

REPORT TO: Children and Families Policy and Performance Board

DATE: 31 October 2016

REPORTING OFFICER: Dorothy Roberts, Customer Care Manager

SUBJECT: Annual Report - Comments, Complaints and Compliments relating to Children's Social Care Services 1st April 2015 - 31st March 2016.

WARDS(S): Borough Wide

1.0 PURPOSE OF THE REPORT

- 1.1 To meet the statutory requirement to publish an Annual Report.
- 1.2 To report and provide an analysis on complaints processed under the Children Act 1989, Representation's Procedure.

2.0 RECOMMENDATION: That

- 2.1 The report is accepted as the mechanism by which the Local Authority is kept informed about the operation of its complaints procedure for Children Social Care.
- 2.2 The Annual Report will evidence how feedback from service users has been used to improve service delivery.

3.0 SUPPORTING INFORMATION

- 3.1 The aim of The Children Act 1989 Representations Procedure is for Children and Young People to have their concerns resolved swiftly and wherever possible by the people who provide the service locally.
- 3.2 A complaint may generally be defined as an expression of dissatisfaction or disquiet in relation to an individual child or young person, which requires a response.
- 3.3 There are 4 categories to the representation process.
 - i. Statutory Complaints - the complainant is eligible as stated in the Representations Procedure to make a formal complaint.
 - ii. Representations - where a complainant is not eligible under the Statutory Complaints Procedure to make a formal complaint, but their comments are noted and responded to. If it is not a complaint under the Statutory Procedure then the Corporate Complaints procedure may

apply. These will often be as complex and take as much time as a statutory complaint and are recorded as Customer Care issues.

- iii. Customer Care issues – can also include advice and guidance, signposting, problem solving and early resolution to prevent complaint escalation.
- iv. Compliments – positive feedback

3.4 The formal complaints procedure has a process of 4 stages.

Stage 1: Aims to resolve the problem as quickly as possible (within 10 working days, or 20 if complex)

Stage 2: If unhappy with response at stage 1, a request can be made for the complaint to be investigated by an Independent Investigator/Person (within 25 working days, 65 if complex).

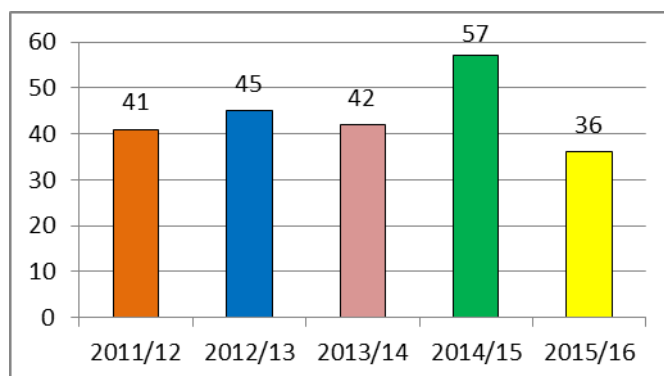
Stage 3: If still dissatisfied, a request can be made for a Review Panel to consider whether the complaint has been dealt with adequately. The Review Panel is made up of 3 independent people and should be held within 30 working days of request.

Stage 4: If still dissatisfied, the complainant has the right to refer self to the Local Government Ombudsman (LGO); they can do this at any stage of the complaint.

3.5 The Customer Care Manager has responsibility for the overall administration of Children Social Care complaints liaising with relevant services across the People Directorate, and parents and families in working to resolve children’s social care complaints.

3.6 **Annual Report 1st April 2015 – 31st March 2016 – Numbers of Complaints**

- a. The analysis and comments in this report are based on 36 Statutory Complaints which were made to the Council in 2015/16; this is a 36% decrease from the previous year which had an increase following the Ofsted inspection; however in this financial year we have also responded to 9 complaints dealt with under the Corporate Complaint Procedure making the total number of Complaints about Children Social Care 45.



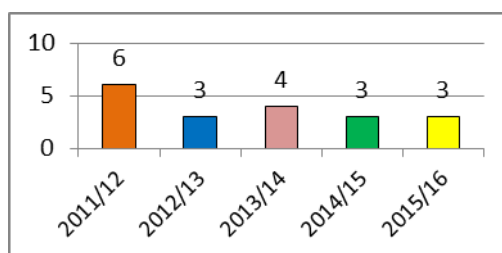
- b. Staffing issues can impact on the number of complaints, in February 2015 the Children in Need Teams had 15 agency workers plus interim managers in 5 posts and so a number of complaints were around changes in social workers. Following a significant recruitment drive the majority of these workers have now been replaced with permanent workers, at May 2016 there were only 5 agency workers across the teams, all managers are now permanent managers. The stability this creates for parents and carers could be a reason that the number of statutory complaints has gone down with extended family members who are dissatisfied using the Corporate Procedures.
- c. The process is promoted both to and by individual workers and teams and by the availability of information on the Councils webpage, this and the public information which informs on how to make a complaint was reviewed this year.

