



Haverling

LONDON BOROUGH

ADJUDICATION AND REVIEW COMMITTEE AGENDA

7.00 pm	Tuesday 20 November 2018	Town Hall
----------------	-------------------------------------	------------------

Members 8: Quorum 3

COUNCILLORS:

**Conservative Group
(4)**

Maggie Themistocli
(Chairman)
Ray Best (Vice-Chair)
Joshua Chapman
Timothy Ryan (Vice-Chair)

**Residents' Group
(1)**

Ray Morgon

**Upminster & Cranham
Residents' Group
(1)**

Gillian Ford

**Independent
Residents Group'
(1)**

Jeffrey Tucker

**Labour Group
(1)**

Denis O'Flynn

**For information about the meeting please contact:
Richard Cursons Tel: 01708 432430
e-mail:richard.cursons@onesource.co.uk**

Protocol for members of the public wishing to report on meetings of the London Borough of Havering

Members of the public are entitled to report on meetings of Council, Committees and Cabinet, except in circumstances where the public have been excluded as permitted by law.

Reporting means:-

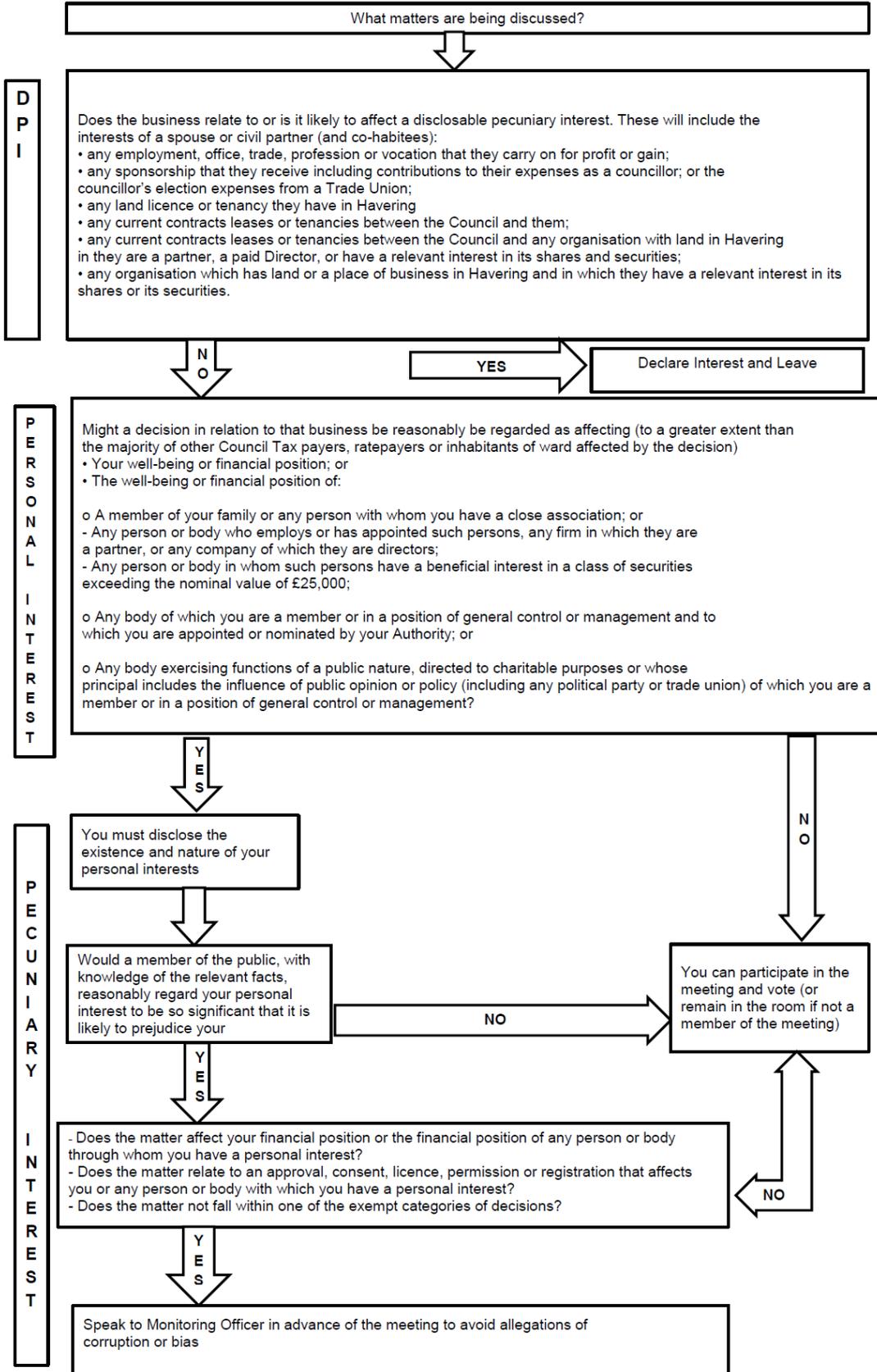
- filming, photographing or making an audio recording of the proceedings of the meeting;
- using any other means for enabling persons not present to see or hear proceedings at a meeting as it takes place or later; or
- reporting or providing commentary on proceedings at a meeting, orally or in writing, so that the report or commentary is available as the meeting takes place or later if the person is not present.

Anyone present at a meeting as it takes place is not permitted to carry out an oral commentary or report. This is to prevent the business of the meeting being disrupted.

Anyone attending a meeting is asked to advise Democratic Services staff on 01708 433076 that they wish to report on the meeting and how they wish to do so. This is to enable employees to guide anyone choosing to report on proceedings to an appropriate place from which to be able to report effectively.

Members of the public are asked to remain seated throughout the meeting as standing up and walking around could distract from the business in hand.

DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF



AGENDA ITEMS

1 CHAIRMAN'S ANNOUNCEMENTS

The Chairman will announce details of the arrangements in case of fire or other events that might require the meeting room or building's evacuation.

2 APOLOGIES FOR ABSENCE & SUBSTITUTE MEMBERS

(if any) – receive.

3 DECLARATIONS OF INTERESTS

Members are invited to declare any interests in any of the items on the agenda at this point of the meeting. Members may still declare an interest in an item at any time prior to the consideration of the matter.

4 MINUTES (Pages 1 - 4)

To approve as a correct record, the minutes of the meeting of the Committee held on 22 August 2018 and to authorise the Chairman to sign them.

5 UPDATE ON CORPORATE COMPLAINTS AND STATUTORY COMPLAINTS FOR QUARTER 2 (Pages 5 - 28)

6 ADULT SOCIAL CARE - ANNUAL COMPLAINTS REPORT 2017/18 (Pages 29 - 54)

7 CHILDREN'S SERVICES COMPLAINTS - ANNUAL COMPLAINTS REPORT 2017/18 (Pages 55 - 86)

Andrew Beesley
Head of Democratic Services

**MINUTES OF A MEETING OF THE
ADJUDICATION AND REVIEW COMMITTEE
Town Hall
22 August 2018 (7.00 - 8.00 pm)**

Present:

COUNCILLORS

Conservative Group Timothy Ryan (Vice-Chair), Maggie Themistocli (Chairman), Joshua Chapman and +Michael Deon Burton

Residents' Group Ray Morgon

Labour Group Denis O'Flynn

Upminster & Cranham Residents' Group Gillian Ford

Independent Residents Group

An apology for absence for Councillor Ray Best was received.

+Substitute Members: Councillor Michael Deon Burton (for Ray Best)

All decisions were taken with no votes against.

The Chairman reminded Members of the action to be taken in an emergency.

1 DECLARATIONS OF INTERESTS

There were no declarations made at the meeting.

2 MINUTES

The minutes of the meeting held on 20 February 2018 were agreed as a correct record and signed by the Chairman.

3 UPDATE ON CORPORATE COMPLAINTS

The Committee considered a report which provided an update on complaint handling performance across all Council services.

The Council received 452 Stage 1 complaints during the period April to June 2018. 94% of them (427) were responded to within 15 days which was a slight increase on the quarter 4 figures.

The council received 92 requests for escalation to Stage 2 of the process, 73% (67) of them dealt with within 20 days.

This equated to an escalation request rate of 20% however, this was reduced to 5% when considering the number of cases that were not escalated to Stage 2.

Appended to the report was a breakdown of cases that had been audited during quarter 1. The aim was to audit approximately ten percent of the total number of complaints received. Also appended were details of decisions that had been taken by Local Government and Housing Ombudsmen. During quarter 1 fourteen decisions had been taken.

Members were advised that the purpose of the 15 day timescale given in April 2015 for Stage 1 complaints was to enable a full and comprehensive investigation to be carried out. In many cases, the full investigation was not being undertaken until the customer requested escalation to Stage 2 of the complaints process. Whilst Stage 1 performance remained at reasonable levels, the Stage 2 process was clearly struggling.

As a result, it was therefore recommended that turnaround times for Stage 1 complaints be reduced from 15 days to 10 days, whilst increasing the Stage 2 target to 25 days.

Performance targets would remain at 95% for both stages.

Any revisions would be made to the Corporate Complaint Policy and Procedure and be signed off as an Executive Decision, with an effective date of 1 October 2018.

The Committee **RESOLVED** to note as follows:

- The Corporate Complaints Performance Statistics for Quarter 1
- The results following the Quarter 1 Audit of complaints
- Decisions made by both the Local Government and Housing Ombudsmen throughout the quarter.

4 **UPDATE ON PERFORMANCE WITH MEMBER ENQUIRIES**

The Committee considered a report that provided an update on Member Enquiries handling performance across all the Council's services.

The quarter 1 performance statistics for all Member Enquiries was appended to the report.

Members made 857 enquiries of Services during the period April to June 2018. 95% of them (811) were responded to within time; compared to the previous Quarter when 727 enquiries were received and (714) responded to within time.

For the same period in the previous year, 2017, 702 were received and 672 (95%) were dealt with in time.

Members again re-iterated the point made at the last meeting of the Committee that it was felt that the number of Members/MP Enquiries data presented was not an accurate reflection as often Members approached officers directly which by-passed the CRM process.

Members were advised that a new system of collecting enquiry information was in the pipeline and would hopefully be live by the beginning of 2019 that would enable officers to provide more accurate data in future.

The Committee **RESOLVED** to note the Member Enquiries Statistics for Quarter 1 and also that until the new system was in place to enable more accurate statistics that the member enquiry report be temporarily removed from future meeting agendas.

5 **LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN'S ANNUAL REVIEW LETTER 2017/18**

The report before Members provided details relating to the Local Government and Social Care Ombudsman's Annual Review letter.

The Council had improved results in the Ombudsman's 2017/18 letter compared to 2016/17.

This year, the LGSCO received 94 complaints and enquiries about Havering Council, against 104 the previous year. Of those 94, there were reductions for almost all Service Areas, most noticeably for Council Tax and Benefits who had seven complaints lodged against them this year; down from 16 in 2016/17

When considering the decisions made, and in particular the Detailed Investigations, 13 were Not Upheld compared to nine the previous year, (where more is better); whilst ten were upheld, against 12 in 2016/17 (where less is better). The overall uphold rate equated to 44%, down from 57%, again, less is better.

In his letter, the Ombudsman, Michael King, had emphasised the need for council's to evidence their learning from complaints. As a result, the LGSCO would be making some changes to the format of their annual letter from next year, to encourage transparency in the work of the Ombudsman's office, and also to recognise the improvements councils have made following intervention.

Appended to the Annual Review letter was the Ombudsman's activity report for 2017/18.

Members **NOTED** the contents of the Ombudsman's Annual Review letter and activity report.

Chairman

**ADJUDICATION AND REVIEW
COMMITTEE**

20 November 2018

Subject Heading:	Update on Corporate Complaints and Statutory Complaints for Quarter 2
SLT Lead:	Andrew Blake-Herbert
Report Author and contact details:	Carol Ager carol.ager@havering.gov.uk 01708 434389
Policy context:	Corporate Complaint Policy and Procedure 1st April 2015
Financial summary:	There are no financial implications to this report.

The subject matter of this report deals with the following Council Objectives

- Havering will be clean and its environment will be cared for []
- People will be safe, in their homes and in the community []
- Residents will be proud to live in Havering [X]

SUMMARY

This report updates Members of Adjudication and Review on complaint handling performance, across all Council services.

The Corporate Complaint Policy and Procedure was introduced on 1st April 2015. Turnaround were set to 15 working days for Stage 1 complaints and 20 working days for Stage 2 complaints. Services should aim to respond to 95% of cases within time.

Some changes to the Corporate timescales have been made, effective 1st October 2018, and the impact will be explored in greater detail at the next meeting of Adjudication and Review.

For the first time, quarterly statistics are being included in this report for Statutory complaints; information follows.

Statistics are reported to Committee on a quarterly basis.

This report attaches written information for Members to consider on complaint statistics for Quarter 2, indicating numbers received and performance on timeliness and quality.

RECOMMENDATIONS

That the Committee consider and discuss any further action required on the following:

1. The Corporate Complaints Performance Statistics for Quarter 2 (July – September 2018).
2. The Statutory Complaints Performance Statistics for Quarter 2 (July – September 2018).
3. Decisions made by both the Local Government and Social Care Ombudsman (LGSCO) and the Housing Ombudsman (HO) throughout the quarter.

REPORT DETAIL

The Corporate Complaints Policy and Procedure has been in place since 1st April 2015. This report summarises the performance under the Council's complaints handling process, and identifies Services response turnaround times, together with those areas in need of additional attention.

Statutory complaints, those related to the care of children and adults, are subject to a separate Statutory Complaint Policy with different timescales.

Corporate Complaints Performance Statistics

The 2nd quarter performance statistics for all complaints under the procedure is attached as **Appendix 1**.

In short, the council received 480 Stage 1 complaints during the period July to September 2018. 80% of them (383) were responded to within 15 days.

The council received 98 requests for escalation to Stage 2 of the process, 84% (82) of them dealt with within 20 days.

This equates to an escalation request rate of 20% however, this is reduced to 4% when considering the number of cases that were not escalated to Stage 2. The following table provides an easy view of the percentage of complaints completed at Stages 1 and 2.

Adjudication and Review Committee – 20th November 2018

	July	August	September
Stage 1 percentage to time	81%	79%	80%
Stage 2 percentage to time	89%	81%	82%
Cumulative percentage Stages 1 & 2	82%	79%	80%

Results for Quarter 2 are disappointing, bearing in mind the target is 95%. However, this has been discussed at length at previous meetings and as result, a review was carried out into the effectiveness of the timescales set out in the Corporate Complaint Policy. A number of changes were made and this will be reflected in the Quarter 3 reporting period.

Statutory Complaints Performance Statistics

Quarters 1 and 2 statutory complaints statistics for Children's Social Care and Adult Social Care are shown at Appendix 2.

There has been a slight increase in Children's statutory complaints in Q1 (35) and Q2 (23) overall of 2% in 2018-2019 (58) compared to the same period in 2017-18 (57). Adult statutory complaints has seen a slight decrease in 2018-19 for Q1 (20) and Q2 (20) overall of 7% (40) compared to 2017-18 (43) in the same period.

Performance on response times for statutory complaints still require improvement with Adults having 65% (13 of 20) responded to within timescale in Q1 and 55% (11 of 20) in Q2 and Children's having 34% (12 of 35) in Q1 and 61% (14 of 23) in Q2. There was one escalation to Stage 2 in Q1 and 4 in Q2 for Children's Services within the statutory process

Ombudsmen Decisions

During Quarter 2 there were 19 decisions by Local Government and Social Care Ombudsman and the Housing Ombudsman, as follows:

- 8 x Closed after initial enquiries: No further action
(*Environment (3); Planning & Building Control; Housing (3); Council Tax & Benefits*)
- 4 x Closed after initial enquiries: Out of jurisdiction
(*Adult Services; Housing (3)*)
- 3 x Closed: Premature
(*Adult Services; Children's Services; Environment*)
- 1 x Not upheld: No maladministration
(*Planning & Building Control*)
- 1 x Upheld: Maladministration, injustice, no penalty
(*Adult Services*) **S**
- 2 x Upheld: Maladministration, injustice with penalty
(*Adult Services; Learning & Achievement*) **S**

There were no Housing Ombudsman decisions during the period.

Adjudication and Review Committee – 20th November 2018

See table below for comparison of significant (**S**) decisions made for Quarter 2 in 2017 and 2018:

Significant decisions (where maladministration and injustice found)				
	Quarter 2 2017		Quarter 2 2018	
Maladministration, injustice with penalty	1	Housing	2	Adult Services; Learning & Achievement
Maladministration, injustice, no penalty	0		1	Adult Services

Quarter 2 Ombudsman decisions are shown in more detail on attached Appendix 3.

IMPLICATIONS AND RISKS

There are no financial, legal, human resource or equality implications or risks from this report.

BACKGROUND PAPERS

The Corporate Complaints Policy and Procedure is published on the internet and as it has been mentioned previously, may provide background to the information in this report.

Attached are two appendices:

- Appendix 1 – Quarter 2 Corporate Complaints statistics
- Appendix 2 – Quarter 2 Statutory Complaints statistics
- Appendix 3 – Ombudsman Activity Report for Quarter 2

The Council defines a complaint as any expression of dissatisfaction about the Council's provision of, or failure to provide, a service for which it has responsibility and when it has not put right any service failure in a reasonable timescale.

