

**Children, Young People &  
Culture**



**ANNUAL COMPLAINTS REPORT  
APRIL 2013 – MARCH 2014**

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12 June 2014**

## **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 2013 to 31 March 2014, 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 quality 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 2013 / 2014.
- 1.2 As part of our refined 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 monthly within the 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 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 allows 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 is overseen by 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.

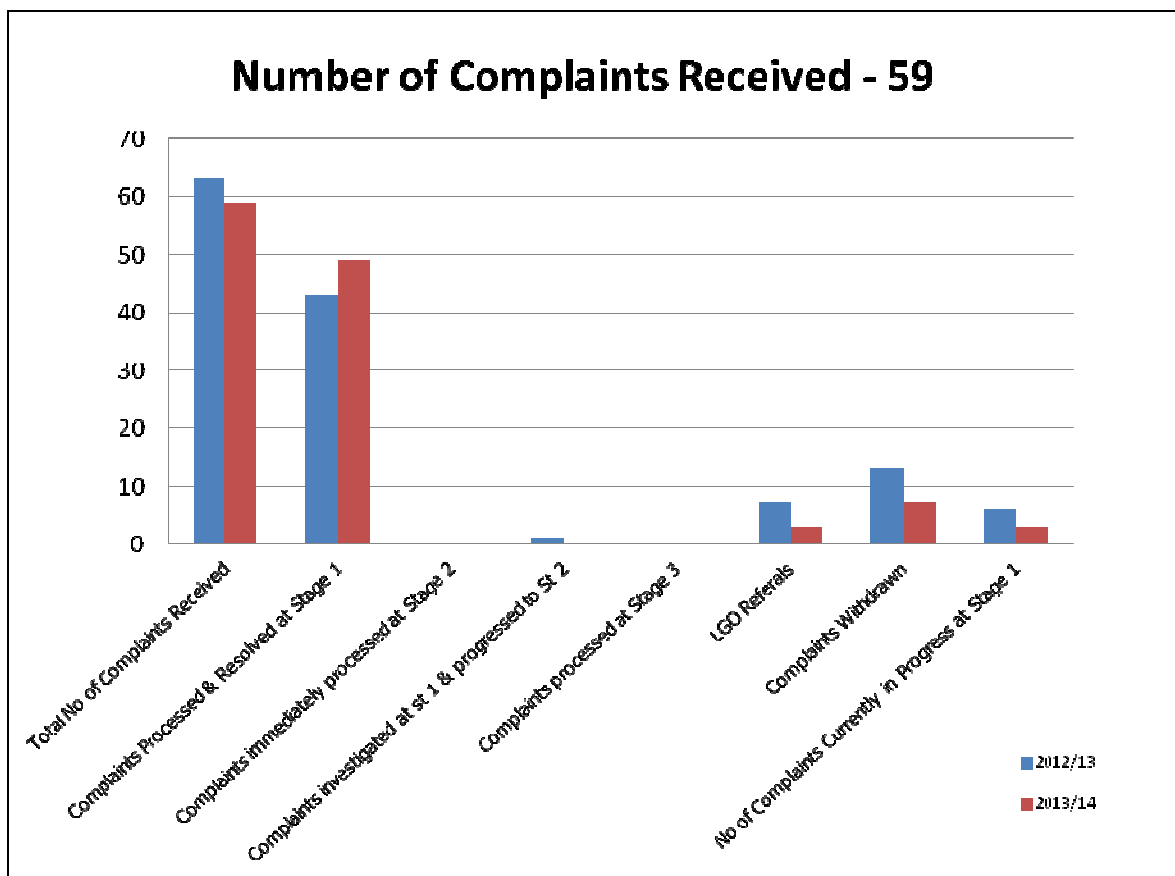
## ANALYSIS OF COMPLAINTS RECEIVED

All figures detailed below are from 1 April 2013 to 31 March 2014. Reference is also made to outstanding complaints or complaints which were reported as not being agreed or completed as of 31 March 2013.

### 4.0 SOCIAL CARE COMPLAINTS RECEIVED

4.1 A total number of 59 complaints were received across all social care teams during the 2013 – 2014 financial year. This reflects a 6% decrease in the number of complaints received when compared with the 63 complaints that were received during the last financial year (April 2012 – March 2013).

