TRAFFORD COUNCIL

Complaints, Comments and Compliments Annual Report 2024-2025

(Adult Social Care)

Contents

1. Introduction

Local Authorities are legally required to have a clear and accessible complaints process for adult social care services. This duty stems from the NHS and Community Care Act 1990 and is governed by the Local Authority Social Services and NHS Complaints Regulations 2009.

Under the **Care Act 2014** councils also have broader responsibilities to ensure care services are person-centred, accountable, and responsive.

A complaint is any verbal or written expression of dissatisfaction about a service provided by the Council. All accepted complaints are logged, acknowledged, and monitored to ensure transparency and accountability.

This annual report summarises all feedback received by Trafford Adult Social Services during **2024-25.** It includes:

- Statutory complaints related to social care
- Corporate complaints about other services within the Adults Directorate
- MP and Councillor representations
- Adult Social Care Appeals
- Compliments
- Ombudsman enquiries

2. Complaint Frameworks

Adult Services complaints fall under one of the following complaint frameworks:

a) Adult Statutory Complaints

b) Adults Corporate Complaints

a) Adult Statutory Complaints Framework

Adult Social Care Statutory Complaints follow a two-stage process:

Stage 1: Local Resolution: The Council investigates and responds.

Stage 2: Independent Review: If unresolved, the complaint can be escalated to the Local Government & Social Care Ombudsman.

Our primary aim is to attempt to resolve all complaints at first point of contact locally within 24 hours. However, if unresolved, a formal Stage 1 investigation is launched.

In Trafford, we are committed to delivering a responsive and person-centred approach to Adult Statutory complaints. While national guidance does not prescribe a fixed timescale for resolution, we prioritise transparency and collaboration by agreeing a realistic timeframe with each complainant at the outset. Internally, we aim to provide a full response within 20 working days, ensuring timely communication and resolution. To maintain accountability and uphold service standards, our target is all complaints are concluded within a maximum of three months.

b) Adults Corporate Complaints Framework

Apply to social care services that fall outside the scope of Local Authority Social Services and NHS Complaints Regulations 2009. Target resolution: 20 working days.

All Adult Corporate complaints follow the Council's two stage complaints procedure:

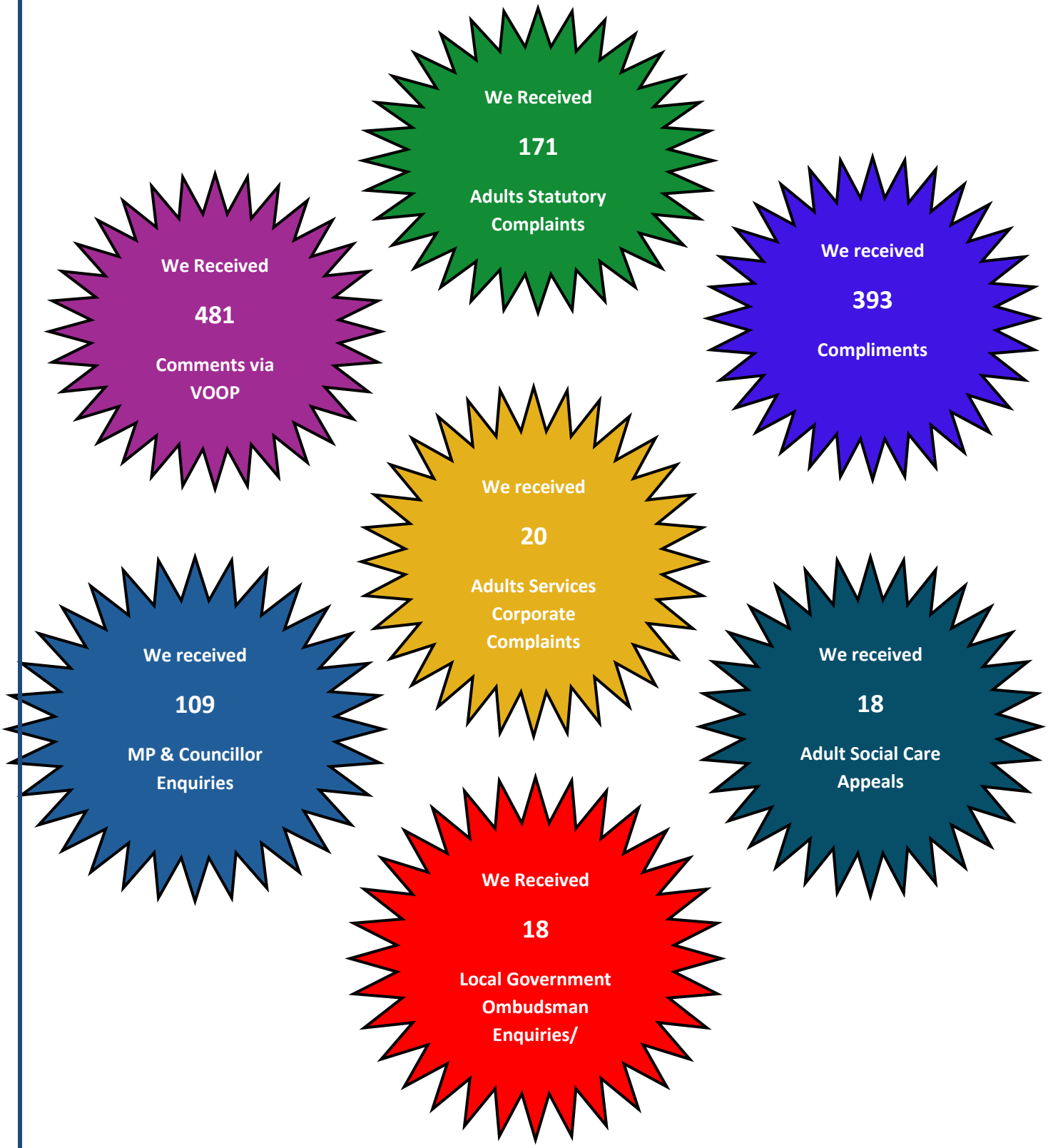
Stage 1: Investigation by Manager of the Service involved. The prescribed timescale is 20 working days. If complainant remains dissatisfied with the response at Stage 1; they can escalate complaint to Stage 2 of the Council's Corporate Complaint procedure.

Stage 2: Senior Manager Review. A response is provided within 10 working days.

If a complainant remains dissatisfied after completing our two-stage corporate complaints process, they have the right to escalate their concerns to the Local Government and Social Care Ombudsman.

3. Activity Headlines for Year 2024-25

In **2024-25** Adult Social Care received a range of feedback, summarised into the categories below.

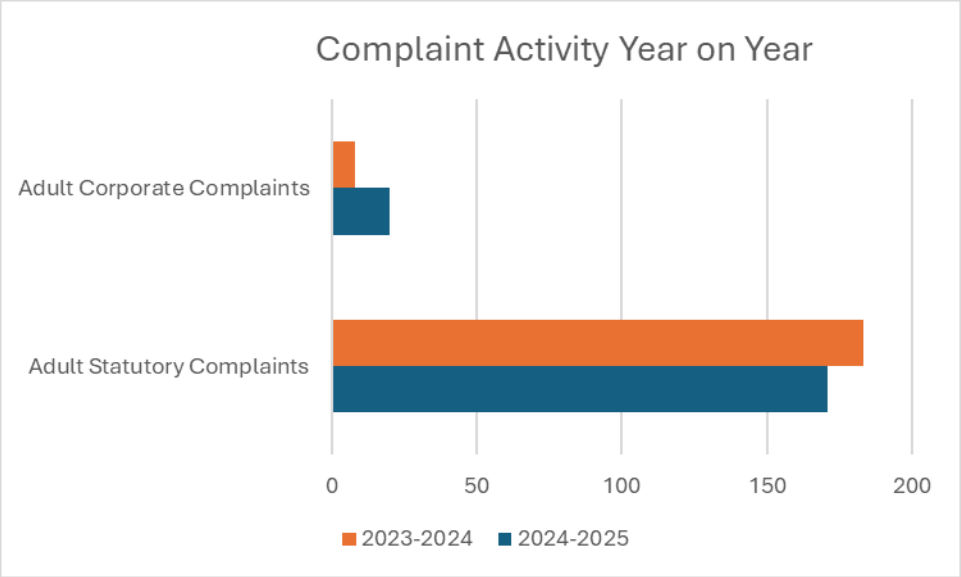


4. Summary of Complaint Activity and Performance

This section of the report **(**pages 6-18) provides a more in-depth overview of Adults Statutory Complaint and Adults Corporate Complaint Activity and Performance.

Summary of Overall Adults Complaint Activity 2024-25

The chart below provides a year-on-year overview of overall Adults Services complaint activity:



In the year **2024-25** there was a slight increase in the **total** number of accepted complaints received for Adult Services compared to year **2023-24**.

