



Adult and Health Services

Annual Statutory Representations Report
Adult Social Care Services 2023/24

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Part One - Introduction

Welcome to Durham County Council's (DCC) Adult and Health Services (AHS) Annual Report which details representations made in relation to adult social care services. The report covers the period 1 April 2023 to 31 March 2024.

The report is published under the provisions and requirements of the relevant regulations: *The Local Authority Social Services and NHS Complaints (England) Regulations 2009*. This is a single joint complaints process for both adult social care and health services where there are no fixed timescales for managing a complaint, with a greater focus on local resolution. If all proportionate resolution mechanisms have been exhausted and if the complaint remains unresolved, the complainant can refer outstanding issues to the Local Government and Social Care Ombudsman (LGSCO). The regulations also introduced a duty for health and adult social care services to cooperate, should this be required, in complaints investigations.

This process aims to:

- Make it as easy and accessible as possible for service users or their nominated representatives to raise complaints;
- Foster an organisational culture in which complaints are accepted, owned and resolved as efficiently as possible;
- Ensure high levels of customer satisfaction with complaints handling;
- Resolve individual issues when they arise and reduce the number of complaints referred to the Ombudsman; and
- Enable the Council to identify topics and trends in relation to adult social care complaints and improve services as a result.

In recording and reporting upon the Council's performance in relation to the above, the Local Authority has a statutory duty to produce an annual report under Regulation 18 of the statutory instrument detailed above.

Other key features of the Regulations include:

- the requirement for local authorities to appoint a Complaints Manager; and
- a 12-month time limit to make complaints.

During 2023/24 the AHS Development and Learning Manager fulfilled the role of Complaints Manager in accordance with the requirements of the regulations, with a Complaints Officer allocated to undertake the day-to-day supervision of the complaints function, both being independent of adult social care services operational line management, thus ensuring a high level of independence in the way adult social care complaints are managed within the Council.

Part Two - Summary of Key Messages

The key headlines from this report are as follows:

There has been an increase in the number of complaints investigated from 95 in 2022/23 to 115 in 2023/24 noting that 50.5% were not upheld compared to 42.5% in the previous performance year.

There was also an increase in the number of adult social care complaints the Council declined during 2023/24; 12 compared to 9 in the previous performance year.

AHS received 2 complaints where the contribution of colleagues from health were needed to inform upon the Council's response. In line with joint protocols, the Council led these investigations and responded on behalf of all involved organisations. This was a decrease from 4 in the previous performance year. The Council also contributed to a further 5 investigations led by health, a decrease from 9 in the previous performance year.

In relation to service areas Older People, Physical Disabilities and Sensory Support received 45.5% (52) of the overall complaints about adult social care services, an increase from 36% (34) in 2022/23. Complaints relating to Finance decreased by around a third in number from 32 in 2022/23 to 22 in 2023/24, with the percentage of overall complaints for this service area falling from 33.5% of the overall total in 2022/23 to 19% in 2023/24.

The most common reason for making a complaint in 2023/24 was 'Finance – Charging Policy', identified as a factor in 45 complaints. This was also the most common reason for making a complaint in 2022/23 linked to 32 complaints and is not unique to Finance Teams who may have issued an unexpected bill, for example, but also arising in circumstances where it is alleged that a Social Worker failed to explain the charging policy, and that a service user was in receipt of a chargeable service.

Adult social care complaints escalated to the Local Government and Social Care Ombudsman (LGSCO) by the complainant after receipt of the Council's complaints response totalled 21 during 2023/24, compared to 14 in 2022/23, with the Ombudsman taking action and/or reaching a decision on 19 of these cases at the time of writing this report.

The service received 75 compliments about adult social care services during 2023/24, a decrease from 93 in 2022/23 with Older People, Physical Disability and Sensory Support receiving the most compliments (55).

Complaints continue to provide invaluable information and learning from which adult social care services can improve, some examples of which are detailed below:

- A communication was issued to the Billing/Collections Team to reiterate the importance of correctly and promptly adding invoice holds to service user accounts.
- The Commissioning Service carried out a 'monitoring of service delivery' visit to ensure a care provider's systems and recordings were accurate.