4.2



4.3 The 3 complaints which were received during March 2014 but which were not actually completed within the 2013 / 2014 financial year have now been responded to during April 2014; 2 within 10 working days and one within 20 working days. 7 of these complaints were withdrawn, and 3 of these were enquiries from the Local Government Ombudsman. This report therefore focuses on the 49 complaints which were actually investigated at Stage 1 of the Social Care Complaints Procedure during the last financial year (April 2012 – March 2013).

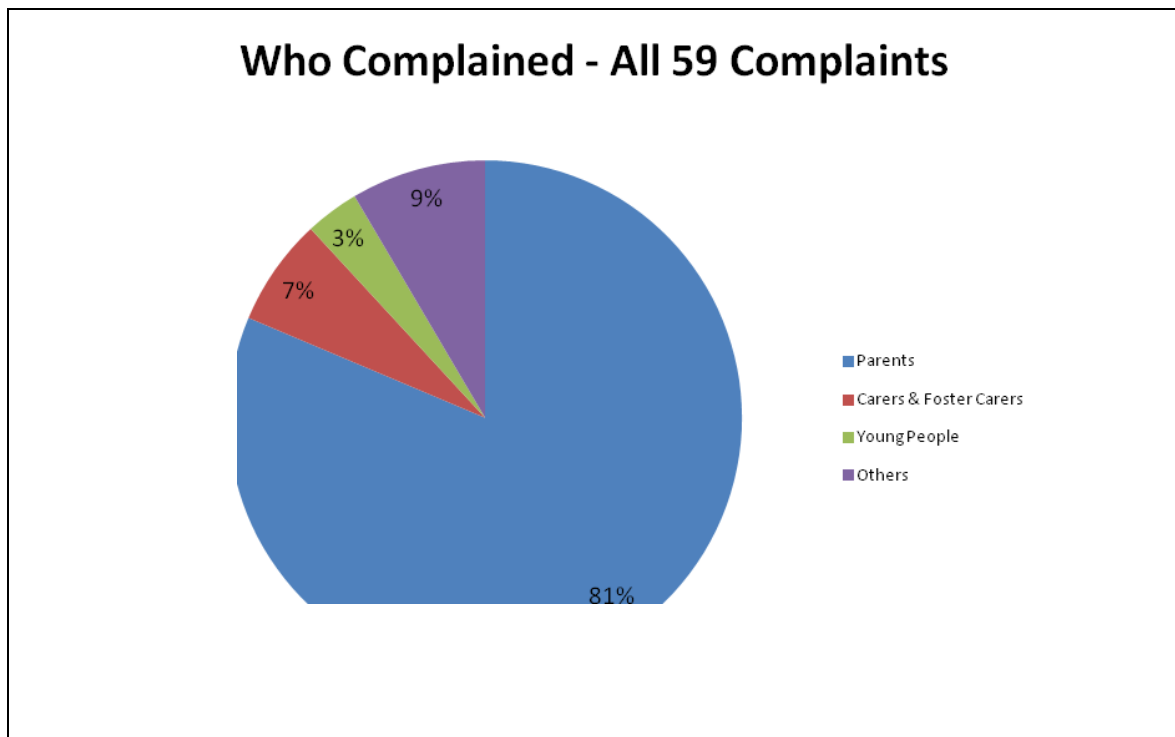
4.4 In addition to the 59 complaints received in 2013 / 2014, 6 complaints received towards the end of 2012 / 2013 were also investigated during the

2013 / 2014 financial year. 1 of these complaints was responded to within 10 working days, 4 were responded to within 20 working days and 1 took over 20 working days with the agreement of the complainant.

## 5.0 WHO COMPLAINED?

5.1 The vast majority of complaints 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.

5.2



## 6.0 ADVOCACY

6.1 5 complaints were made using the service of an external Advocate, compared to 14 during the previous financial year. The number of complaints received through Bury Children's Rights Service was 3, compared with 8 last year. There has been a reduction in the number of complaints received from the Hospital Citizens Advice Bureau as a result of work being carried out with them at the end of the last financial year in order that they understand the Social Care thresholds.

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.