Of the **191** Adult Social Care complaints: **171** were accepted as formal complaints under **the Local Authority Social Services and NHS Complaints Regulations 2009** and the remaining 20 complaints were dealt with under the Council's **Corporate Complaints** procedure.

Whilst there was a slight decrease in the number of Adult Statutory complaints recorded in **2024-25** there was a significant increase in the number of Adult Corporate Complaints recorded.

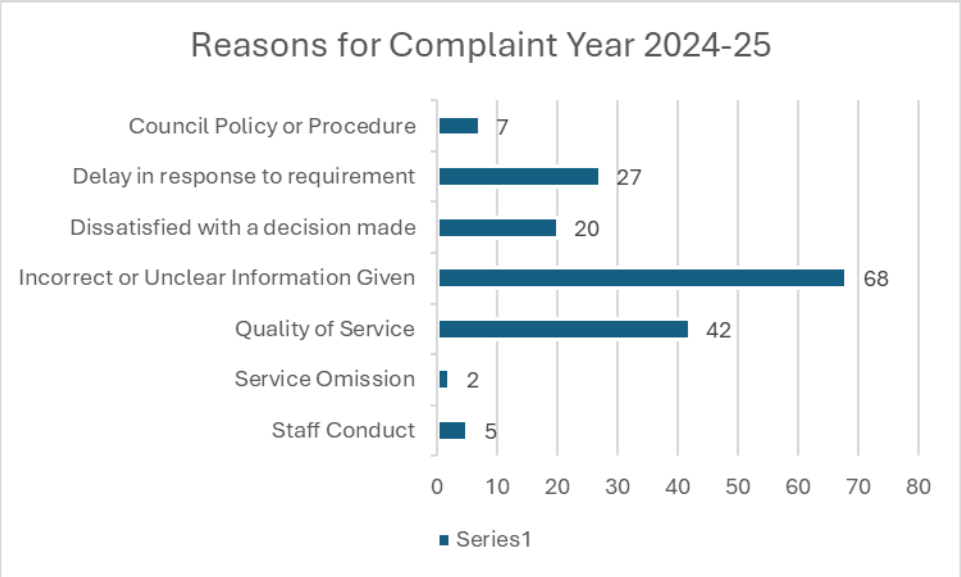
Adults Statutory Complaint Activity

As highlighted earlier, there was a slight decrease in the number of recorded Adult Statutory complaints in the year **2024-25** compared to the number of recorded complaints in the previous year **2023-24** which was **183**.

To improve services and respond to resident feedback effectively, each Adult Social Care complaint is given a reason code when recorded. This helps us identify patterns, understand the root causes of concerns, and target improvements in service delivery, communication, and decision-making.

Adult Statutory Complaint by Reason

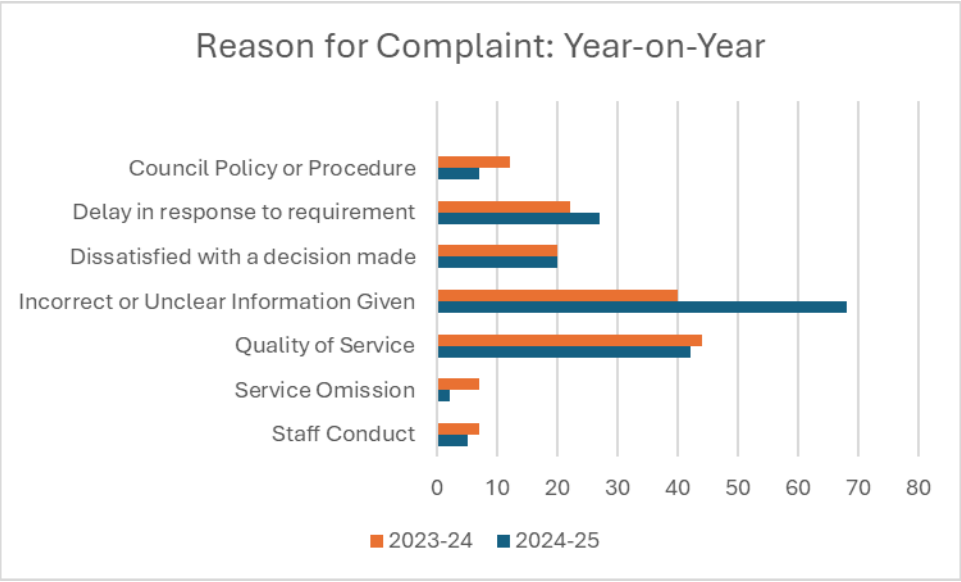
The table below presents a breakdown of accepted complaints by reason code for Adult Statutory complaints for the year **2024-25.**



In **2024–25**, the leading cause of complaints in Adult Social Care was incorrect or unclear information, with 68 cases. This was followed by concerns about service quality (40 complaints) and delays in response (27). Other issues included dissatisfaction with decisions (20), Council policy or procedure (7), staff conduct (5), and service omission (2).

Year on Year Comparison of Complaint by Reason

This year-on-year comparison highlights consistent areas of dissatisfaction and helps pinpoint where improvements are needed most.



The comparison between years **2023-24** and **2024-25** reveals notable shifts in the nature of complaints relating to Adult Social Care services. The most striking change is a sharp rise in complaints about incorrect or unclear information, increasing from 40 to 68 cases, which points to a growing issue with communication. Complaints about delays in response also rose slightly, from 22 to 27, while dissatisfaction with decisions remained steady at 20, suggesting ongoing concerns in that area.

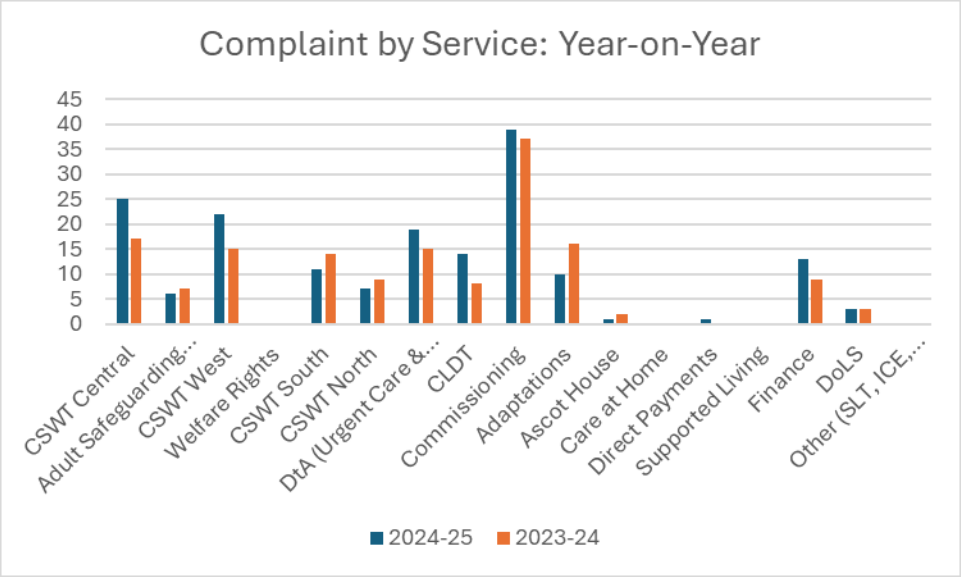
On a more positive note, some areas have seen improvement. Complaints about service omission dropped significantly from 7 to 2, and issues related to Council policy or procedure fell from 12 to 7, indicating better clarity and alignment. Staff conduct complaints declined modestly from 7 to 5, and while quality of service remains a key concern, it showed a slight improvement, decreasing from 44 to 42.

Tracking these trends over two years has helped identify recurring issues, emerging challenges, and areas where progress is evident. The data clearly highlights the need to prioritise improvements in communication and responsiveness, while continuing to build on gains in policy clarity and service delivery.

Year on Year Complaint Activity by Service

A year-on-year comparison of complaints by service enables us to identify patterns and trends linked to specific types of ***intervention*** and ***localities,*** helping us better understand where concerns arise and how they relate to the nature of the support provided.

The chart below outlines the volume and trends in complaints received across Adult Social Care service areas over the past two years.



Summary Adults Statutory Complaint Activity by Service:

Out of the **171** Statutory complaints recorded across Adult Social Care services in **2024/25**. The highest volume came from Commissioning, which accounted for 39

complaints, making it the most significant contributor. Community Social Work Teams (CSWT) collectively represent a major share, with CSWT Central (25) and CSWT West (22) leading, followed by CSWT South (11) and CSWT North (7).

Other notable areas include Discharge to Assess (DtA) which includes Urgent Care & Hospital Discharge with 19 complaints, and the Community Learning Disability Team (CLDT) with 14 complaints, indicating ongoing challenges in these high-pressure services. Finance also featured prominently with 13 complaints, while Adaptations recorded 10.