In line with the Corporate Complaints Policy and Procedure, the timescales in which we have to respond to a complaint are 15 days for a Stage 1, 20 days for a Stage 2 and 31 calendar days for a Stage 3 (Adjudication and Review). The target to achieve for both Stages 1 and 2 is 95% to time

The information on the following pages shows:

The number of complaints logged at Stage 1 and Stage 2 against the service area and the response times
 A graphic of Stage 1 and Stage 2 by topic showing those logged, closed or still open
 The specifics of complaints that are outside the corporate target and remain open that need attention
 The method of contact by our customers
 The cumulative total of complaints from the previous quarter and the build up to this quarter
 The complaint outcomes
 The reasons for complaints
 Stage 3 complaints and the outcome
 Cumulative complaint figures for both Stage 1 and Stage 2 complaints from April 2018 until March 2019

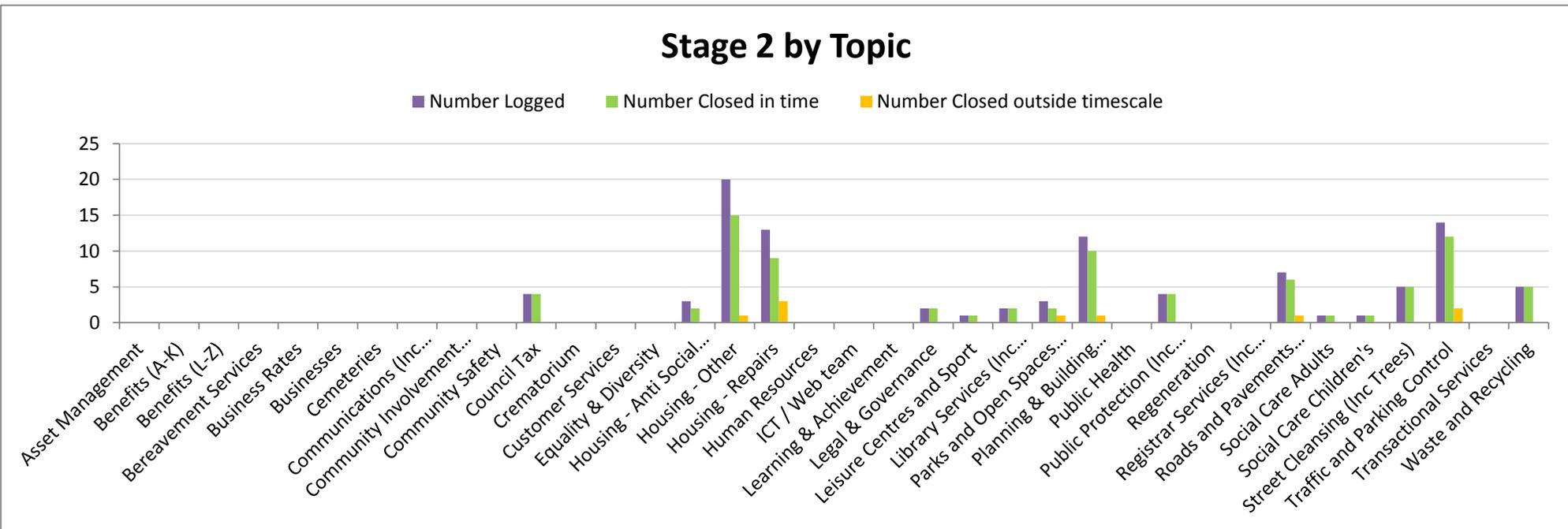
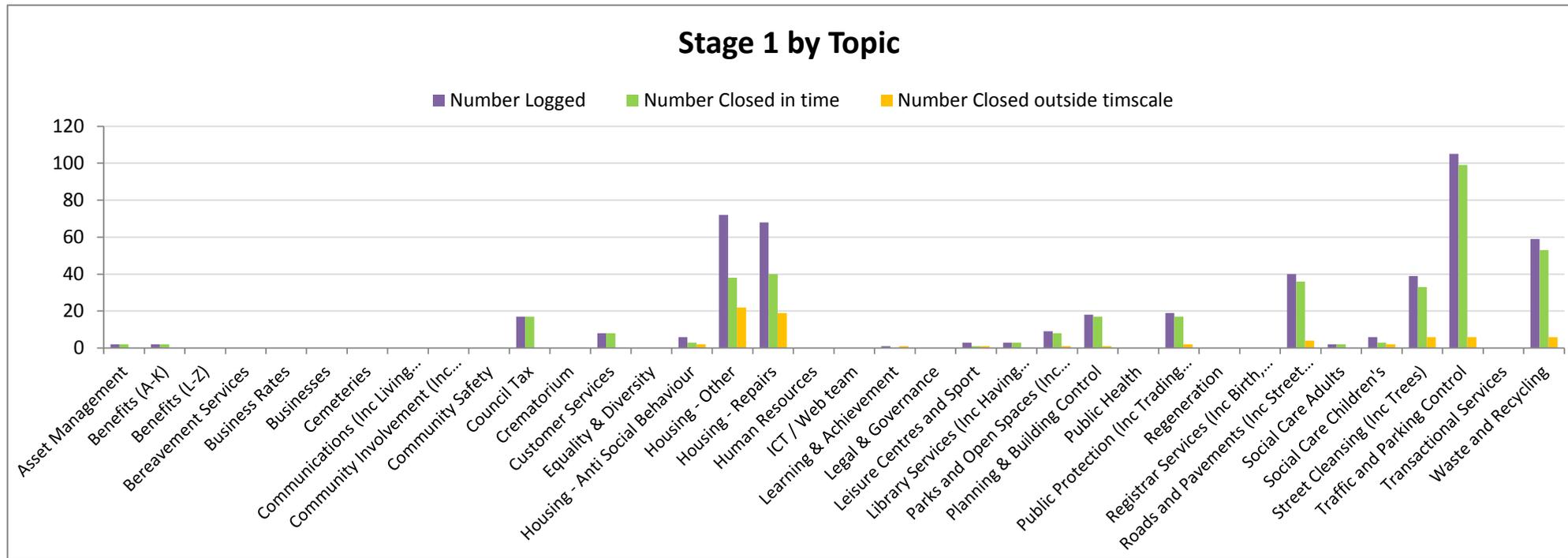
Performance for Quarter 2 (in short) is therefore:

Stage 1 percentage to time overall	80% (383/480)
Stage 2 percentage to time	84% (82/98)
Stage 3 percentage to time	0% (one case)
Stage 1 & 2 cumulative score	80% (465/578)

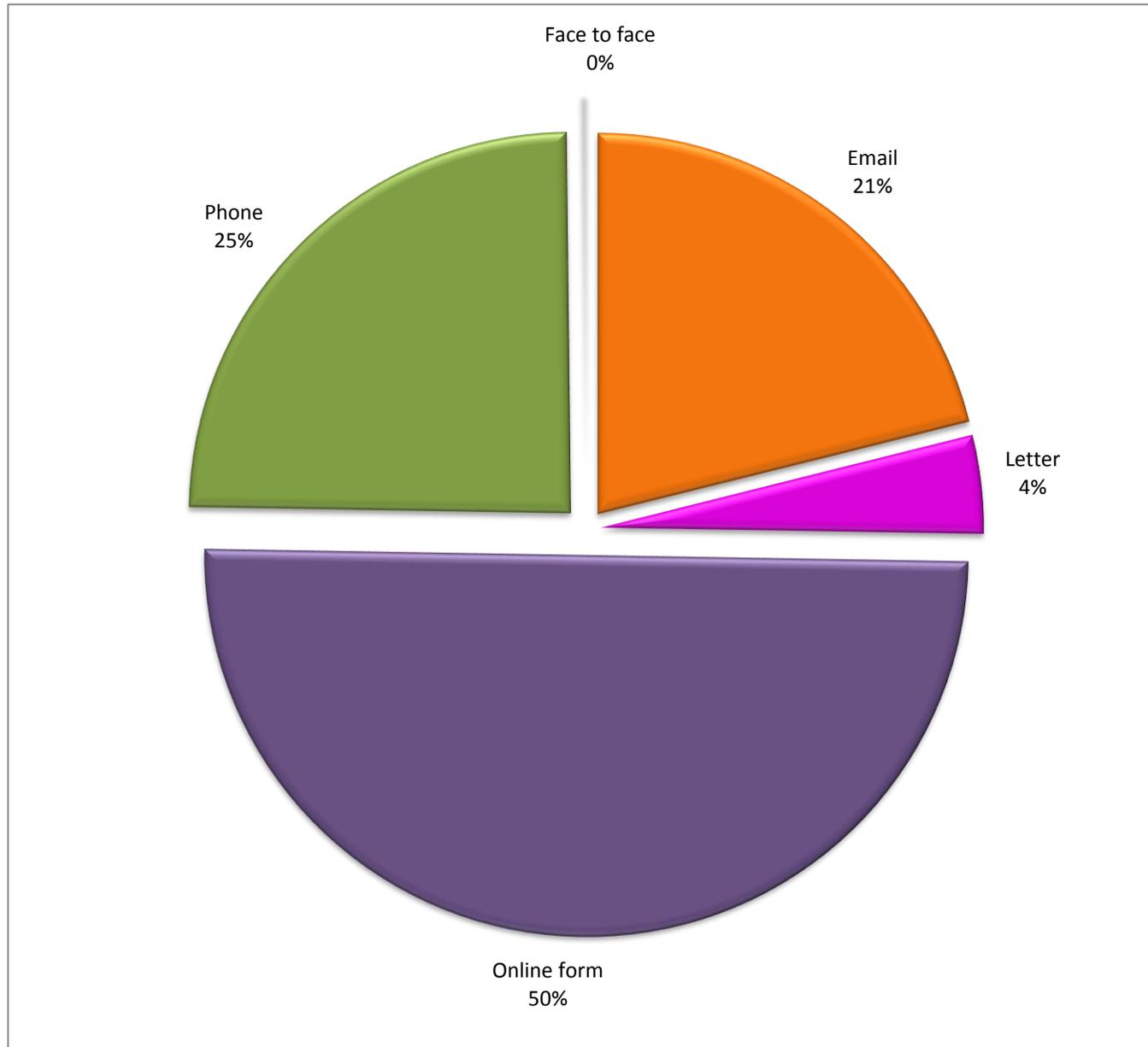
Senior Leadership Complaints team
 12th November 2018

Corporate Complaints Report - Quarter 2 July to September 2018

	Stage 1					Stage 2				
	Number Logged	Closed in 15 days	Closed in 15 days (%)	Closed over 15 days	Still open	Number Logged	Closed in 20 days	Closed in 20 days (%)	Closed over 20 days	Still open
Art Services	1	1	100%			1	1	100%		
Asset Management	2	2	100%							
Benefits (A-K)	2	2	100%							
Benefits (L-Z)										
Bereavement Services										
Business Rates										
Businesses										
Cemeteries										
Communications (Inc Living Magazine)										
Community Involvement (Inc Volunteers)										
Community Safety										
Council Tax	17	17	100%			4	4	100%		
Crematorium										
Customer Services	8	8	100%							
Equality & Diversity										
Housing - Anti Social Behaviour	6	3	50%	2	1	3	2	67%	1	
Housing - Other	72	38	53%	25	9	20	15	75%	3	2
Housing - Repairs	68	40	59%	22	6	13	9	69%	3	1
Human Resources										
ICT / Web team										
Learning & Achievement	1	0	0%	1						
Legal & Governance						2	2	100%		
Leisure Centres and Sport	3	1	33%	1	1	1	1	100%		
Library Services (Inc Having Museum)	3	3	100%			2	2	100%		
Parks and Open Spaces (Inc allotments)	9	8	89%	1		3	2	67%	1	
Planning & Building Control	18	17	94%	1		12	10	83%	2	
Public Health										
Public Protection (Inc Trading Standards, Environmental Health & Noise Nuisance)	19	17	89%	2		4	4	100%		
Regeneration										
Registrar Services (Inc Birth, Death and Marriages)										
Roads and Pavements (Inc Street Lighting)	40	36	90%	4		7	6	86%	1	
Social Care Adults	2	2	100%			1	1	100%		
Social Care Children's	6	3	50%	3		1	1	100%		
Street Cleansing (Inc Trees)	39	33	85%	6		5	5	100%		
Traffic and Parking Control	105	99	94%	6		14	12	86%	2	
Transactional Services										
Waste and Recycling	59	53	90%	6		5	5	100%		
Total	480	383	80%	80	17	98	82	84%	13	3



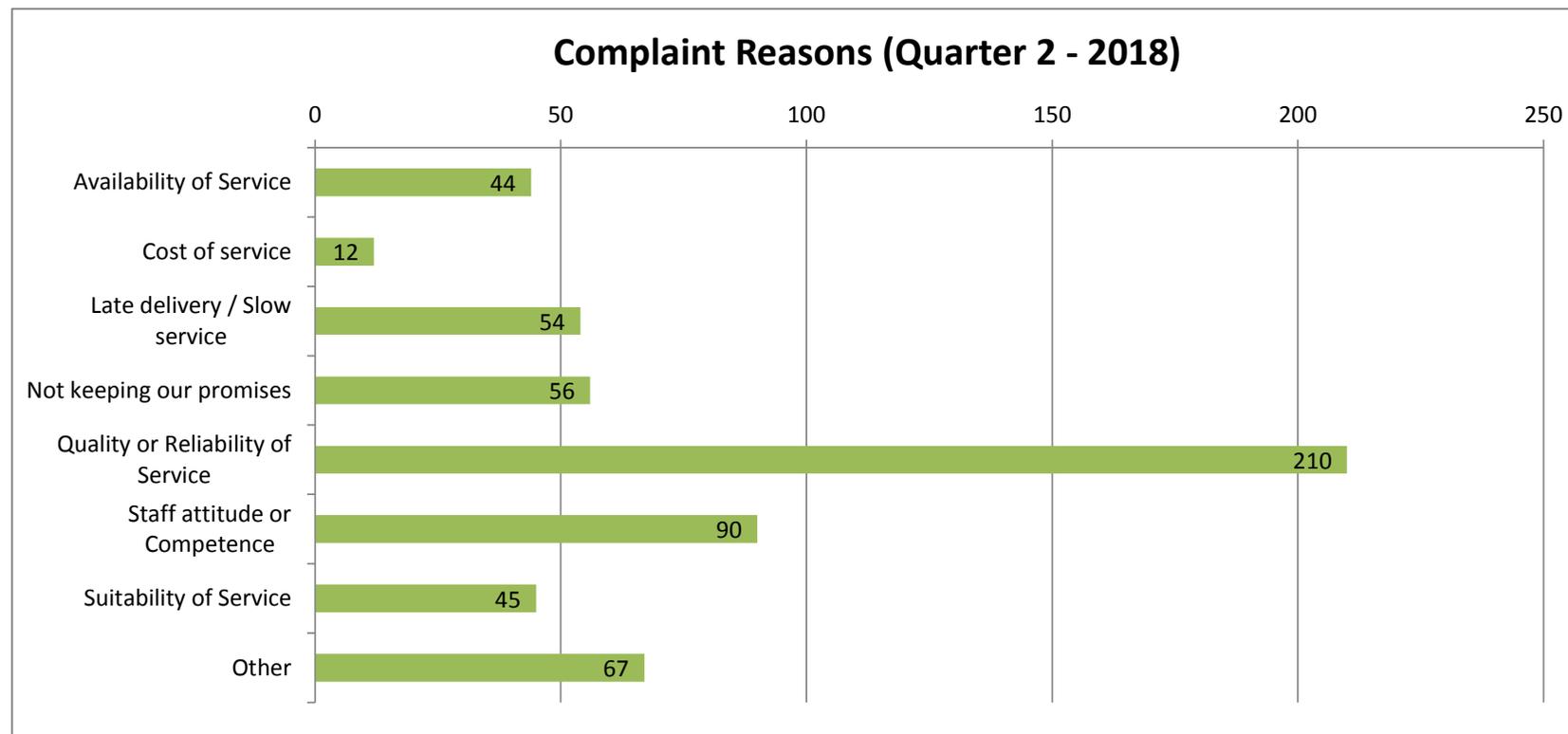
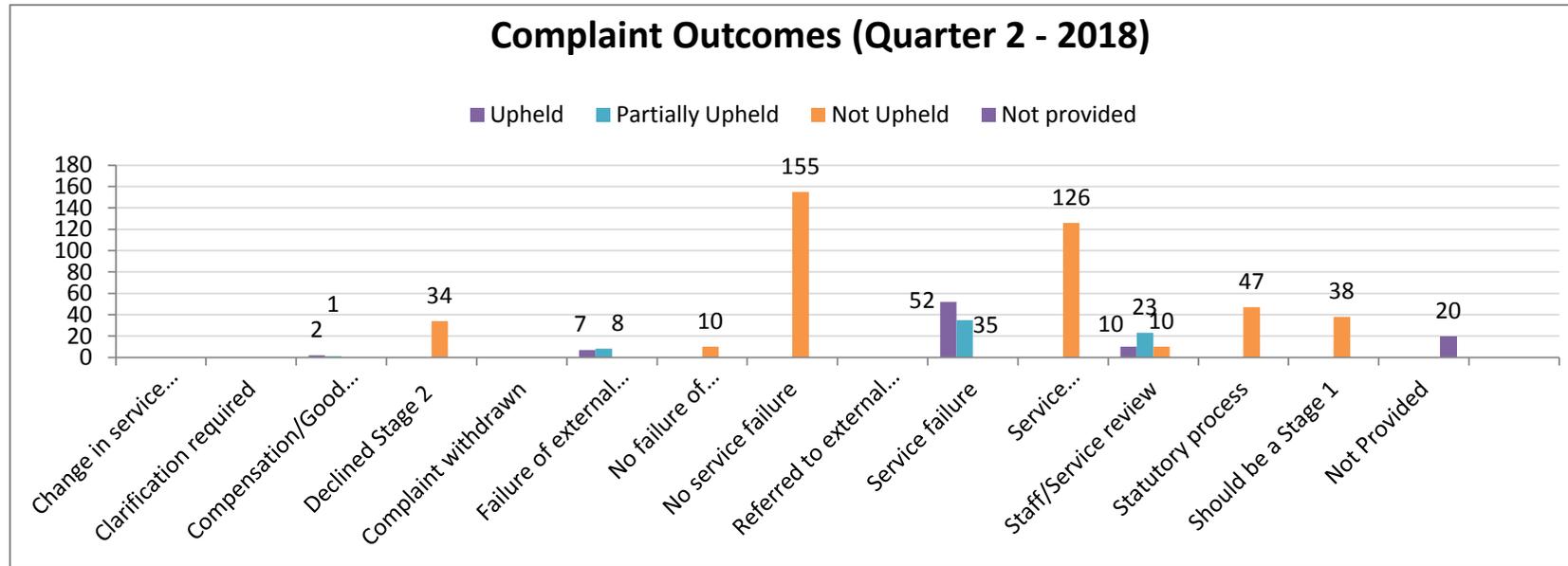
Quarter 1 Contact Type



