



Statutory Complaints and Representations Annual Report 2021-2022

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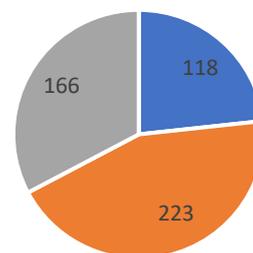
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Introduction

This report outlines the feedback received by the Customer Relations Team about statutory social care children's and adult services during 2021-2022. It includes compliments, concerns, representations, complaints and learning from complaints.

Overview

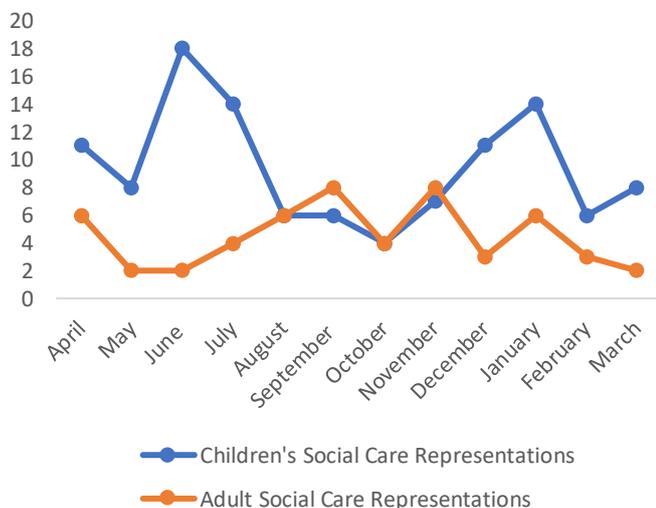
507 new compliments, concerns, representations and complaints were received between 1 April 2021 and 31 March 2022. The tables below show the types of feedback received and when they were received.



■ Complaints ■ Compliments ■ Representations

Type of Record	2020/21				2021/22			
	Children		Adults		Children		Adults	
	No	%	No	%	No	%	No	%
Compliments	15	14%	82	32%	1	1%	222	59%
Concerns/representations	78	72%	95	37%	105	80%	61	16%
Complaints	15	14%	82	32%	26	20%	92	25%
Total	108	100%	259	100%	132	100%	375	100%

Representations



When a concern or representation is received, an initial assessment is made to decide whether it needs to be considered using the complaints procedure. This includes establishing whether another route is more appropriate or if relatively minor issues can be resolved very quickly and locally by a manager. The figures below show that many concerns and representations fell outside of the complaints procedure and that others were resolved quickly to the satisfaction of complainants. 167 concerns and representations were received during the period. The table below shows the outcomes.

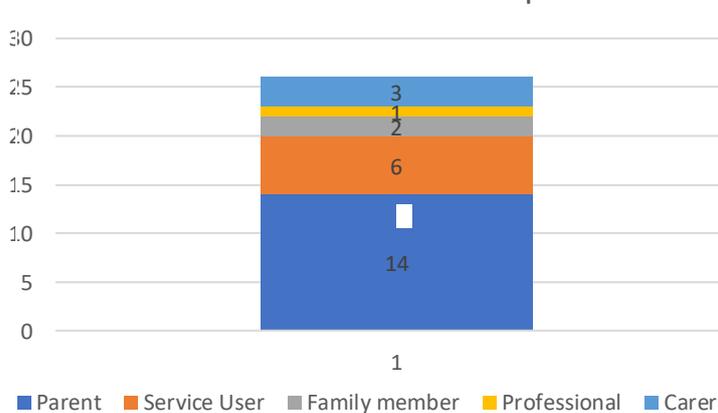
Number		Outcome	Comments
Children	Adults		
5	6	Anonymous	passed to appropriate managers for their attention but no response could be given
4	1	No further contact	complainant did not pursue their concerns when asked for further information
33	20	Outside procedure	e.g. court proceedings relating to complaint issues (13), complaints related to events which took place over a year ago (1), person complaining had insufficient interest in or no consent from child/service user (6), repeat complaint (2), record was deemed to be an enquiry, not a complaint (17) complaint was dealt with within the data breach procedure instead (8), professional or contractual complaint (6)
2	10	Referred to external organisation	e.g. another local authority (4), NHS (3), private company providing a service to complainant (4) school (1)
51	16	Resolved	through timely discussions, meetings, explanations
10	8	Safeguarding	current safeguarding concerns are referred to adult or children's safeguarding services or area services for appropriate investigation or follow up.