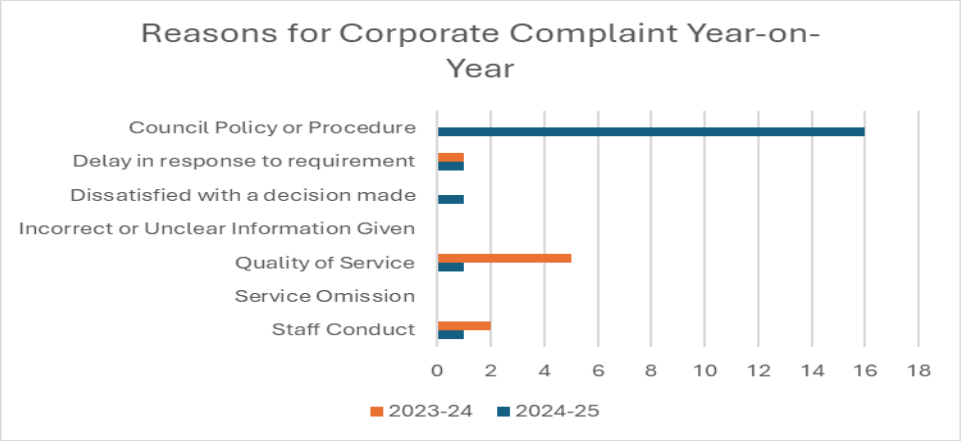
Several services reported minimal or no complaints, such as Welfare Rights, Care at Home, Supported Living, and other multi-department areas, suggesting either effective service delivery or lower levels of direct customer interaction.

Overall, the data highlights that complaints are concentrated in Commissioning and front-line CSWT teams, pointing to areas where targeted improvement efforts could have the greatest impact.

Adult Services Corporate Complaint Activity

In the year **2024-25** we recorded **20** Adult Corporate complaints. Adult Corporate complaints were relatively low in volume compared to Adult Statutory complaints (171). However, there has been a **150%** increase in the number of corporate complaints we dealt within **2024-25** compared to **2023-24** where we received **8** complaints.

The table below provides a year-on-year breakdown of corporate complaint by reason.

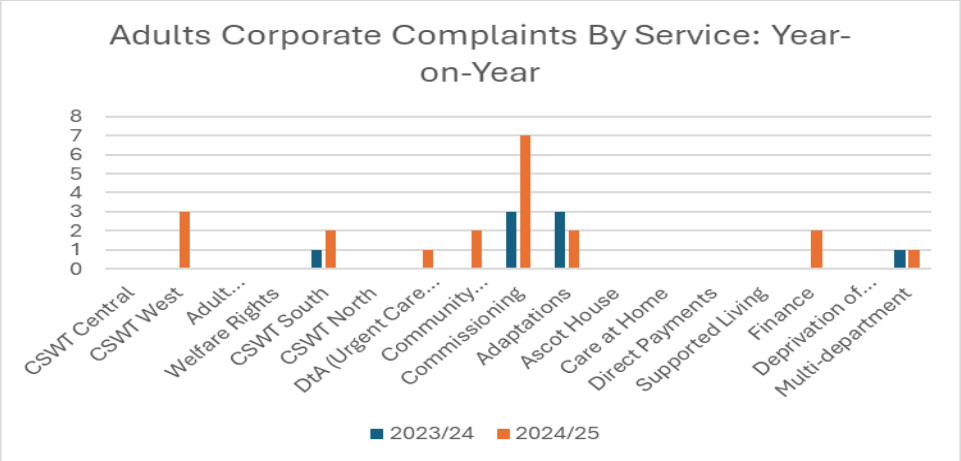


In **2024-25** the most prominent reason was **Council Policy or Procedure**, which accounted for **16** complaints, representing most issues raised.

Other reasons for complaints were minimal in numbers, with Staff Conduct, Quality of Service, Dissatisfaction with a Decision Made, and Delay in Response to Requirement each recording one complaint.

Notably, there were **0** complaints related to Service Omission or Incorrect/Unclear Information.

The chart below is a year-on-year comparison of Corporate Complaints by Service



Commissioning saw the sharpest rise, more than doubling from 3 complaints in **2023-24** to 7 complaints in 2024-2025, making it the most affected service. CSWT West, which had no complaints the previous year, recorded 3, while CSWT South increased from 1 complaint to 2. New complaints emerged in Discharge to Assess (DTA), Community Learning Disability Team (CLDT), and Finance, each registering 1 or 2 cases. Adaptations, which previously accounted for 3 complaints, dropped slightly to 2, and multi-department (involving input from services outside of Adult Services) remained unchanged at 1 complaint.

Overall, the data points to a growing concentration of issues in Commissioning in which most complaints received were due to Providers concerns over payments and/or that our process had not been followed in line with invoicing.

A broader spread of complaints across services that previously had none, signals emerging areas of concern that require closer attention and monitoring.

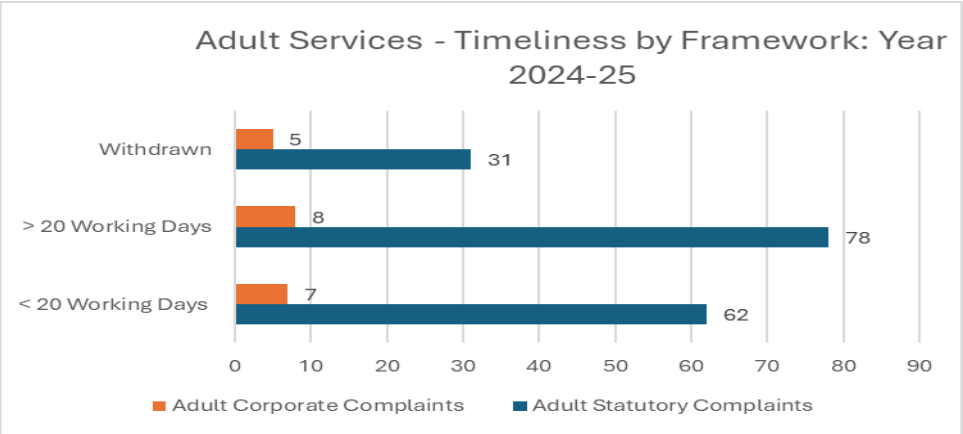
.

Summary of Complaint Performance

The next few pages (12-18) provide an overview of complaint performance. This includes timeliness of response and investigation outcomes to Adult Statutory and Adult Corporate complaints.

Timeliness

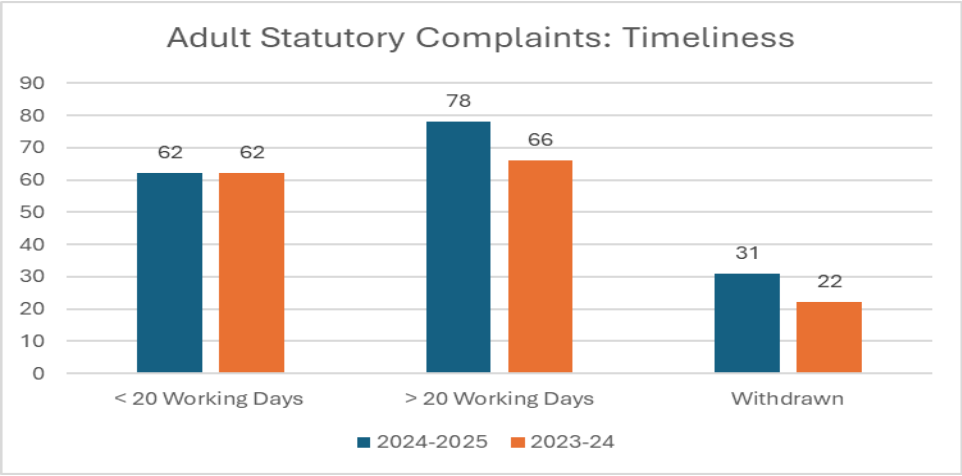
The chart below presents the overall performance of Adult Services in meeting complaint response.



Complaints that took more than 20 days to resolve were primarily linked to complex disputes involving care quality and associated charges, requiring extensive coordination with commissioned providers. Improving timeliness in these cases is a key priority to ensure residents receive prompt and effective responses, especially where concerns relate to the quality or cost of care.

Adults Statutory Complaints

While the response timeframe for Adult Statutory complaints is agreed with the complainant, the Council works to an internal target of 20 working days. Given the complexity of many cases, extended timescales are often necessary to ensure thorough investigation.