Corporate Complaints Report - Quarter 2 July to September 2018

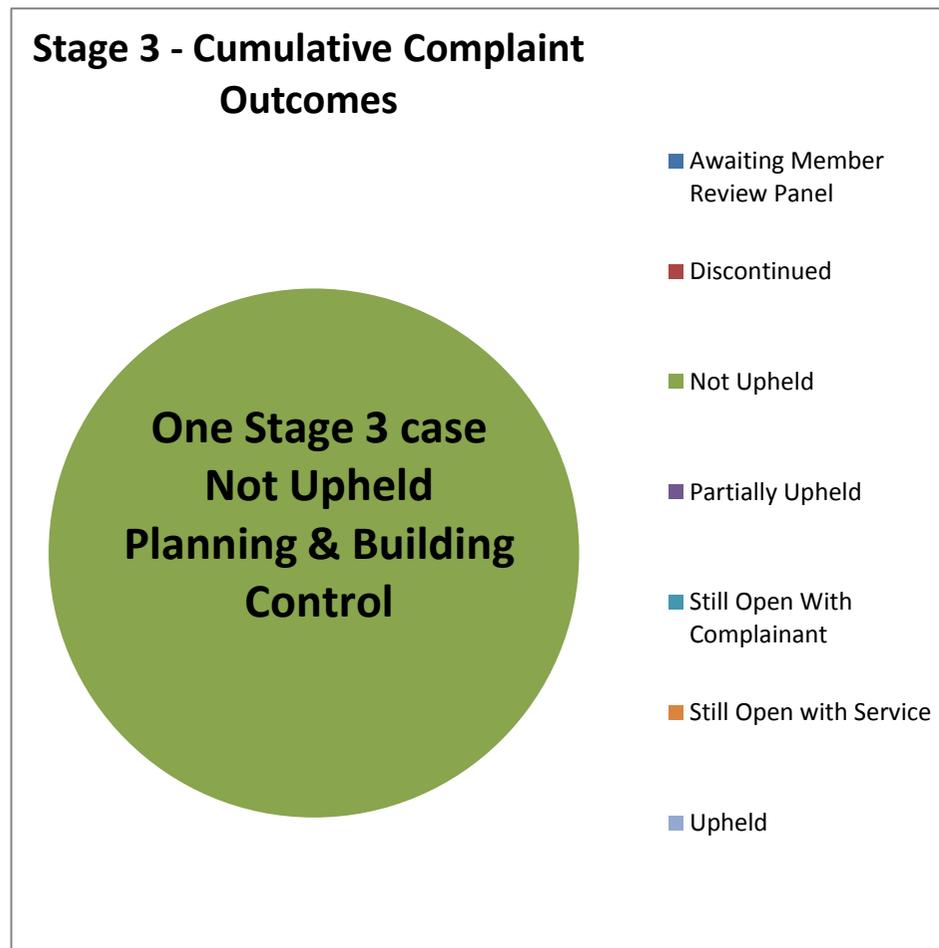
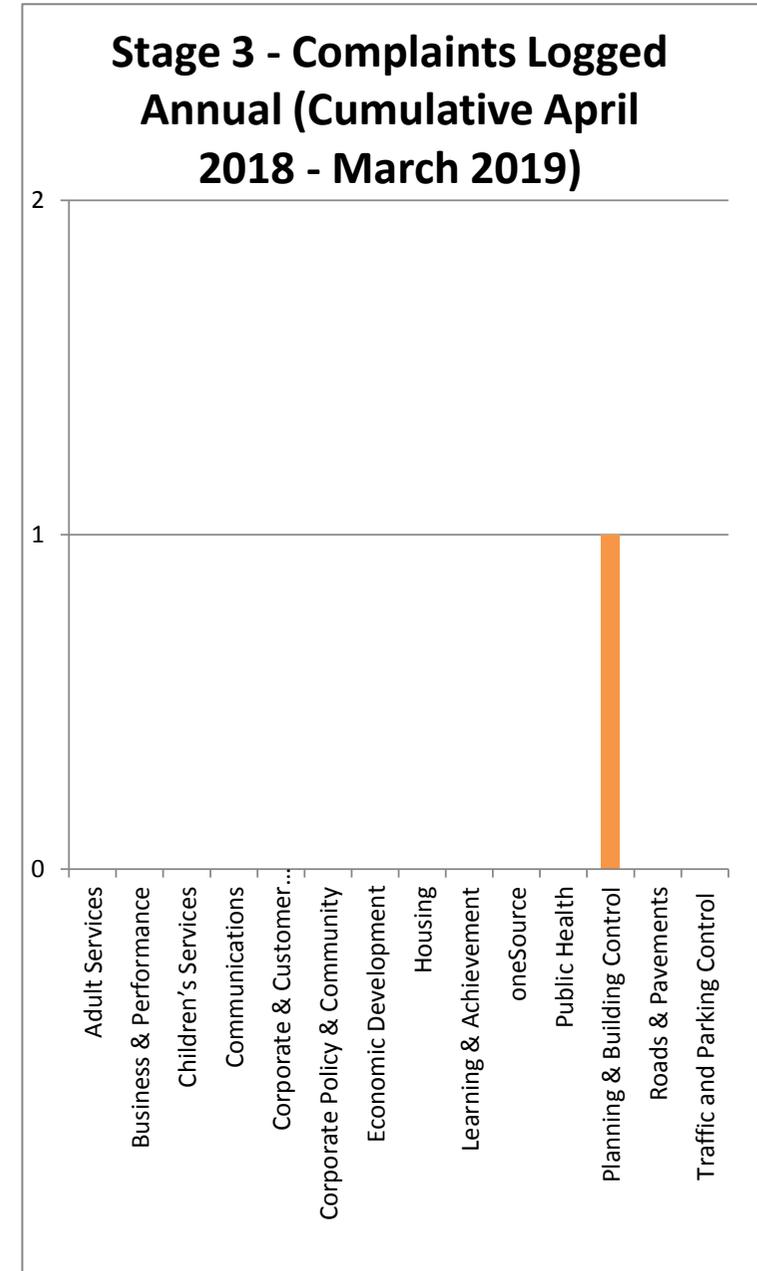
	Carry Over	July				August				September				Total
	Cumulative (Apr - Jun)	Stage 1 logged	In 15 days (%)	Stage 2 Logged	In 20 days (%)	Stage 1 logged	In 15 days (%)	Stage 2 Logged	In 20 days (%)	Stage 1 logged	In 15 days (%)	Stage 2 Logged	In 20 days (%)	Cumulative*
Art Services	0	1	100%	1	100%									1
Asset Management	2	1	100%			1	100%							4
Benefits (A-K)	1	1	100%											2
Benefits (L-Z)	1					1	100%							2
Bereavement Services	1													1
Business Rates	0													0
Businesses	0													0
Cemeteries	0													0
Communications (Inc Living	0													0
Community Involvement (Inc	0													0
Community Safety	0													0
Council Tax	21	5	100%	3	100%	6	100%	1	100%	6	100%			38
Crematorium	1													1
Customer Services	10	4	100%			3	100%			1	100%			18
Equality & Diversity	0													0
Housing - Anti Social Behaviour	9	2	100%			3	33%	2	50%	1	0%	1	100%	15
Housing - Other	66	18	83%	1	100%	33	42%	11	82%	21	43%	8	63%	138
Housing - Repairs	65	25	76%	5	60%	18	50%	2	100%	25	48%	6	67%	133
Human Resources	0													0
ICT / Web team	0													0
Learning & Achievement	0									1	0%			1
Legal & Governance	4			2	100%									4
Leisure Centres and Sport	1	1	100%			1	0%			1	0%	1	100%	4
Library Services (Inc Having	5	1	100%							2	100%	2	100%	8
Parks and Open Spaces (Inc	14	6	83%	1	100%	1	100%	1	0%	2	100%	1	100%	23
Planning & Building Control	15	3	67%	3	67%	9	100%	4	75%	6	100%	5	100%	33
Public Health	0													0
Public Protection (Inc Trading	12	6	83%			5	80%	3	100%	8	100%	1	100%	31
Regeneration	0													0
Registrar Services (Inc Birth,	4													4
Roads and Pavements (Inc Street	43	13	69%	2	100%	15	100%	2	50%	12	100%	3	100%	83
Social Care Adults	1	1	100%	1	100%	1	100%							3
Social Care Children's	1	3	87%			3	33%	1	100%					7
Street Cleansing (Inc Trees)	30	12	58%		100%	16	94%	4	100%	11	100%	1	100%	69
Traffic and Parking Control	88	36	83%	7	100%	35	100%	5	80%	34	100%	2	50%	193
Transactional Services	1													1
Waste and Recycling	56	22	86%	2	100%	19	95%	1	100%	18	89%	2	100%	115
Stage 1 Logged (Total)	452	161				170				149				932
Completed in 15 days (%)	94%		81%				79%				80%			
Stage 2 logged (Total)	92			28				37				33		190
Completed in 20 days (%)	73%				89%				81%				82%	

* Annual cumulative count does not include Stage 2 as these complaints will have been counted as Stage 1 at some point during the year.



Detailed Summary of Stage 3 Complaints recorded for Quarter 2 2018

	Cumulative (April-Jun)	Jul-18	Aug-18	Sep-18	Total	Resolved within 31 Calendar
Planning & Building Control	0	1	0	0	0	0%
Total Logged	0	1	0	1	0	



Corporate Complaints Report - Quarter 2 July to September 2018

	Cumulative numbers logged April 17 - March 18 (Stage 1&2)	% of total	April '18	May '18	June '18	July '18	August '18	September '18	October '18	November '18	December '18	January '19	February '19	March '19
Asset Management	4	0.36%	0	1	1	2	0	0						
Benefits (A-K)	3	0.27%	0	1	0	1	1	0						
Benefits (L-Z)	4	0.36%	1	0	2	1	0	0						
Bereavement Services	2	0.18%	0	1	0	0	1	0						
Business Rates	0	0.00%	0	0	0	0	0	0						
Businesses	0	0.00%	0	0	0	0	0	0						
Cemeteries	0	0.00%	0	0	0	0	0	0						
Communications (Inc Living	0	0.00%	0	0	0	0	0	0						
Community Involvement (Inc	0	0.00%	0	0	0	0	0	0						
Community Safety	0	0.00%	0	0	0	0	0	0						
Council Tax	27	2.41%	6	15	6	0	0	0						
Crematorium	22	1.96%	0	1	0	8	7	6						
Customer Services	11	0.98%	3	5	3	0	0	0						
Equality & Diversity	8	0.71%	0	0	0	4	3	1						
Havering Music School	0	0.00%	0	0	0	0	0	0						
Housing - Anti Social Behaviour	12	1.07%	2	6	4	0	0	0						
Housing - Other	93	8.29%	24	29	31	2	5	2						
Housing - Repairs	171	15.24%	37	26	16	19	44	29						
Human Resources	81	7.22%	0	0	0	30	20	31						
ICT / Web team	0	0.00%	0	0	0	0	0	0						
Learning & Achievement	1	0.09%	0	0	0	0	0	1						
Legal & Governance	6	0.53%	2	0	2	2	0	0						
Leisure Centres and Sport	6	0.53%	1	1	0	1	1	2						
Library Services (Inc Having	10	0.89%	1	2	2	1	0	4						
Parks and Open Spaces (Inc	28	2.50%	7	6	3	7	2	3						
Planning & Building Control	53	4.72%	6	12	5	6	13	11						
Public Health	0	0.00%	0	0	0	0	0	0						
Public Protection (Inc Trading	37	3.30%	4	4	6	6	8	9						
Regeneration	0	0.00%	0	0	0	0	0	0						
Registrar Services (Inc Birth, Death	5	0.45%	0	4	1	0	0	0						
Roads and Pavements (Inc Street	93	8.29%	18	22	6	15	17	15						
Social Care Adults	4	0.36%	0	1	0	2	1	0						
Social Care Children's	10	0.89%	1	1	1	3	4	0						
Street Cleansing (Inc Trees)	75	6.68%	9	9	13	12	20	12						
Traffic and Parking Control	226	20.14%	29	48	30	43	40	36						
Transactional Services	1	0.09%	1	0	0	0	0	0						
Waste and Recycling	129	11.50%	15	18	32	24	20	20						
Total Complaints logged	1122		167	213	164	189	207	182	0	0	0	0	0	0
Overall % of complaints 1&2 completed within time				91%			80%		#DIV/0!			#DIV/0!		

Corporate Complaints Report - Quarter 2 July to September 2018

	Availability of service	Late Delivery/Slow Service	Not keeping our promises	Quality or reliability of service	Cost of Service	Staff attitude or competence	Suitability of Service	Other	Total
Art Services						2			2
Asset Management		1		1					2
Benefits (A-K)						1			1
Benefits (L-Z)					1				1
Bereavement Services									0
Business Rates									0
Cemeteries									0
Communications (Inc Living Magazine)									0
Council Tax		2		3	3	9	3	1	21
Crematorium									0
Customer Services		2	1	2		2		1	8
Community Safety									0
Housing - Anti Social Behaviour	1		1	6		1			9
Housing - Other	4	9	14	25	2	11	3	24	92
Housing - Repairs	4	15	11	34		1	3	13	81
Learning & Achievement								1	1
Legal & Governance		2							2
Leisure Centres and Sport	1			1		2			4
Library Services (Inc Having Museum)				2	1	2	1		6
Parks and Open Spaces (Inc allotments)	1	1	1	4		2	3		12
Planning & Building Control	1	7	2	10	2	3	3	1	29
Public Health									0
Public Protection (Inc Trading Standards, Environmental Health & Noise Nuisance)		2	1	14		4	1	1	23
Registrar Services (Inc Birth, Death and Marriages)									0
Roads and Pavements (Inc Street Lighting)	7	2	7	19		1	8	3	47
Social Care Adults				3					3
Social Care Children's		1		4			2		7
Street Cleansing (Inc Trees)	1	2	4	22		9	3	3	44
Traffic and Parking Control	17	2	10	33	3	31	12	11	119
Transactional Services									0
Waste and Recycling	7	6	4	27		9	3	8	64
Total:	44	54	56	210	12	90	45	67	578

This table shows the breakdown of complaint reasons for each service area for Stages 1 and 2.

This page is intentionally left blank

The Council defines a complaint as any expression of dissatisfaction about the Council's provision of, or failure to provide, a service for which it has responsibility and when it has not put right any service failure in a reasonable timescale.

Adult Social Care do not have statutory timescales, however these are in line with the Statutory regulations for Children's timescales as follows: to respond to a complaint within 10 - 20 working days for Stage 1, 25-65 working days for Stage 2 (independent investigation) and 45 working days for Review Panel. The Review Panel involves Panel to be held within 30 working days of request, report and recommendations to be sent to Director within 5 working days of the Review Panel and Director issues response within 15 working days on receipt of the report. The target to achieve for Stages 1 and 2 is 95% to time

The information on the following pages shows:

- The number of complaints logged at Stage 1 and Stage 2 against the service area and the response times
- A graphic of Stage 1 and Stage 2 by Service showing those logged, closed or still open
- The method of contact by our customers
- The cumulative total of complaints from the previous quarter and the build up to this quarter
- The complaint outcomes
- The reasons for complaints
- Stage 3 complaints
- Cumulative complaint figures for both Stage 1 and Stage 2 complaints from April 2018 until September 2018

Performance for April to September 2018 (Quarter1 & 2) in short is therefore:

Stage 1 percentage to time overall	51%	(50/98)
Stage 2 percentage to time	0	0
Stage 3 percentage to time	0	0
Stage 1 & 2 cumulative score		

Social Care Complaints team

Statutory Complaints Quarter 1 and 2 Report April to September 2018

	Stage 1					Stage 2					Explanation of late response to Stage 1&2
	Number Logged	Within 20 days	Within 20 days (%)	Over 20 days	Over 20 days and still open	Number Logged	Closed in 20 days	Closed in 20 days (%)	Closed over 20 days	days and still open	
Social Care Adults - Statutory	40	24	60%	12							
Social Care Children's - Statutory	58	26	45%	25							
Total	98	50	51%	37							0

Adults - 6 withdrawn
 Children's 7 withdrawn

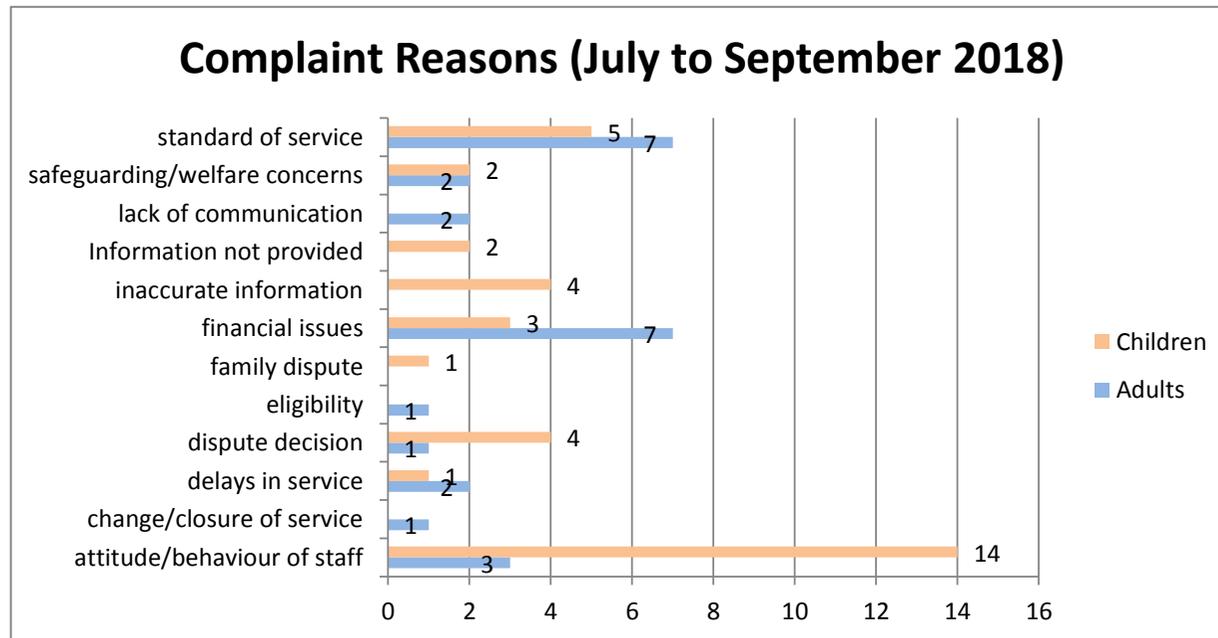
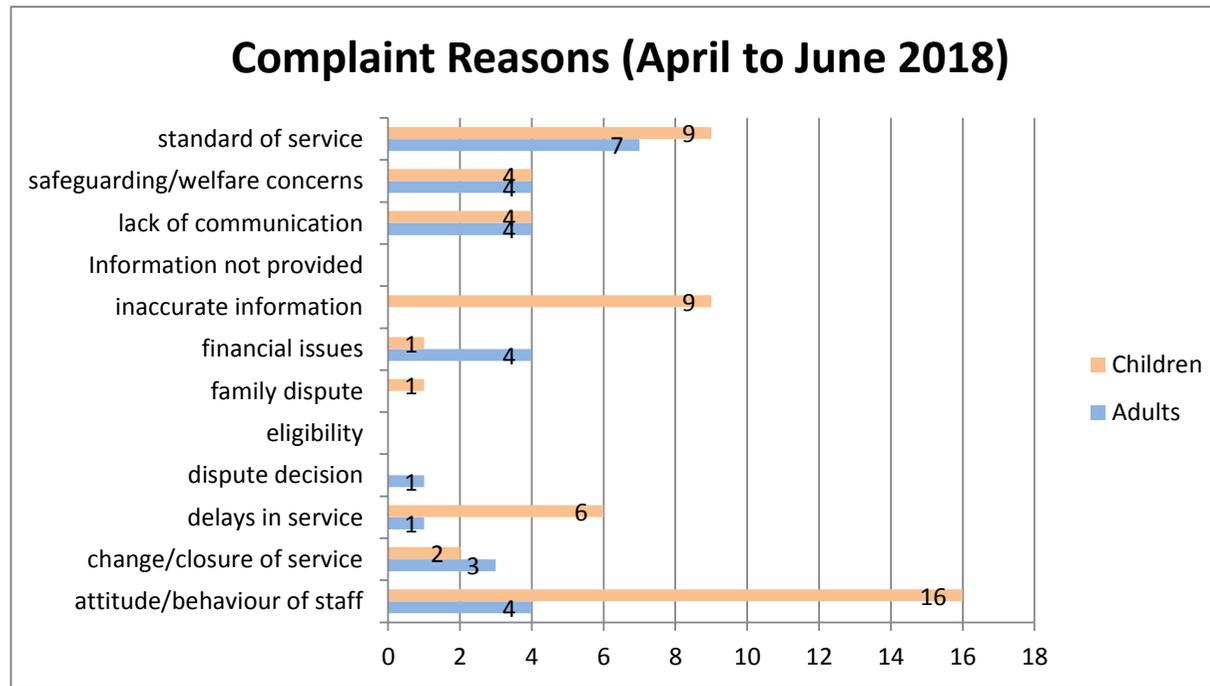
Showing this quarters performance

