# Children, Young People & Culture



# DRAFT ANNUAL COMPLAINTS REPORT APRIL 2018 - MARCH 2019

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19 April 2019

# **PURPOSE/SUMMARY:**

This report has been produced in line with the statutory requirement to update Members and provide current information in respect of complaints related to Children's Social Care Services. This report looks at the period 1 April 2018 to 31 March 2019 and will allow Members to see the extent and complexity of Children's Social Care Service's span of activity and to receive information relating to the guality of the services delivered.

Members are asked to note the content of the report and advise Officers of future requirements in respect of the reporting of complaints relating to Children's Social Care Services.

# 1.0 INTRODUCTION

- 1.1 In line with guidance from the Department for Education, Local Authorities are required to publish an Annual Complaints Report covering the council year. This report is to provide current information in respect of complaints related to Children's Social Care Services for the year 2018 / 2019.
- 1.2 As part of our continued approach to monitoring performance, the status of complaints is also reported weekly to the Children's Senior Management Team. Lessons learnt from complaints are also discussed within the Team Meetings and where there is wider learning discussions take place during the monthly Children's Services Extended Managers Meeting.

# 2.0 WHAT IS A COMPLAINT

- 2.1 A complaint may be generally defined as 'an expression of dissatisfaction or disquiet' in relation to an individual child or young person, which requires a response. A complaint may be made by written or verbal expression.
- 2.2 Complaints principally concern service delivery issues, including the perceived standard of these services and their delivery by service providers. These recorded figures only represent a percentage of complaints received as many complaints / concerns are managed daily on an informal basis operationally and are thus, not registered formally by the complaints section.
- 2.3 The Complaints Procedure is not designed to deal with allegations of serious misconduct by staff. These situations are covered under the separate disciplinary procedures of the Council.
- 2.4 It is a legal requirement that Children's Social Care Services has a distinct complaints procedure. This statutory procedure provides the means for a child or young person to make a complaint about the actions, decisions or apparent failings of a local authority's children's social care provision. It also allows an appropriate person to act on behalf of the child or young person concerned or to make a complaint in their own right.
- 2.5 For some service users and for children and young people in particular, it is not easy to make a complaint. This can be the case when the person using the service may be apprehensive about what may happen if they do complain. It is important, therefore, that all complaints are treated seriously, in confidence, investigated and are given due attention. It is therefore the role of the Assistant Team Manager (Information) to provide a degree of independence and support

to the complainant whilst ensuring the complaint follows the statutory procedure. If a complaint is received directly from a child or young person, an automatic referral is made for advocate support to Bury Children's Rights Service, which is an independent advocacy service commissioned by Children's Social Care. Feedback to complainants about their complaint is essential.

2.6 A prime objective of the Children's Social Care Complaints Procedure is to ensure the Local Authority develops a listening and learning culture where learning is fed back to children and young people who use services. Complaints present an opportunity for the Local Authority to learn why people who are using our services find them unsatisfactory, and how we can improve the services we provide.

