



Statutory Complaints and Representations Annual Report 2015–2016

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Introduction

This report details the feedback received by the Customer Relations Team about statutory social care adult and children's services during 2015-2016, including numbers and types of concerns, complaints and, importantly, learning from complaints.

Overview

311 new compliments, concerns, representations and complaints were received between 1 April 2015 and 31 March 2016, a 14% decrease from 362 last year. The table below shows the types of feedback received.

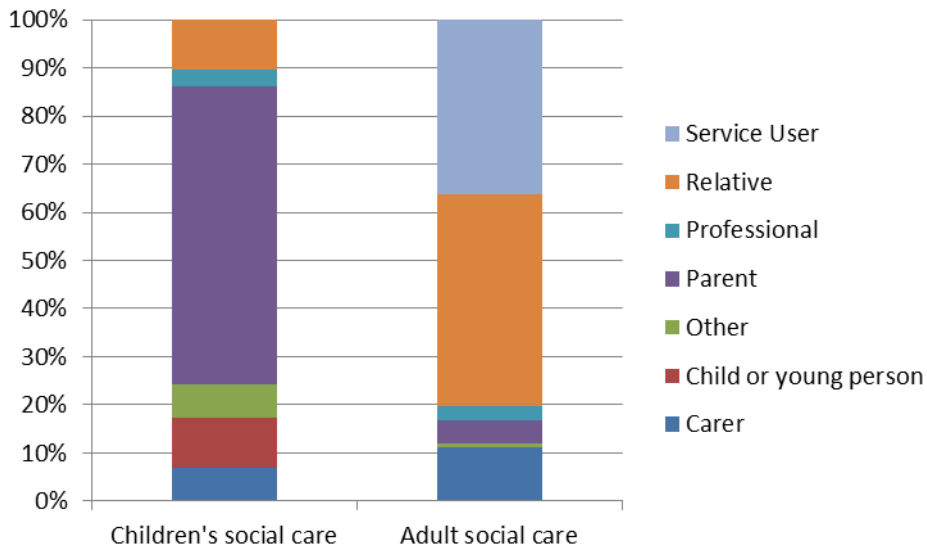
Type of Record	Children		Adults	
	No	%	No	%
Compliments	4	4%	60	29%
Concerns and representations	72	77%	28	13%
Complaints	17	18%	120	58%
Total	93	100%	208	100%

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 were resolved quickly to the satisfaction of complainants.

100 concerns and representations were responded to during the period:

- 47 were resolved
- 26 people were advised that their complaint fell outside of the complaints procedure, eg because of court proceedings relating to the complaint issues or because the person complaining did not have sufficient interest in the child or service user.
- 13 people contacted us but did not pursue their concerns when asked for further information
- 5 concerns were referred to adult or children's safeguarding services for appropriate investigation
- 4 escalated to complaints
- 2 were referred to another agency or Bristol City Council department
- 2 were anonymous enquiries or concerns which were passed to appropriate managers for their attention but no response could be given
- 1 concern about adult services was referred on and responded to by the provider of a service commissioned by the Council

Who complained or complimented



The table above provides a breakdown of the type of complainant, split into complaints about adults and children's social care services. It is usual that the majority of complaints about children's services are made by parents of children, eg of children in care or who are subject to safeguarding investigations.

Further analysis, broken down by type of complaint, follows on the next few pages.

Complaints about children's services

Appendix 1 explains the stages of the statutory children's social care complaints procedure. The tables in this section relate to complaints responded to during the period and do not include concerns or compliments.

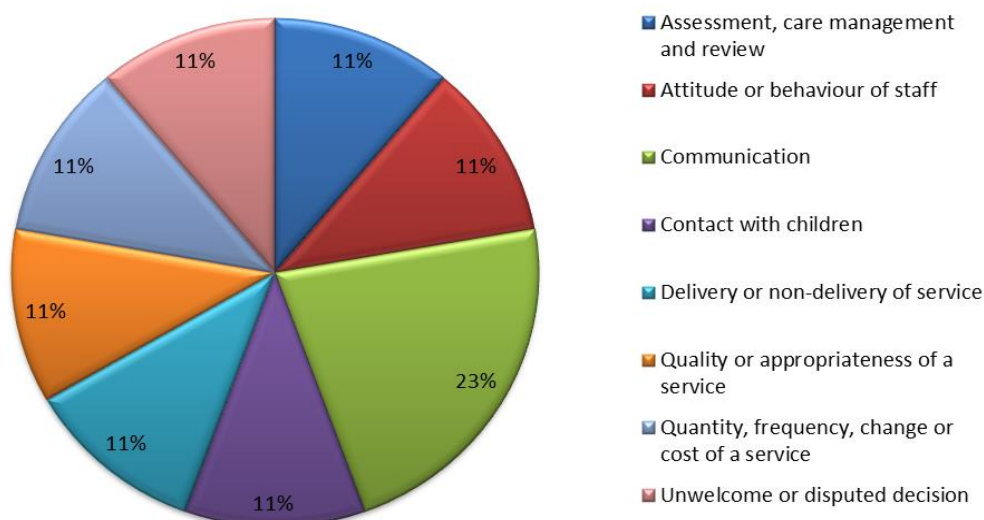
The table below shows the number of complaints responded to at each stage.