	Carry Over	April				May				June				Total
	Cumulative (Apr - Jun)	Stage 1 logged	In 20 days (%)	Stage 2 Logged	In 20 days (%)	Stage 1 logged	In 20 days (%)	Stage 2 Logged	In 20 days (%)	Stage 1 logged	In 20 days (%)	Stage 2 Logged	In 20 days (%)	Cumul ative*
Social Care Adults - Statutory		7	50%			6	83%			7	71%			20
Social Care Children's - Statutory		10	50%			14	36%			11	18%			35
Stage 1 Logged (Total)														55
Completed in 20 days (%)														
Stage 2 logged (Total)												1		
Completed in 25-65 days (%)														

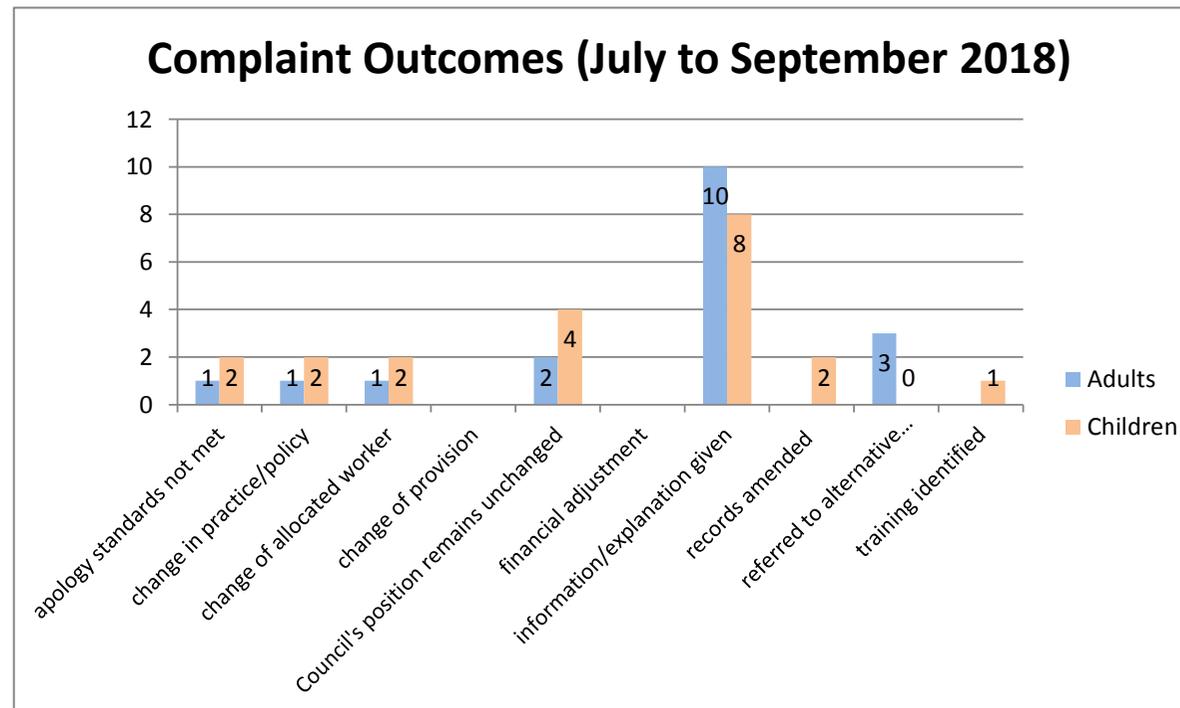
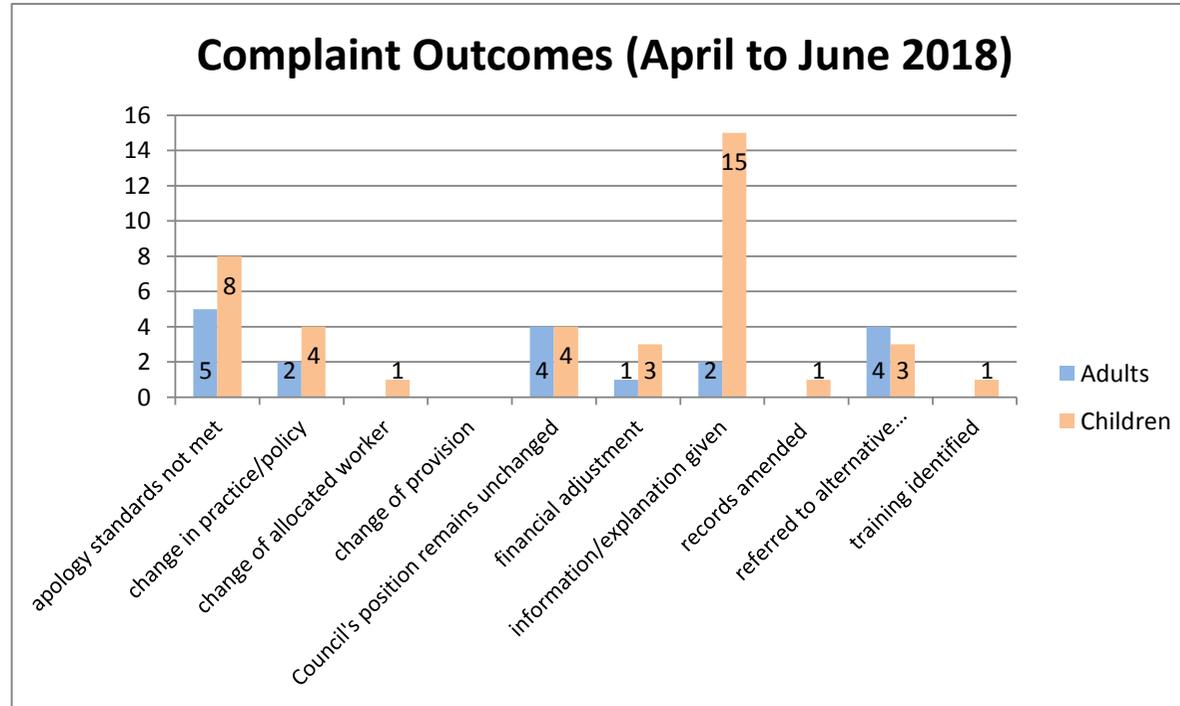
e Stage 2 as these complaints will have been counted as Stage 1 at some point during the year.

	Carry Over	July				August				September				Total
	Cumulative (Apr - Jun)	Stage 1 logged	In 20 days (%)	Stage 2 Logged	In 20 days (%)	Stage 1 logged	In 20 days (%)	Stage 2 Logged	In 20 days (%)	Stage 1 logged	In 20 days (%)	Stage 2 Logged	In 20 days (%)	Cumul ative*
Social Care Adults - Statutory		8	50%			4	75%			8	50%			20
Social Care Children's - Statutory		10	60%			8	50%			5	80%			23
Stage 1 Logged (Total)														43
Completed in 20 days (%)														
Stage 2 logged (Total)								3				1		
Completed in 25-65 days (%)														

Reasons: there can be more than one reason to a complaint



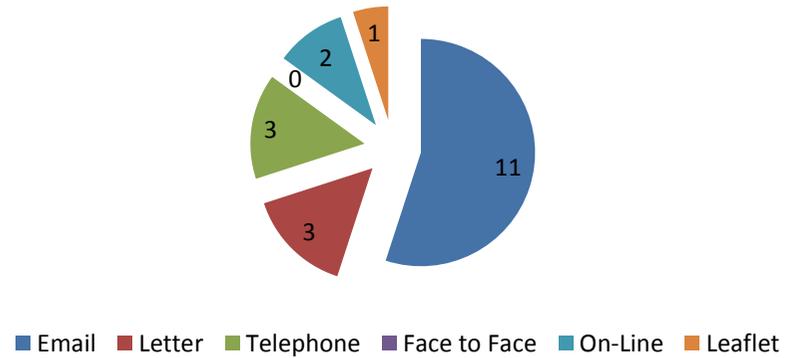
Outcomes: there can be more than one outcome to a complaint.



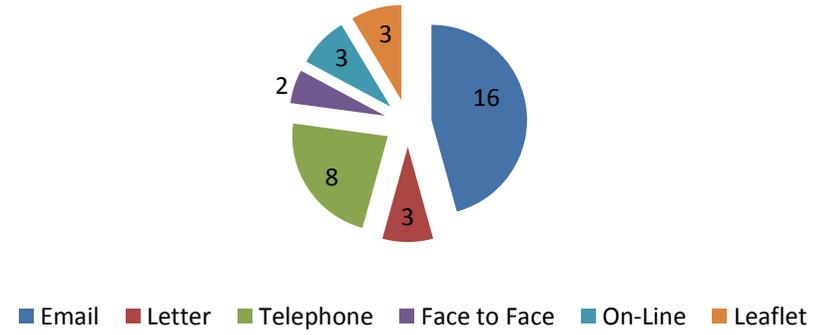
Adult Social Care

Children's Services

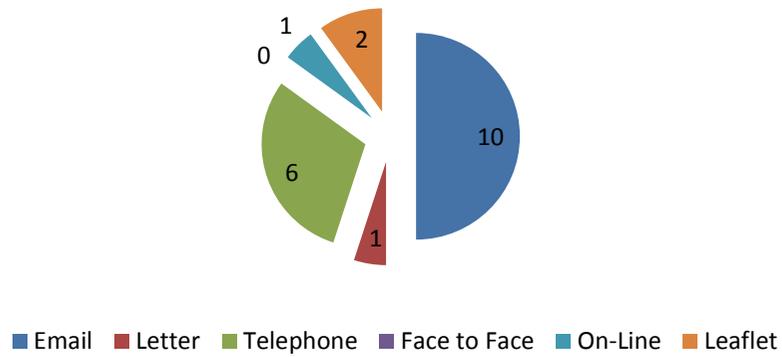
Contact Type (Apr - Jun 2018)



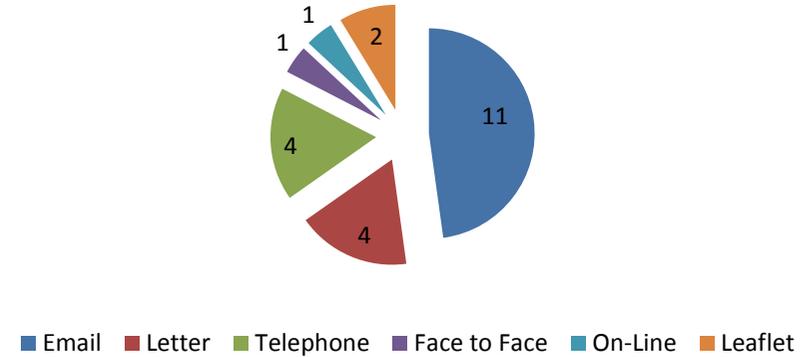
Contact Type (Apr - Jun 2018)



Contact Type (Jul - Sept 2018)



Contact Type (Jul - Sept 2018)



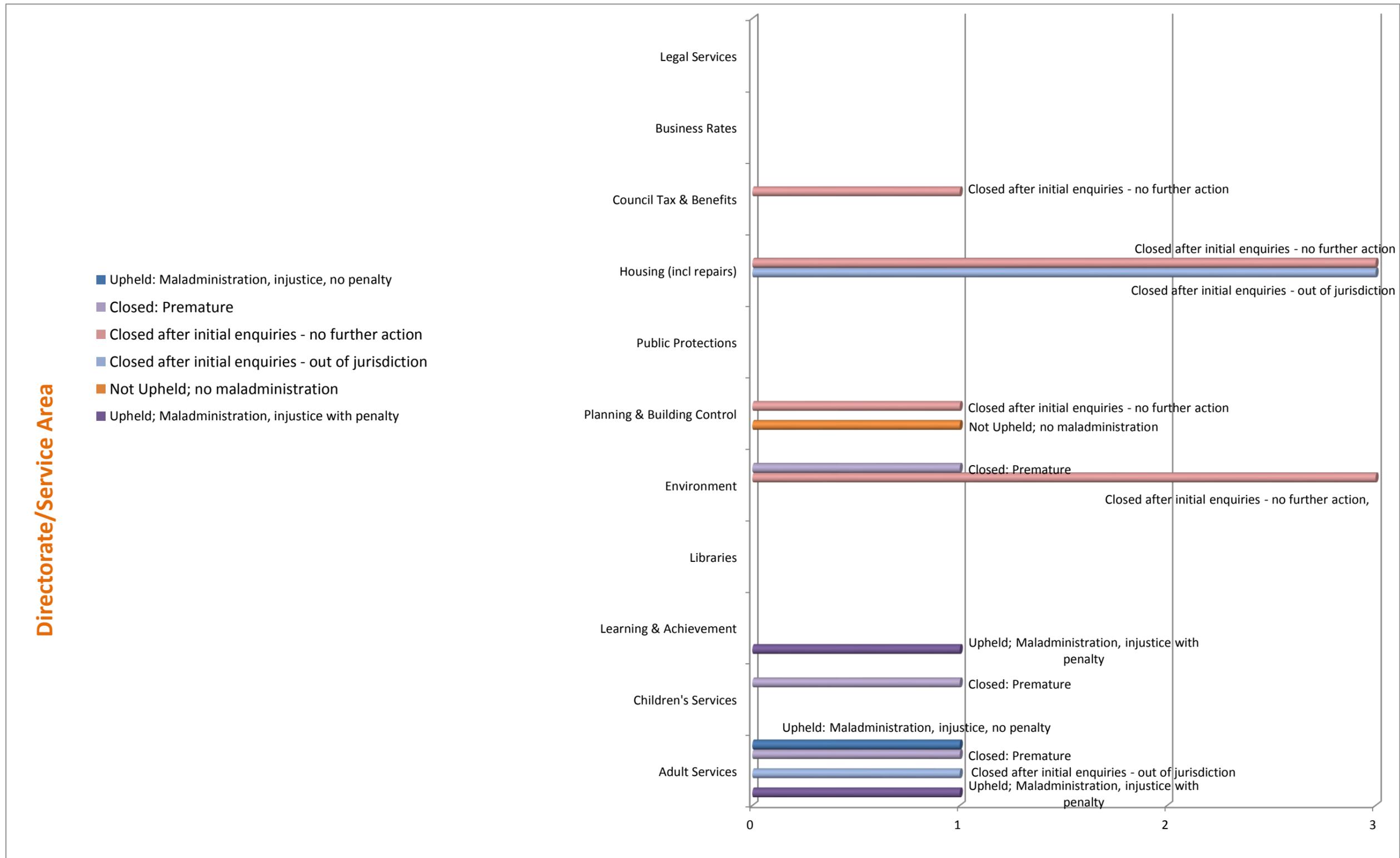
This page is intentionally left blank

Complaints determined:

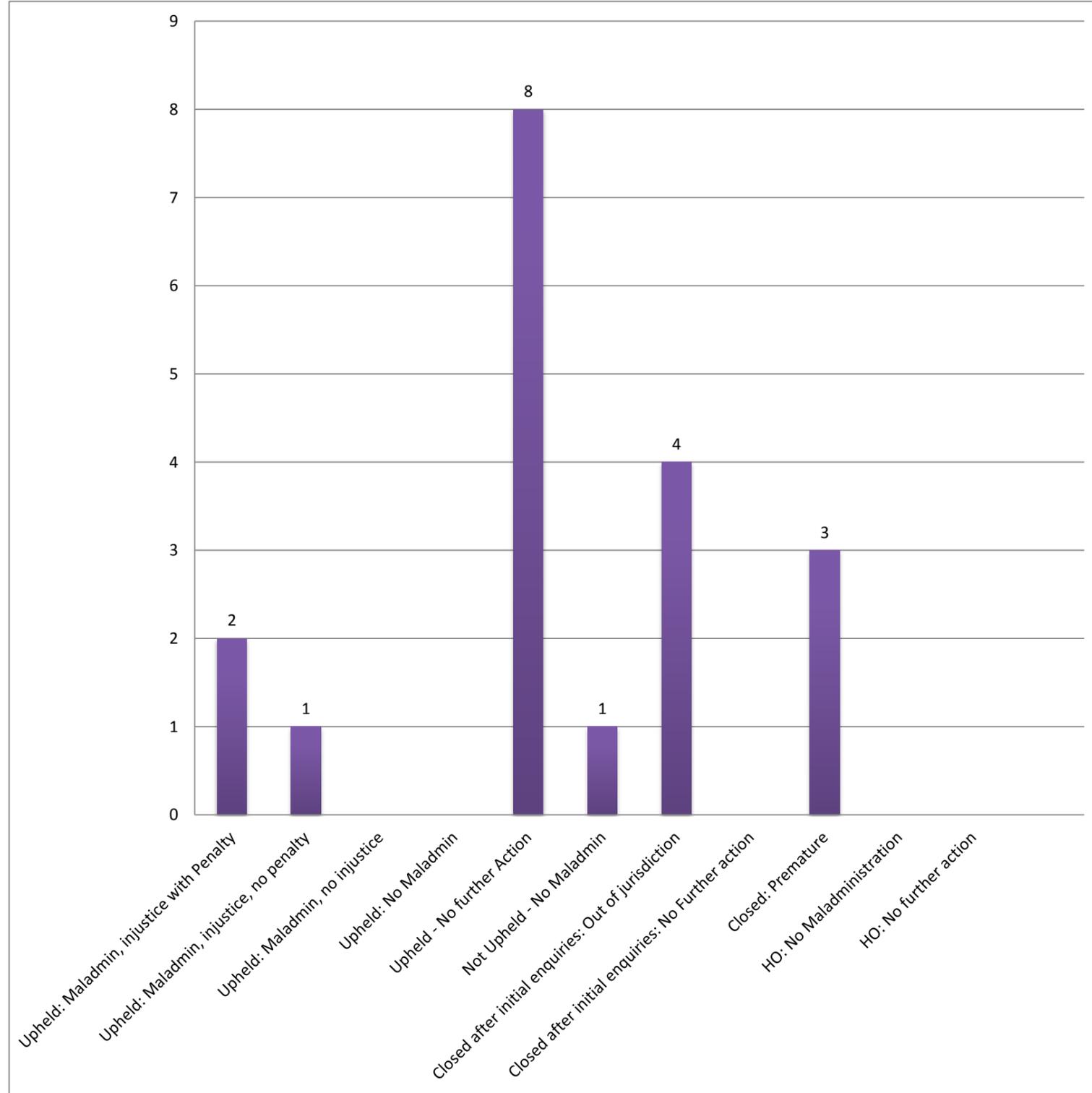
		Report Issued: Upheld; maladministration and injustice	Report issued: Upheld; maladministration, no injustice	Report issued: Not upheld; no maladministration	Upheld; Maladministration, injustice with penalty	Upheld: Maladministration, injustice, no penalty	Upheld ; Maladministration, no injustice	Upheld: No further action	Not Upheld; no maladministration	Closed after initial enquiries - out of jurisdiction	Closed after initial enquiries - no further action	Closed: Premature	HO: No maladministration	HO: No further action	HO: Resolved locally - No further action	Not upheld: No further action
Adult Social Care	Adult Services				1	1				1		1				
Children's Services	Children's Services Learning & Achievement											1				
					1											
Chief Operating Officer	Libraries															
Page 25 Neighbourhoods	Environment Planning & Building Control										3	1				
	Public Protections								1		1					
	Housing (incl repairs)									3	3					
oneSource	Council Tax & Benefits										1					
	Business Rates															
	Legal Services															
Total :		0	0	0	2	1	0	0	1	4	8	3	0	0	0	0

4
1
1
0
4
2
0
6
1
0
0
19

Decisions



Outcomes



Significant decisions from Local Government or Housing Ombudsmen

1. Ms B

The Ombudsman found fault in the way the Council managed the transfer of C's statement of special educational needs to an education, health and care plan and in its response to the complaints by C's mother, Ms B. The Council agreed to apologise to Ms B and C and to pay £650 to reflect the distress suffered by the delay and Ms B's time and trouble in pursuing the complaint.