# 3.0 THE SOCIAL CARE COMPLAINTS PROCEDURE

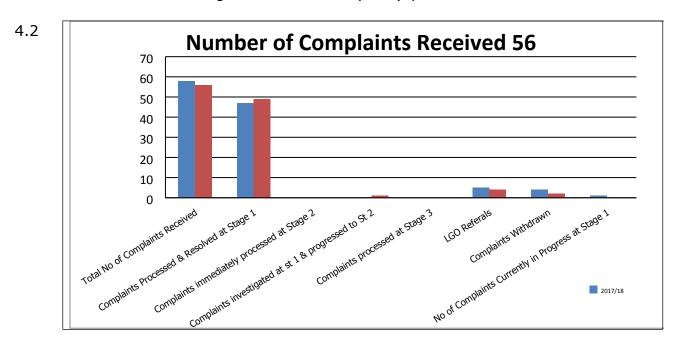
- 3.1 The handling and consideration of complaints consists of three stages:-
  - Stage 1: Local Resolution,
  - Stage 2: Independent Investigation
  - Stage 3: Review Panel
- 3.2 Local Resolution requires the Local Authority to resolve a complaint as close to the point of contact with the service user as possible (i.e. through front line management of the service). Emphasis is placed on resolving complaints under Stage 1, local resolution, because this should provide a more timely response and is user friendly. The Department strives to investigate and resolve complaints within 10 working days although the procedure does allow a 20 working day time scale for more complex complaints. In most circumstances complaints are considered at Stage 1 in the first instance.
- 3.3 Where the complaint is not resolved locally, or the complainant is dissatisfied with the Local Authority's response, the complaint can be considered at Stage 2. An independent investigation is completed by a senior manager from outside the team to which the complaint refers to. This has the oversight of an Independent Person from outside the Local Authority to ensure a full and fair investigation is carried out. We aim to send a response with a full report within 25 working days, although this can be extended to 65 working days.
- 3.4 Where Stage 2 of the Complaints Procedure has been concluded and the complainant is still dissatisfied, they will be eligible to request further consideration of the complaint by a Stage 3 Review Panel. The Panel does not reinvestigate the complaint or consider any substantively new issues of complaint that have not been first considered at Stage 2. The purpose of the Panel is to consider the initial complaint and, wherever possible, work towards a resolution. The Panel should be convened within 30 working days of request and its report (including any recommendations) will be sent within 5 working days following the meeting. The Department then issues its response to the complainant within a further 15 working days.
- 3.5 Where a complainant remains dissatisfied with the Local Authority's response to the Review Panel's recommendations, the complainant has the right to refer his / her complaint to the Local Government Ombudsman. The Assistant Team Manager (Information) will assist with this process as far as possible.

#### **ANALYSIS OF COMPLAINTS RECEIVED**

All figures detailed below are from 1 April 2018 to 31 March 2019. Reference is also made to outstanding complaints or complaints which were reported as not being agreed or completed as of 15 April 2019.

#### 4.0 SOCIAL CARE COMPLAINTS RECEIVED

4.1 A total number of 56 complaints were received across all social care teams during the 2018 – 2019 financial year. This reflects a slight decrease in the number of complaints received when compared with the 58 complaints that were received during the last financial year (April 2017 – March 2018.

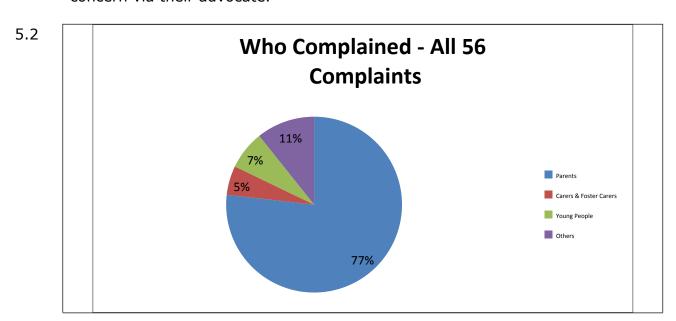


- 4.3 Of the 56 complaints received, 2 complaints were withdrawn and 4 complaints were enquiries from the Local Government Ombudsman. At the time of writing the report, there were no stage 1 complaint investigations outstanding, with the exception of some clarification being requested on a response. This report therefore focuses on the complaints which were actually investigated at Stage 1 of the Social Care Complaints Procedure during the last financial year (April 2018 March 2019).
- 4.4 49 complaints were investigated and resolved at stage 1 of the Social Care Complaints Process during 2018 / 2019
- 4.5 We have also continued to record the number of informal concerns / complaints received into the Complaints Department, which have predominantly been requests for information. This does not include any informal concerns or complaints which have been raised directly with individual teams. There were 83 informal concerns / complaints logged within the Complaints Department which were resolved immediately by telephone and did not result in a formal complaint being made. This is a 14% increase compared with the 73 informal concerns / complaints logged within the Complaints Department during 2017 / 2018; however it should be noted that often this type of concern is raised

directly with individual team managers and is therefore not captured within this recording.

# 5.0 WHO COMPLAINED?

The majority (77%) of the complaints received were received from parents. Young people are encouraged to raise their own concerns with the assistance of advocacy from Bury Children's Rights Service. Bury Children's Social Care Services and Bury Children's Rights Service continue to work with their joint working protocol to ensure that a consistent and timely service is offered to children and young people in the care of Bury Local Authority when they raise a concern via their advocate.