Children's social care				
Number of Social Care Complaints	Stage One	Stage Two	Stage Three	Ombudsman
2011 - 2012	23	6	0	6
2012 - 2013	20	3	1	4
2013 - 2014	22	3	1	5
2014 - 2015	22	4	4	2
2015 - 2016	18	4	4	5

In addition, 4 complaints about social care were considered using the corporate procedure. The statutory procedure is not used for complaints from people who have insufficient interest in the child in receipt of a service (eg a relative or a neighbour) or for complaints about child protection conference chairs or adoption agency issues.

There were a further four complaint investigations which began at Stage Two but were not completed. In two cases, the Investigating Officer successfully negotiated a resolution between the complainant and the service. One complaint could not proceed as the issues became subject to court proceedings. In the other case, all complaints were inconclusive at stage I as there was insufficient information on file to reach conclusions due to the historical nature of the complaint.

Subject of children's social care complaints



The table on the previous page shows the main complaint subject areas. There is a fairly even split this year although staff attitudes and communication still account for a third. Parents sometimes consider they are being unfairly judged by social workers investigating allegations of abuse or neglect as part of their statutory duties. This can result in complaints about social worker attitudes and communication.

Children’s social care complaint outcomes

The table below shows the outcomes of complaints responded to at each stage of the Children Act statutory social care complaints procedure.

Outcomes	Stage 1	Stage 2	Stage 3	Ombudsman
Not Upheld	20%	25%	50%	
Partially Upheld	60%	25%	50%	
Upheld	13%			
No conclusion	7%			
Withdrawn by complainant		25%		
Withdrawn – outside procedure		25%		
Maladministration with injustice				60%
Maladministration, no injustice				20%
Closed after initial enquiries – out of jurisdiction				20%

The Local Government Ombudsman uses distinct classifications to record complaint outcomes. Maladministration refers to Council fault. In some cases, although the Council has been at fault, it does not result in any injustice caused to the complainant or service user. Some complaints cannot be considered by the Ombudsman, often because of court proceedings or the complainant has access to other forms of redress.

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 can be agreed with complainants 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	2011/2012	2012/2013	2013/2014	2014/2015	2015/2016
Stage 1	96%	80%	55%	50%	53%
Stage 2	83%	67%	100%	75%	50%
Stage 3	N/A	100%	100%	50%	75%
Ombudsman	100%	67%	80%	100%	80%

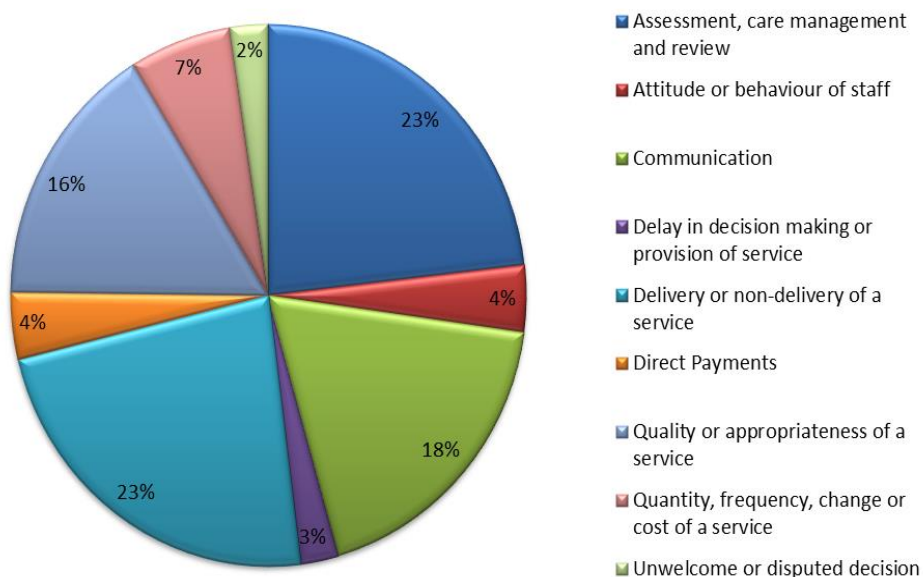
Complaints about adult services

Appendix 2 explains the statutory adults 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.

