

The below table provides an overview of the number of plans produced and timescales.

Within 5 days	Over 5 days/ overdue reason	No plan produced
4	6	5

We aim to agree a plan with complainants within 5 working days of receiving a complaint that establishes the points of complaint and how they will be investigated. 3 plans were agreed outside of this timeframe as the initial plan required amendments, 1 was delayed due to the complexities of the complaint, 1 was delayed due to the availability of the complaint, and 1 due to the availability of the person investigating the complaint.

Table 7 – Complaint Response times

Response in line with plan	Respond outside of agreed plan
12	3

Two of the three complaints that were responded to outside of the agreed timeframe were done so to allow consultation with other services. The remaining response was issue one day after the agreed response date. All responses were issued within a timeframe that was appropriate and proportionate to the areas of complaint.

17. Putting Things Right

Financial remedy was made in respect of 2 complaints. The table below shows the amount paid and reasons:

Table 8 – Financial Remedy

Amount of remedy	Service area	Reason for remedy

£800	Adults Mental Health Service	To acknowledge the distress, anxiety, and uncertainty caused by the service failings, and the time, effort, and emotional energy that the complainant has had to spend in pursuing their complaint.
£400	Client Property & Affairs	Removal of home care fees due to lack of information shared regarding financial implications prior to commencement of service.

Other remedies that were provided included:

- Apology for the fault identified and any distress caused.
- Explanation of why the fault occurred.
- Amendment to assessments or reassessment.
- Amendments to procedures or practice.
- Officer guidance to prevent future recurrence.
- Assurances of improved communication.

18. Training

There is a training programme in place to ensure that officers investigating complaints have the necessary skills and experience to do so. The Complaints Manager offers two bespoke training sessions each year to officers dealing with complaints relating to adult social care. Two separate sessions are provided to providers of social care commissioned by the local authority that focus on the elements of effective complaint handling systems, national minimum standards and the effective investigation of complaints. Training available through the Local Government and Social Care Ombudsman is also highlighted to officers. A complaint forum is held each year giving complaint handlers across the Council to come together, share experiences and hear about how we have improved our services following our consideration of complaints.

Adult Social Care's Workforce, Quality Assurance and Improvement service have worked with the Information Governance Team to develop a framework for officers investigating complaints to support collaborative working practices and develop internal processes and monitoring arrangements for complaint handling. A training programme is in place to support officers handling complaints to further develop their knowledge and have opportunity to apply the learning to practice through activities.

19. Key priorities for 2026/2027

To build on the progress made during 2025/26, the following key actions will be progressed in the forthcoming year:

1. Strengthening Early Resolution - We will promote consistent use of Early Resolution to resolve concerns quickly and reduce escalation.

2. Improving Timeliness and Performance - We will monitor response times to ensure compliance with statutory and local timescales and work with colleagues to address recurring delays.

3. Embedding Learning from Complaints – We aim to strengthen arrangements to ensure learning is routinely captured, shared and evidenced and use complaint themes to inform service improvement plans and performance discussions.

4. Promoting and embedding learning from compliments – Whilst all positive feedback is valued, further work will be undertaken with staff to clarify what should be recorded as a compliment. This will help ensure recorded compliments reflect notable examples of positive outcomes, exceptional support or particularly positive experiences of services. We will ensure that feedback is from compliments is regularly reviewed and used to recognise good practice, understand what matters most to people, and identify opportunities for improvement, and report findings through existing governance arrangements to support continuous improvement. This will be supported by a compliment performance dashboard providing real-time, at-a-glance information that can be accessed across the service.

5. Training and Awareness – We will continue to deliver ongoing training for our officers and providers of services we commission on complaint handling and good practice, reinforcing expectations around clear communication, record-keeping and evidence-based decision-making. We will continue to embed internal procedures to support officers handling complaints through our Adult Social Care Complaints Group, which will be supported by a complaint performance dashboard providing real-time, at-a-glance information that can be accessed across the service.

6. Enhancing Quality and Consistency of Responses – We will continue to improve the quality, clarity and tone of complaint responses to ensure they are accessible and customer-focused and support colleagues to provide thorough explanations and appropriate remedies where fault is identified.

7. Strengthening Partnership and Joint Working – We will collaborate with health and partner organisations to improve processes for handling joint complaints, ensuring clear ownership and accountability where multiple agencies are involved.

8. Oversight and Scrutiny – we will provide regular updates to senior leadership and members to maintain effective oversight and explore the use of benchmarking and Ombudsman feedback to inform continuous improvement.

Carolyn Nice

Director of Adults, Health and Wellbeing

Date: 13 August 2026