# 6.0 ADVOCACY

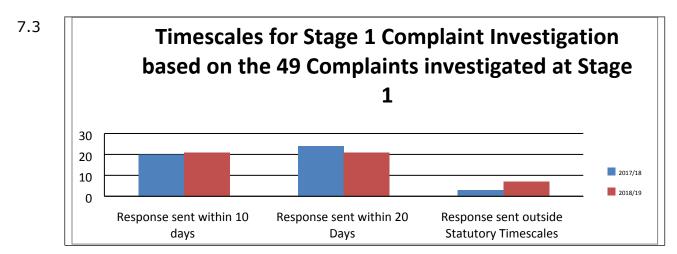
- 6.1 3 complaints were made using the service of an external Advocate, compared with 4 received during 2017 / 2018. These were all received through Bury Children's Rights Service.
- 6.2 Concerns and complaints received from Children and Young People in Care are very important. These young people are often supported to make a complaint by Bury Children's Rights.
- 6.3 The advocate from Bury Children's Rights Service will initially raise the concern with the Young Person's Social Worker, and if no response is received within a timely manner, this will be referred to the Social Worker's line Manager for a response.
- 6.4 Should a response not be provided within a timely manner, or if the Young Person is unhappy with the response, their advocate will assist the child or young person to make a formal complaint at Stage 1 of the Statutory Children's Social Care Complaints Procedure.

# 7.0 TIMESCALES OF STAGE 1 SOCIAL CARE COMPLAINTS

7.1 Performance Indicators show that there has been a slight increase in the compliance of timescales for responding to complaints within ten working days, but a drop in compliance at 20 working days..

Year	10 Working Days	20 Working Days
2009 / 2010	Unavailable	60%
2010 / 2011	32.72%	65.46%
2011 / 2012	36.36%	79.55%
2012 / 2013	41.86%	90.96%
2013 / 2014	46.94%	95.92%
2014 / 2015	47.50%	82.50%
2015 / 2016	41.18%	79.42%
2016 / 2017	48.72%	92.31%
2017 / 2018	42.55%	93.62%
2018 / 2019	42.85%	85.7%

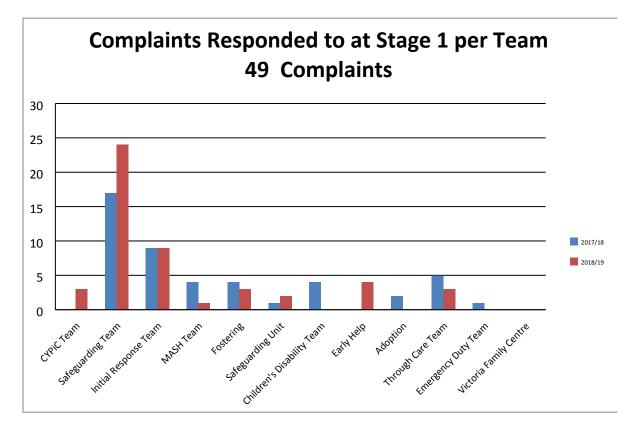
7.2 This resulted in 14% of complaints (7) being responded to outside of the statutory timescales. There were a number of reasons for this; new managers who required additional support in carrying out the investigations, complex complaints, sickness of social workers meaning they were unable to be spoken to in respect of the investigation. However, the additional time allowed for a full investigation which resulted in the complaints being resolved at Stage 1.



#### 8.0 COMPLAINTS PER TEAM

- 8.1 The majority of complaints received were in respect of work carried out within the Safeguarding Team
- 8.3 Whilst there has been an increase in complaints within the Safeguarding Team, this is not unexpected due to the number of assessments carried out in this team along with the disruption in staffing that this Team has seen. New managers within this team are supported in their investigation and response to complaints. We continue to implement quality assurance of complaint responses which assists in the provision of training and guidance to Team Managers who may be new to dealing with complaints.