6.5 The Children in Care Council are currently involved in updating our Complaints Leaflet.

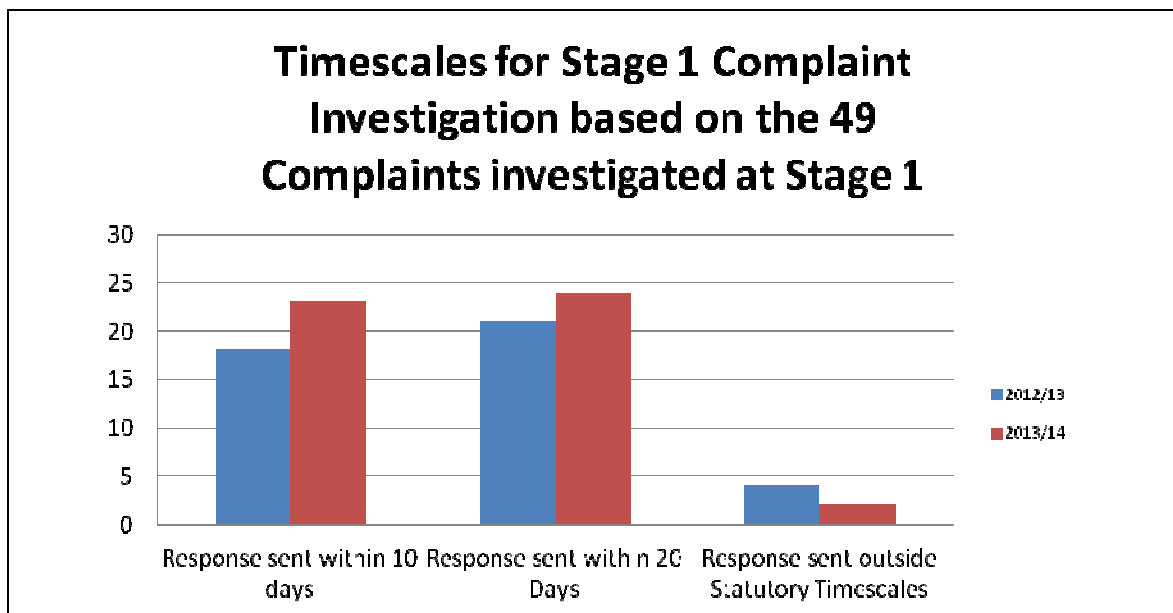
**7.0 TIMESCALES OF STAGE 1 SOCIAL CARE COMPLAINTS**

7.1 Performance Indicators show that for the fourth year running, staff have continued to make significant improvements to the timescales in which we have responded to complaints compared with the figures from 2012 / 2013. Of the complaints received and investigated within 2013 / 2014, 46.94% of complaints have been dealt with within ten working days, compared with 41.86% for the same period in 2012 / 2013 and 95.92% of complaints have been dealt with within twenty working days compared with 90.69% during 2012 / 2013.

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%

7.2 Delays were agreed with the complainant for the 4.08% of the complaints which were dealt with outside timescales. The additional time taken prevented these complaints being taken to stage 2.

7.3



## 8.0 COMPLAINTS PER TEAM

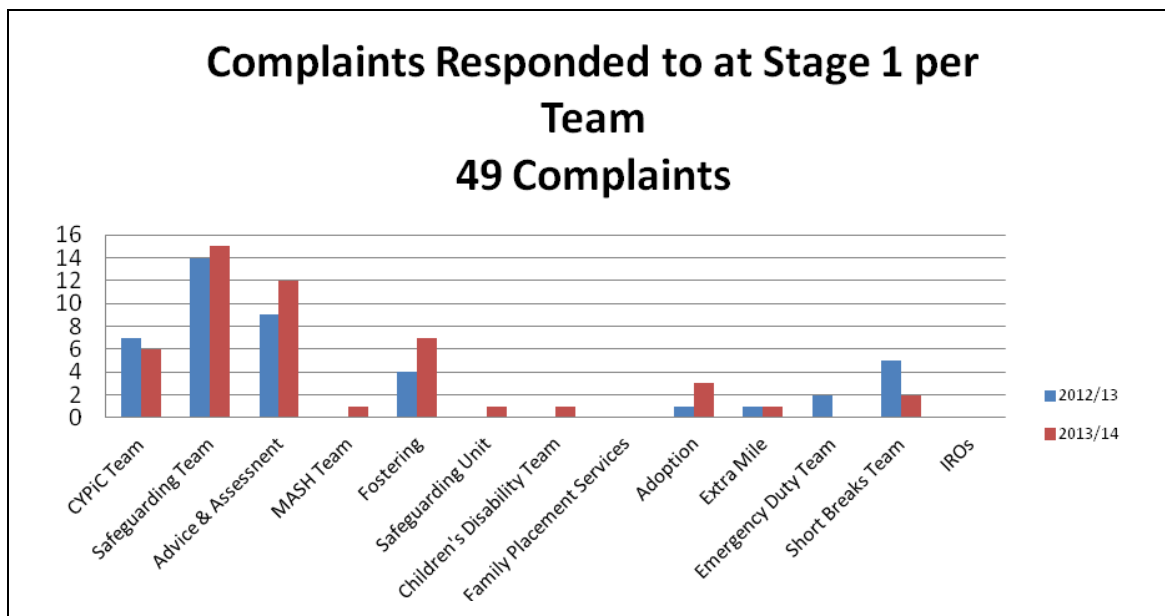
8.1 Figures show that 30.61% of complaints have been investigated and responded to by the Safeguarding team, which is a similar level to the 32.56% during 2012 / 2013. Slight increases in complaints have been seen in other departments.