Part Three - The Adult Social Care Complaints Process

When a complaint is received, it is risk-assessed to ensure that there are no safeguarding or other procedural issues that might supersede the complaints procedure and that it is within the 12-month limitation period. Consent must be obtained to confirm that someone making a complaint on another's behalf has been given the authority to do so.

Once the above determinations have been made, complainants are engaged in planning how their complaint is to be addressed and the timescales for doing so, along with what they hope to see happen as a result of making a complaint in the form of desired outcomes. A Complaints Resolution Plan (CRP) is produced which summarises this information along with the specific elements of complaint for investigation, and the complainant is encouraged to suggest any changes to this document so that it accurately reflects the issues they wish to be examined.

The Council's focus is always on the resolution of the complaint and engagement with the complainant in order to resolve matters to their satisfaction. Where resolution is not achieved, the complainant remains dissatisfied and the Council's complaints procedure is deemed to have been exhausted, the complainant is invited to raise any outstanding issues with the LGSCO.

Whilst a complainant can refer their complaint to the LGSCO from the outset, the Ombudsman will not usually investigate a complaint until the Council has conducted its own investigation and provided a response. In some circumstances where there has been a joint investigation with health, progression may also involve the Parliamentary and Health Service Ombudsman (PHSO).

Part Four- Complaints made to the Local Authority (AHS)

AHS received 115 complaints that required a formal investigation in 2023/24.

In addition to this number, 12 complaints were declined. In 4 cases, complaints were made on behalf of service users by a relative or person known to them, but without the service user's knowledge or consent, and when questioned, these service users did not agree with, nor give their consent for a complaint to be made on their behalf. In 2 cases the service user lacked the capacity to understand the complaint being made on their behalf, and the Council concluded that the individual making the complaint was not acting in the service user's best interests.

A further 2 complaints alleged criminal behaviour which is a matter for the Police and outside of the Council's jurisdiction to investigate. One complaint was a repetition of a submission made by the same service user previously which the Council had already investigated and fully reported on. A further 3 submissions were made more than one year after the grounds to make the representation arose and were, therefore, out of the 12-month timescale for accepting a complaint.

Complainants can approach the LGSCO with a request that they review the Council's decision to decline their complaint. At the time of writing this report the Ombudsman has not approached the Council with an instruction to investigate any of these declined complaints.

AHS led on 2 complaint investigations that incorporated contributions from our partners in health, a decrease from 4 in 2022/23. This involved joint complaint investigations with County Durham and Darlington NHS Foundation Trust (CDDFT) in both instances.

The Council also contributed information to 1 complaint investigation led by Tees Esk and Wear Valleys NHS Foundation Trust (TEWV), 1 led by CDDFT and 1 by the North of England Commissioning Support Unit (NECS) who investigate complaints on behalf of the Integrated Care Board (ICB), formerly known as the Clinical Commissioning Group (CCG) i.e. 5 in total. This was a decrease from 9 in the previous performance year. These figures are not included in this report as the lead organisation will include these within their own annual reporting.

Number of Complaints Received by Service Area in 2022/23 and 2023/24

Service Area	Number of Complaints 2022/23	% of Total Complaints 2022/23	Number of Complaints 2023/24	% of Total Complaints 2023/24	Year on Year Increase / Decrease in Numbers of Complaints (% Increase / Decrease)
Older People/ Physical Disabilities/Sensory Support	34	36%	52	45.5%	+ 18 (+53%)
Learning Disability/Mental Health/Substance Misuse	16	17%	27	23.5%	+11 (+69%)
Commissioning	10	10.5%	7	6%	-3 (-30%)
County Durham Care and Support	1	1%	0	-	-1 (-100%)
Safeguarding, Practice Development and Access	2	2%	6	5%	+4 (+200%)
Finance*	32	33.5%	22	19%	-10 (-31%)
Emergency Duty Team (EDT)*	0	-	1	1%	+1 (+100%)
Total	95	100%	115	100%	+20 (+21%)