	Q1	Q2	Q3	Q4	Total
2015-16	5	11	12	8	36
2014-15	14	11	13	19	57
2013-14	6	12	8	16	42
2012-13	12	9	12	12	45
2011-12	12	12	10	7	41

3.7 Complaints were made by:

- a.
- 1 complaint (parent) used an advocacy service (Advocacy Works Halton)
 - No complaints have been received from care leavers in the last 3 years.
 - 3 Young People made a complaint, same number as last year and consistent to the last 4 years. All the young people used an advocacy service, NYAS (National Youth Advocacy Service), who provide mediation and advocacy service for children and young people in Halton. Children and young people are informed on how to make a complaint when they first become 'looked after' and receive a child friendly leaflet which explains clearly what to do if they are unhappy.
- b. The remainder were made by parents or relatives; this is the picture nationally as identified in the focus report published in March 2015 by the Local Government Ombudsman Office.

By year, the number of young people who have made a complaint.



3.8 How complaints were made

a.

	2015-16		2014-15		2013-14		2012-13	
Complaint Form	7	19%	12	21%	11	26%	14	31%
E-mail	15	42%	14	25%	6	14%	4	13%
Letter	2	6%	10	17%	7	17%	11	27%
Telephone	11	30%	21	37%	18	43%	12	27%
Meeting	1	3%	0	0%	0	0%	0	2%

- b. Email continues to be the preferred method of communication not just in making a complaint but also in communicating with the complainant as this is instantly accessible via their mobile telephones. It is not always possible to respond via email as consideration needs to be given to personal identifiable information or information of a sensitive and private nature being sent to an unsecure email address. Some complainants also expect immediate responses to emails, whilst emails give instant delivery to the staff to which they are addressed; staff are not always available to respond instantly. Enquires are dealt with in a timely manner and in order of receipt and/or priority however, email responses often take more time to compose and generates more work than speaking over the telephone.

3.9 Types of Statutory complaints made

a.

Main categories	2015/16	2014/15	2013/14	2012/13	2011/12
Staff	5 (14%)	7 (12%)	3 (7%)	1 (2%)	3 (7%)
Service (i.e. quality, lack of, over provision and client expectations)	18 (50%)	27 (48%)	22 (52%)	30 (67%)	25 (61%)
Assessment / Review Process	13 (36)	23 (40%)	17 (41%)	14 (31%)	13 (32%)
Other	0	0	0	0	0
Total	36	57	42	45	41

- b. Complainants often state they wish to complain about the 'Social Worker' however, it is often the case that staff were undertaking their statutory duties or acting within the required policies and so complaints are categorised at closure.

3.10 Year on year there are similar themes such as:

- a. Communication, this is always an issue for the majority of complaints raised whether that be around quality of service i.e. late or missed social work visits, non-return of phone calls or unanswered letters but also in communicating why and how decisions are made.
- b. The nature of work undertaken is not always welcomed and as a result of this, relationships between the social worker and family members can often be strained.
- c. It continues to be the case that where children who have been assessed as either a Child in Need or have been placed on a Child Protection Plan, families will disagree and challenge the reasons for the Council's intervention.
- d. The numbers of Social Workers involved with a family was also a factor during the year with some families reporting that this resulted in delays and inconsistencies. This makes complaint handling difficult, as once a Social Worker left complaints were raised by families and so the reliance was on the recorded data as this evidence supports complaint findings, in some instances this evidence was lacking.
- e. It has to be acknowledged that workload and capacity was also a theme identified as the root cause behind some of the complaints made. It is difficult for workers who in this unique area of work have to prioritise urgent visits to deal with safeguarding issues or write reports for Court within very tight timescales. Ultimately this leads to non-urgent work not being completed or if it is, then the amount of time they can commit to is limited which then impacts on the quality of work they then do. This leads to complaints about timeliness of documentation, availability of staff to respond, the quality of work undertaken and policies and procedures not being adhered to.
- f. In terms of outcomes, every complainant received a full explanation about the alleged action or inaction in both a policy and procedural context. Where complaints were fully or partially upheld, the complainant received a full written apology.