8.2 Neighbouring authorities have continued to note an increase in complaints over the past twelve months. Despite budget cuts and staff restrictions and restructures, it is pleasing to note that we have seen a decrease in complaints being made. Parents, carers and children are provided with complaints leaflets during visits, and are aware of how to make complaints. During a recent Safeguarding Diagnostic by the Local Government Agency and a Thematic Inspection of Early Help by Ofsted, both agencies reported on the positives of the lessons learnt from complaints.

8.3 Whilst the percentage of complaints between teams has changed from last year, the following figures clearly highlight that just over half the complaints received were with regard to the two largest Social Care Teams (Safeguarding and Advice & Assessment).

8.4 It should be noted that the MASH Team is a new team set up in August 2014, and complaints received by this team would previously have been recorded within the figures for the Advice and Assessment Team.

8.5

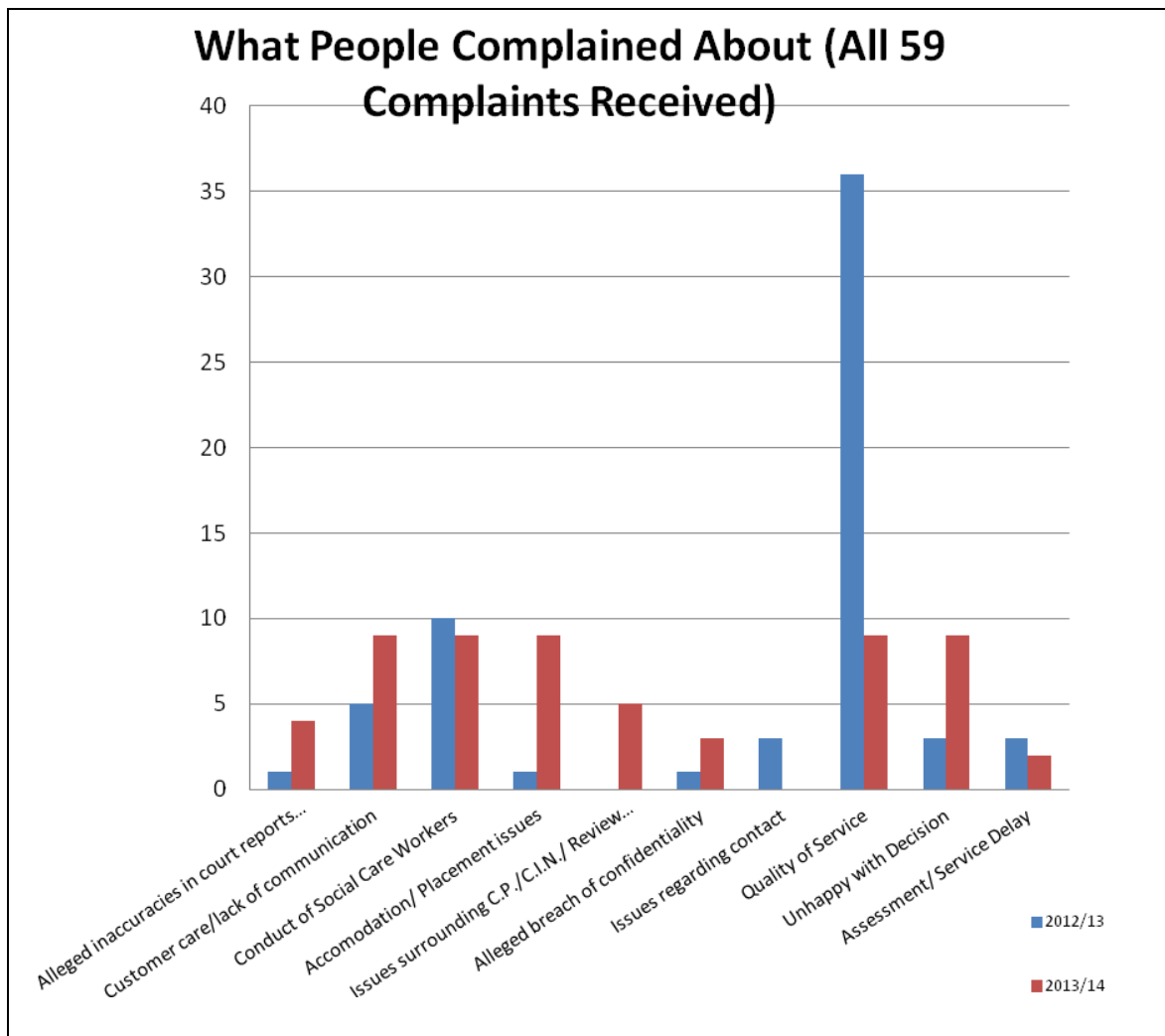


## 9.0 WHAT PEOPLE COMPLAINED ABOUT

9.1 All complaints received in respect of staff conduct have also been addressed personally by Managers on an individual basis.

9.2 The above graph shows that over the last twelve months we have been able to narrow complaints down to more specific details rather than quality of service. There is no main pattern to the complaints received which is pleasing as it does not highlight a particular weak area within the teams / service.

9.3



## 10.0 HOW WE DEALT WITH COMPLAINTS

- 10.1 Each of the 49 complaints investigated at Stage 1 was investigated by the relevant Service Manager or 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 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 There have been 3 complaints which were received by the Local Government Ombudsman and which we were asked to supply information to support their enquiry.
- 10.4 To date we have received a provisional view on one case that the LGO will be closing the complaint as they have been unable to discuss the complaint with the complainant in order to gain sufficient information to proceed.