Who complained?

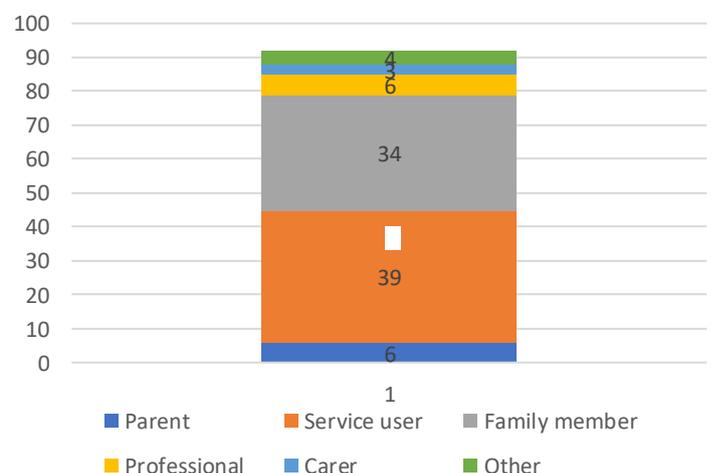
We have received complaints or compliments from the following people:

- Service users. These complaints come directly from a young person or adult receiving, or having received, a service. These complaints may also be made on their behalf via an advocate.
- Parents. These form the majority of complaints about children's services e.g. of children in care, children in need or who are subject to child protection investigations.
- Family members. These complaints are often made by children or grandchildren of adults receiving care, raising concerns over the quality of care, communication and finance.
- Professionals. Complaints may be raised on behalf of service users by a solicitor or medical professional or practitioner.
- Carers. Complaints may be made directly by carers. The majority of these complaints in children's services relate to foster carers
- Other. Neighbours, friends etc of adults receiving care.