**EDT & Finance are not part of AHS, however, the complaints related to statutory adult social care services*

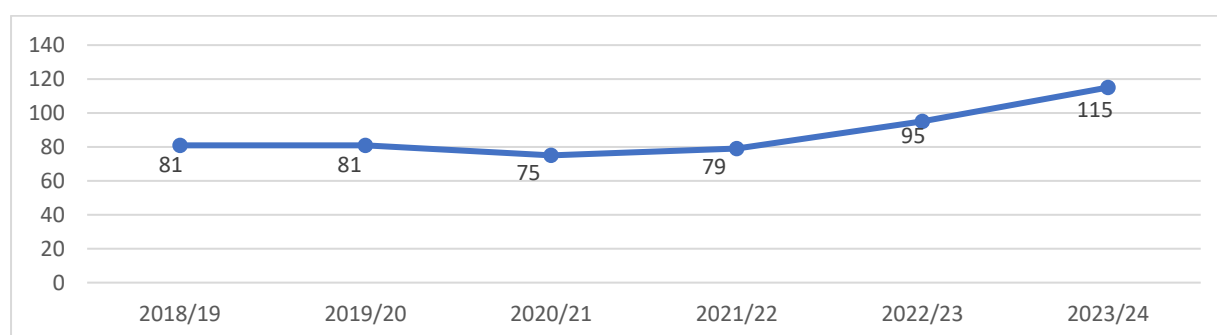
The overall trend has been an increase in complaints from 95 to 115, (21%), noting that in the previous performance year there was also a 20% uplift in complaints. Complaints relating to Finance have fallen by around a third when compared to previous years when the Financial Assessment Team and the Debtors and Collections Team continued to be impacted upon by the aftermath of the pandemic, where a hold was placed on all debt recovery action.

In relation to service areas, Older People, Physical Disabilities and Sensory Support received 45.5% (52) of the overall complaints about adult social care services, an increase from 36% (34) in 2022/23. However, it should be noted that although complaints have increased about this service, 60% were not upheld. It appears that the expectations of service users and/or their representatives seeking redress may be rising, although there is not a corresponding increase in complaints being upheld.

Complaints relating to Safeguarding, Practice Development and Access trebled, however, the numbers are still relatively small and there was no discernible pattern to these complaints which encompassed Social Care Direct, Deprivation of Liberty Safeguards, Safeguarding and Data Security.

The graph below shows the number of complaints received by adult social care services over the last 6 years, with similar complaint numbers until a marked increase over the past two years.

Year on year trend Adult Social Care Complaints 2018 – 2024



Complaints Completed Within Timescale

Complaints Resolution Plans (CRPs) were completed in all but 2 of the 115 complaints received in the year; these 2 had already been summarised by the LGSCO, were deemed premature and the Ombudsman asked the Council to investigate. Of the CRPs compiled, all included a projected timescale for a response which was initially calculated based upon the perceived complexity of the case.

In 15 complaint investigations (13%), more time was needed for service areas to fully complete their enquiries for a variety of reasons, such as the availability of staff for interview, unforeseen complexity, further information required from the complainant and the need to seek legal advice. This is a significant reduction when compared to 2022/23 where 30 complaints had the deadline extended representing 31.5% of all complaints. This figure is fluctuating as it stood at 29.5% in 2018/19 and then dropped to 12.5% in 2019/20. In the previous performance years impacted upon by the pandemic the deadline for a response was extended in 17% of cases in 2020/21 and in 29% of cases in 2021/22.

Over the 2023/24 performance year the need to extend timescales was evenly spread between services: Finance (5), Older People, Physical Disabilities and Sensory Support (5) and Learning Disability, Mental Health and Substance Misuse (4). Commissioning also extended the deadline on one of the complaints they were investigating.

Where the Council needed more time to fully investigate and report upon a complaint, the complainant in each case was updated and fully informed of developments along with a new projected response date.