3.11 The outcome of closed Stage 1 complaints

a.

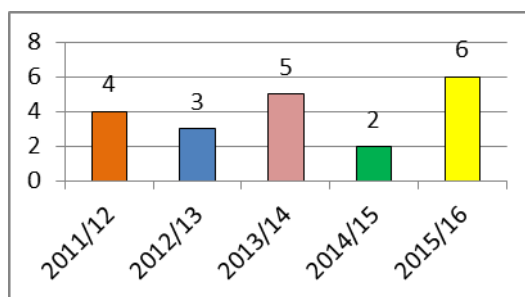
Stage 1	Upheld	Partially upheld		Not upheld	Totals
2015-16	4 (11%)	16 (44.5%)	56%	16 (44.55%)	36
2014-15	9 (16%)	19 (35%)	52%	26 (48%)	54
2013-14	16	7	62%	14	37
2012-13	4	12	36%	29	45
2011-12	8	7	39%	23	38

- b. A partly upheld complaint usually results from a multi-strand complaint and where we have upheld some but not all of the complaints. There has been a 10% increase in this outcome which evidences the volume of issues being raised from one complainant and which will result in complex and time consuming complaint investigations and responses.
- c. Overall, numbers of complaints received remains small in comparison to the number of contacts staff have with families. In the year 2014-15 the number of contacts increased as did the number of complaints. In this financial year Contacts have decreased and are more in line with expectations with referrals having decreased by 38%, this decrease may also be a factor in the reduced number of complaints in this financial year. Caution does need to be exercised in using complaints data to draw conclusions about overriding themes, the complaints upheld were single incidents.

3.12 Stage 2 Complaints

- a. The aim is to resolve complaints as early as possible; where this is not achievable a formal complaint investigation under stage 2 of the complaints procedure is undertaken by an Independent person who will determine if all that could be done has been done and whether it is in line with policy, procedures or statutory requirements.
- b. Six (17%) complaints received in this financial year have progressed to Stage 2 complaint investigations being commissioned, this has increased from 4% last year. 4 of these complaints were received in quarter 3 resulting in the investigations commencing in the final quarter, one received in the final quarter is still ongoing. Where elements are upheld the Local Authority will also look to remedy the fault, for example it may be to put the service in place or reimburse any loss they have occurred, it is also usual for a recommendation to be; an offer of an apology and inform the complainant of changes to how we work as a result of their complaint, this is done in writing by the adjudicating officer.

c.



d.

Complaint A

There were 14 complaints investigated, 3 were not upheld, 4 were partially upheld and 7 were upheld. There were 13 recommendations which were accepted and actioned by the service and of these one was in relation to service development. Exemptions to the usual fostering limits were reviewed and a revised system for monitoring and quality

assuring foster carer exemptions was introduced. In addition to this the training provided to foster carers when they are being prepared for the role was reviewed to ensure that the issues identified in the complaint are sufficiently addressed. The complainant was dissatisfied and requested Stage 3 review however they also indicated they would be writing to the Local Government Ombudsman, Halton agreed to an early referral and await correspondence from them on this matter.

e. Complaint B

There were 9 complaints investigated, 1 was not upheld, 2 were partially upheld and 6 were upheld. There were 14 recommendations which were accepted and actioned by the service. The elements raised in this complaint identified that procedures that are in place were not adhered to and identified a lack of case recording and communication with the family. In terms of improvements to service delivery there is now a robust protocol regarding the transfer of cases from the Duty Team. Cases assessed by the Duty Team are allocated within 5 days of receipt and the Principal Managers and Practice Lead within the team now meet twice weekly to ensure that all cases are allocated in a timely manner. Social Workers are then required to update their manager on day 5 of the assessment in order to provide feedback on how the case is progressing.

f. Complaint C

This complaint was not investigated at stage 1 due to lack of engagement from the complainant. There were 3 complaints and 2 were not upheld, these were in regards to support provided to the young person and the family. The report identified that the young person had been offered virtually all of the services available with the parents declining offers of those available to them. The third complaint was only partially upheld and this was around communication. The report did however highlight that the difficulties with communication were not only the fault of the Council; the family were difficult to communicate with too.

g. Complaint D

There were 5 complaints, 3 were upheld with the remaining 2 being partially upheld. There were 14 recommendations made which were agreed and actioned. This complaint revolved around a disputed decision between the complainant and the service and was in regards to the provision of a service, the service is now in place. There were also faults identified in terms of procedure not being adhered to, the recording of information, the rationale behind decision making as well as the communication with the parent.