Adult social care			
Response	2013/2014	2014/2015	2015/2016
Response	117	119	92
Review	2	8	10
Ombudsman	6	4	3

Subject of adult social care complaints



11 complaints related to the quality of independent providers, 9 of which were complaints about home care, mainly about delayed or missed visits, poor communication, health and safety concerns and a lack of empathy and compassion for service users.

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%	60%	33%
Partially Upheld	40%	30%	
Upheld	20%	10%	
Withdrawn	8%		
Referred to Safeguarding	2%		
Investigation not initiated			67%

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	2013/2014	2014/2015	2015/2016
Response	42%	52%	43%
Review	50%	37.5%	20%
Ombudsman	57%	50%	67%

Advocacy

Children and young people are entitled to independent and confidential advocacy support to help them make social care complaints and representations. The Council has a service level agreement with Reconstruct to provide this service as part of a wider advocacy and participation project for children and young people. Reconstruct advocates work closely with children and young people in care and frequently support them to raise concerns informally with staff. Therefore the majority of issues raised directly by children and young people are resolved without using the complaints procedure. 7 young people were supported by Reconstruct to raise formal complaints during 2015-2016. A further 46 were supported by advocates to seek resolution to their concerns outside of 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. Different levels of support are provided, from information that can promote self-help to assisted information (including research or signposting) and general help (typically arm's length support, eg advising on process and proof reading letters drafted by clients) through to full case work. Complainants are supported to look at different options and possible outcomes to equip them to make informed choices about action which may be taken. 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.

CPA supported 4 adults making complaints on behalf of or concerning children and young people at all stages of the complaints procedure, from initial concerns to post stage three. It also supported 17 adults or their relatives/carers complaining about adult services. In addition, it supported 21 people with brief interventions demanding 30 minutes or less of an advocate's time by signposting to appropriate services and/or providing self-help packs.

Diversity monitoring

For children's services, as much information as possible is captured about the gender, ethnic background, age and disability of those who give feedback. Some information is available through the social care case management system. In addition, diversity monitoring forms are sent to people when complaints are acknowledged. However, some complainants decline to provide information. The tables in Appendix 3 outline the diversity information of complainants and service users for children's services.

For adult services, diversity information about complainants is unavailable from the case management system if the complainant is not the service user. Service user diversity information is available and provided in Appendix 3.

Quality assurance

We are keen to receive feedback from those who use our complaints procedures. For complaints about children's services, this is a requirement and a short survey is sent with the following statements once a complaint has been responded to asking complainants to tell us how satisfied they have been with each aspect:

- It was easy to find out how to make a complaint.
- I was able to speak to the manager dealing with my complaint.
- I had a written reply.
- I am happy with the way my complaint was handled.

In 2015-2016, a new computer management system was introduced and it hasn't been possible to send surveys since October 2015. This will be improved for 2016-17.

All complainants receive a written acknowledgement of their complaint. Information about response performance is available in the analysis section of this report. In 2015-2016, 18% of surveys were returned. The feedback is as follows:

- None considered it had been easy to find out how to make a complaint.
- Half said they were unable to speak to the manager dealing with their complaint.
- All stated they had a written reply. Our records show that written replies were sent to all complaints.
- None were happy with the way their complaint was handled because they were unhappy with the outcome.

Learning from complaints

One of the key principles of statutory social care complaints regulations is that local authorities learn from complaints and use this learning to improve services for everyone who uses them. Additionally, senior managers place great emphasis on the importance of learning from complaints. All actions agreed when complaints are concluded are tracked and 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

Two separate complaints from fathers, one concerning inaccuracies and omissions in a child's core assessment and the other that a child protection report was one-sided and did not represent his point of view, resulted in staff members being reminded to fully involve fathers in assessments wherever possible and ensure that the views of parents are included in appropriate parts of assessments. These issues were also addressed in subsequent training.

A former child in care complained that allegations of sexual abuse were ignored by social workers when she was a child. Some of the complaint was upheld and specific action was taken in relation to the young person as a remedy. The young person, although supported by an advocate, nevertheless found engagement with the complaints procedure to be very formal and gave helpful feedback on difficulties experienced. Consequently, a meeting was set up between Reconstruct Advocacy and relevant Council staff to discuss how to improve complaint correspondence to make it easier to read and understand. A training event is also being planned for Reconstruct advocates to improve their understanding of the complaints procedure so they can better support children and young people.

A parent complained that a social worker shared information with his child's school without his consent. The social worker recorded that verbal consent had been given. This resulted in procedures being changed to require written consent.

Adult social care

A husband complained that his wife was admitted to a nursing home against her and his will and that it was not in his wife's best interests to be there. Staff were reminded of the need to ensure good and open dialogue with service users and carers and to follow the Best Interests process set out in The Mental Capacity Act 2005 on how to work with individuals who lack mental capacity to make decisions about their care and support.

Staff were reminded about the use of interpreting services where appropriate and of not relying on family or friends after a service user complained that a social worker did not use the Council's official interpreting service.