Of the 115 complaints received, all but one had been responded to at the time of writing this report. All complaint investigations relating to complaints submitted in 2023/24 that were completed had associated responses issued within the projected or extended timescales notified to the complainant.

Categories of Complaints Received and Findings in 2023/24

When complaints are received, they are recorded and categorised according to the subject matter of the issues raised. Detailed below is the outcome of complaints in 2023/24 in the associated categories (the highest three totals are shown in bold):

Complaint Category / Issue	Upheld	Partially Upheld	Not Upheld	Pending	Total
Application of Service Guidance/Procedures	2	6	4	-	12
Confidentiality	1	-	1	-	2
Covid-19 related	-	-	1	-	1
Discrimination	-	-	4	-	4
Disputed Decision – disagreement with an action	4	5	4	-	13
Disputed Decision – disagreement with an assessment	-	4	3	-	7
Disputed Decision – disagreement with a report	-	-	1	-	1
Disputed Decision–disagreement with an explanation/decision	-	3	17	1	21
Eligibility Criteria	-	-	1	-	1
Finance – Assessment	-	4	5	-	9
Finance – Charging policy	10	18	17	-	45
Lack of Communication – no information received	3	7	9	-	19
Lack of Communication – not updated about case-	-	3	1	-	4
Lack of Communication – unreturned phone calls/texts	1	-	1	-	2
Lack of Communication – other	5	7	3	-	15
Lack of Explanation / Explanation not understood	2	2	6	-	10
Lack of Service – change to client's service	1	1	1	-	3
Lack of Service – contact/visits	-	-	2	-	2
Lack of Service – denied service	3	5	16	-	24
Lack of Service – referral of concern not actioned	-	-	3	-	3
Provision of Service – assessment	4	3	5	-	12
Provision of Service – equipment	-	2	4	-	6
Provision of Service – placement provision	1	-	1	-	2
Provision of Service – reviews/conferences	-	1	-	-	1
Quality of Service – missed/late domiciliary care calls	-	3	1	-	4
Quality of Service – personal care	-	2	-	-	2
Quality of Service – work of other agencies	-	1	2	-	3
Refusal of a service	-	-	1	-	1
Safeguarding	1	3	5	-	9
Service withdrawal	2	-	2	-	4
Speed of service	3	4	3	-	10
Staff attitude	2	5	4	1	12
Staff being or seeming to be untruthful	-	1	5	-	6
Staff not acting in best interest of service user	1	6	12	-	19
Standard of care	1	3	1	1	6
Overall Total	47	99	146	3	295

It should be noted that a complaint can have more than one category assigned to it.

From the 295 different categories assigned to the 115 complaints received in 2023/24, the top 3 reasons for making a complaint are listed below:

Finance – Charging Policy was the most common reason for making a complaint, appearing 45 times (15.5%). This was also the main reason for making a complaint in 2022/23 and often relates to the charges services users are asked to pay for adult social care services, and the failure to adequately explain that the service user is in receipt of a chargeable service or where the amounts are disputed. For example, where an unexpected bill has been received or services have not been delivered as frequently or to the standards expected.

Lack of Service – Denied Service was the second most common reason for making a complaint appearing 24 times (8%), having been the third most common reason in 2022/23. Such complaints again are often linked to the provision of care and support, where a service user reports that their needs are not being met with appropriate provision.

Disputed Decision – Disagreement with an Explanation or Decision was the third most common reason for making a complaint, appearing 21 times (7%) with 'Lack of Communication – No Information Received' falling out of the top 3 having been the second most common reason for making a complaint in 2022/23.

During the peak of the coronavirus outbreak in the 2020/21 performance year, 21 complaints included 'Covid Related' as a reason for making a complaint, out of a total of 75 complaints. In the two previous performance years 81 complaints were received in each of these years. Whilst 'Covid Related' complaints have fallen with only one received this performance year, the number of complaints received overall has not returned to pre-pandemic levels and have steadily increased.