Children's social care complaints

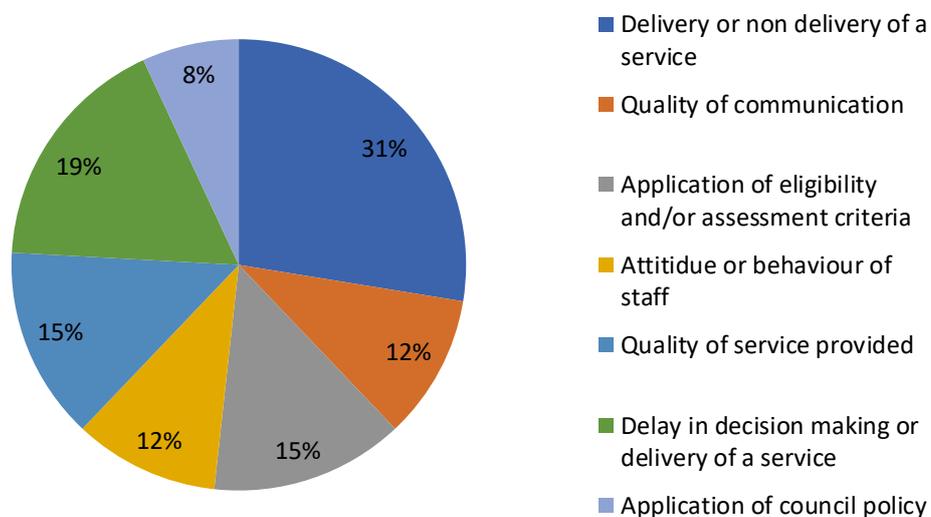


Adult social care complaints



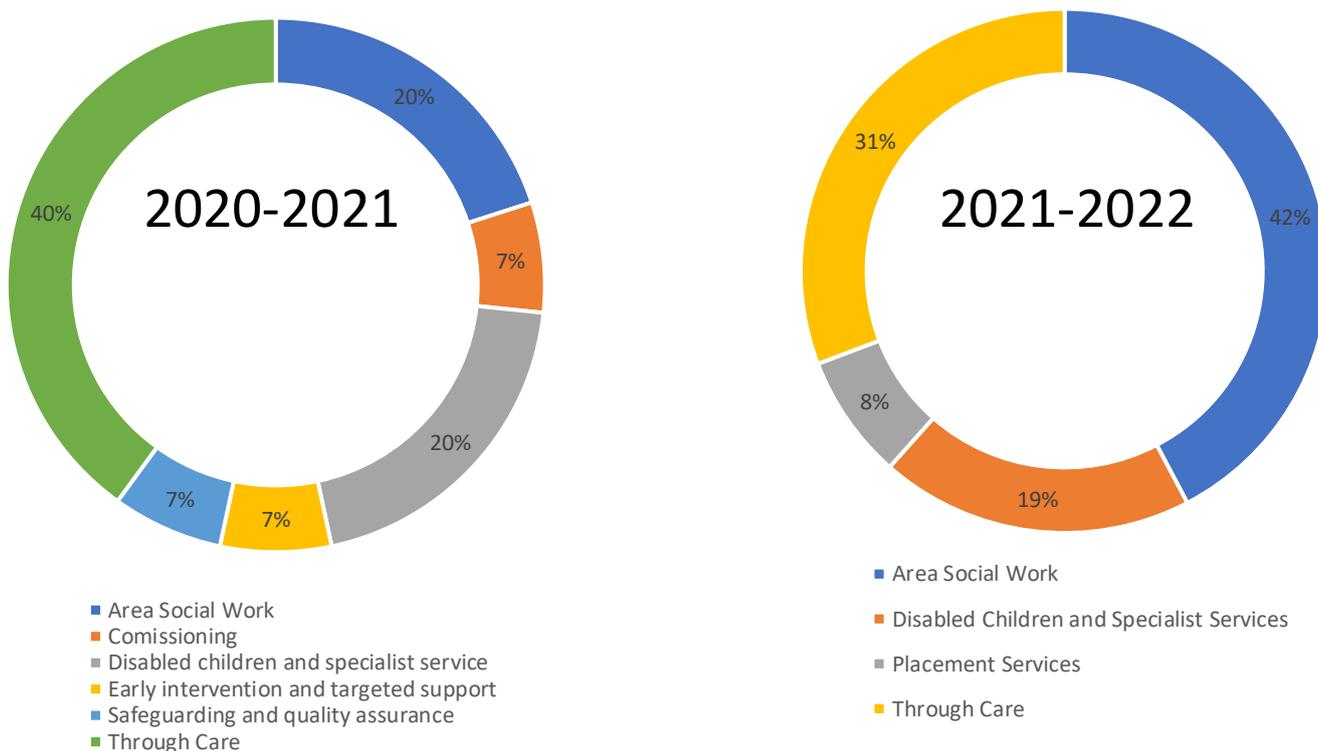
Children's social care				
Number of Social Care Complaints	Stage One	Stage Two	Stage Three	Ombudsman
2015 – 2016	18	4	4	5
2016 – 2017	23	6	3	4
2017 – 2018	27	5	2	3
2017 – 2018	21	6	1	8
2020 – 2021	15	5	2	1
2021 - 2022	21	2	2	4

Subject of complaints in children's social care



Delivery or non- delivery of a service has been widely complained about this year, particularly from parents unhappy with unwanted action taken by their children's' social workers. Service users have raised complaints over *delays* and the *quality* of their care. *Application of eligibility and/or assessment criteria* has also led to complaints from parents of disabled children who have disagreed with criteria for assessments. Parents have raised concerns over the level of *communication* from social workers, claiming that they haven't been adequately updated and disagreements between parents and their children's' social workers has led to complaints about *staff attitude or behaviour*.