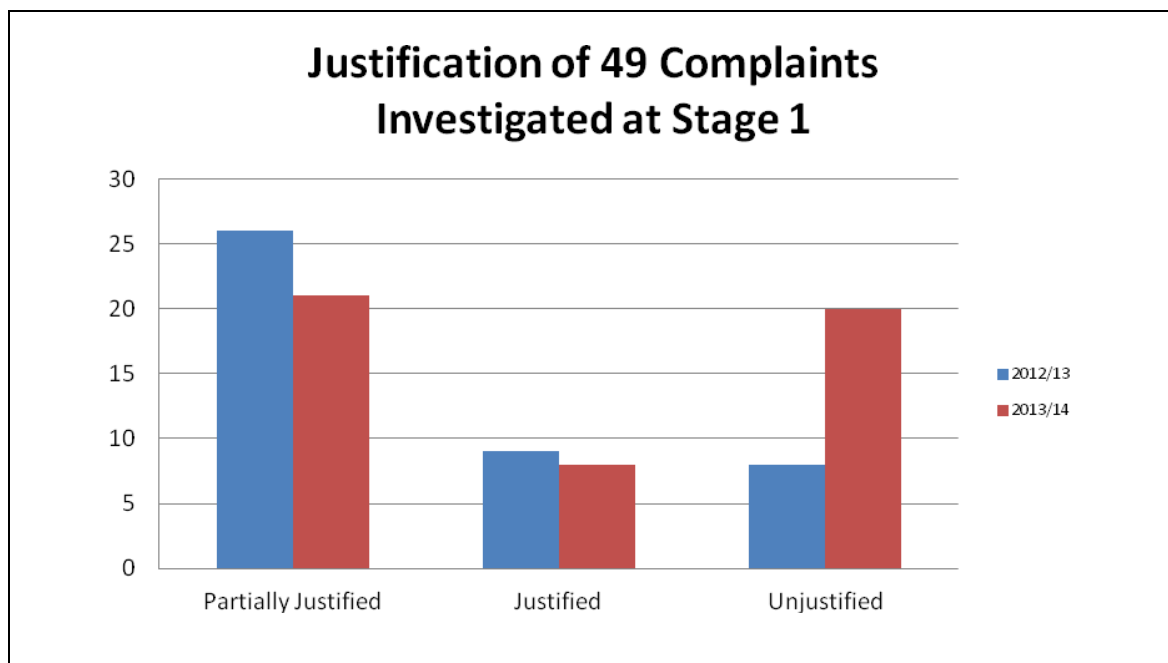


10.5 Two cases are currently outstanding with the Ombudsman, awaiting a decision as to whether they are happy with the information supplied or whether they intend to investigate as a formal complaint.

10.6 At the end of the financial year, there have been no cases which have been formally investigated by the Local Government Ombudsman.

10.7 There have therefore been no complaints that progressed to Stage 2 or 3 and at the time of writing.