Outcome of Complaints by Service Area 2023/24

Service Area	Upheld	Partially Upheld	Not Upheld	Total	Not Upheld as a % of Total	Upheld/ Partially Upheld as a % of Total
Older People/ Physical Disability/Sensory Support	4	16	31	52 (*1 pending)	27%	17.5%
Learning Disability/ Mental Health Substance Misuse	5	6	16	27	14%	9.5%
Safeguarding, Practice Development and Access	1	2	3	6	2.5%	2.5%
Commissioning	1	3	3	7	2.5%	3.5%
Emergency Duty Team (EDT)	-	-	1	1	1%	-
Finance	8	10	4	22	3.5%	15.5%
Total	19	37	58	115	50.5%	48.5%

*One complaint was still pending an outcome at the time of writing this report and given a notional value of 1%.

In the performance year being reported upon more than half the complaints investigated through to a finding were not upheld (50.5%), compared with 42.5% not

upheld in the 2022/23 performance year. All complaints bar one had been investigated through to a finding in 2023/24 with 48.5% having some or all aspects of the complaint upheld, a reduction from 57.5% in 2022/23.

Complaints that are upheld or partially upheld are of particular interest to adult social care services. In these cases, the service actively looks to identify what it could have done better and what action it can take with the aim of resolving matters to the complainant's satisfaction.

These complaints give the service the opportunity for learning, on an individual level for example, where a Social Worker can be supported by management to improve their performance and sometimes across the whole service, where a policy or procedure is improved as a result of a complaint. Further examples of learning and service improvement as a consequence of complaints received are outlined in Part Six of this report.

Part Five - The Local Government and Social Care Ombudsman (LGSCO)

Where a complainant remains dissatisfied with the outcome of a complaint, they can refer any outstanding issues to the LGSCO who will determine what action to take after considering the presenting issues.

Complaints Considered by the LGSCO 2023/24

Service Area	Upheld	Partially Upheld	Not Upheld	Declined/ No Action	Ongoing	Total
Older People/ Physical Disability/ Sensory Support	1	-	-	7	1	9
Learning Disability/ Mental Health / Substance Misuse	-	-	-	3	-	3
Finance	3	-	-	3	1	7
Commissioning	-	-	-	1	-	1
Safeguarding, Practice Development and Access	-	-	1	-	-	1
Total	4	-	1	14	2	21

In the 2023/24 performance year the Ombudsman approached AHS in relation to 21 adult statutory social care complaints, up from 14 in 2022/23, and concluded their enquiries in 19 of these cases at the time of writing this report.

Of the 14 cases declined, closed or identified as needing no further action:

- In 12 of these complaints the Ombudsman concluded that further investigation would not add to the Council's response or allow the LGSCO to make a different finding of the kind the complainant wants, so closed these complaints concluding there was no further action for them to take.
- In 2 cases the Ombudsman identified that these complaints were out of their jurisdiction. One had been made more than one year after the grounds to make the representation arose and deemed to be out of timescale. In the other the Ombudsman concluded that the complainant was not a suitable representative to raise a complaint on behalf of a deceased service user about their care.

Of the 4 cases where the Ombudsman upheld the complaint:

- In 2 cases the Ombudsman identified fault and injustice. In one of these cases the LGSCO concluded that DCC failed to provide a service user's father with timely information about charges for adult services when his son moved from children's services to adult services and instructed the Council to pay the complainant £250 for the time, and trouble, they had taken in pursuing a complaint.
- In another case the Ombudsman found the Council was at fault for failing to commission a care provider as it could not identify one at its hourly rate and did not review a care and support plan to make sure the service user's personal budget was sufficient to meet their needs, awarding £1,000 for distress caused.
- In 2 other cases the Ombudsman upheld the complaints, as had the Council during the course of their own investigation, concluding that the organisation had already remedied the fault, so the LGSCO would take no further action. In one case the Council had acknowledged and explained the reasons for a delay in issuing an invoice for care and support fees with the LGSCO confirming the Council was at liberty to pursue payment as the charges were valid. In the other case the Council had already apologised for the upset caused by not communicating with relevant representatives when care charges changed and took action to change processes to ensure correct communication in future.