Service Area of complaints in children’s social care



This year, Area Social Work has received the most complaints this year with 42%, followed by Through Care with 31% which specialises in young people leaving care. Disabled Children and Specialist Service received 19% of the complaints and Placement Services, which covers placements such as fostering received 8% of the complaints.

Children’s social care complaint outcomes

The table below shows the outcomes of complaints responded to at each stage of the procedure.

The Local Government and Social Care Ombudsman uses distinct classifications to record complaint

Outcome	Stage 1	Stage 2	Stage 3	Ombudsman
Not Upheld	5			
Partially Upheld	14	2	2	
Upheld	2			
Closed after initial enquiries – no further action				3
Upheld: Maladministration and Injustice				1

outcomes. Some complaints are not investigated after initial assessment if the Ombudsman decides evidence of fault would be unlikely.

Children's social care response performance

There are statutory deadlines for responding to social care complaints. The table in Appendix 2 shows the structure of the complaints procedure. The deadlines for response are given at each stage with the possibilities for extensions in brackets. Extensions occur where cases are complex or there are difficulties arranging meetings with a number of professionals etc. The table below shows the percentage of complaints which were responded to on time, at each stage.

Stage of procedure	2016/17	2017/18	2018/19	2020/21	2021/22
Stage 1	52%	56%	67%	80%	57%
Stage 2	100%	100%	100%	100%	50%
Stage 3	100%	50%	100%	100%	100%
Ombudsman	100%	100%	100%	100%	100%

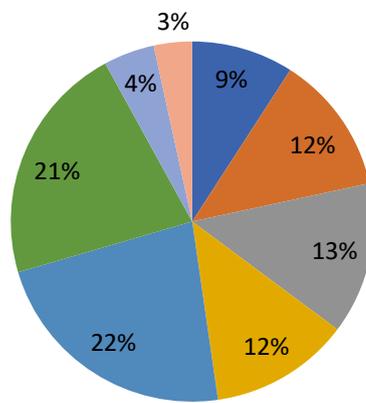
Complaints about adult services

Appendix 2 explains the statutory adult social care complaints procedure which is different from the procedure for children’s services. The tables in this section relate to complaints responded to during the period and do not include concerns or compliments. The table below shows the number of complaints responded to at each stage.

Response	2016/17	2017/18	2018/19	2020/21	2021/22
Response	90	84	114	82	87
Review	1	11	8	4	8
Ombudsman	5	3	7	3	4

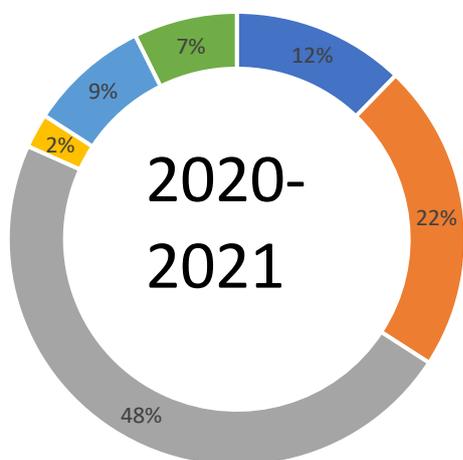
Subject of adult social care complaints

Delivery or non-delivery of service and quality of service provided have been the most frequently cited issues in adult social care, with family members expressing frustration at their perceived insufficient care for their relative. Attitude or behaviour of staff has also been a cause for complaints, with family members saying they didn’t receive the level of empathy they would expect. As in previous years, application of assessment criteria continues to generate complaints from service users and their families who believe that they are not receiving the level of care that they are entitled to and delays in decision-making or delivery of a service have also contributed toward dissatisfaction.