8.1



# 9.0 WHAT PEOPLE COMPLAINED ABOUT

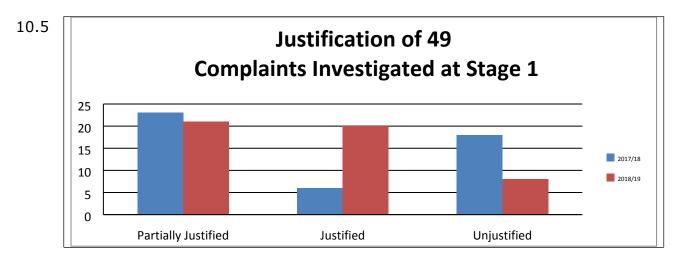
9.1 What People Complained About (All 56 **Complaints Received)** 20 15 10 5 0 ISSUES SURrounding C.P. C.I.N. Review meetings Conduct of Social Care Workers Customer care lack of communication Alleged breach of confidentiality Unhappy With Decision Issues regarding contact Quality of Service Assessment | Service Delay 2017/18

9.2 Many of the complaints received cover a variety of issues. Whilst on first glance, the graph above appears to show an increase in complaints about customer care and the lack of communication, we do have to consider that the involvement of

social workers is a service that is often unwanted by families, and they are unhappy with any involvement. Due to the nature of individual complaints it is sometimes difficult to categorise these into specific themes and the categorisation is therefore a broad categorisation. Each individual complaint has been scrutinised and there is no particular pattern to the complaints received in respect of a specific issue or worker; this is pleasing as it does not highlight a particular weak area within the teams / service.

# 10.0 HOW WE DEALT WITH COMPLAINTS

- 10.1 Each of the 49 complaints investigated at Stage 1 were investigated by the relevant Team Manager, and a response was provided to the Complainant explaining the situation or what the service intends to do as a result of the complaint. In the majority of cases, a letter of explanation or an apology was sufficient to resolve the matter.
- 10.2 Whilst a number of complainants were initially dissatisfied with the Stage 1 outcome, we were able to resolve the majority of complaints without the need to progress to Stage 2 by offering meetings with the Strategic Lead for Safeguarding and the Assistant Team Manager (Information).
- 10.3 One complaint was been escalated to stage 2 of the Complaints Procedure; this investigation is currently ongoing.
- 10.4 There were 4 complaints which was received by the Local Government Ombudsman and which we were asked to supply information to support their enquiry. Following comments received by the Council the LGO discontinued their investigation. The LGO discontinued a third complaint as the case was in the court arena. The LGO have yet to respond in respect of the 4<sup>th</sup> complaint.

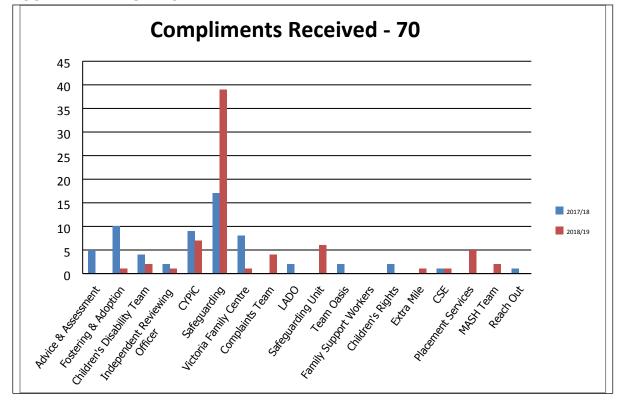


# 11.0 QUALITY ASSURANCE / BUDGET POSITION

Permanent Team Managers are now familiar with carrying out complaint investigations and providing a written response; in addition quality assurance procedures have continued which have resulted in the Local Authority having been able to resolve complaints at Stage 1 of the Complaints process, sometimes with additional mediation. There will be a charge for the Stage 2 investigation which is ongoing.

# 12.0 COMPLIMENTS RECEIVED

12.1



12.2 70 compliments regarding the Children's Social Care Teams have been received over the last twelve months, compared to 66 during the last financial year, however not all managers forward these to be logged. A discussion has already taken place within team meetings to encourage staff to record the compliments received. It is pleasing to note that whilst the Safeguarding Team received the highest number of complaints, they also received the highest number of complements (39).