Ombudsman decision: Upheld - Maladministration, Injustice with penalty

2. Mrs X

The Ombudsman found the Council was in error in the way it decided Mrs X had deliberately deprived herself of assets to avoid care home charges; it also took too long to resolve the matter. The Council agreed to backdate payments of care home charges to December 2016, when Mrs X's assets fell below the threshold. The Council agreed to apologise to Mrs X's family for the distress caused by the delay in reaching a resolution and make a payment of £1000 in recognition of the anxiety its actions caused. A further payment of £300 was agreed to Mrs A, who had made the complaint on behalf of Mrs X, to recognise the time and trouble she had been put to in making the complaint.

Ombudsman decision: Upheld - Maladministration, Injustice with penalty

3. Mr X

Mr X complains about the quality of the care provided to him by the Council. Ombudsman found some fault in the service provided to Mr X regarding homecare delivery. The Council apologised for the fault and agreed to take steps to ensure it keeps a record of the information provided to service users about the time slots for care.

Ombudsman decision: Upheld - Maladministration, Injustice, No penalty

**ADJUDICATION & REVIEW COMMITTEE
20 NOVEMBER 2018**

Subject Heading:	Adult Social Care Annual Complaints Report 2017/18
SLT Lead:	Barbara Nicholls
Report Author and contact details:	Veronica Webb, Complaints & Information Team Manager, Mercury House, Mercury Gardens Romford RM1 3SL Telephone: 01708 433589
Policy context:	An annual report is required as part of the remit of 'The Local Authority Social Services & NHS Complaints (England) Regulations 2009 and Health and Social Care (Community Health and Standards) Act 2003.
Financial summary:	There are no financial implications

The subject matter of this report deals with the following Council Objectives

Communities making Havering	X
Places making Havering	[]
Opportunities making Havering	[]
Connections making Havering	[]

SUMMARY

This report is for information and refers to the reports presented to Individuals Overview & Scrutiny Committee on 4 September 2018.

RECOMMENDATIONS

Members to note the reports and contents.

REPORT DETAIL

Please see attached report

IMPLICATIONS AND RISKS

Financial implications and risks:

Please see attached report

Legal implications and risks:

Please see attached report

Human Resources implications and risks:

Please see attached report

Equalities implications and risks:

Please see attached report



INDIVIDUALS OVERVIEW AND SCRUTINY COMMITTEE – 4 September 2018

Subject Heading:

Adult Social Care Complaints Annual Report 17/18

SLT Lead:

Barbara Nicholls

Report Author and contact details:

Veronica Webb, 01708 432589
Veronica.webb@havering.gov.uk

Policy context:

An annual report is required as part of the remit of 'The Local Authority Social Services & NHS Complaints (England) Regulations 2009 and Health and Social Care (Community Health and Standards) Act 2003.

SUMMARY

The Adult Social Care Annual Complaints Report 2017-18 attached as Appendix 1 is for consideration and outlines the complaints, enquiries, compliments and Members correspondence received during the period April 2017 – March 2018.

Adult Social Care Annual Complaints fall within the remit of the 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009' with a requirement to publish the annual report.

RECOMMENDATIONS

1. That Members note the contents of the report and the continued work in resolving and learning from complaints and the challenges faced by the service with increasing demands.
2. That Members note the actions identified to improve services and the continued monitoring by the Service and the Complaints & Information Team to ensure these are implemented evidencing service improvements and with a view to reduce similar complaints.
3. That Members note the positive feedback to services by way of compliments received and highlighting good practice.

REPORT DETAIL

4. Adult Social Care complaints have decreased slightly in 2017/18 (108) by 11% from 2016/17 (121) with a 13% decrease in formal (75 in 17/18 from 86 in 16/17) and 6% in informal complaints (33 in 17/18 from 35 in 16/17) The number of enquiries however have increased in 2017/18 (34) by 47% from 2016/17 (18).
5. Ombudsman enquiries have increased slightly from 8 in 2016/17 to 9 in 2017/18. Of these, two were found to be maladministration injustice with penalty regarding financial implications on change of service, one no maladministration after investigation. The remaining enquiries were either closed after initial enquiries, out of jurisdiction or premature.
6. The highest number of complaints received was for external home care. The total commissioned hours for Adult Social Care for 2017/18 was 707,593 with 15,884 of those hours representing 2% of complaints involving external home care.
7. The main reason for complaints 'level of service' still remain around disputes on charges, linked to level and quality of service. There were also issues regarding delays in equipment and services and financial assessments/funding. During 2017/18 there were changes in Adult Social Care teams involving a realignment of cases which had an impact and also the Financial Assessment & Benefits Team developed a backlog of assessments to be completed (now resolved)
8. The number of complaints upheld in 2017/18 was 51 with 52 not being upheld and five being withdrawn. With the introduction of the new social care system in February 2019 the Complaints & Information Team will be able to improve management information, including better categorisation of outcomes to indicate where a complaint is fully upheld, partially upheld or not upheld.
9. It is noted that there were still complaints involving financial information as a result of a change in provision and also in relation to frustrated visit charges. This highlighted the need for completeness of assessments to include budget information and consistency where there is a change of provision. The introduction of the new social care system should help ensure consistency across the Service. The Non-Residential Charging Policy has been revised and made available February 2018 on Havering's website https://www.havering.gov.uk/downloads/20118/policies_and_strategies which now covers charges for frustrated visits.
10. Overall response times still need to improve, however those that have been responded to within 10 working days improved with 25 being responded, 11-20 working days was at the same level of 32 as 2016/17 and those

responded to over 20 working days reduced to 50 in 2017/18 as opposed to 76 in 2016/17.

11. The collation of monitoring information is reflecting the main equalities characteristics requirement and includes, gender, religion, marital status and sexual orientation. For marital status and sexual orientation, there are a high number not recorded as these categories may not have been routinely recorded.
12. For those aged 85+ there has been a decrease by 28% (39 in 17/18 from 54 in 16/17). The breakdown of gender is included within this category and shows that there are a higher number of females within the age range 75-84 and 85+. 'Physical Disability' information is slightly lower in 2017/18 to 74 from 80 in 2016/17 and includes 'physical support – personal care' and physical support – access and mobility'. As reflected in the borough 'White British' is the highest with next highest representations from 'Black/Black British African'.
13. Complainants preferred method of contact is via email, letter and telephone. With the new social care system, this may move more towards online with the introduction of the social care portal.
14. Expenditure incurred was £581.25 for publicity of complaints leaflets, which are included in packs used by social workers.
15. Compliments have decreased by 21% from 62 in 16/17 to 49 in 2017/18. Satisfaction surveys may be re-introduced and teams are reminded to send in compliments to log, which should bring compliments back up in the following year.
16. Member enquiries have declined from 91 in 2016/17 to 68 in 17/18 with 88% being responded to within timescale.
17. Learning from complaints is seen as an important management information tool and evidencing improvements in the Service is paramount to the learning. Actions have been reviewed and implemented and will be brought to the Director's Operational Management Group (OMG) meetings to monitor progress. Further areas of improvement regarding better integrated working on complaints with external provider agencies is being explored and with the new Single Complaints Statement issued recently by Healthwatch England and Local Government Social Care Ombudsman, this should assist these discussions.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no specific financial implications to this report, which is for information only. Costs incurred through complaints will be contained within Adult Social Care allocated budgets. However, despite the reduction in the number of complaints highlighted in the report, there is still a risk of consequential compensation payments, which is being managed in the service by ensuring lessons are learned and procedures reviewed to minimise the risk of compensation arising from future complaints.

Legal implications and risks:

There are no apparent direct legal implications arising from noting of this report

Human Resources implications and risks:

The number of complaints relating to lack of communication, level of service and quality of service have increased from 2016/17 to 2017/18. Adult Social Care continues to support a personalised approach to customer needs in the Havering community. Training and development opportunities for staff will focus on these skills that are essential for effectively undertaking this responsibility. It is of vital importance that existing, and potential, customers receive the highest quality of service delivery possible. The needs of Adult Social Care staff in relation to implementation of the Care Act, with greater integrated working with health services, have been captured within the new Workforce Development Strategy and Plan.

The Council uses monitoring data from the complaints process as an indicator of how well Adult Social Care is delivering its services to the community. To ensure that there is significant continuity, and consistency in advice, along with other areas of delivery, frontline and support staff across the service teams need to be part of a stabilised workforce that is able to meet service and quality standards. Relevant outcomes from the complaints process have been incorporated into the new Plan in order to aid learning and improve staff performance.

Equalities implications and risks:

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;

- (iii) Foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are: age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants. We are regularly monitoring the equalities profile of our customers and it is encouraging that disclosure is improving year on year.

The most recent monitoring information has evidenced that the number of ethnic minorities accessing the complaints process is reflective of the population within Havering and therefore accessing information about our Complaints, Comments and Compliments Policy and Procedure or the facilities available to make a complaint/compliment is available to these groups. Monitoring data shows that there has been a significant increase in complaints made by service users with physical disabilities and this has been linked to the increase in disabled freedom pass complaints, however this will need continued monitoring.

We will continue to ensure that our communication is clear, accessible and written in Plain English, and that translation and interpreting services or reasonable adjustments are provided upon request or where appropriate. We will need to ensure accurate and comprehensive monitoring data is maintained to cross-tabulate complaints data against protected characteristics. This will provide us with more detailed information on gaps/issues in service provision and barriers facing people with different protected characteristics, and will enable us to take targeted actions and make informed decisions on service improvement and future service provision.

BACKGROUND PAPERS

- 1 Adult Social Care Complaints Report 2017-18 as Appendix 1

This page is intentionally left blank

ANNUAL REPORT 2017/18

ADULT SOCIAL CARE

Complaints, Comments and Compliments

Prepared for: Barbara Nicholls, Director Adult Social Care & Health

**Prepared by: Veronica Webb
Complaints & Information Team Manager**

Contents

Item	Contents	Page No.
1	Executive Summary	3
2	Introduction	4
3	Service Context	5
4	Complaints Received	5
4.1	Ombudsman referrals	5
4.2	Total Number of Complaints	6
4.3	- Stages	6
4.4	- Teams	6
4.5	- Reason	7
4.6	- Outcome	8
4.7	- Response Times	10
4.8	- Monitoring Information	10
5	How Complainants Contacted Us	12
6	Expenditure	13
7	Compliments & Resident Satisfaction	14
8	Member Enquiries	15
9	Conclusion	15
10	Complaints Action Plan	17

1. Executive Summary

Adult Social Care complaints fall within the remit of the 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009' which includes a requirement to publish an annual report. This report covers the period April 2017 to March 2018.

In 2017/18, there has been a slight drop in the number of complaints across Adult Social Care from the previous year. However enquiries have increased and although these do not form part of the statutory process, these still need to be responded to. As in previous years, there remains a key complaint theme around financial assessment and charging, particularly linked to level and quality of services, mostly community based services. The other key complaint issue to emerge in 2017/18 was around delivery of equipment.

Adult Social Care recognises that the service needs to continue to improve response times to enquiries and complaints, although it is noted that this has improved on the previous year. The main reason that some responses were over timescale is that the complaint/enquiry involved external agencies where information is required to reach decisions around charging disputes. Work is ongoing to continue to improve response times, and also how the Complaints & Information Team and Adult Social Care can work more effectively with external agencies, to ensure timescales are met.

In 2017/18, Adult Social Care began a period of transformational change, most notably making changes to how incoming work is managed by the Service 'Front Door' and then by the Service as a whole. In February 2018, the Service went live with 'Three Conversations', a model that focusses on building on residents' strengths and family and social networks, and ensuring every opportunity to maximise independence before setting up statutory services). Embedding this across the service is a key priority for 2018/19.

Within this context, complaints continue to play an important role in highlighting areas of improvement. Learning from complaints is crucial, to ensure the service is able to make improvements to how vulnerable residents and their families are worked with. With the continued emphasis on learning and by evidencing this, improvements to the service can be made.

2. Introduction

Under the Local Authority Social Services and NHS Complaints Regulations 2009, made under powers in Sections 113 to 115 of the Health and Social Care (Community Health and Standards) Act 2003, it is a requirement for local authority Adult Social Care and Children's Services to have a system of receiving representations by, or on behalf of, users of those services. Havering Adult Social Care welcomes all feedback, whether this is a comment on improving the service, complaint on what has gone wrong, or compliment about how well a service or individual has performed.

Havering has adopted the statutory guidelines for complaints management as outlined by the Department of Health and good practice principles of the Local Government Ombudsman, and has encompassed this within its new procedures as follows:

Informal- Where a complaint involves a regulated service, or is a minor concern which can be dealt with within 5 working days, or where a complainant does not wish to take it through the formal process.

Formal - Local resolution – where the complaint is considered low-medium risk, we aim to respond within 10 working days where possible. Where a complaint is considered medium–high risk, we aim to respond within 10-20 working days. Where a complaint is considered complex and may require an independent investigation, we aim to respond within 25-65 working days. Timescales may vary in agreement with the complainant.

Although there is no longer a Stage 3 Review Panel in the regulations, it has been agreed within Havering to have an option for complaints to be reviewed by a Hearings Panel.

Complainants who remain dissatisfied will have the right to progress to the Local Government Ombudsman.

The time limit for complaints to be made has remained at 12 months.

3. Service Context

Adult Social Care in Havering provides a wide range of support, including information and advice, front line assessment and social work/occupational therapy services for adults who have an identified care and support need, and are eligible for assistance with meeting those needs. We provide support to older people (65+); individuals with a physical or sensory disability; individuals with a learning disability; and individuals with mental health needs. In addition, we have direct delivery of services including day opportunities for people with learning disabilities and physical disabilities. The Service also includes Safeguarding Adults. The Service is further supported through brokerage of care, management of direct payments and client income and managing client finance arrangements, as well as quality and contract monitoring of provider services.

The total number of new contacts received in 2017/18 by Adult Social Care was 10,440 (which may or may not have resulted in services being provided), with around 50% being managed by the Service 'Front Door' and 50% received via the Joint Assessment and Discharge Service based in Queens and King Georges Hospital. Total activity within the service over the year (including for example assessments, reviews, and safeguarding adult referrals) was just under 14,500. The key area where the service has seen increased activity is in managing Safeguarding Adults referrals and Deprivation of Liberty Safeguards.

The total number of services implemented for residents in 2017/18 at some point in the year was just over 7,200, including people who received short term services (such as reablement), long term services (such as home care or residential/nursing care), or one off interventions (such as equipment).

4. Complaints Received

4.1 Ombudsman referrals

Ombudsman enquiries have increased slightly by 20% in 2017/18. Two were found to be maladministration with penalty. These both involved cases where financial implications were not communicated clearly when there had been a change in care provision. One was not upheld no maladministration found, three were closed after initial enquiries, with two out of jurisdiction.

	Apr17 - Mar18	Apr 16 - Mar17	Apr 15 - Mar16
Maladministration (no injustice)			3
Maladministration Injustice with penalty	2		1
Maladministration injustice no penalty		4	
No maladministration after investigation	1		3
Ombudsman discretion			
-Cases under investigation/ongoing			
-Investigation not started/discontinued		1	
No evidence of maladministration/service failure		1	
Closed after initial enquiries: no further	3		

action			
Closed after initial enquiries: out of jurisdiction	2		
Premature/Informal enquiries	1	2	3
Total	9	8	10

4.2 Total number of complaints

Total number of statutory complaints for 2017/18 were 108 an 11% drop from 2016/17 (121),

Total Number of Statutory Complaints		
2017/18	2016/17	2015/16
108	121	93

4.3 Stages

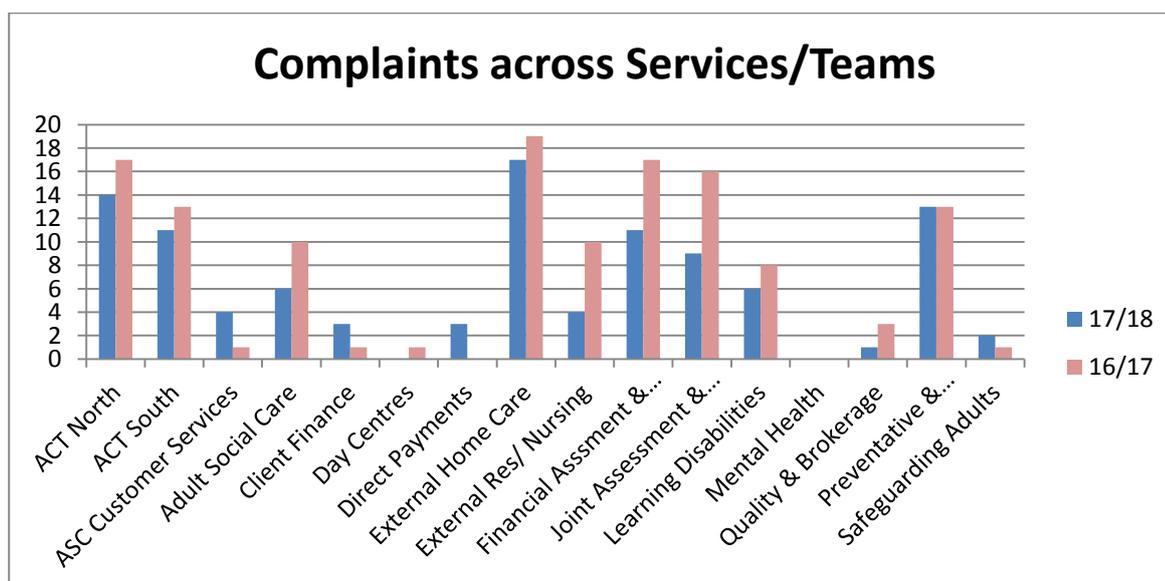
The number of enquiries in 2017/18 increased by 47% (34) compared to 2016/17 (18), with both formal and informal complaints in 2017/18 decreasing by 13% and 6% respectively. Enquiries are not reported in this report, except where indicated.