10.8



## 11.0 QUALITY ASSURANCE / BUDGET POSITION

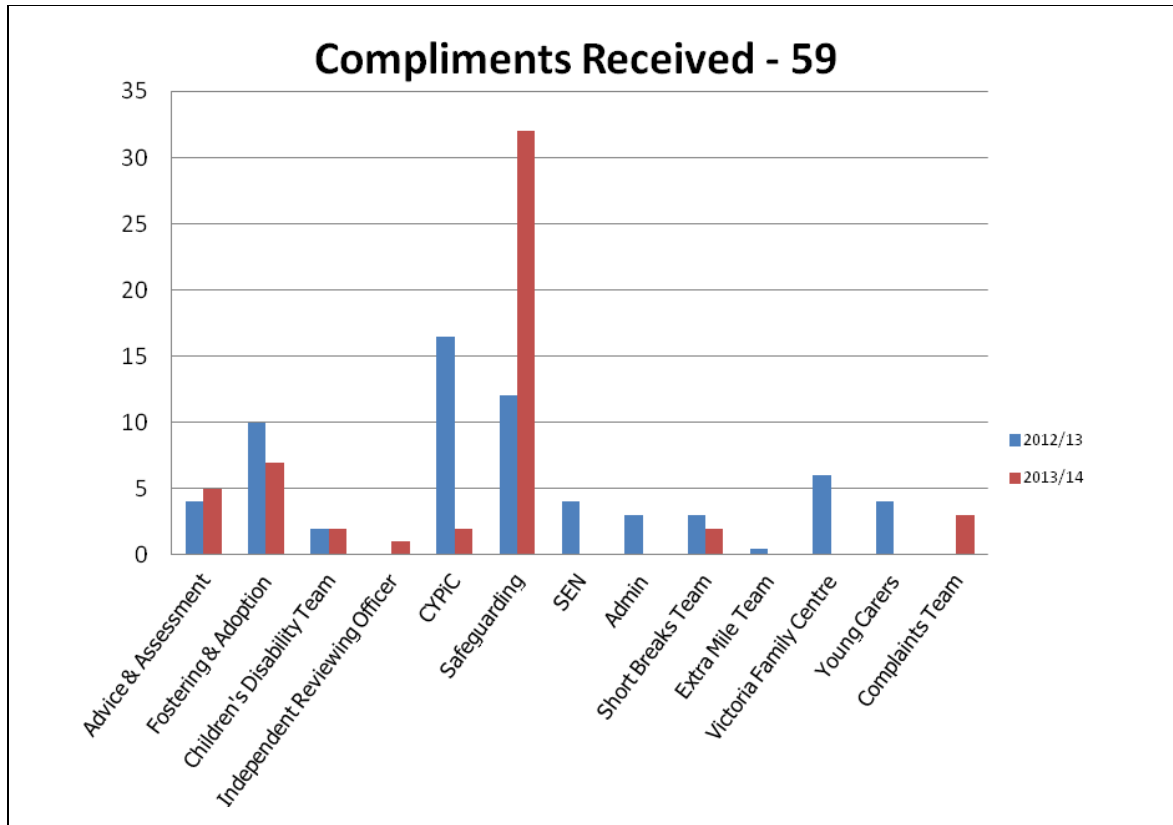
11.1 This year, more staff are now familiar with carrying out complaint investigations and providing a written response; in addition there has been an increase in quality assurance procedures. These measures have resulted in the Local Authority having been able to resolve all complaints at Stage 1 of the Complaints process without the need to carry out any Stage 2 Complaint Investigations.