A daughter complained about not being given enough time and support when planning her mother's discharge from a community hospital, due to staff absences. The social work team changed its practice to ensure, where possible, re-allocation to another social worker in situations where significant periods of leave are involved to provide a more continuous service.

A service user complained that she was asked to sign an inaccurate contract for respite care, was not properly welcomed on arrival and that self-catering equipment was inadequate. The provider subsequently amended misleading information in the contract about meals and laundry, developed a welcome pack for prospective respite guests which includes a list of items to bring and the cost of meals from the restaurant and equipped the flat with new pots and pans.

The mother of a man with complex needs complained about the lack of information and support she and her son received when setting up Direct Payments. The team manager reviewed the process and information sent to individuals on receipt of a referral and arranged for staff members to attend a refresher training session on Direct Payments.

Rehabilitation

A complaint from a son about the failure to adequately assess, plan, monitor and review his mother's care during her stay at an Intermediate Care Centre resulted in: the introduction of a communication book to ensure staff communicate effectively with clinical staff; improvements to the admission checklist which assesses residents' needs prior to admission so they can be planned for; more robust weekly review meetings, involving all members of the multi-disciplinary team, where goals, care plans, health and well-being and progress are discussed with all actions recorded, implemented and reviewed; improvements to daily handover systems to improve communication; more meaningful day to day recording; key workers being more accountable and responsible by understanding role limitations and when/how to seek specialist advice.

The daughter of a man with physical disabilities complained that she wasn't given training on how to care for her father after he left a rehabilitation centre. The rehabilitation centre reviewed its record keeping to include providing training to relatives when service users leave and developed a booklet of discharge information for service users and their families with a checklist of care families will provide.

Home care

A daughter complained about the quality of care her mother received from a home care provider. As a result, the agency reminded staff of the importance of maintaining good hygiene procedures at all times, following care plans. It introduced an English language assessment as part of its recruitment process and enrolled existing staff on English language courses where appropriate and recruited more supervisors. At the time, the Council was in the process of concluding a review of homecare agencies and adjusted the agency's contract with the Council to ensure a more robust service delivery.

As a result of a relative complaining about the way she was treated by staff of a home care agency, the agency advised staff on appropriate ways of speaking to relatives and conducting themselves and will monitor the conduct of staff more closely.

Appendix 1 – Children’s social care complaints procedure

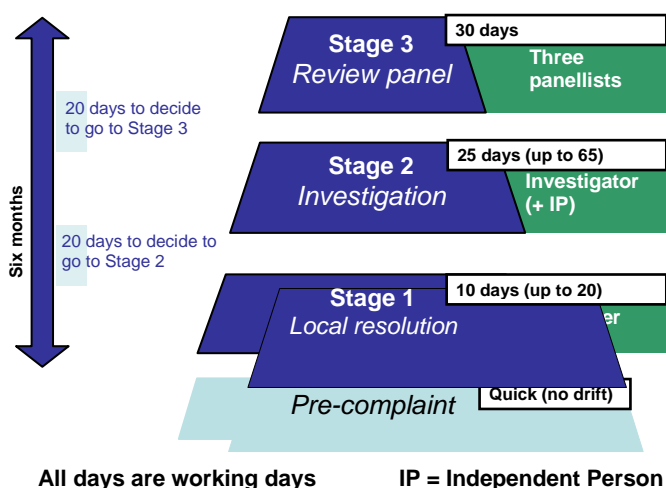
The Children Act 1989 Representations Procedure (England) Regulations 2006 requires local authorities to have in place procedures for handling complaints made by or on behalf of service users (or potential users) of social care services provided to children and young people.

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 Ombudsman for a review of the case. Usually, the LGO 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	Unsatisfactory service or experience not directly related to care. No impact or risk to provision of care Or 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.
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	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. Or 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.

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

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

Appendix 3 - Diversity monitoring

Age	Adult complaints (service users)	Children's complaints (service users)	Children's complaints (complainants)
15 or under		57%	14%
16 – 24	8%	43%	4.5%
25 – 49	19%		50%
50 – 64	16%		23%
65 – 74	32%		4.5%
75 +	20%		
Unknown	5%		4%

Disability	Adult complaints (service users)	Children's complaints (service users)	Children's complaints (complainants)
Yes	42%	8%	13%
No	25%	92%	74%
Unknown	33%		13%

Ethnic group	Adult complaints (service users)	Children's complaints (service users)	Children's complaints (complainants)
Asian	3%		
Black	14%	8%	9%
White	75%	75%	52%
Multiple	1%		
Unknown	7%	17%	39%

Gender	Adult complaints (service users)	Children's complaints (service users)	Children's complaints (complainants)
Male	36%	33%	43.5%
Female	62%	67%	43.5%
Joint			13%
Unknown	2%		