	Enquiry	Formal	Informal	Joint health and adult social care formal complaint
Apr 17 – Mar 18	34	75	33	
Apr 16 - Mar 17	18	86	35	

4.4 Teams

There has been a reduction in complaints across most services/teams in 2017/18, with slight increases across Adult Social Care Customer Services, Client Finance, Direct Payments and Safeguarding.

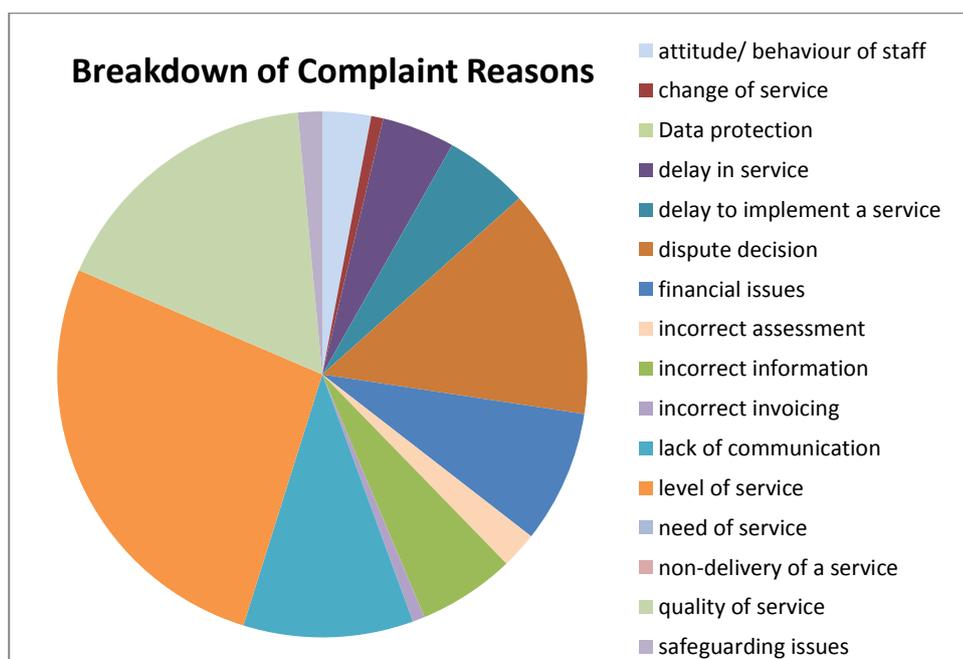
External home care received the highest number of complaints in 2017/18. The number of commissioned hours for 2017/18 was 707,593. Complaints involving external home care, commissioned hours totalled 15,884.71 and represents 2% of the total commissioned hours for home care.



4.5 Reasons

‘Level of service’ remains the highest reason for complaint in 2017/18. Although this mainly included issues around payments, invoices, this also included issues involving delay in financial assessments and delays in the provision of equipment and services. ‘Quality of service’ is the next highest and relates mainly to external home care regarding late or missed calls and charges incurred for the late cancellation by the service user.

In 2017/18 there were increases in complaints regarding delays in providing service/equipment, as well as financial and care assessments/reviews being undertaken. The Financial, Assessment and Benefits Team experienced a backlog within 2017/18 in getting financial assessments of service users undertaken within usual timescales, which has now been cleared. An increase in waiting times for assessments/reviews occurred within the year mainly due to the number of unforeseen additional work requirements required during 2017/18. This was as a result of cases moving from one provider to another where an agency had withdrawn their provision in the borough and also through the transfer of cases from Direct Payments (DP) to Individual Service Fund (ISF). In February 2018 Adult Social Care also reorganised how incoming work/referrals are processed and progressed, with the creation of the Havering Access Team, which affected all teams due to the realignment of cases and this had an impact.



‘Level of service’ and ‘quality of service’ as reasons for complaint increased in 2017/18 from 2016/17, with ‘dispute decision’, ‘financial issues’ and ‘lack of communication’ being the next highest and also increased from 2016/17. These continue to be linked to financial disputes for charges. The table below represent more than one complaint reason associated with a complaint and reflects the complexity of complaints within 2017/18, many of which are issues that necessitated liaison with third parties in order to provide a full response. This includes those where information is required from from external provider agencies, the Clinical Commissioning Group, Barking Havering and Redbridge University Hospitals Trust (BHRUT) or North East London Foundation NHS Trust (NELFT).

	attitude/ behaviour of staff	change of service	Data protection	delay in service	delay to implement a service	dispute decision	financial issues	incorrect assessment	incorrect information	incorrect invoicing	lack of communication	level of service	need of service	non-delivery of a service	quality of service	safeguarding issues
2017/18	4	1	0	6	7	19	11	3	8	1	14	36	2	3	23	2
2016/17	14	0	0	1	3	15	8	1	12	3	12	29	2	3	17	2

4.6 Outcomes & Learning

Recording practice has been improved to provide more consistency and transparency. . Categories have been streamlined to indicate where a complaint has been fully upheld, partially upheld, or not upheld which will be represented in 2018/19 report. The table below shows that those complaints upheld and those not upheld are almost equal. Further work is ongoing around ensuring a robust process for learning from complaints has been established by bringing those identified as requiring action to the attention of the Director’s management team meeting for allocation of responsible manager and to review.

Upheld	Not Upheld	Complaint Withdrawn
51	52	5

For 2017/18 the outcomes below have been used and compared as far as possible to 2016/17.

'Explanation and apology' is the highest outcome for 2017/18 and relates to where information was not made clear to families, or explained clearly with regard to relevant financial or service information, or where delays occurred. 'Changes in process/worker' mainly related to external home care provision, where a change of carer occurred, or a review of rota system took place, as well as implementation of more regular spot checks.

'Financial assistance awarded' is as a result of fees being waived, where a complaint is upheld regarding the lack of information or incorrect information provided about charges or a payment plan for outstanding fees where a complaint is not upheld and the costs would be deemed as still outstanding. Reimbursements are usually arranged as credits against future invoices.

	Change in process/worker	Complaint Withdrawn/referred to different procedure	Explanation and Apology	Explanation / Information provided	Financial assistance awarded	No action/further action required	Reassessment/Review	Reimbursement	Services re-instated	Training identified
17/18	14	5	36	16	11	3	6	6	2	8
16/17	2		31	60	4	3		2		

4.6.1 Learning from Complaints

During 2017/18 the service identified that there are still practice areas where consistency must be improved regarding financial information and this continues to be addressed through team meetings and supervision. This has also highlighted the need to ensure that where there is a change of provision for a service user that the financial implications still need to be communicated and understood by families, even where financial information may have been provided prior to the change in service.

Also identified is the need for completeness of assessments, and consistency in providing these to service users, as this has been shown to be variable across areas. Adult Social Care are implementing a new social care system, which will ensure greater consistency across the Service.

Information sharing between the local authority and external home care agencies regarding charging policies on home care needs to be reviewed across all home care agencies and reaffirmed through the local authority. The Non-Residential Charging Policy has been revised in light of complaints received regarding the charged incurred for late cancellation by service users known as 'frustrated visits' and this was signed off and made available on the intranet in February 2018 and the link has been provided as follows:
https://www.haverling.gov.uk/downloads/20118/policies_and_strategies

4.6.2 Learning from the Ombudsman

As highlighted above where a change in provision may have a financial implication, regardless of whether information had recently been provided, this needs to be clearly explained and information provided on the new charges. This also refers to where there are financial implications resulting from the change of provision, that the budget/cost information is included within the revised financial assessment.

4.7 Response times

The table below shows the percentages broken down by informal and formal complaints and provider complaints. Of the informal and formal complaints, 17 informal and 8 formal were responded to within 10 days, 6 informal and 26 formal were responded to within 11 – 20 working days and 9 formal and 41 informal were responded to in over 20 days. One complaint had no response time as response was not made available to Adult Social Care at the time of reporting.

Of the 108 complaints, 62 involved external providers, i.e. home care agencies or residential/nursing homes. Formal complaints that involved dispute of charges for external providers resulted in a higher percentage being responded to over 20 days. Due to a number of complaints being historic by several months sometimes up to a year, this will always prove a challenge in being able to respond in a timely manner. The Complaints Team and Commissioning is looking at ways to improve the engagement with external providers when dealing with complaints. The recent Single Complaints Statement that has recently been published by Healthwatch England and the Local Government Social Care Ombudsman will help to accomplish better integrated working on dealing with complaints.

	Within 10 days		11-20 days		Over 20 days	
	Apr17- Mar18 %	Total no.	Apr17- Mar18 %	Total no.	Apr17- Mar18 %	Total no.
Informal	16	17	6	16	8	9
Formal	7	8	24	26	38	41
Total no. 2017/18		25		32		50
Total no. 2016/17		11		32		76
<i>Of the 2017/18 total, response times for all complaints involving external providers:</i>						
External providers	18	19	12	13	28	30

4.8 Monitoring information

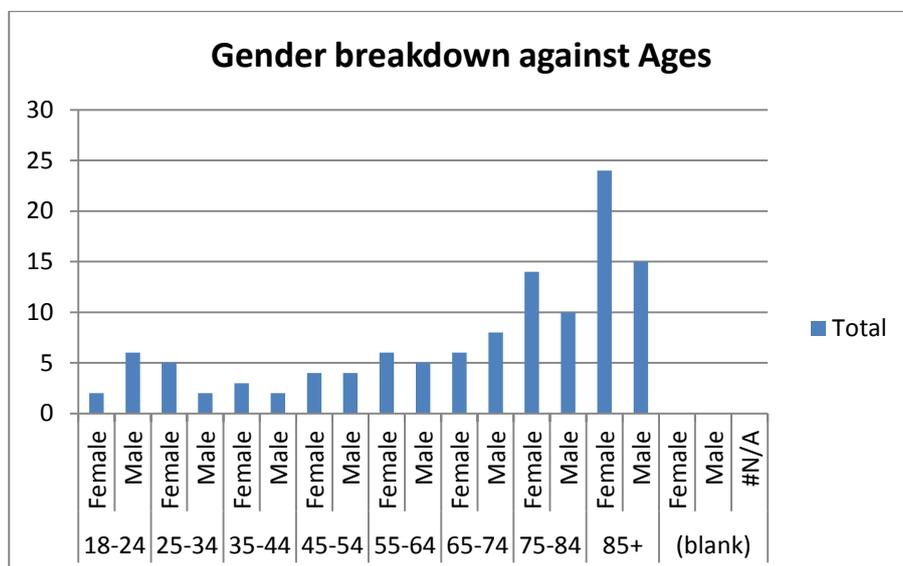
4.8.1 Age

There increases in 2017/18 across ages between 35 – 84, with a decrease in those over the age of 85+ by 28% and slight decreases for ages 18-24 and 25-34. It should be noted that for monitoring information, a complaint may involve more than one service user and therefore this is reflective in the numbers for monitoring.

ADULT SOCIAL CARE ANNUAL REPORT 2017-18

	under 18	18-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	undeclared
17/18		7	5	5	8	11	14	24	39	2
16/17	1	9	9	3	5	8	6	21	54	

Below also shows the breakdown of gender against ages and shows that between the ages of 75-84 and 85+ there are a higher number of females within this age bracket.



4.8.2 Disability

The breakdown below shows that complaints involving someone with a physical disability declined slightly from 80 in 2016/17 to 74 in 2017/18. Those that are not recorded relate to one historic case, one freedom pass and one carer complaint.

	Hearing impairment	Frailty or temporary illness	Learning Disability	Known disability	Physical Disability	Memory and Cognition	Mental Health	Other Vulnerable People	Social Support	Not recorded
17/18		1	9	1	74	20	3	1	3	3
16/17	3		10	1	80	14	2	2		

4.8.3 Ethnicity

As reflected with the ethnic mix within the borough, 'White British' has the highest number. Although there does not appear to be the spread across ethnicity in 2017/18, there is no up to date population data to understand if this is reflective in the borough as a whole.

	Asian / Asian British - Bangladeshi	Asian / Asian British - Indian	Asian / Asian British - Pakistani	Black / Black African	Black / Black British	Black / Black Caribbean	Mixed - Other / Multiple Ethnic Background	Mixed - White & Asian	Mixed - White & Black	Mixed - White & Black African	Mixed - White & Black Caribbean	White Any other White background	White British	White - English	White - Irish	White - other	Not declared
17/18	1	1		4		1						3	100	1	1		3
16/17	2	3	1	3	1	1	14	4	5	1	2		54		1	4	4

As part of the equalities monitoring information, religion, marital status and sexual orientation figures are included in this report and in future reports comparisons will be given on previous year where possible.

4.8.4 Religion

'Church of England' is the highest of those making complaints. It may be argued whether Christian should be classed as one category against 'Church of England' and Catholic, however this is taken from what is recorded on the Adult Social Care system.

Buddhist	Catholic	Christian	Church of England	No Religion	Not recorded	Not stated
1	11	13	42	2	23	23

4.8.5 Marital Status

This information shows that there are 43 where marital status is not recorded, which may be as a result of information not being provided at time of recording. Married couples are the highest and complaints may involve both husband and wife, or either the husband or wife.

Divorced	Married	Not recorded	Other	Separated	Single	Unknown	Widowed
1	30	43	1	2	14	6	18

4.8.6 Sexual Orientation

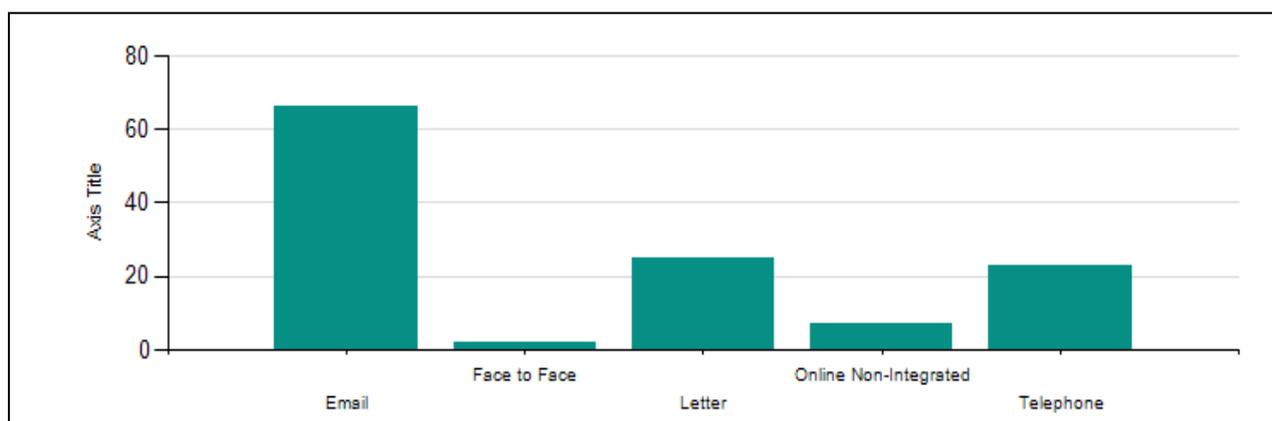
This information is still perceived by residents as being very sensitive information and therefore the number not recorded is high at 92, with 12 being 'heterosexual' and 11 'preferring not to say'.

Heterosexual	Not recorded	Prefer not to say
12	92	11

5 How we were contacted

The information below show that emails, letter and telephone continue to be the preferred method of contact. With the introduction of the new Adult Social Care system, the aim would be to allow complaints to be sent via a portal, which will allow secure communication between the service user and the local authority. It is anticipated this will have an impact on how complainants will prefer to contact Adult Social Care in the coming years.

Method of Contact



6 Expenditure

The expenditure incurred for 2017/18 is for the update and publication of Adult Social Care leaflets. The use of leaflets will need to be reviewed in light of the introduction of the new social care system which will be implemented in early February 2019.

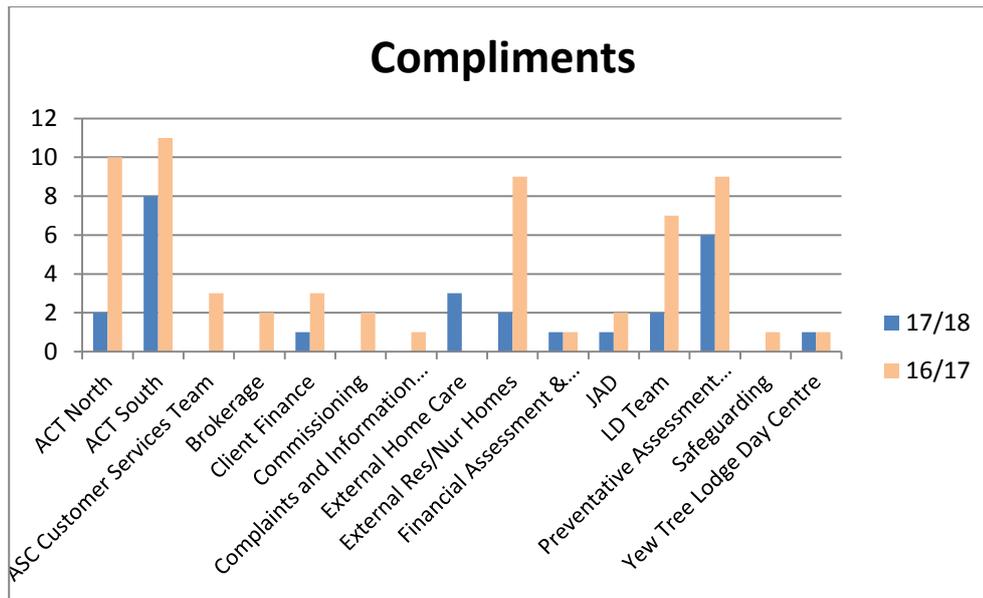
	Publicity	Compensation £	Independent investigators £
Apr 2017-Mar 2018	581.25		
Apr 2016- Mar 2017		250	0

7. Compliments and resident satisfaction

The number of compliments has gone down in 2017/18 by 21% from 62 in 2016/17 to 49 in 2017/18. In previous years satisfaction surveys were routinely sent out by community teams for completion by residents, however this had ceased following changes to the service structure. These surveys had been used to capture positive and negative feedback from residents receiving services, and supported practice improvements where applicable. Satisfaction surveys will therefore be re-introduced in September 2018. Teams still need to be reminded to send in their compliments to be logged.