h. Complaint E

There were 2 complaints and both were upheld, 9 recommendations were highlighted, agreed and actioned. The complaint report highlighted the delay in dealing with the matter and the lack of communication from the service and identified that this was caused partly by a lack of knowledge in the team, newly qualified Social Workers were the allocated case managers and a lack of knowledge in

relation to the process for a child with disabilities following a Single Assessment, this case was unique. Guidance and flow charts have now been provided which will give clarity to this process and staff have been given training. 'Champions' within each Child in Need team now take the lead for Children with Disabilities, to keep up to date with changing legislation and to advise and support colleagues.

i. Complaint F

There were 14 complaints, 12 were upheld, 1 was partially upheld and 1 could not be concluded. The report made 6 recommendations which were considered and led to reviews of some administrative processes. The majority of the complaints upheld had previously been investigated and upheld at the Stage 1 internal investigation and the independent investigator commented "*it was the best stage 1 response he had seen*". There were some criticisms in previous complaints about internal investigations and this evidences the improvements made.

j. There is a cost to undertaking a Stage 2 and these can vary depending on the complexity of the complaint, the average cost taken from the six above being £3,394.00 per investigation.

k. 3 stage 2 complainants openly indicated one of their desired outcomes as being monetary compensation. The Local Government Ombudsman gives guidance in terms of payments for time and trouble, stress and distress and risk of harm. In total £1294.00 has been paid to complainants. There have been other costs associated with the remedy of complaints however these cannot be classed as a cost of a complaint; it is associated with the cost of what they should have been receiving.

3.13 Stage 3 Review Panel

There have been no stage 3 Review Panels this year. Since 2009/10 there has only been one Stage 3 Review Panel which was held in June 2013, this continued to Stage 4 and was investigated by the Local Government Ombudsman.

3.14 Local Government Ombudsman (LGO)

From 1 April 2013 the LGO changed the process to consider complaints. It is a three-stage process; Intake, Assessment and Investigation. There is one investigation currently ongoing, the LGO did conclude a response however the complainant remained dissatisfied and so they decided to reinvestigate.

3.15 Timescales

a. We aim to provide responses to complaints within 10 working days. It can be extended to 20 working days where, for example, a case may be particularly complex or there are other mitigating circumstances (eg key staff member is absent).

b.

	% within 10 days	% within 20 days	% over 20 days
2015-16	33%	70%	30%
2014-15	35%	75%	25%
2013-14	43%	79%	21%
2012-13	71%	96%	4%

- c. In an effort to increase timeliness, given the higher number of Practice Leads to Principal Managers, complaint investigations were being undertaken by the Practice Leads. This however led to different problems, they were closer to the operational pressures of child protection work which took priority and so although complaint timescales are a statutory requirement this was not met in 30% of the Stage 1 complaint responses. Following consultation with the Divisional Manager the Principal Managers now undertake Stage 1 complaint investigations.
- d. Delays in the complaint responses can reinforce the complainant's perceptions and undermine the work to resolve their complaint.
- e. Of the completed Stage 2 investigations all were completed within timescales.

3.16 Other Customer Care Contacts

- a. "Customer Care Contacts" are those that do not fall within the statutory complaints procedure, but where time is spent communicating with clients to resolve issues, this can include sign-posting to other services, mediating between parties or liaising with Corporate Complaints Team. These contacts provide an early resolution, and can prevent a formal complaint escalating which may also be a consideration in terms of the decreased numbers of complaints.

b.

2015-16	92
2014-15	71
2013-14	48
2012-13	25

- c. The table identifies a further increase in the recorded customer care contacts, of these 9 Representations were made to the Local Authority, with 3 having progressed to Stage 2 of the Corporate Complaint Procedure for an independent review with each one being as complex and time consuming as a statutory complaint. The findings at review supported the outcomes at stage 1.
- d. MP's write to the Director of Children's Services or the Chief Executive on behalf of their constituents and the Customer Care Manager helps co-ordinate some of the responses to these enquiries as often they will link to ongoing complaints. MP enquiry responses cannot accurately be recorded this year as they are all now directed to a single corporate

contact. Those (17) that have been supported via customer care have not been included in the overall number of contacts; this is because they have not been included in the previous year's contacts and so it would not be comparable data.