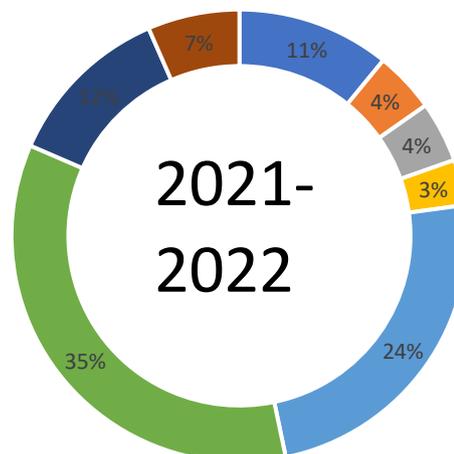


- Quality of communication
- Application of eligibility and/or assessment criteria
- Attitude or behaviour of staff
- Delay in decision making or delivery of a service
- Delivery or non delivery of a service
- Quality of service provided
- Quantity, frequency or cost of a service
- Unwelcome or disputed decision

Service areas of adult social care complaints



- Commisioning
- Hospitals and Front Door
- Maximising Independence and Specialist Teams
- Mental Health
- Re-ablement Intermediate Care and Regulated Services
- Safeguarding and DOLS



- Commisioning
- Communities South Hospitals D2A and Front Door
- Community Inner City and Easy Mental Health PSW
- Community North and West Safeguarding and DOLS PFA
- Hospitals and Front Door
- Maximising Independence and Specialist Teams
- Re-ablement Intermediate Care and Regulated Services
- Safeguarding and DOLS

Adult social care complaint outcomes

The table below shows the outcomes of complaints responded to at each stage of the adult procedure.

Outcomes	Response	Review	Ombudsman
Not Upheld	30	5	
Partially Upheld	30	3	
Upheld	27		
Withdrawn			
Review declined			
Closed after initial enquiries – no further action			1
Upheld: maladministration and injustice			1

The review stage is discretionary. If a Head of Service is satisfied that the original complaint was fully investigated and that a complete response has been provided, a review request will be declined and the complainant signposted to the Local Government and Social Care Ombudsman. The LGSCO uses distinct classifications to record complaint outcomes which are reflected above. Some complaints are not investigated after initial assessment if the Ombudsman decides evidence of fault would be unlikely.

Adult social care response performance

The Council sets a target of 15 working days for response but deadlines can be agreed between the manager with responsibility for responding to the complaint and the complainant, within six months. The manager must keep the complainant informed of any delays, giving reasons. The table below shows the percentage of complaints which were responded to on time, at each stage.

Stage of procedure	2016/17	2017/18	2018/19	2020/21	2021/2022
Response	54%	42%	66%	62%	49%
Review	0%	64%	75%	0%	50%
Ombudsman	100%	67%	86%	67%	75%

Advocacy

Children and young people are entitled to independent and confidential advocacy support to help them make social care complaints and representations. Reconstruct Advocacy provides this service. Advocates work closely with children and young people in care and frequently support them to raise concerns informally with staff so that they can be resolved without using the complaints procedure. Reconstruct also supports young people using the complaints procedure. Complaints Procedure Advocacy (CPA), part of the Care Forum, provides support to adults making complaints on behalf of children and to adults complaining in their own right about adult social care services. Complainants are supported to look at different options and possible outcomes to equip them to make informed choices. CPA works to ensure people can represent their own interests as far as possible and does not offer advice on how an individual should act. They undertake brief intervention work in the majority of cases to support people to reach an outcome quickly, including signposting, sending out self-help packs and supporting clients to self-advocate. Other clients are given more support, depending on their level of vulnerability.

Learning from complaints

One of the key principles of statutory social care complaints regulations is that local authorities learn from complaints and improve services. All actions agreed when complaints are concluded are monitored by the Customer Relations Team to ensure they are implemented within agreed timescales. Some examples of how individual complaints have led to service improvements are given here.

Children's social care

A foster carer was unhappy with a placement which they considered unsuitable and prior to which they had not been provided with sufficient information. The complainant felt that certain facts had been purposefully withheld to secure the placement. The complaint was partially upheld as the investigation found that the initial referral form had limited information on the individual needs of

the children as just the one referral was completed for all 3 siblings. In the root cause analysis of the complaint, this was identified as a process issue and now individual referral forms will be completed as opposed to a joint form so that the Placements team have all relevant information on the individual needs of each child.