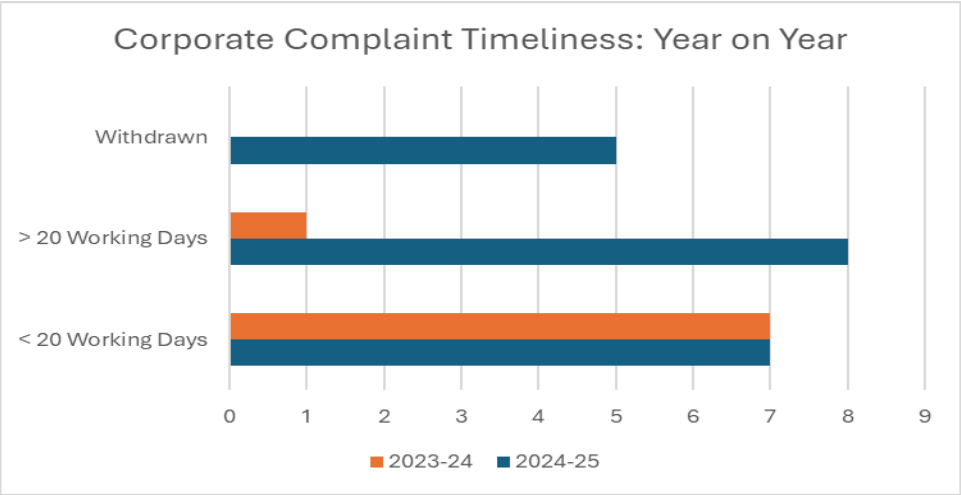
In the year **2024–25** out of the **171** recorded complaints, 62 complaints (**36%**) were resolved within Trafford's internal target of **20** working days, demonstrating a strong commitment to timely responses. A further **46%** (78 complaints) exceeded the 20-day target but were completed within an *agreed extended* timescale, reflecting flexibility and continued engagement with residents. Meanwhile, **18%** (31 complaints) were withdrawn, with nearly half of these resolved at first contact, highlighting the effectiveness of early intervention.

While most complaints were resolved within *agreed* timeframes, the fact that **46%** exceeded our internal target suggests room for improvement, as this should be the exception rather than the norm.

Compared to year **2023–24**, there was an **18%** increase in complaints responded to outside the 20-day target, and a **40%** rise in withdrawn complaints (from 22 to 31) indicating more issues are being resolved quickly, some within just 24 hours.

Adult Corporate Complaints Performance

The chart below illustrates Adult Social Care Statutory Complaint Timeliness of response Year-on-Year



Out of the **20** Corporate Complaints recorded in **2024-25** there were **7** complaints **(35%)** which were responded to within the prescribed corporate complaint **20** working day timescale. This is a significant decline to previous year where **86%** of complaints were responded to within timescale. The 8 complaints (40%) which were responded to outside of timescale were due to investigations requiring input from external providers. There were **5** complaints that were withdrawn, not proceeding to formal investigation due to prompt resolution at the outset.

Outcomes of Adult Social Care Statutory Complaints

Complaint outcomes for Adult Social Care statutory complaints are recorded as follows:

Upheld: We found fault or poor service that negatively impacted the individual and had not yet been resolved.

Part Upheld: Some aspects could have been handled better, but any issues were rectified and did not cause harm.

Not Upheld: No fault was identified in how the matter was managed.

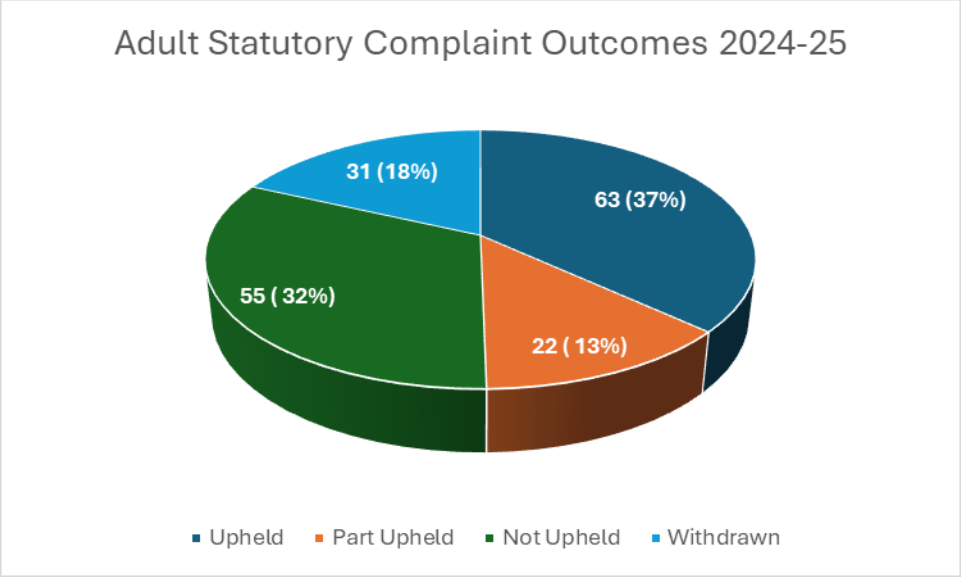
It is important to highlight that outcomes of complaints are instrumental to our learning from complaints. It is for this reason that all outcomes from complaints are considered not just those complaints that have been upheld.

Breakdown of Complaint Outcomes

All complaints that have been investigated will have an outcome recorded. Providing clear, well-documented reasons for complaint findings is essential not just for resolving individual cases, but for enabling meaningful organisational learning and continuous improvement.

Adult Statutory Complaints

Below is a breakdown of complaint finding outcomes for Adult Statutory Complaints for **2024-25**



Of the **171** statutory complaints investigated in **2024–25**, there were **13%** of complaints (22) that were part upheld, often involving multiple issues where some elements were found valid. These cases provide valuable insights into service

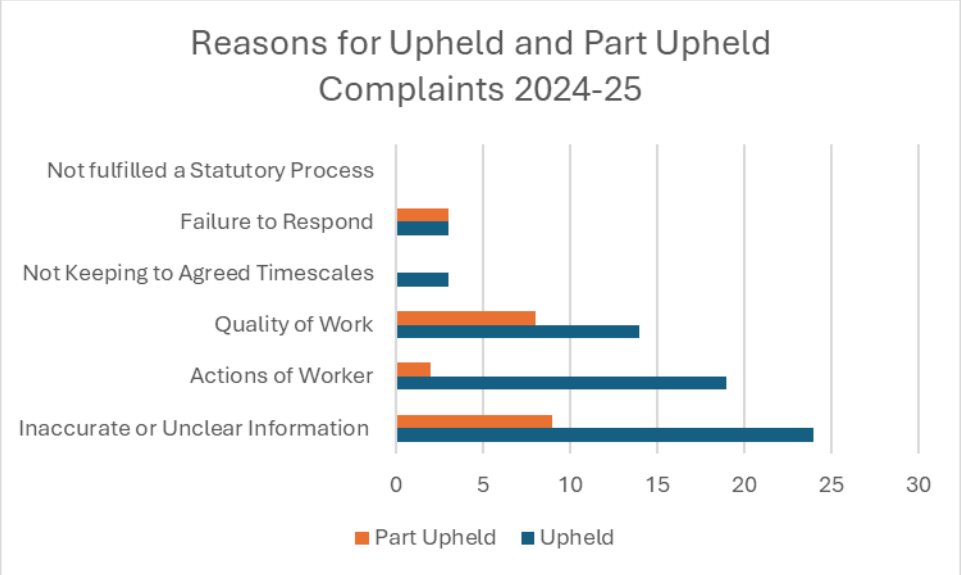
delivery and often lead to targeted improvements in guidance, communication, and documentation.

There were **32%** of complaints (55) that were not upheld following thorough investigation. While no fault was identified, these cases still offer learning opportunities, particularly around managing expectations and improving how decisions are communicated.

Finally, **18%** of complaints (31) were withdrawn, typically because they were resolved to the complainant's satisfaction before a full investigation was needed. This reflects the success of early resolution efforts and highlights the importance of proactive engagement in maintaining trust and preventing escalation.

Reasons for Upheld and Part Upheld Statutory Complaints

The chart below shows the reasons why findings of Upheld and Part Upheld were reached in 2024-25



In **2024-25** the main reason for upheld/part up complaints was the provision of unclear or inaccurate information to individuals or their representatives. This was most evident during the assessment of need process, particularly around the Council's charging policy and the actual cost of care.

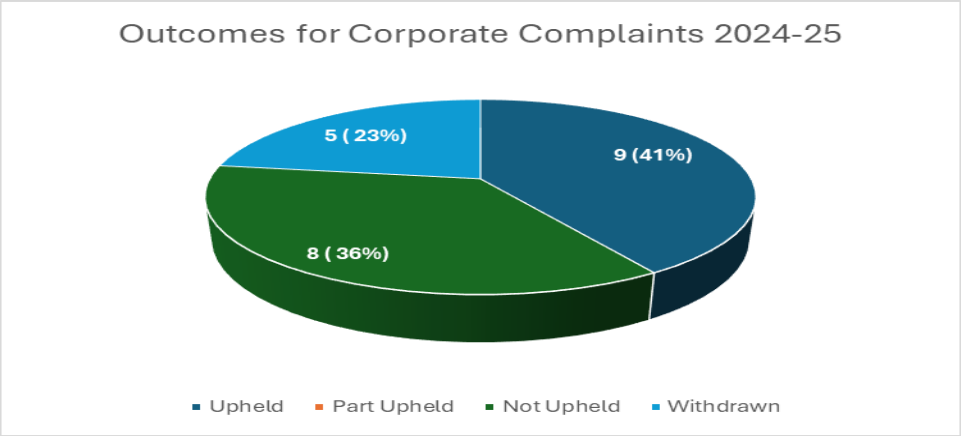
A recurring theme was poor communication at the point of assessment specifically, how the charging policy was applied, the non-chargeable assessment period, and when care charges would begin. These issues were especially common in Discharge to Assess cases.