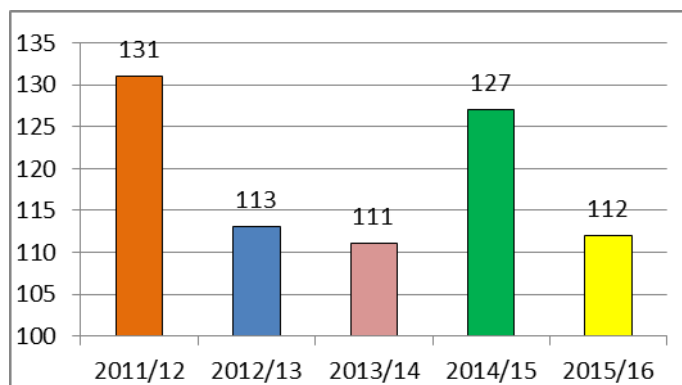
- e. One customer satisfaction survey was returned, these are sent to complainants at case closure. In this instance the complainant had a very positive experience of using the complaints process; this may be reflected in the fact that they were happy with the complaint outcome.

3.17 Complaints Handling Training

During the last quarter of 2014-15 complaint training was provided by the Local Government Ombudsman Office to Principal Managers and Practice Leads and this focused on investigation skills. Training was given on a one to one basis for Principal Managers and Practice Leads new in Post during 2015-16. There were 3 training sessions carried out April, May and June 2016 which focused on the Complaints process for front line staff, further training sessions will be delivered later in the year in order to ensure all staff are able to attend.

3.18 Compliments & Positive feedback, Children Services, People Directorate.

- a. Fairly consistent numbers over the years. There were 112 compliments this year; a separate compliments report has been compiled. Staff are reminded to forward compliments or positive feedback to the Customer Care Manager but it is embedded into working practice and so more often than not, they are submitted without any reminders.



b. Children and Families Compliments (Children's Social Care only)

Year	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
2015/16	13	21	25	18	77
2014/15	23	25	22	15	85
2013/14	16	14	19	15	64
2012/13	11	17	18	26	72
2011/12	27	25	32	9	93

A separate compliments report has been compiled, but illustrative comments about Children Social Care include:

c.

- 1) *Card, young person - To all you wonderful carers, thank you for always making my days fun and happy. (Service user)*
- 2) *Card - I can't believe he is going to be 18 next week and this is his last time with you. Thank you so much for all the care, love and support that you have shown our family. Thank you once again for everything. (Service user)*
- 3) *Telephone - He is amazing, he was professional regarding providing information, polite, my son was comfortable in his presence and I cannot stress how gentle he was with my family respecting what we had been through and not demonstrating any snobbery in relation to what had happened. (Service user)*
- 4) *Card - thank you for helping to restore my self-belief and confidence in my parenting skills. As we learnt along the way, and as you said at the beginning, every child is different. I have always felt I could be open and honest with you and you don't judge. Everybody's situation and lives are different but we all feel equal, thank you again, you're doing a fab job. (Service user)*
- 5) *Card - Thank you for all you have done to bring the children in to our family. We really appreciate your help and support. You have shown genuine care and concern for the children and have been a big help for the grown-ups too! You do an amazing job, thank you. (Service user)*
- 6) *Letter - Thank you for all your support through the year. It's been such a difficult time but you have been a constant support through my good and bad days, you have helped me get medical support for my son, my older son has now got a job, my two younger children now get support from the school and you got everyone to gether to discuss how my illness was affecting the children. Thank you so much, as a result of your support I am in a much better place. (Service user)*

3.19 Learning and Service Improvement

- a. Some complaints highlight issues that may impact on others in a similar situation. Learning from such issues help to inform the improvement or development of services. Managers responding to complaints identify any learning from a complaint in an action plan and monitor progress and actions required.
- b. The majority of complaints received in 2015/16 were around low-level issues that did not require any significant changes to service. These individual issues are followed up by managers in staff supervision to inform individual learning and also where appropriate within team meetings. More widely, learning from complaints is used to inform generic training and service development through the Operational Leadership Team.
- c. Stage 2 investigations are a valuable resource to identify learnings, the investigator is not an employee of Halton Council so they provide an independent view, it also allows for their knowledge of other LA's good

practices to be shared. As identified in point 4.6, bullets a to i, these investigations led to systems being reviewed, processes being amended and new guidance/protocols being developed for staff. It also led to further complaints training for frontline staff which reinforced the learnings from these complaints around issues such as communication, case recording and timeliness. These complaint investigations identified that the majority of our policies and procedures were in place and robust, regrettably in some instances they were not followed.