A grandparent felt there had been a failure to involve her by social workers and that they conducted a Facebook search rather than consulting her directly to get a picture of the family. The complainant also felt that there had been delays on undertaking Disclosure and Barring Service (DBS) checks in a timely way. The complaint was partly upheld as the investigator found that the grandparent's input had been included but it was recognised that there had been a delay in the DBS checks being undertaken. To remedy this, the Council developed a clear process which ensures that all social workers appreciate the importance of acting in a timely to complete DBS checks and particularly in the case where an Independent Social Worker has been allocated to undertake an assessment. The investigation also found that, whilst the practice of conducting a Facebook search is in line with legislation, social workers were not aware of the policy which relates to this, the Regulation of Investigatory Powers Act 2000 (RIPA). Therefore, as a service improvement, all social workers were reminded of the RIPA policy to be applied when considering referring to social media sources for information.

A father was unhappy with the conduct of his child's social worker and felt that they were siding with the mother and not believing him. The investigation found that there had not been biased treatment however the language used by a social worker was inappropriate. Further training needs for the social worker were therefore identified and implemented through this investigation.

The father of a disabled child was unhappy with the quality of practice received from Children's Services, specifically in relation to a particular social worker who he felt had lied about his knowledge of advocacy agencies. The complaint was not upheld as the independent investigation found no fault in the social worker's handling of the case. It was, however, acknowledged that there was an independent organisation the social worker could have referred them to had he been aware of it. As a service improvement, Children's Services collated and made available to all social workers, information about independent organisations that could add value to their social work practice with children and families.

A family member and the children in her care raised concerns about the children's allocated social worker; the children did not feel that they were being heard and were being spoken to as if they were younger than they were. Ensuring all children are spoken to in an age-appropriate manner and ensuring children and carers feel listened to were identified as key issues which were addressed in supervision with the social worker in question and as a training need for the whole service.

Adult social care

A complaint was raised about the conduct of a member of staff whilst on a care visit to a service user with dementia. The complaint investigation found that the member of staff could have been provided with more background information about the service user prior to the visit and that their behaviour was unacceptable during the visit. It was agreed that the member of staff would repeat the Dementia Awareness E-Learning course and attend a Dementia Awareness session along with other new colleagues to the service. It was also agreed that the service would review what information needs to be given to visiting staff especially in a case such as this which needs to be handled in a more person-centred way according to the service user's needs/wishes.

A family member, whose mother (the service user) had already left her property for the weekend complained when her care worker arrived for a home visit. The Care worker removed the key from the key safe to gain entry and, upon leaving the mother's property, left the key in the front door for the weekend and the key safe open. Following the outcome of the complaint, feedback was provided to the care worker in question and it was agreed that the whole staff team would be given refresher training on the use of key safes.

A service user complained when a safeguarding referral wasn't adequately followed up on. It was recognised that the social worker should have followed up with the complainant to explain his decision-making and what would happen next following his visit. As a result of the complaint, the social worker in question attended an update to safeguarding training.

A service user complained following a meeting with a social worker which was arranged and went ahead without an advocate being present. The complaint investigation concluded that the meeting should have been arranged with an advocate present. Feedback was provided to the Social Worker, emphasising the importance of ensuring an advocate is present, where indicated, for discussions with individuals.

A service user disputed an invoice they had received. The complaint investigation concluded that there had been a human error in which the officer unfortunately entered the incorrect date which generated an incorrect amount. As a result, the Direct Payments Finance Team received training and systems were put in place to minimise the chance of recurrence. The number of officers focusing on Direct Payments work was also increased to enable them to work more supportively with Direct Payments recipients and their carers.