Complaints were upheld due to a lack of documented evidence showing that the assessment process and related charges had been clearly explained.

Communication issues have steadily increased over the past two years, with unclear or inaccurate information becoming a consistent factor in upheld complaints.

Adult Corporate Complaint Findings

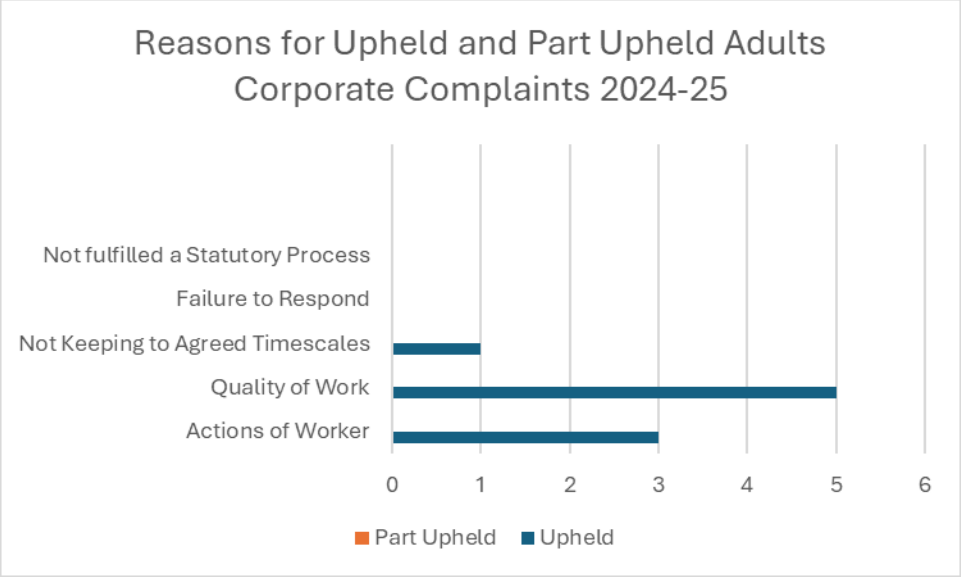
Below is a breakdown of complaint outcomes for **Adult Corporate Complaints** year **2024-25:**



Of the **20** complaints recorded this reporting year, 9 complaints **(41%)** were upheld. There were **0** complaints that were partially upheld, suggesting that concerns raised were either fully substantiated or not at all thus emphasising the importance of thorough investigations, especially where multiple issues are involved.

There were **8** complaints that were not upheld, though they still offered valuable learning around managing expectations and improving clarity in communication. There were 5 complaints (23%) that were withdrawn following early resolution, reflecting the positive impact of proactive engagement and swift intervention.

The chart below shows the **Reasons for Upheld and Part Upheld** findings in year 2024-25.



Among the upheld complaints, 3 related to staff conduct or decision-making, highlighting the need to reinforce professional standards and ensure consistent

procedures. There were 5 cases which revealed shortcomings in service delivery and documentation, pointing to the importance of quality assurance and targeted training. One complaint was upheld due to delays in meeting agreed timescales, underscoring the need for realistic scheduling and proactive communication when delays arise.

These cases will be used to inform improvements in staff training and service protocols.

5. Learning from Complaints

Complaints are a powerful driver of improvement in Adult Social Care.
They reveal where services fall short, enabling us to resolve issues for individuals and enhance care for future residents. Insights from complaints shape better customer experiences, refine staff practice, and strengthen operational processes.

We share lessons quarterly with senior managers and produce targeted reports for the DASS Quality Assurance Subgroup, spotlighting key themes in service delivery. Case studies and training embed this learning into everyday practice, while compliments reinforce what works well.

Although progress has been made, we're committed to deepening how learning drives change. This priority is embedded in the ICE Team's 2024–25 service improvement plan.

Below are 4 examples of key learning points that were taken from complaints in **2024-25**:

Summary of Complaint	What We Learned	What We Did
Lack of contact from the Social Care Team, including missed communication about meetings and assessments	Regular communication is essential for residents to feel informed and supported	Service Manager reminded Social Worker; team-wide reminder given at Social Care Team Meeting
Individual charged for respite care despite being told by the worker the Local Authority would fund it	Financial charges must always be clearly discussed and documented to avoid confusion	Service Manager reminded Social Worker to discuss and record financial arrangements with families
Care charges issued after care ended due to care plan not being closed on the system	Timely closure of care plans is critical to prevent billing errors	Apology issued; care plan closed; credit applied; reminder sent to staff about timely care plan closure
Incorrect advice given about homecare charges; no evidence of financial discussion or leaflets provided	Financial discussions must be clearly recorded and supported with written materials	Apology issued; charges waived temporarily; Social Worker was reminded to document financial discussions and provide leaflet

Summary of Key Learning 2024-25

Key learning from complaints has highlighted the importance of maintaining high standards in care planning and communication. All care plans must be completed accurately and updated within the required timeframe to ensure continuity of care. Equally important is ensuring where care and support have finished; the Care plan is closed on the system to avoid unnecessary charges. All financial discussions with residents or their families should be clearly documented, reflecting transparency and informed decision-making. Additionally, all interactions with families must be recorded in detail, and communication should be clear and accessible to avoid misunderstandings. These areas are being reinforced to support consistent, high-quality service delivery and strengthen trust with residents and families.

Broader actions identified to learn from complaints from year 2024-25

As highlighted earlier in the report, a recurring theme in complaints is the provision of unclear or inaccurate information to clients and their families. This continues to be a concern and requires further analysis to reduce repeat issues.

To address this, an action plan has been developed (see page 28) focusing on improving communication and identifying broader learning that can be shared across the workforce to support service-wide improvement.

6. MP & Councillor Enquiries 2024-25

MPs and Councillors regularly raise representations with the Corporate Director of Adult Services on behalf half of their constituents regarding social care matters. Responses are issued directly to the elected representative, who then shares the outcome with the constituent.

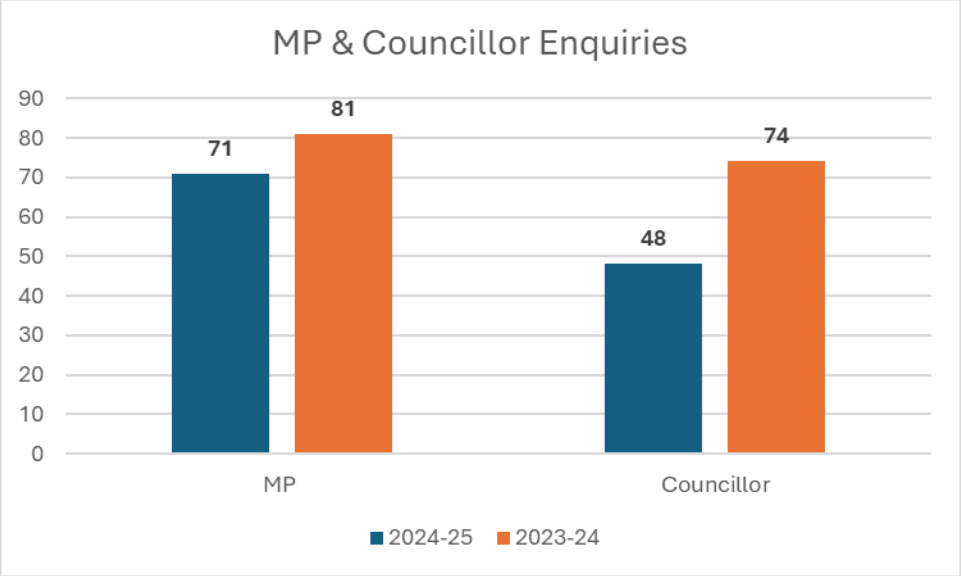
In some cases, the constituent may have already submitted a formal complaint under the Statutory Complaints Procedure. Where this applies, the MP or Councillor is informed and kept updated on the progress and outcome of the investigation. These dual processes can impact response times and resource allocation.