- d. We receive notifications from the Local Government Ombudsman of cases they have investigated elsewhere in the country; they provide an opportunity to reflect on the consequences of processes not being applied, learn from them and develop our own practice. These reports are shared with the Senior Management Team to cascade to appropriate staff.
- e. Compliments are also a measure of awareness from our Service Users; it is their acknowledgment of the good developments and the positive effects on them. Staff benefit from receiving compliments, knowing that they are noticed and that they are valued is powerful in motivating continued efforts. People strive to do more of what brings praise from others.

3.20 Action Plan 2014-15

- a. The following actions were identified as areas of work for 2014-15
 - Explore ways of communicating and publicising the complaints and representations procedure to Children and Young People, and staff within Halton Council.
 - Raise with Social Care staff and the Parents and Carers of Children and Young People the role and support offered by the Customer Care Manager in seeking to improve practices and assist in dealing with and resolving complaints.
- b. After review, publicity was updated, the Customer Care Manager attended team meetings and moving in to the Directorate has allowed a visible presence. Links were made with the Participation and Inclusion Officer for Looked after Children who visits every child in care and has ensured each is aware of the complaints process and how to access it. Links remain good with NYAS and Independent Reviewing Officers. The Single Assessment Pack includes information on how to make a complaint.

Action Plan 2016-17

- Staff training
- Continue to raise awareness and maintain links

4.0 POLICY IMPLICATIONS

- 4.1 “Complaints, Comments and Compliments” is the guidance intended to detail the policy and procedure for each type of complaint and provide guidance on how to respond when they receive a complaint. This document remains under review and will be amended when changes in legislation or procedure occur.
- 4.2 Where identified through the complaints process, policies can be amended to improve service delivery.
- 4.3 Halton Council is a member of the North West Regional Complaints Managers Group. The aim of the regional groups, which meet bi-monthly, is to provide a forum in which peer professionals can discuss and learn about regional and national issues. Here there are opportunities to develop local practice standards, discuss performance and problem solve. The group also discuss proposed changes to legislation and procedures and prepare consultation responses where necessary.

5.0 RISK ANALYSIS

- 5.1 Investing in a timely and thorough complaint investigation and a written response at Stage 1 identifies potential savings for the Local Authority as this can prevent the complaints progressing to Stage 2. Costs are incurred in commissioning Stage 2 complaint investigations which is referenced in point 4.6 bullet (j) and in releasing staff to participate in these.
- 5.2 Failure to implement an efficient service could result in the Local Authority being challenged for not dealing with complaints in a timely and efficient manner and could result in the customer not receiving a service which could then detrimental to their safety and wellbeing.
- 5.3 Children Social Care Complaints are included within the Ofsted Inspections Handbook: Inspections of Services for Children in Need of Help and Protection, Children Looked After and Care Leavers. Failure to meet the standards as prescribed in the Children Act 1989 Representations Procedure and the Guidance “Getting the Best from Complaints” can potentially impact on the overall findings of the Inspection.
- 5.4 Whilst complaints can result in changes for individuals, collectively they are a key source of information to help us develop the services we provide or commission.

6.0 EQUALITY AND DIVERSITY ISSUES

- 6.1 No matter who complains they receive the same equality of access and provision.

- 6.2 Children and young people under the age of 18 made 3 complaints. The ethnicities of these complainants were White British (source Carefirst) with 2 being female and 1 being a male.
- 6.3 Of the adults over the age of 18 years, in the previous year 72% of complainants were female, this number reduced this financial year to provide a more equal 56% women and 44% men. None declared a disability.
- 6.4 Complaints from ethnic minorities remains low which reflects the demographics of the borough. (Information sourced from Carefirst or complaint form), only 1 was classed as White Other with the remainder being White British.

7.0 IMPLICATIONS FOR COUNCIL PRIORITIES

7.1 Children and Young People

The learning taken from comments, complaints and compliments ensures the ongoing development of services to provide better outcomes for children, young people and their families. The transparency of the process enables children, young people and their families to challenge our provision of services if they feel unhappy about any aspect of it and provides independent oversight if required.

7.2 Employment, Learning & Skills in Halton

Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

7.3 A Healthy Halton

Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

7.4 A Safer Halton

Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

7.5 Halton's Urban Renewal

Any findings from a comment, complaint or compliment relating to this priority will be used to inform the relevant service.

8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
Representation Procedure 1989	Rutland House	Dorothy Roberts Customer Care Manager