Part Six - Learning and Service Improvement

Complaints provide invaluable information from which the service learns how to improve. Complaints also act as a prompt to ensure all staff work consistently to policies and procedures. Even where complaints are not upheld, full explanations, further information and often apologies are given. At the time of writing this report there was one learning point still to be completed relating to improving professional knowledge of the Local Authority Designated Officer (LADO) process alongside adult safeguarding. This is due to be concluded by September 2024.

Some of the learning outcomes and actions taken in response to complaints included:

- issuing a briefing note to care providers on the information that should be provided as part of a Deprivation of Liberty Safeguards (DoLS) referral to allow the team to screen such referrals and be better able to decide whether a formal DoLS assessment is actually required.
- undertaking work with the Hospital Social Work Team on the matter of Mental Capacity Act assessments and Best Interest decisions to ensure compliance with the Mental Capacity Act 2007.
- raising issues with the paperwork provided to service users and their families by a residential care provider to ensure that more clarity was given on costs, to identify that the contribution aspect was for self-funders only and that any person placed there by the Council would require a financial assessment to determine the level of their personal financial contribution.

- reminding Social Workers of the need to notify the Billing Team of new care packages so that invoices could be issued promptly.
- additional resource being put in place by the Billing Team to ensure a generic email address was more effectively monitored and adequate resources allocated to deal with email enquiries promptly.
- advising a care provider to update their website to make it explicitly clear how people can raise a concern as well as make a compliment, comment or complaint.
- reviewing process and procedure, specifically in respect of communication and invoicing service users in respite care and particularly when placements become longer-term.

Payments were made where failures constituted fault and/or injustice as defined by the LGSCO (see the LGSCO section in Part Five of the report). In the 2023/24 performance year financial redress was only considered and agreed in line with the Council's Scheme of Delegation as appropriate, where there was strong evidence of shortcomings.

It is recognised that where adult social care services are responsible for service failures that have caused losses and significant emotional distress, there is clearly the duty for this to be acknowledged and further distress to the complainant avoided. In each of the complaint responses issued, full explanations and, where appropriate, apologies were offered.

At the conclusion of each complaint investigation, the Complaints Officer identifies and disseminates any outstanding actions/learning points and monitors progress until the Strategic Manager with responsibility for the service area being complained about advises that any proposed action is completed. They in turn also disseminate any learning across their own area of the service and to a wider audience across AHS where appropriate.

Part Seven – Compliments

There is no statutory requirement to publish data on compliments for the period in question. These are included in this report in order to provide a more holistic view of what service users and their nominated representatives think about the services they receive and to understand what elements of the service that are valued.

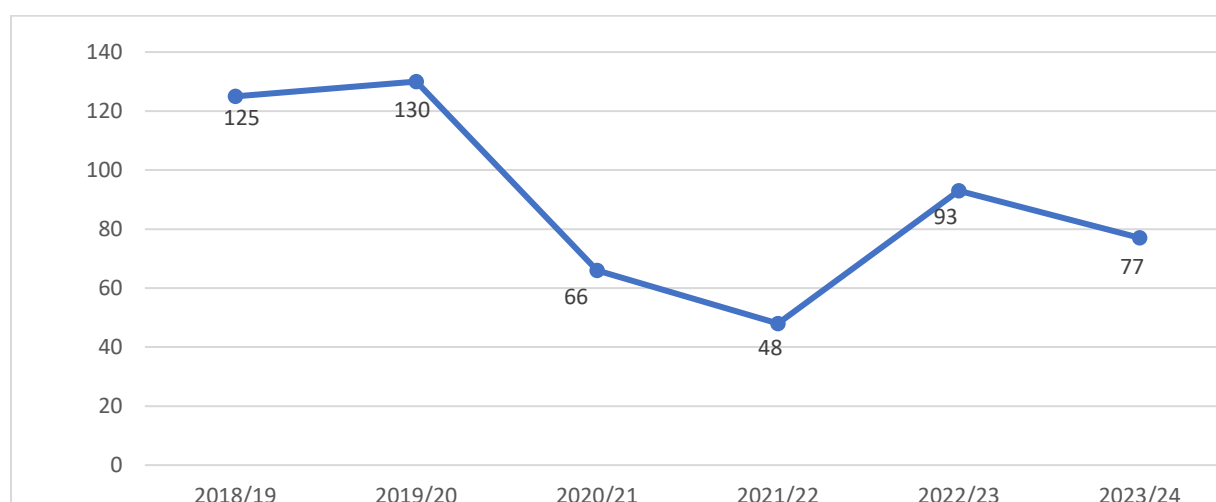
There were 75 recorded compliments during 2023/24, a decrease from the 93 received in 2022/23. As shown in the table below, the majority of the compliments received were for Older People, Physical Disability and Sensory Support.