Adult Social Care response targets are as follows:

- MP enquiries: full written response within 20 working days
- Councillor enquiries: interim response within 3 working days, outlining proposed actions and timescales

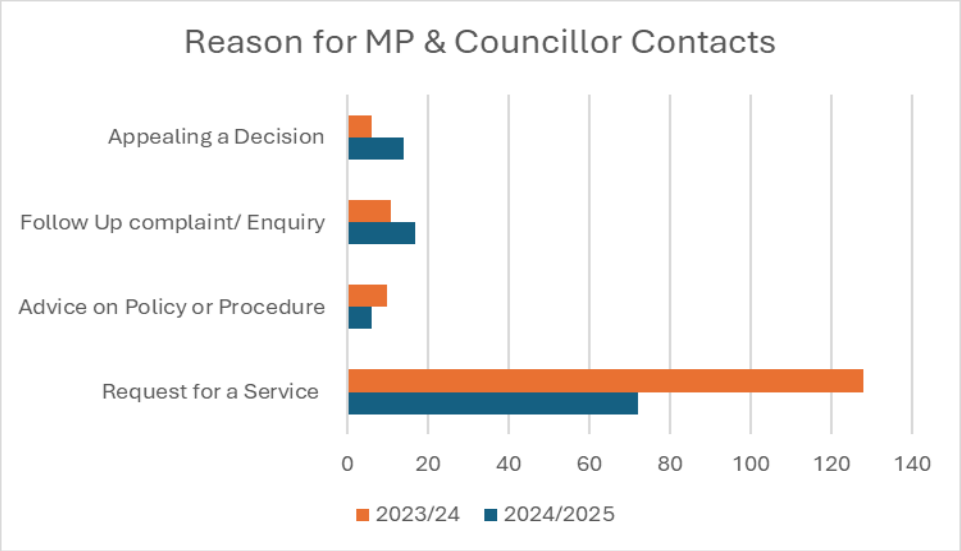
It is important to note that some cases are complex, particularly where appeals are raised against assessment outcomes or funding decisions. In such instances, interim updates are provided until a full response can be issued.

MP & Councillor Activity: Year on Year Comparison



In the year **2024–25** there was a notable reduction in MP and Councillor enquiries compared to the previous year. MP enquiries fell from **81** to **71** a decrease of 10 cases (12%), while Councillor enquiries saw a more significant drop from 74 to 48, a reduction of **26** cases (35%). This downward trend suggests improved processes, clearer communication, or greater resolution at earlier stages, reducing the need for escalation through elected representatives.

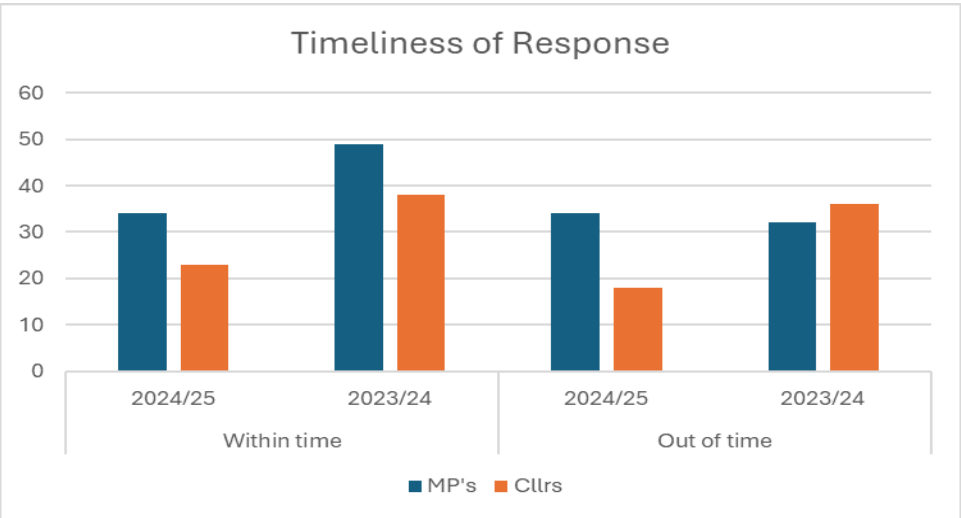
Reason for MP & Councillor Contacts 2024-25:



In 2024/25 we have seen decreases in **Requests for Services** and **Advice on Policy/Procedure** compared to **2023/2024.** However, **Request for Service** remains the main reason for MP/Councillor representations.

There has been significant increases in the year **2024/25** relating to MP's /Councillors **Following up a Complaint or Enquiry** and **Appealing a Decision**. This signals a need to improve our timeliness in responses to complaints and/or political enquiries, keeping those involved fully informed of progress and signposting at the outset to the formal appeals procedure.

Timeliness of Response



In **2024/25** there was **52.29%** of enquiries that were responded to within the required timeframe. This represents a slight decrease compared to **2023/24** when **56.12%** were completed within the timeframe.

7. Adult Social Care (ASC) Appeals

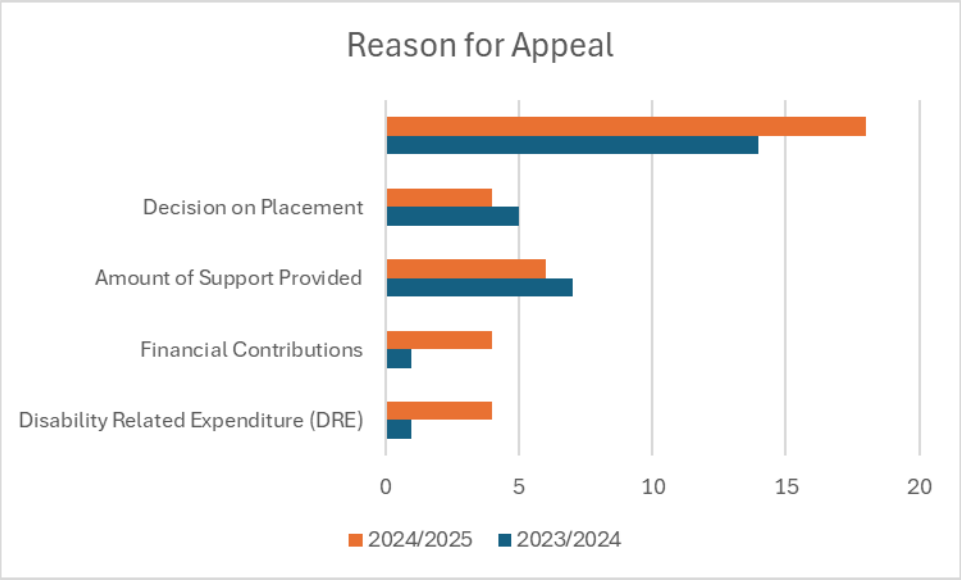
Adult Social Care appeals are directly linked to a decision following an assessment of need. Although these appeals do not follow the Statutory Complaints process (as no formal investigation is required) if the customer remains unhappy with the outcome to their appeal and the Appeals process has been exhausted; they still have the right to take the matter to the Local Government Ombudsman for adjudication.

There is no statutory deadline in place to respond to these requests and each case is considered on merit. It is the Council's aim however to provide an outcome to the customer within 25 working days of it receiving the Appeal.

Number of Appeals Received	
2024/25	**2023/24**
18	**14**

In **2024-25** there were **18** appeals made. This was higher than the number of appeals received in in **2023-24** which was **14.**

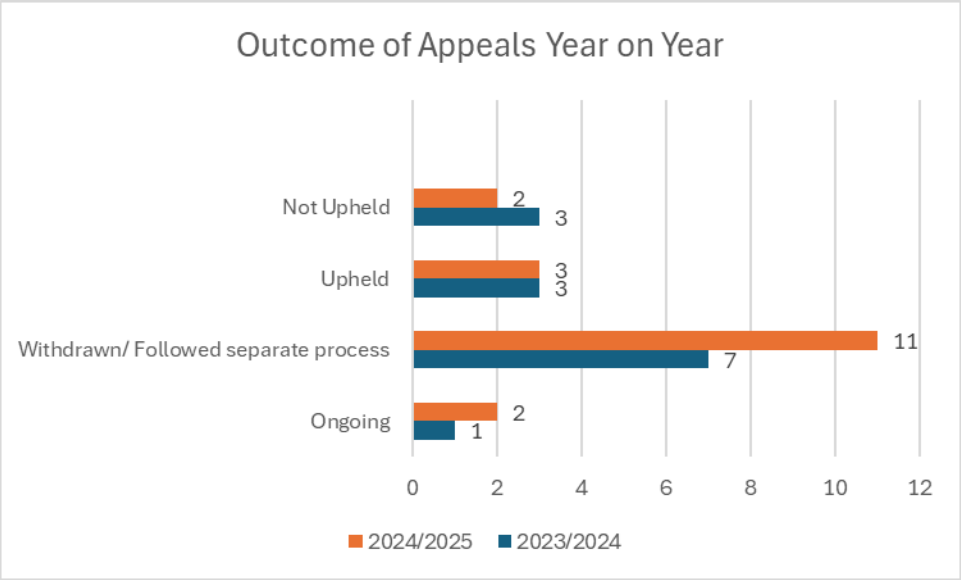
Year-on-Year Comparison of Reason for Adult Social Care Appeals



The primary reason for appeals in **2024–25** was dissatisfaction with decisions relating to the amount of care or support provided. This theme has remained consistent across both years **2024–25** and **2023–24** indicating an ongoing need to

review how decisions are communicated and ensure clarity and transparency in the allocation process.