Adult Social Care undertakes a statutory annual service user survey, in the last quarter of each financial year, seeking client views on seven key indicator areas from the Adult Social Care Outcomes Framework. This outcome of this annual survey gives an indication on views and experiences from a wider range of people who use services.

7.1 Compliments



Some examples of compliments received are given below:

A friend writes - *'thank you for giving me the help to bury our friend.... He went with the dignity he deserved..'* – Appointee and Deputyship

A husband and wife write in regarding placement of their mother in a care home - *'she has been very professional in our dealings with her and my wife and myself have spoken to her on a number of occasions on the telephone. She has always been direct and transparent with and ourselves, nothing has been too much trouble for her. I would go as far as saying she is a major asset for Havering.'* – **ACT North**

A wife thanks Social Worker - *'I would like to take this opportunity to once again thank you for the kind consideration and help you gave to me and my family when arranging the placement of my mother. This was a very traumatic time for us and your patience, especially with me, was much appreciated. I would also like to thank you for the kindness, courtesy and patience you showed to my mother..'* – **ACT South**

Family thanks a Senior Practitioner - *'I am writing to say a huge Thank You for all your help and support in moving ...to Ashgate House. I know the journey has not been an easy one. Fromreview meeting there the other day it is obvious to see she is far happier and healthier than she has been in a long time. Thanks to your efforts she now has quality of life and the appropriate level of care for her needs, for the first time in years she has actually put on some weight! Since movingmental health has also improved no longer accusing people of stealing things and her constant phone calls have virtually stopped. From our whole families point of view it feels like a weight has been lifted, knowing is being cared for properly. It has allowed us to provide support and spend quality time with our mum whom is terminally ill without worrying about the level of care and for that we will always be very grateful to you.'* – **Learning Disabilities**

A grateful couple write in *'thank you so much for all your help. We had a stressful time (initially) but you were so very supportive with your input and assistance and you reassurance. You have been a credit to us and your service.'* – **Preventative Assessment Team**

A social worker relays message from daughter - *'thank you and express her gratitude towards the work and care you put into getting him into Upminster Nursing home. ... wanted to let you know that and the whole family are really pleased with this placement and he is receiving a good level of care there, they are equally pleased with the travel times etc. in reaching the home.advised was initially confused, but he has settled well.'* - JAD

7.2 Adult Social Care Outcomes Framework – Survey 2017/18

The annual statutory survey for Adult Social Care was completed in the last quarter of 2017/18. Around 60% of people using services who responded to the survey, reported overall satisfaction with the service they received from Adult Social Care. This has been consistent over the past few years, with benchmarking against other London local authorities in 2016/17 placing Havering 7th in London for overall client satisfaction¹.

Other key outcomes from the Adult Social Care survey for 2017/18 are shown in the table below:

	16/17	17/18
% Service User who are satisfied with their quality of life	77.9%	79.6%
% Service User who have control over daily lives	75.5%	77%
% Service User who feel they have as much social contact as they like	41.9%	45%
% Service User overall satisfaction	61.0%	60%
% Service Users who find it easy to find information about services	71.3%	74%
% Service Users who feel safe	69.0%	71%
% Service Users who think services make them feel safe	91.7%	88%

8. Members Enquiries

The number of enquiries declined in 2017/18 from 91 in 2016/17 to 68 with 88% (60 of 68) being responded to within timescale. This is an improvement from 2016/17 with 71% being responded to within timescale.

9. Conclusion

Complaints and compliments continue to give insight to the service and highlight areas for improvement and good practice. The Complaints Team along with Adult Social Care are continuing to look at improving the way the Service captures the evidence of learning and introducing a process of monitoring actions and reviewing those actions.

With the introduction of the new Adult Social Care system (February 2019), this will greatly with the capturing of data for complaints and monitoring and reviewing actions to evidence learning in future years.

Ways to further improve response times for Adult Social Care complaints are being explored and in particular those involving external providers and how we engage better with them. With the introduction of the Single Complaints Statement from Healthwatch England and the Local Government Social Care Ombudsman, this will help inform

¹ 2017/18 benchmarking information for 2017/18 will be available by late September 2018.
Adult Social Care Annual Complaints Report 2017-18

discussions going forward with providers with Complaints and Commissioning at future forums. Also recording practices will continue to be reviewed going forward to ensure consistent recording to aid reporting in future..

Complaints continue to be complex, involving different service areas and external providers and remain in the main around disputing of charges.

10. Complaints Action Plan

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
Information about financial assessment process and potential client contribution reportedly not properly conveyed	<ul style="list-style-type: none"> Improved recording of information given on financial assessment and charges 	<ul style="list-style-type: none"> Financial assessment case note implemented in 2020/16/17. Forms introduced to be signed by service user/financial representative (JAD only) Compliance with completion monitored by: <ul style="list-style-type: none"> Monthly performance reporting 1-1 supervision 	<ul style="list-style-type: none"> All 	Ongoing	<p>Case note to continue to be used to record information on advice and guidance given, including date. Ensure form signed by service user.</p> <p>Senior management to meet with individuals where case note recording identified as an ongoing concern.</p> <p>Implement in the new care management system</p>
Lack of accessible information about adult social care more generally leading to complaints about level of service / incorrect information	<ul style="list-style-type: none"> Reviewing information to ensure it is available and accessible, and provided to people in timely fashion 	<ul style="list-style-type: none"> Locality model under review New arrangements at adult social care 'front door' being planned, with strengthened information and advice provision planned at first point of contact. 	<ul style="list-style-type: none"> Head of Integrated Care Head of Joint Commissioning Unit 	<p>March 2019</p> <p>Implemented February 2018 and for review by March 2019</p>	<p>Redesigned locality model to include other Council departments and external agencies on virtual or co-located basis.</p>
Percentage of complaints responded to within timescales has declined	<ul style="list-style-type: none"> Response times require improvement 	<ul style="list-style-type: none"> Complaints involving other NHS agencies – adult social care element to be responded to within 20 days. Noted that NHS timescales for response are longer than 20 days. Commissioning to support Complaints Team in getting information from external social care providers back within timescale Raise the profile of Complaints and the learning opportunities 	<ul style="list-style-type: none"> All Head of Integrated Care Head of Joint Commissioning Unit <p>Complaints Manager</p>	Ongoing	<p>Quarterly presentation to senior management team on complaints performance.</p> <p>Head of Integrated Care reviews all members enquiries weekly to ensure response within timescale.</p> <p>Improved engagement with providers and other agencies is ongoing.</p>

ADULT SOCIAL CARE ANNUAL REPORT 2017-18

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
		presented by increased attendance at Team Meetings and presence in various forums, (i.e. staff events).			
Quality and level of service received from commissioned providers continue to be affected by recruitment and retention of front line care and support staff		<ul style="list-style-type: none"> Proactive work with providers via Quality and Safeguarding Team work and provider forums to identify issues and support resolution, including supporting sustainability of market. Attendance at Provider Forums. 	<ul style="list-style-type: none"> Head of Joint Commissioning Unit. 	Ongoing	Engagement with care home providers: "Working with Care Homes to Understand Costs"
Home care charges need to be ratified when charging for services	<ul style="list-style-type: none"> Confidence that invoices reflect actual delivery 	<ul style="list-style-type: none"> Brokerage to ensure that invoices provide evidence of actual service delivery 	<ul style="list-style-type: none"> Brokerage Team 	Ongoing	New Active Homecare Framework established January 2017. Improved use of CM2000 by providers on the framework
Changes in provision (or funding body ²) need to identify where there are financial implications and that these are communicated	<ul style="list-style-type: none"> That financial implications are clear for service users and their financial representatives where there is a change of service 	<ul style="list-style-type: none"> Assessments needs to be completed with budget information Financial assessments need to be undertaken following change in provision, including where the funding body changes 	Adult Social Care	Ongoing	Adult Social Care need to ensure when multi-disciplinary team is completing an assessment that they give financial information and document accordingly.
The half hour charge in relation to frustrated visits.	<ul style="list-style-type: none"> Information to service users and their financial representatives needs to be clear that liability to charging for such visits will remain. 	<ul style="list-style-type: none"> Updated charging policy –need to implement changes and make sure all are clear. 	<ul style="list-style-type: none"> Care Management, Brokerage and Financial Assessment and Benefits. 	When was the Policy done? Please insert date. Implemented February 2018 and for review by March 2019	Non-Residential Charging Policy has been reviewed and updated to include information on frustrated visits and is available on website.

² This includes where the funding body changes from the council to the NHS for example

**ADJUDICATION & REVIEW COMMITTEE - 20
NOVEMBER 2018**

Subject Heading:	Children’s Services Complaints Annual Complaints Report 2017/18
SLT Lead:	Tim Aldridge
Report Author and contact details:	Veronica Webb, Complaints & Information Team Manager, Mercury House, Mercury Gardens Romford RM1 3SL Telephone: 01708 433589
Policy context:	An annual report is required as part of the remit of the Children Act 1989 Representations Procedure (England) Regulations 2006’
Financial summary:	There are no financial implications

The subject matter of this report deals with the following Council Objectives

Communities making Havering	X
Places making Havering	[]
Opportunities making Havering	[]
Connections making Havering	[]

SUMMARY

This report is for information and refers to the reports presented to Children & Learning Overview & Scrutiny Committee on 27 September 2018.

RECOMMENDATIONS

Members to note the reports and contents.

REPORT DETAIL

Please see attached report

IMPLICATIONS AND RISKS

Financial implications and risks:

Please see attached report

Legal implications and risks:

Please see attached report

Human Resources implications and risks:

Please see attached report

Equalities implications and risks:

Please see attached report



CHILDREN & LEARNING OVERVIEW & SCRUTINY COMMITTEE – 27 SEPTEMBER 2018

Subject Heading:	Children's Services Annual Complaints Report 2017-18
SLT Lead:	Tim Aldridge
Report Author and contact details:	Veronica Webb, 01708 432589 Veronica.webb@havering.gov.uk
Policy context:	An annual report is required as part of the remit of the Children Act 1989 Representations Procedure (England) Regulations 2006'
Financial summary:	There are no financial implications as this report is for information purposes and is required as part of the statutory complaints regulations

The subject matter of this report deals with the following Council Objectives

Communities making Havering	<input checked="" type="checkbox"/>
Places making Havering	<input type="checkbox"/>
Opportunities making Havering	<input type="checkbox"/>
Connections making Havering	<input type="checkbox"/>

SUMMARY

The Children's Services Complaints Annual report for 2017-18, attached as Appendix 1 provides information about the numbers and types of complaints handled by the Children's Service during 2017-18, as well as Members' correspondence. It is a requirement under the Children Act 1989 Representations Procedure (England) Regulations 2006 that the complaints annual report be published. Education falls under the responsibility of Children's Services and the Education Services Complaints Annual report for 2017-18 is attached as Appendix 2.

RECOMMENDATIONS

1. That Members note the contents of the attached reports and the continued efforts made by the service to learn from complaints and enable young people to engage with the complaints process.
2. That Members note the recommendations identified from complaints and continued monitoring of these to ensure that actions are implemented to evidence service improvements.
3. That Members note the positive feedback to services received through compliments, highlighting good practice.

REPORT DETAIL

1. The number of Stage 1 complaints decreased slightly in 2017-18 by 2% from 92 in 2016-17 to 90 in 2017-18 with a drop in Ombudsman enquiries also from 6 in 2016-17 to 3 in 2017-18. Complaints made directly by young people increased from 15 in 2016-17 to 18 in 2017-18 and has increased steadily over the last three years. However enquiries have risen from 43 in 2016-17 to 50 in 2017-18 and are not included in figures in the report. There was one escalation from Stage 1 to Stage 2 and no Stage 3 Reviews during 2017-18
2. Complaints received by the Intervention & Support Services has decreased by 19% from 69 in 2016-17 to 56 in 2017-18, however received the highest number of complaints across teams, with Triage/MASH & Assessment being the next highest. This is reflective of the type of complaints received from parents around the unwelcomed intervention by Social Workers and decisions made regarding their children.
3. Linked to the intervention by Social Workers is the main reason for complaint, 'level of service', and the second highest 'lack of communication'. These related to parents' perceptions of a Social Worker's role and their expectations of support to them. Interventions and support would be focussed on the child(ren), although looking at the family as a whole. However, some related to late or non-receipt of information for meetings, not being kept updated or challenging information within assessments. Children's Services continue to provide briefing and training sessions on engaging with children and families through their systemic approach.

There were 42 complaints upheld and 39 not upheld in 2017-18, with 8 withdrawn and one 'no further action'. Of those upheld, the main outcome was 'apology given' and next highest 'explanation/information given' where

clarification of processes or explanations were not provided as to why a course of action was taken. This highlighted particular themes regarding fathers not feeling included in decisions about their children where parents were separated, initial child protection enquiries and recording of information. The importance of follow up work with families and continued communication is being reinforced to staff in particular ensuring smooth handover of cases where there is a change of Social Worker. Audit processes have been put in place to ensure reports for Court are quality assured and signed off by Team Manager. The introduction of briefing/training sessions 'Obsessions with Assessments' will also lead to improved recording and quality of assessments.

4. Complaints received from young people related to the level of support, particularly when leaving care. The Cocoon has provided an informal venue for meetings with young people to discuss their concerns in a positive way resulting in five of the 18 complaints received being withdrawn.
5. Response times need to be improved and cause for the delay needs to be identified. Although it is notable that complaints are complex, involving very emotive situations, they need to be investigated thoroughly. This has resulted in a reduction of complaints being escalated, however efforts need to be made to ensure they comply to the statutory timeframe.
6. No expenditure was incurred for 2017-18, however the costs for the Stage 2 investigation in 2017-18 will be incurred in 2018-19 expenditure.
7. Monitoring information relates to all children within a family where a complaint is made. There were increases across ages 6-9, 10-14 and 15-17, with male children being the highest amongst all age ranges except 18+. The majority of children had no disability across all age groups, with two children having a sensory disability. 'White British' is the highest reflecting the demographics of the borough. 'No religion' or 'not recorded' is the highest and recording may improve with the implementation of the new Children's Services social care system.
8. Member enquiries have increased from 61 in 2016-17 to 63 in 2017-18 with 62% being responded to within timescale.
9. The number of compliments is low with 10 being received in 2017-18 from 16 in 2016-17, with Adoption receiving the highest number (3). Staff will need to be reminded to send compliments to the Complaints & Information Team to be logged.
10. Children's Services have strived forward with their vision for children and young people, with openness to learning and making improvements. This was reflected in the recent Ofsted inspection in which inspectors found improvements across all service areas.

11. Education complaints have reduced by 67% in 2017-18 from 18 in 2016-17 to 6 and enquiries relating to schools, academies or colleges have dropped by 30% from 60 in 2016-17 to 42 in 2017-18. There were no Ombudsman enquiries in 2017-18.
12. Those enquiries reported against service areas, related to complaints referred on to the relevant education provision, and Education & Schools received the highest number of these enquiries (26).
13. 'Level of service' and 'safeguarding' were main reasons for complaint against a school/academy or college mainly relating to parents concerns about how a school/academy or college dealt with bullying. Complaints against the service i.e. Education complaints were mainly around 'staff attitude or incompetence' and related to parents being unhappy about school attendance letters resulting in fines.
14. Of the six Education complaints received, four were 'not upheld', one was 'upheld' and one 'partially upheld'. The majority of enquiries, resulted in either 'information given' or being 'referred' to the relevant school/academy or college.
15. Education's response times in 2017-18 were 100% showing an improvement from 72% in 2016-17. Although member enquiry response times were slightly down in 2017-18 at 82% compared to 84% in 2016-17.
16. Compliments received are very low, and efforts will need to be made to encourage staff to send these for logging, with only four being recorded for 2017-18.

IMPLICATIONS AND RISKS

Financial implications and risks:

There is a Complaints & Information Team within the Adult Services Directorate. This team addresses complaints received across Adults and Childrens Services and manages associated resource implications, which are funded from within overall service budgets.

There are no new financial implications or risks arising from this report, which is for information purposes. It should be noted however that any material increase in investigations following on from complaints could result in additional costs to the authority, which is being managed as part of the overall financial management responsibilities of the service.

Legal implications and risks:

There are no apparent legal implications from noting this Report. The complaints process is governed by the Children Act 1989 Representations Procedure (England) Regulations 2006.

Human Resources implications and risks:

The Children's Services department have identified actions to be followed through with the qualified workforce to ensure that the learning from the complaints received is firmly embedded into the training and supervision of social work staff and also addressed through the Council's Performance Development Review (PDR) process

Equalities implications and risks:

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) the need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are: age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment. The missing categories not reported within the 2017-18 report will be reported on in future reports.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

This page is intentionally left blank

APPENDIX 1

Children Services

Annual Report 2017 – 2018 Complaints and Compliments

Prepared for:

Tim Aldridge, Director Children Services

**Prepared by: Veronica Webb,
Complaints & Information Team Manager**

	<u>Contents</u>	<u>Pages</u>
1	Executive Summary	3-4
2	Introduction	5
3.	Complaints Received	6
3.1	- Ombudsman Referrals	
3.2	- Total No. of Complaints	6
3.3	- Stages	6
3.4	- Teams	7
3.5	- Reasons	7-8
3.6	- Outcomes & Learning	9-10
3.7	- Response Times	10-11
4.	Expenditure	11
5	How complaints Received	11
6	Monitoring Information	11-13
6.1	- Age & Gender	11-12
6.2	- Disability	12-13
6.3	- Ethnicity	13
6.4	- Religion	
7	Members Correspondence	13-14
8	Compliments	14-15
9	Conclusion	15
10	Action Plan	16-17

1. Executive Summary

Since 2016, Havering Children's Services has been on an improvement journey in its approach to working with families and developing a new way of working. Last year, Children's Services launched its vision to enable our children and families to lead happy, healthy lives. This is focused around spending more face to face time with families and helping them to find their own solutions. In the recent Ofsted inspection of Children's Services, it was reported that Havering shows 'a determination to strive for improvement and an openness to learning has been pivotal in driving such improvements.' In all service areas, inspectors have found improvements since 2016. Ofsted found a learning organisation that routinely assesses itself and seeks to improve.

Listening to children and young people's views has been a central part of the Children's Services vision. The continued use of MOMO with young people has encouraged them to have more of a voice in raising any worries or concerns they may have about their care. It has been noted that complaints from young people directly have continued to increase, although still relatively low, at a steady pace and this is encouraging to see.