Number of Compliments by Service Area in 2022/23 and 2023/24

Service	Total Compliments 2022/23	% of Total Compliments 2022/23	Total Compliments 2023/24	% of Total Compliments 2023/24	Year on Year Increase / Decrease in Numbers of Compliments (% Increase / Decrease)
Older People/ Physical Disabilities/ Sensory Support	62	67%	55	74%	-7 (-11%)
Learning Disability/Mental Health/Substance Misuse	7	7.5%	6	8%	-1 (-14%)
County Durham Care and Support	16	17.5%	12	16%	- 4 (-25%)
Safeguarding, Practice Development and Access	1	1%	1	1%	0 (0%)
Finance	2	2%	1	1%	-1 (-50%)
Operational Support	5	5%	-	-	-5 (-100%)
Total	93	100%	75	100%	-18 (-19%)

In June 2021 AHS replaced its Social Services Information Database (SSID) with a new (Azeus) and the compliments above represent the first two full performance years where compliments were added to the new system, noting that compliments fell by 19% in 2023/24.

Year on Year Trend - Adult Social Care Compliments 2018 – 2024



Compliments for reporting purposes must meet specific criteria. Managers are encouraged to ensure that all compliments in the form of positive comments, letters,

emails and cards are captured and shared with their staff and teams to reinforce their value.

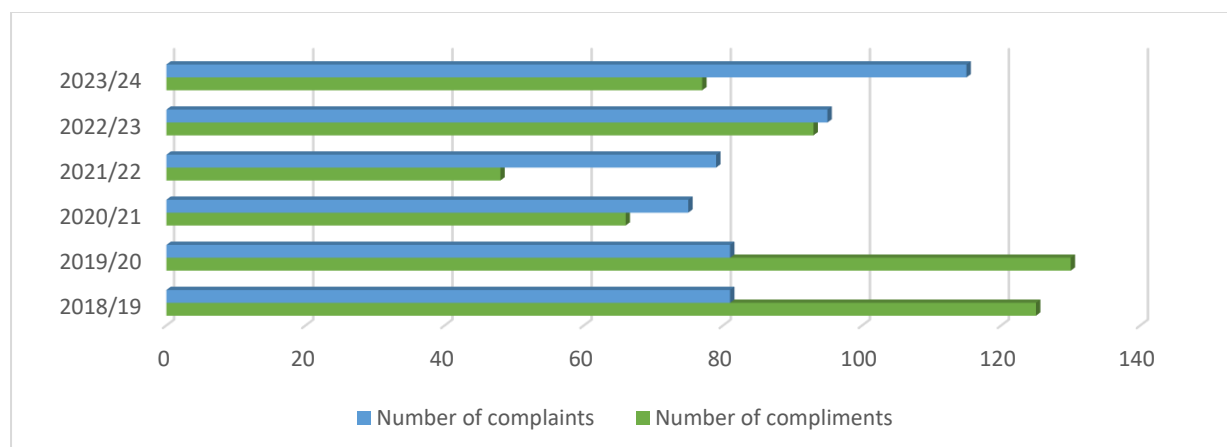
Compliments highlight that service users have appreciated the following:

- Feeling respected, listened to and supported.
- Having decisions explained to them.
- Being kept informed.
- Staff explaining issues in a way the client understood.
- Professionalism, care and commitment of staff.
- Being able to contact staff easily.