Appeal Outcomes: Year on Year



In **2024-25** there was **17%** of appeals **upheld** compared to **21%** upheld in **2023/24**.

Although the number of appeals rose, the proportion upheld decreased from 21% in **2023–24** to 17% in **2024–25**. This suggests that while concerns are being raised more frequently, fewer are found to warrant change, reinforcing the importance of robust decision-making and effective communication.

These insights will inform staff training and service development, ensuring appeal feedback drives continuous improvement

8. Local Government and Social Care Ombudsman (LGSCO) Enquiries & Investigations

The Adult Social Care complaints process has two stages:

1. **Council Investigation** – The Council investigates and responds to the complaint.
2. **Ombudsman Review** – If unresolved, the complainant can escalate to the Local Government and Social Care Ombudsman (LGSCO).

Unlike other complaint frameworks, the Council has only one opportunity to resolve a complaint. It aims to work collaboratively with complainants at this stage and remains open to further dialogue. Once the process is complete, the Council informs the complainant and provides LGSCO contact details.

The LGSCO is the final stage for complaints about councils, adult social care providers, and some local services. It investigates maladministration and injustice, ensuring proper procedures were followed.

When contacted by the LGSCO, the Council typically has 28 calendar days to respond with detailed, evidence-based information. Due to the complexity of some cases especially those involving third parties or partnerships, extensions may be needed. The Ombudsman may also request further evidence, adding to the time and resource demands.

The LGSCO has powers equivalent to the High Court. If the Council fails to respond, it can be legally compelled to do so. Complaints at this level are often complex and require input from multiple sources. Any recommendations made by the LGSCO are implemented, and progress is reported back.

If fault is found, the Council must give serious consideration to the findings and implement any remedies suggested.

LGSCO Activity

For the fiscal year **2024-25** we received **18** Local Government Social Care Ombudsman (LGSCO) enquiries concerning Trafford Council Adult Social Care.

This is a significant increase compared to the previous year **(2023-24)** where we received 8 enquiries.

The LGSCO upheld **5** complaints in the year **2024-25** which are summarised in the table below which also includes our learning.

Summary of LGSCO Upheld Findings for the fiscal year 2024-25

Summary of Complaint	LGO Findings	Recommended Actions	What We Learned
Care plan issued with more care than required, significant cost not explained	**Fault:** Procedure followed, but miscommunication due to lack of written clarification	Apologise; pay £250; remind staff about clear case-note recording	Importance of written communication and clarity in care planning
AMHP failed to notify nearest relative of rights during detention under Mental Health Act	**Fault:** No issue with detention, but insufficient written info on rights	Apologise; remind AMHPs to provide written info to nearest relatives	Ensure nearest relatives are fully informed in writing during detentions
Poor communication with family; unsafe care practices; delayed complaint response	**Fault:** Safeguarding investigated properly, but complaint response took over 6 months	Apologise; pay £250; remind staff to respond to complaints promptly	Timely complaint handling is essential to avoid distress
Delayed safeguarding investigation; incorrect referral to commissioned service; distress caused	**Fault:** Delay in investigating rent issues; incorrect complaint referral	Apologise; pay £100 + £150; repay owed money; provide learning review; issue memo to staff	Proper safeguarding investigation and correct complaint routing are critical
Care package not reduced after temporary increase; delay in equipment delivery; extra charges	**Fault:** Care package increased without informing individual; delay in equipment action	Apologise; remind staff to review care packages within 6–8 weeks and act decisively on equipment delays	Timely reviews and proactive equipment management are vital to avoid unnecessary costs

These LGO decisions **2024-25** highlight key areas for improvement in communication, timeliness, and process clarity. In one case, while the Council's rationale for care charges was upheld, fault was found due to charging in arrears without prior notification, causing distress. This underlines the need for proactive financial communication and timely reassessments. Another case revealed miscommunication around care plan costs, reinforcing the importance of clear written explanations and accurate case note recording. A third case identified delays in reviewing temporary care package increases and failure to act decisively when equipment delivery was delayed. This demonstrates the need for robust review processes within 6–8 weeks of assessment and prompt escalation when delays occur.

These findings provide us with valuable learning: strengthen transparency in financial matters, ensure written clarity in all care decisions, and embed timely review and escalation protocols to prevent unnecessary costs and distress.

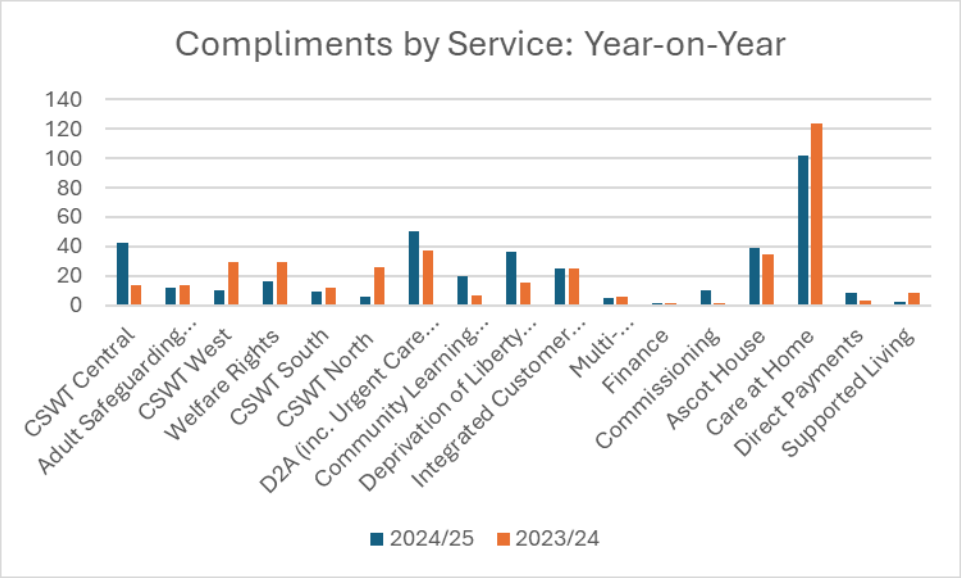
10. Compliments

The Complaints Manager collates details of the compliments received by services in the Directorate from appreciative users of services, their relatives, or carers. This information offers a valuable insight into our performance and balances and complements the more critical comments made by complainants.

Compliments offered usually relate to the standard of care received or interactions with individual members of staff.

During the **2024–25** reporting period, Trafford Council received **393** compliments relating to Adult Social Care services. These expressions of appreciation provide valuable insight into what matters most to service users and their families and highlight areas of excellence across the workforce and service delivery.

Compliments by Service:



The overall activity across service areas shows a slight increase from **386** compliments in year **2023-24** to **393** compliments in **2024/25**, representing a **1.8%** increase year-on-year. The CSWT Central Team seen a substantial rise in compliments **(42)** as did the Deprivation of Liberty Safeguards Team **(36)** which doubled in compliments to the previous year.

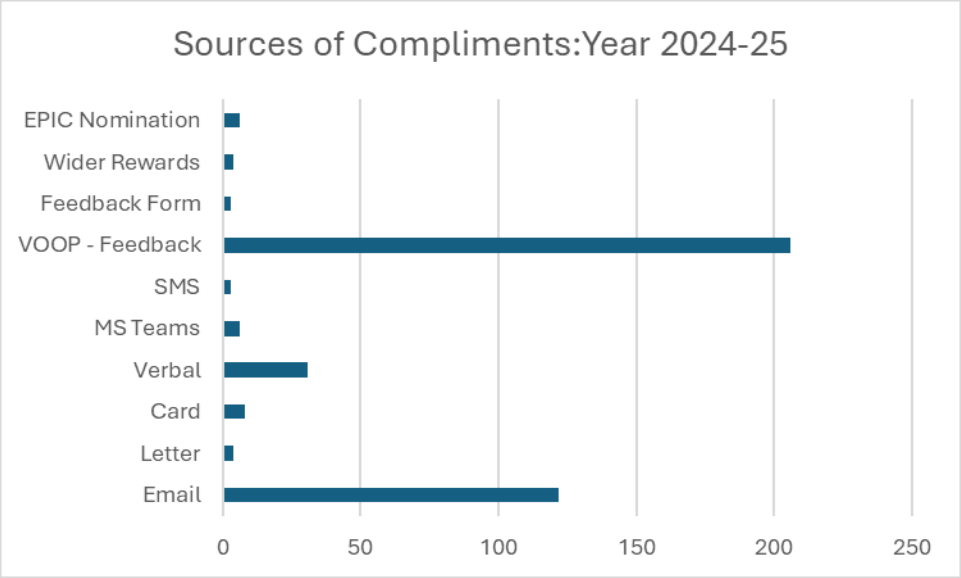
The Community Learning Disability Team (CLDT) also saw a notable increase in compliments **20** cases, indicating growing complexity or referrals in this domain.