# 13.0 EQUAL OPPORTUNITIES MONITORING

- 13.1 Whist efforts have been made to monitor the ethnic origin of the Authority's complainants; many have not returned the diversity questionnaire.
- 13.2 Due to the limited number of questionnaires being returned, a true and accurate reflection of the Authority's Complainants cannot be reported.

# 14.0 REPEAT AND VEXATIOUS COMPLAINTS

- 14.1 It should be noted that as reported in the last financial year we do still receive a small number of complaints which may be construed as either vexatious or repeated. This type of complaint impacts greatly on the time of both the Assistant Team Manager (Information) and Departmental Staff, and hinders the completion of other complaints.
- 14.2 The Local Government Ombudsman remains a source for advice in these situations, especially when it is clear that a Stage 2 Investigation would not provide a different outcome / resolution, and a small number of complainants

were advised to contact the LGO if they remained unhappy with the Local Authority's response.

# 15.0 DEVELOPMENT OF COMPLAINT MANAGEMENT & EXPERTISE

15.1 The North West Complaints Managers Group meets bi-monthly. Meetings are well attended. The network aims to raise standards for Complaint Management across Authorities. Whilst I have been unable to attend all meetings due to work pressures, the group continues to be a valuable source of advice and support.

# 16.0 LEARNING FROM COMPLAINTS

- 16.1 In order to demonstrate learning from complaints and the Department's commitment to use complaints to improve standards of services, all Team Managers complete a "Lessons Learnt" form following each complaint investigation. All recommendations arising from complaints have been recorded and shared with the wider Social Care teams.
- 16.2 During the last twelve months, discussions have taken place with Team Managers in order that lessons learnt can be fed back to social work staff.
- 16.3 Feedback and discussion from complaints takes place with Team Managers and is fed back to staff during Team Meetings. Wider learning has also shared during the monthly Extended Manager's Meetings.
- 16.3 Some complaints identify lessons learnt in dealing with an individual or family; others offer a wider learning experience
- 16.4 The recommendations which have arisen from complaints during 2018 / 2019 have been shared during Team Meetings. The following recommendations have now been implemented are detailed below:
  - Reflective case supervision has been carried out in respect of specific cases in order for social workers to reflect on complaints received.
  - The Family safe care policy has been updated in respect of Foster Carers
  - Changes have been made in respect of the circulation of Child Protection minutes to ensure these are received by parents
  - Mangers have received further guidance in respect of the quality assurance of assessments
  - Practices in respect of sharing information with partner agencies have been reviewed in line with GDPR compliance
  - Good practice information was shared with Managers at the Extended Manager Meeting in respect of Care Leaver Entitlements if a Care Order is revoked prior to the young person becoming 18.
  - Adoption Training for frontline Social Workers has been completed
  - Managers have been requested to ensure the consistency of decision making when meetings are covered by other workers
  - A review of the finance system in respect of Fostering has been carried out to ensure this is fit for purpose.
  - Further support / training has been provided to Managers in respect of consistent standards for signing off meeting minutes

#### 17.0 CONCLUSIONS

- 17.1 The Complaints process has been monitored and evaluated throughout the year to ensure that we not only meet the requirements of the statutory regulations and guidance, but those of the families we work with.
- 17.2 There is still scope for the timescales in which we respond to complaints to be improved and for complaints to contribute towards improvements to the services we provide.
- 17.3 To ensure that we continue to work and resolve complaints quickly the Assistant Team Manager (Information) has worked with newer Team Managers in the investigation and response to complaints, and all written responses continue to go through a final stage of quality assurance.
- 17.4 It is essential to the smooth running of investigating and responding to complaints that delays are kept to a minimum, and that any delays in the investigation process do not add to the initial complaint. Whilst there has been a reduction in the number of complaints received, those that have been received have been more complex in nature. Therefore it is encouraging that despite the addition to working pressures for managers, we have improved the timescales for responding to complaints
- 17.5 Strict monitoring and following up on complaint investigation continues to be a priority to ensure complaints are responded to effectively within the ten day timeframe.