Appendix 1 – Children’s social care complaints procedure

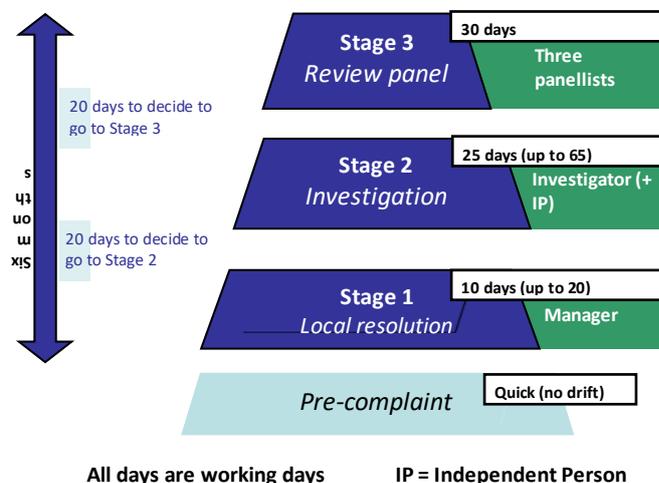
The Children Act 1989 Representations Procedure (England) Regulations 2006 requires local authorities to have in place procedures for handling complaints made by or on behalf of service users (or potential users) of social care services provided to children and young people.

The children’s social care complaints procedure consists of three stages:

- ❑ Stage 1 – Local, informal resolution (usually conducted by a first line manager)
- ❑ Stage 2 – Formal, detailed investigation (conducted by an investigator and independent person)
- ❑ Stage 3 – Formal review (considered by a panel of three independent people).

In some circumstances, a complaint can be investigated at Stage 2 of the procedure, without being considered at Stage 1. However, complainants are generally encouraged not to skip Stage 1 if local managers have not previously had an opportunity to look into the concerns raised. A review panel will only be held once a Stage 2 investigation is completed.

Structure of children’s complaints procedure



Ombudsman

At any time, complainants can approach the Local Government and Social Care Ombudsman for a review of the case. Usually, the LGSCO only considers complaints once the local authority’s complaints procedure has been fully exhausted.

Appendix 2 – Adult social care complaints procedure

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 requires local authorities to have in place procedures for handling complaints made by or on behalf of service users (or potential users) of social care services provided to adults.

When a complaint is received, a risk assessment is undertaken as follows:

Risk assessment

Step One: Decide how serious the issue is?

Seriousness	Description
Low	<p>Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care</p> <p style="text-align: center;">Or</p> <p>Unsatisfactory service or experience related to care, usually a single resolvable issue. Minimal impact and relative minimal risk to the provision of care or the service. No real risk of litigation.</p>
Medium	Service or experience below reasonable expectations in several ways, but not causing lasting problems. Has potential to impact on service provision. Some potential for litigation.
High	<p>Significant issues regarding standards, quality of care and safeguarding of or denial of rights. Complaints with clear quality assurance or risk management issues that may cause lasting problems for the organisation, and so require investigation. Possibility of litigation and adverse local publicity.</p> <p style="text-align: center;">Or</p> <p>Seriousness issues that may cause long term damage, such as grossly substandard care, professional misconduct or death. Will require immediate and in depth investigating. May involve serious safety issues. A high probability of litigation and string possibility of adverse national publicity.</p>

Step two: Decide how likely the issue is to recur

Likelihood	Description
Rare	Isolated or “one off” – slight or vague connection to service provision
Unlikely	Rare – unusual but may have happened before
Possible	Happens from time to time – not frequently or regularly.
Likely	Will probably occur several times a year
Almost certain	Recurring and frequent, predictable

Step three: Categorise the risk

Seriousness	Likelihood of recurrence				
	Rare	Unlikely	Possible	Likely	Almost Certain
Low	Low				
		Moderate			
Medium					
			High		
High				Extreme	

Response

After this, the manager dealing with the complaint develops a Complaint Investigation Plan (CIP) with the complainant which defines how the complaint will be handled and the time frame within

which it will be completed. A written response is subsequently sent to the complainant by the manager which explains how the complaint was investigated, conclusions reached and actions taken as a result of the complaint.

Review

If the complainant is not satisfied with the response, they can request a review by a more senior manager. Although not required by the regulations, the local authority will then decide whether a review is warranted and respond accordingly.

The local authority must complete its response to a complaint within 6 months of receipt. If it is unable to do this, it must provide a written explanation which outlines when they can expect to receive their response.

Ombudsman

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