11.2 We have therefore not incurred any costs for Stage 2 Complaint Investigations which is a saving of £1007.70 when compared with the previous financial year.

## 12.0 COMPLIMENTS RECEIVED

12.1 59 compliments regarding the Children's Social Care Teams have been received over the last twelve months, compared with 65 which were received during the last financial year.

12.2



12.3 It is pleasing to note that the number of compliments received for the Safeguarding Team have more than doubled in the last financial year. A considerable number of these compliments have been received from the Courts with regarding to the reports and information provided during Legal Proceedings.

The graph reflects a significant reduction in the number of compliments received by the Children and Young People in Care (CYPiC) Team. This is a team in which there has been a high level of staff sickness and agency cover.

### 13.0 EQUAL OPPORTUNITIES MONITORING

13.1 Whilst 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 is something that has also been noted by colleagues in neighbouring Authorities. 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.

- 14.3 The LGO agreed with the Council's decision and did not carry out any further investigations other than one outstanding and identified at 10.3.

#### **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. Both this group, and the Children's Subgroup continue 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 Service Managers complete a "Lessons Learnt" form following each complaint investigation. All recommendations arising from complaints have been recorded and followed up by Service Team.

- 16.2 During the last twelve months, a report has been issued to Team Managers on a quarterly basis to ensure feedback to complaints is reported back to staff.

- 16.3 Feedback and discussion from complaints also takes place with Team Managers during the monthly Extended Manager's Meetings. This feedback is then shared with staff during Team 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 2013 / 2014 which have now been implemented are detailed below:

- Staff to consider sensitivity around Christmas and festive holidays and to understand how difficult the assessment and court process is for service users.
- To ensure that parents who are excluded from review meetings are offered a separate meeting to keep them informed and ensure that the decision for exclusion is reviewed at each meeting.
- The issue of confidentiality and sharing sensitive information to be regularly reviewed in Team Meetings
- Social Workers need to be clear from the start of involvement of the difference between CIN and CP but to advise parents/carers that if concerns remain and parents/carers refuse to work with the department we will consider if a CP plan is required
- Introduction of a communication diary between foster carers and birth mother in improve communication.
- Social Workers must share assessments / reports with parents and record the parents' view within the body of the assessment or the report. The Safeguarding Unit have distributed

expectations to all Team Managers/Social Workers around timescales in which to share reports with parents prior to meetings. If this is not complied with, Conferences will be stood down. This will ensure that parents are prepared for discussions at meetings.

- It has been highlighted that Social Workers need to be mindful of any potential language barriers and ensure that translation services are involved from the beginning and that all information gathered is shared.
- Medical policies and procedures have been reviewed and updated with regard to medical consent for CYPiC, and this has been shared with staff
- Protocol / guidance to be developed for Digital Images Clear guidance must be given to families when they are sharing information of a safeguarding matter that this cannot remain confidential – this will reduce the complaints about potential breaches of data protection.
- Tracking spreadsheet to be set up and maintained by the post adoption worker to detail requests for access to records as this can be a lengthy process and will assist in good communication.
- A duty tray has been created within the Safeguarding Team to ensure that there are no delays in allocation of cases and to prevent any issues with regards to communications between MASH and Safeguarding Team.
- Reflection on the way we deal with allegations of domestic violence to ensure we allow both partners to voice their concerns.
- Early resolution and maintaining good communication between birth parents and foster carers is essential to prevent unnecessary complaints. Establishing communication protocols for the future to ensure good flow of information between the parties concerned.
- To ensure that prospective foster applicants are aware of the background information required. Management to be involved in informing the prospective applicants if not proceeding to the assessment stage.

## **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 that of our Service Users. Improved feedback and learning from complaints may be a factor in the reduction in complaints compared to increases seen in other Local Authorities. We are able to evidence that changes to Social Care processes have been made and also that improvements have been made to the Authority's response time to complaints.

17.2 There is still further 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 and

effectively, experienced Team Managers have worked with newer Team Managers in the investigation and response to complaints and procedures have been implemented to quality assure all written responses.

- 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 it is pleasing to note that staff have made huge improvements in the completion of complaints within timescales and have reduced the number of complaints responded to outside the statutory timescales, there is still scope to improve the number of complaints that we respond to within the statutory response time of ten working days.
- 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.