The number of compliments in previous years has been consistently higher than the number of complaints received as shown in the graph below, until 2020/21, when for the first time there were more complaints than compliments. In 2022/23 there was virtual parity between the number of complaints (95) and compliments (93) received.

The ratio of compliments to complaints received across AHS in 2022/23 was effectively 1:1, however, for 2023/24 this stands at 0.6:1 meaning that for every 1 complaint received, there were 0.6 compliments.

The Ratio of Compliments to Complaints 2018 – 2024



Part Eight – Developments and Conclusion

Developments

Whilst the Local Authority has a statutory duty to operate and administer a system for dealing with and reporting upon adult social care complaints, DCC AHS does not simply meet that duty, but continuously strives to achieve and maintain a high level of service in relation to the management of complaints. With this aim in mind, a number of developments have been undertaken during 2023/24 including:

- The continuous improvement of tracking and monitoring systems to ensure actions and learning outcomes arising from complaints are implemented in a timely and effective way and fully embedded, in order to compliment the LGSCO's focus on the monitoring of improvement actions as a consequence of decisions they have made on complaints.

- Closer working with AHS Systems and Data Team responsible for managing the adult social care case management system (Azeus) in order to resolve operational issues and correct system anomalies, whilst working to use Azeus to replace and update the systems currently in use for recording performance on complaints, as it already does with compliments. This will enable AHS to use the data captured by the system to help inform the understanding of feedback received from service users.
- Building close working relationships with senior management within Older People, Physical Disabilities and Sensory Support due to new appointments at Strategic and Operational Manager level.
- Closer working with the complaint teams in health services, such as the ICB/NECS, TEWV and CDDFT, with a focus on a consistency in approach for complaints requiring joint investigations.

Reporting

AHS produces this annual report as required by *The Local Authority Social Services and NHS Complaints (England) Regulations 2009*, in order to illustrate the statutory representations received linked to adult social care services and is published on the DCC website. Complaints information from AHS is also reported on a quarterly basis within the Customer Feedback Report which brings together a wide range of information collected from our customers across the whole range of Council services. This includes customer satisfaction/dissatisfaction and general experiences of the services and support the Council provides.

Conclusion

The complaint function is a statutory requirement for social care services, playing a vital role in contributing to quality improvement across adult social care and providing an understanding of service user experiences. Acting upon the learning arising from complaints provides the opportunity to change practice and improve service delivery with transparency and accountability.

A collaborative approach is continually promoted during the management of complaints, where the complainant is central to the process and resolution is proactively sought and encouraged.

Further information regarding any points in this report is available by contacting:

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Appendix 1 - Glossary of abbreviations

AHS	Adult and Health Services
CCG	Clinical Commissioning Group
CDCS	County Durham Care and Support
CDDFT	County Durham and Darlington NHS Foundation Trust
CHC	Continuing Healthcare
CRP	Complaints Resolution Plan
DCC	Durham County Council
ICB	Integrated Care Board
LADO	Local Authority Designated Officer
LGSCO	Local Government and Social Care Ombudsman
NECS	North of England Commissioning Support Unit
NHS	National Health Service
PHSO	Parliamentary and Health Service Ombudsman
SSID	Social Services Information Database
STSFT	South Tyneside and Sunderland NHS Foundation Trust
TEWV	Tees, Esk and Wear Valleys NHS Foundation Trust



Adult and Health Services

Annual Statutory Representations Report

Adult Social Care Services 2023/2024

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Please ask us if you would like this document summarised in another language or format, such as Braille, Audio or Large Print.

AHS Complaints, Room 1B, Green Lane, Spennymoor, DL16 6JQ