Commissioning and Direct Payments Team also saw increases in compliments in **2024-25**.

The overall increase in compliments demonstrates continued recognition of quality and compassionate care across Adult Social Care.

Sources of our Compliments 2024-25:

Compliments highlight what staff and services are doing well. Understanding the source helps ensure that recognition is meaningful and encourages continued high standards in the areas that matter most to those we serve. The table below provides an overview of the sources of compliments recorded.



While complaints often drive change, compliments provide a balanced view of performance. They help identify strengths that can be built upon and shared across teams.

Sharing compliments from service users or families can boost staff morale, reinforce positive behaviours, and support a culture of appreciation and continuous improvement.

10. Voice of Our People (VOOP) - Summary of Year 2024–25

Unlike traditional complaints, where residents come to us with concerns, VOOP is our proactive approach to engaging with residents. It's about reaching out first and inviting people to share their experiences, ideas, and suggestions about Adult Social Care services.

Through VOOP, we create opportunities for residents to influence and shape the services they use, ensuring their voices are heard not just when things go wrong, but as part of a continuous conversation about improvement. This approach helps us:

- Understand what matters most to our communities
- Identify areas for innovation and change
- Build trust through transparency and collaboration

By embedding VOOP into our culture, we're not just responding to feedback—we're co-creating better outcomes with the people we serve.

VOOP Activity:

Number of feedback questionnaires gathered from people with lived experience who receive support from Adult Services.

Number of VOOP Questionnaires Completed	2024/25	2023/24
	480	**381**

Summary of Feedback:

Positive feedback includes common praise, staff professionalism, emotional support, clear communication and going above and beyond.

The feedback via VOOP for year **2024-25** consistently highlights:

- Outstanding care and professionalism from staff
- Emotional support and kindness during difficult times
- Clear communication and responsiveness
- Consistency and reliability in service delivery

The examples below reflect compassionate, person-centred care and strong relationships between staff and the people we support:

“X has been outstanding.” - “Always nice people that came to visit. You can always talk to them.”

- “X and X have been exceptionally fantastic… I would be completely lost without them.”

Learning opportunities and areas for improvement:

Common issues:

– delays in in care planning, inconsistent communication and gaps in continuity of care.

Recurring issues include:

- Communication gaps between services and families

- Inconsistent care quality, especially with agency staff

- Delays in care planning and follow-up

- Lack of continuity in care

- Insufficient clarity around processes and responsibilities - examples of comments:

“Lots of different carers confused dad.”

“…arrival timing was irregular that disturbed everything and in a way was not acceptable.”

“…made all the promises and just to tick all the boxes and then didn’t do anything.”

These highlight the need for better coordination, clearer communication and more consistent service delivery. Further work is needed as to how to obtain feedback from seldom heard groups, because ethnicity data collected evidences that 85% of individuals providing feedback are from a White ethnicity.

The “Voice of Our People” (VOOP) initiative continues to be a cornerstone of Trafford Council’s commitment to person-centred care and continuous improvement in Adult Social Care. Through a robust feedback strategy, we have actively engaged with residents, carers, and families to ensure their voices shape the services they receive.

11. Complaints Management and Service Improvement

Comparing year-on-year data allows us to see which types of complaints persist, indicating systemic issues or areas needing sustained attention. It also supports operational trend analysis across service areas, interventions, and localities.

By understanding what has changed and what has not changed, we can target training, resources, and policy reviews more effectively.

It enables evidence-based decision-making, ensuring that changes are responsive to real concerns raised by service users.

Effective complaints management enables Adult Social Care to put forward meaningful service improvement proposals which feed into the wider service improvement initiatives. with action plans

The Integrated Customer Engagement Team (which facilitates all feedback for Adult Social Care) continues to review how it manages customer feedback and identifies initiatives to strengthen performance and learning from complaints.

Key Developments in the Year 2024-25

The implementation of the action plan has delivered measurable improvements in practice standards and quality assurance across Adult Social Care (ASC). Key achievements include:

Issuing of Practice Standards in Complaint Handling:

Clear, consistent guidance is now in place, ensuring complaints are managed effectively and transparently. This has strengthened confidence in resolution processes and improved customer experience.

Centralised Records for Lessons Learned

A single repository for lessons learned has been established, enabling systematic sharing of insights across teams. This promotes organisational learning and reduces recurrence of issues.

Overall Impact

The completion of this action plan has strengthened communication, improved case recording standards, and embedded a culture of learning and recognition. These changes have enhanced service quality, supported complaint resolution, and promoted best practice across ASC.

Forward Focus

We are committed to learning from all feedback, not just formal complaints. Over the coming year, we will explore new ways to capture broader service user insight beyond the traditional Complaints, Comments, and Compliments framework. This will support our goal of delivering more person-centred, responsive services.

Quality & Improvement Action Plan for 2024-25

The following action plan outlines our priorities for continuous improvement across Adult Social Care, aligned with our strategic commitment to learning, accountability, and service excellence.

Objective	Action	Measure	Owner/Context	Rationale	Deadline
Improve financial communication during assessments	Develop 7-minute briefing	15% reduction in complaints related to finance information.	Co-designed with frontline teams and finance specialists	Responds to recurring theme of unclear financial information	End of December 2025
Enhance case recording standards	Monthly Case file audits with structured compliance checklist.	95% compliance monitored via moderated audits	System updates planned with IT support and staff training	Supports evidence-based complaint resolution and Ombudsman compliance	Implement by September 2025
Strengthen timeliness of complaint responses	Create early resolution guidance and real-time monitoring dashboard	Reduce out-of-time responses to less than 20% compared to 2024–25 baseline	ICE Team to lead implementation with service managers	Addresses delays highlighted in Ombudsman and MP/Councillor enquiries	Operational by December 2025
Embed learning from complaints across teams	Publish 4 Yearly lessons learned bulletins and provide case	10–15% reduction in recurring complaint themes.	ICE Team to coordinate and distribute	Drives continuous improvement and accountability	Start April 2025

	studies reviews for Team Meetings				
Promote positive practice through compliments	Launch a digital compliments dashboard accessible to all staff	Feature minimum 5 compliments monthly and track increase in compliments by 10% year-on-year	ICE Team to collate and publish	Reinforces positive behaviours and morale	Go live by December 2025
Improve Ombudsman compliance	Develop LGSCO Response Toolkit with templates and guidance	100% compliance with 28-day response target	Legal and QA teams to support	Addresses upheld Ombudsman complaints linked to unclear communication and delays	Implement by December 2025
Introduce a Complaints Recording Dashboard for Adult Social Care complaints, including reasons, outcomes, and theme monitoring.	Develop and implement a real-time complaints dashboard for managers	Dashboards live and used by 100% of service managers within 3 months of launch	ICE Team with Business Intelligence support	Improves oversight, enables early resolution, and supports performance reporting	January 2026

12. Closing Statement

Trafford Adult Social Care remains committed to learning from every complaint, compliment, and comment received. The findings from **2024–25** highlight both progress and areas requiring continued focus. While improvements have been achieved in policy clarity, early resolution, and embedding lessons learned, recurring themes such as unclear financial communication and delays in response underline the need for sustained action.

Our analysis shows that complaints are not just indicators of dissatisfaction - they are valuable opportunities for service improvement. By addressing communication gaps, strengthening case recording standards, and enhancing timeliness, we aim to reduce upheld complaints and improve customer confidence. Compliments received across all service areas reinforce the dedication and professionalism of our workforce, providing a strong foundation to build upon.

Looking ahead, the **2025–26** Service Improvement Action Plan sets out clear, measurable steps to deliver better outcomes for residents. Through collaboration, transparency, and continuous learning, we will ensure Adult Social Care services remain person-centred, fair, and responsive to the needs of our community.

Importantly, the Integrated Customer Engagement (ICE) Team is now part of the Quality and Improvement portfolio within Adult Social Care. This strategic alignment has strengthened our ability to embed learning, drive improvement, and ensure that resident feedback informs service development. The ICE Team works even more closely with the Senior Leadership Team and contributes regularly to the DASS Quality and Improvement Subgroup, ensuring that insights from complaints and compliments are elevated to the highest levels of decision-making.

This work is further supported by the Improving Lives Every Day (ILED) transformation programme, which aims to embed the voice of our people and enhance resident experience across all aspects of Adult Social Care. Through ILED, we are co-designing services with residents, carers, and families ensuring that lived experience is at the heart of everything we do.

Together, these developments reflect our unwavering commitment to continuous improvement, accountability, and delivering high-quality care that truly meets the needs of our community.