Complaints continue to play a part in identifying areas within services requiring improvement. The opening of 'The Cocoon', which provides face to face contact with young people in an informal setting, has proven to be very welcomed by young people. Complaint meetings have been held with young people in this venue and young people have commented how they prefer the informal environment that 'The Cocoon' offers them. The space is governed by the Youth Management Team (YMT). The YMT consists of children in care and care leavers aged between 14-25 years old who are active in shaping service design, delivery, and evaluation. Creating the Youth Management team aims to strengthen the relationship between the young people and social services, giving them a voice in the strategic leadership in the development, implementation and sustainability of the Cocoon and services. It also allows young people to work alongside professionals and to get an understanding of how processes work, as well as providing the opportunity to think about what skills that they would like to develop and explore with support so as to improve their prospects and gain experience.

Looking forward, we are aiming to introduce surgery-type sessions with members of the Complaints Team attending at 'The Cocoon', to give young people an opportunity to speak to them directly and raise any concerns that they may have. This would complement the existing Director's Surgery which was introduced in February 2018 to enable young people to raise and discuss individual and group issues of concern, share ideas and influence change with the Director and Assistant Director of Children's Services. This process has started to identify issues and is empowering young people to engage with senior officers to improve their individual lived experiences and services for the wider group.

Weekly tracking and monitoring of complaints is undertaken by the Heads of Service and Assistant Director to address specific concerns and ensure responses are provided. Although responses continue to improve, staff turnover can on occasion lead to some delay. Robust auditing and quality assurance of cases has continued within the service, resulting in better oversight and monitoring of cases. There is a quality assurance framework in place which is focused on learning and the development of practice, placing social worker's and practitioners at the centre of quality assurance activity. This includes two Practice Weeks per year, quarterly audits, regular observations of practice and independent audits. For example,

in the Practice Weeks of September 2017 and March 2018, there was an average of 90% of cases showing evidence good rapport with the child and family.

An emphasis on workforce development has been a vital part of the Children's Services improvement journey. Staff retention and permanency has improved, providing increased stability and consistency for children and young people. This has been complemented by the launch of Havering's Social Care Academy, offering professional development opportunities for social care staff, as well as an increased focus and embedding of systemic supervisions across the service. The frequency of supervision is monitored through performance data and the quality of records through the audit programme; a themed audit around supervision recording has been planned for 2018/2019. Practice Week findings show that the majority of practitioners feel they are getting good case direction and supervision.

Furthermore, a recent restructure of social care has ensured there are adequate numbers of case holding posts throughout the service. This forms part of the vision to spend more face to face time with families and also to address the growing demand that we are facing in the borough. Likewise, social work practice should also improve with the introduction of a new case management system, Liquid Logic, from December 2018.

2. Introduction

The 'Children Act 1989 Representations Procedure (England) Regulations 2006' govern complaints, representations and compliments received about children and young people's services.

There are three stages covered within the regulations as follows:

Stage 1 – Local Resolution

Response times are 10 working days with a further 10 working days if required. If a young person requires an advocate this should be sought for them. If the complainant is not happy with the response at Stage 1 they can request to progress to Stage 2 within 20 working days of receiving the response.

Stage 2 – Formal Investigation

Response times are 25 – 65 working days. An Independent Investigator and Independent Person are appointed at this stage. The Independent Person must be external to the organisation. Following the independent investigation, the investigation report will be sent to the complainant, along with the adjudication letter giving the decision of the Head of Service. If the complainant is not happy with the response at Stage 2, they can request their complaint to be heard by a Review Panel within 20 working days of receiving the response.

Stage 3 – Review Panel

The Review Panel is managed independently of the Complaint & Information Team via Democratic Services. The Panel must consist of three independent people, one of whom is the Chair. The Panel must be held within 30 working days from request. Following the Panel Hearing, the recommendations will be issued to the complainant, independent people, advocate and Director within 5 working days. The Director must issue their decision within 15 working days of receiving the recommendations.

3. Complaints Received

3.1 Ombudsman referrals

There were three Ombudsman enquiries during 2017-18, one found maladministration and injustice relating to provisions on Education, Health & Care Plan (EHCP), one was closed after initial enquiries and the other is ongoing and the outcome of this will be known in 18/19.

	Apr17- Mar18	Apr16- Mar17	Apr15- Mar16
Maladministration (no injustice)			
Maladministration & Injustice	1	1	1
No maladministration after investigation			
Ombudsman discretion			
Investigation with Local settlement			
Outside Jurisdiction		3	
Investigation Discontinued			
Premature/Informal enquiries	1	2	4
Total	3	6	5

3.2 Total number of complaints

Total number of complaints, including enquiries, is 140 for 2017-18. This is a slight increase of 4% to 2016-17 (135). The total of Stage 1 statutory complaints have dropped slightly by 2% in 2017-18 from 92 (2016-17) to 90. Complaints made directly by children/young people have increased steadily year on year in the last three years and in 2017-18 there were 18 complaints received directly from children/young people, up from 15 in 2016-17. Of the 18, five were withdrawn, which was as a result of early meetings held with the child/young person or the necessary action being taken quickly.

Enquiries have increased slightly in 2017-18 by 16% from 43 in 2016-17 to 50 in 2017-18. Enquiries do not form part of the statutory process and therefore these figures are not included in further reporting in this report, besides contact method which does include enquiries in the figures.

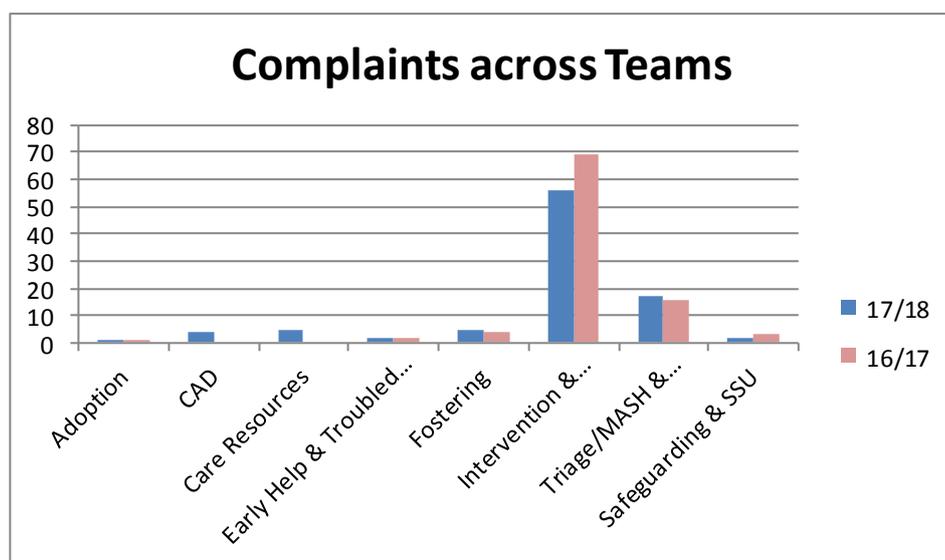
	Enquiries	Stage 1	Stage 1 escalated to Stage 2
202017-18	50	90	1
202016-17	43	92	1
2015/16	20	74	

3.3 Stages

During 2017-18 there was one escalation to Stage 2, which commenced late in 2017-18 and the outcome of this will be known in 18/19. Meetings with complainants who are not satisfied with Stage 1 have continued to prove successful in reducing escalation to Stage 2. There were no Stage 3 Reviews during 2017-18.

3.4 Teams

The complaints received have in the main been received by parents, centred around the unwelcome intervention by social workers and decisions made regarding their children. This is reflected in the high number of complaints for Intervention & Support Services. However, it should be noted that the number of complaints has dropped by 19% from 69 in 2016-17 to 56 in 2017-18 for Intervention & Support Services. Triage/MASH and Assessment received the next highest, and again this was related to intervention particularly around child protection.

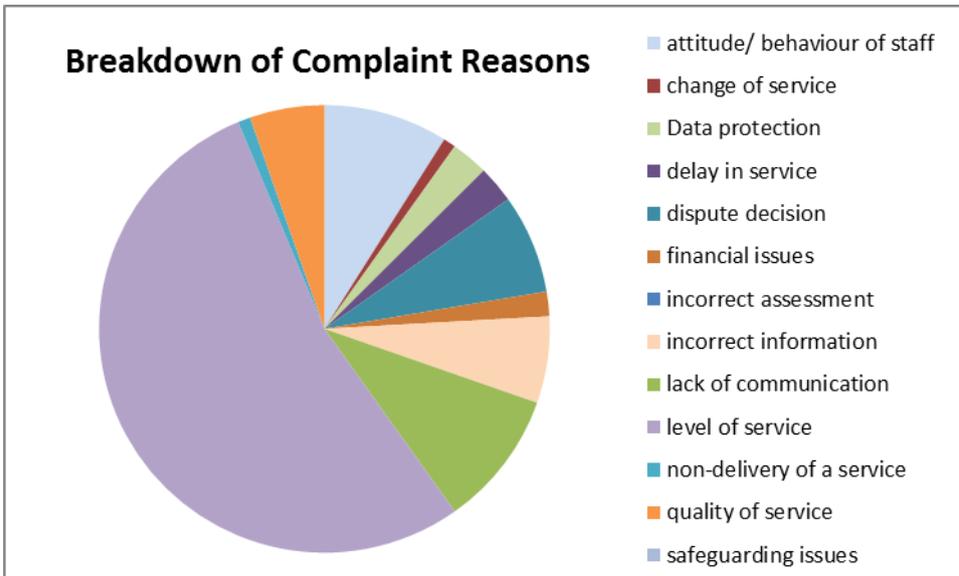


Column1	Adoption	CAD	Care Resources	Early Help & Troubled Families	Fostering	Intervention & Support Services	Triage/MASH & Assessment	Safeguarding & SSU
2017-18	1	4	5	2	5	56	17	2
2016-17	1			2	4	69	16	3

3.5 Reasons

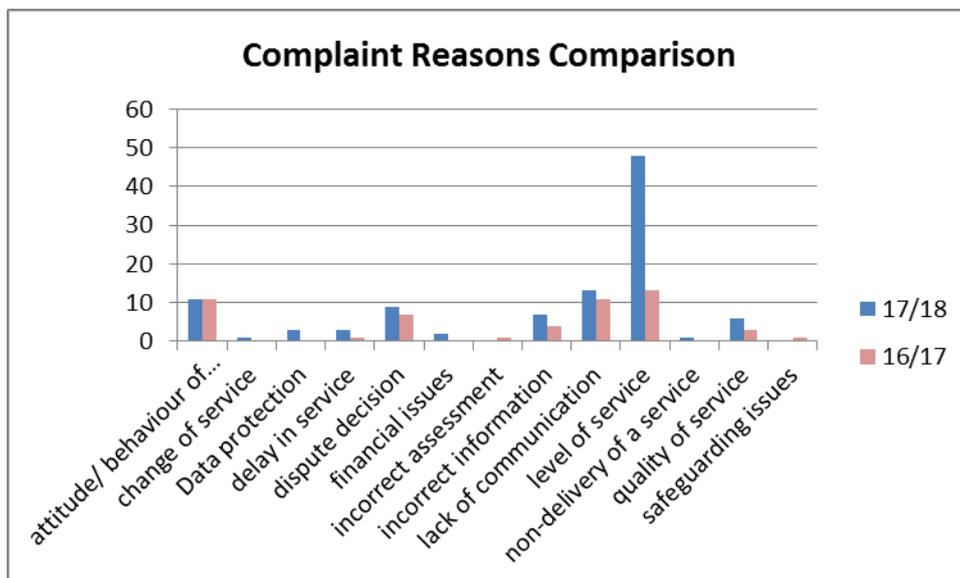
‘Level of service’ is the main reason for complaint and relates to level of support parents feel they should be receiving when intervention occurs. The focus of intervention would be to the child or children, although increasing emphasis is on the family as a whole. Also complaints relating to ‘level of service’ are where parents feel they are not always being kept updated, or the lateness or non-receipt of information/paperwork for meetings.

‘Lack of communication’ is the next highest reason for complaint and has increased slightly in 2017-18 (13) compared to 2016-17 (11) and links to ‘level of service’ in terms of not being kept updated. ‘Behaviour of staff’ is at the same level in 2017-18 (11) as in 2016-17 and Children’s Services continue to provide briefing and training sessions for staff as part of their systemic approach to engaging with children and families. 116 social care staff have undertaken or are currently undertaking systemic training.



'Level of service' has increased significantly in 2017-18, as shown in the graph below with complaints covering a number of elements regarding intervention. It has been highlighted that many of these complaints relate to parents'/carers' perception of a social worker's role and their expectations. Within this category, complaints also related to the information within assessments or reports, in which parents did not feel the content was a true reflection of discussions. It should be noted that of those complaints regarding 'level of service', 23 were 'upheld' and 25 were 'not upheld'. Of complaints 'upheld', they mainly resulted in an apology being given for the delay in providing relevant information/paperwork.

The significant increase from 2016-17 will need to be explored as this could be the result of reporting/recording difficulties.



3.6 Outcomes & Learning

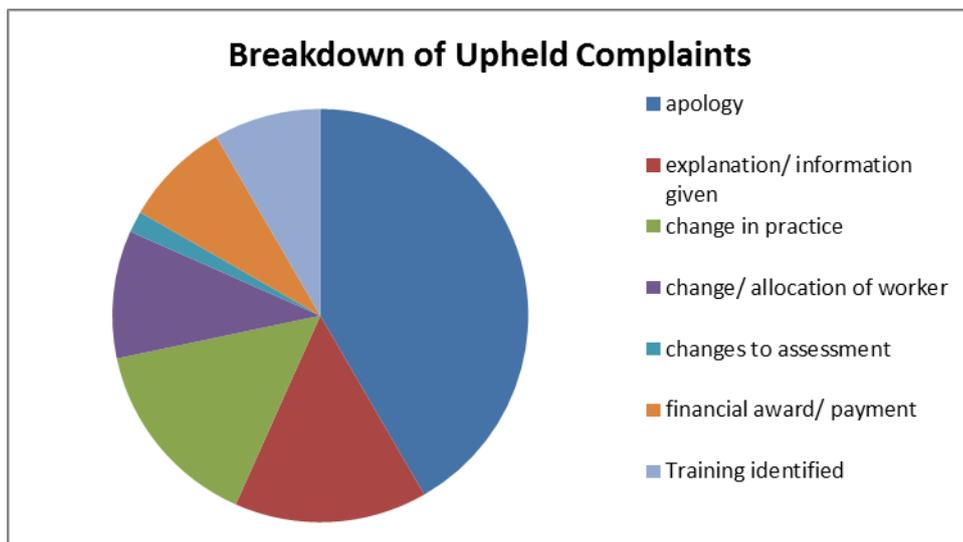
There were 41 complaints upheld in 2017-18 with 38 not upheld, eight withdrawn and one with no further action required. Two complaints had not been closed at time of reporting, as meetings with complainants were undertaken and final notification of outcome required.

Complaint Withdrawn	No further Action	Not Upheld	Upheld
8	1	38	41

Of those upheld, the main outcome was an ‘apology’ given which is linked to the next highest outcomes, ‘explanation/information given’ and ‘change in practice’ related to information not being provided at the time or clarification of processes or explanation as to the reasons why a particular course of action was taken. Therefore the need for social workers to understand the importance of follow up work with families is being reinforced with staff. It has also been recognised that a response is required for complaints from fathers, centred around how they felt they were not being included in decisions around their children. Social workers will therefore need to be more mindful of taking into account fathers’ views and wishes.

Communication is an area that has been highlighted and steps are being taken to better inform families for handover of cases and ensure that when a social worker leaves the authority, the necessary actions are put in place to redirect emails to ensure that delays communicating with families are minimised.

The recording of information within assessments and Section 7 reports was identified as an area for improvement and managers have put in place an audit process to ensure that reports for Court are quality assured and signed off by the team manager.



3.6.1 General Themes and Trends 202017-18

The general themes and trends for 2017-18 in relation to young people was around the level of support or lack of support provided when leaving care. The opening of The Cocoon, an informal venue for young people to go to, where they can meet with Children’s Services

officers, social workers or advocates, has assisted in dealing with their concerns in a more conducive way. Complaints meetings have also been conducted there and young people have found this more comfortable to discuss their concerns openly.

Communication between social workers and families is still sometimes a factor, particularly when there is changeover of social worker or social workers leaving the authority. However, over the last 18 months, Children's Services have decreased their percentage of agency social workers by over 20%. As of April 2018 70% of social workers are permanent and the aim is to increase this by a further 10% in 2018/19. Targeted and focused recruitment campaigns and the introduction of a market supplement have helped to increase the permanency rate. The systemic training offer and innovation work are also widely publicised and have helped to raise the profile of Havering as a place to work. A noticeable benefit in a more stable workforce is the reduction in the number of children experiencing 3+ changes of social worker in 12 months. This has reduced from 14.9% in March 2017 to 4.7% in April 2018.

Staff retention and workforce development has also been boosted by the launch of the Social Care Academy in March 2018. The Academy brings together social care career development and progression routes, accessible to all staff across both Children's and Adult Social Care. It sets out learning and development opportunities that may be available; by mapping a progression route from the career entry point to more specialist and senior roles by providing a framework for achievement that is both developmental and aspirational.

The quality and accuracy of information recorded has been identified as an area requiring improvement, in particular with assessments. Children's Services have reinforced the need for quality assessments and recording through the introduction of the 'Obsessions with Assessments' programme in April 2018. The aim of this training is to enhance how assessments are undertaken in the various contexts they are done using a variety of modalities. This programme builds on what Children's Services are doing well and continues developing improvements in areas that may need them. By the end of the 12 months, Children's Services want to be able to see a positive change in the confidence of staff carrying out assessments and an increase in their ability to hold onto positions of curiosity, imagination, rigour and focus in assessments. To date, nine workshops have taken place and 298 staff have attended.

Furthermore, in December 2017 Children's Services procured a new case management system, Liquid Logic. The plan is for the system to be live from December 2018 with an extensive amount of work regarding configuration, data migration and training before then. The introduction of this system will not only better support case management and social work practice but also enable access to performance data in a way not currently available.

3.7 Response times

Response times have not improved and continuous efforts will need to be made to identify causes for delay. However it should be noted that with the time taken for complaints to be investigated thoroughly, this does inevitably cause responses to be over timescale. Simultaneously, this has also resulted in the reduction in complaints escalating.

	Within 10 days		11-20 days		Over 20 days	
	Apr17 - Mar18	Apr 16 Mar17	Apr17- Mar18	Apr16 Mar17	Apr17 - Mar18	Apr16 Mar17
Stage 1	15	21	28	30	47	41
%	21	23	31	33	48	45

4. Expenditure

There is no expenditure incurred for 2017-18. One Stage 2 investigation proceeded in 2017-18, however costs will be incurred in 18/19 expenditure.

	Publicity/ leaflets	Independent investigators	Total
Apr 2017 – Mar 2018			
Apr 2016 – Mar 2017		£9,432.00	£9,432.00

5. How Complaints were received

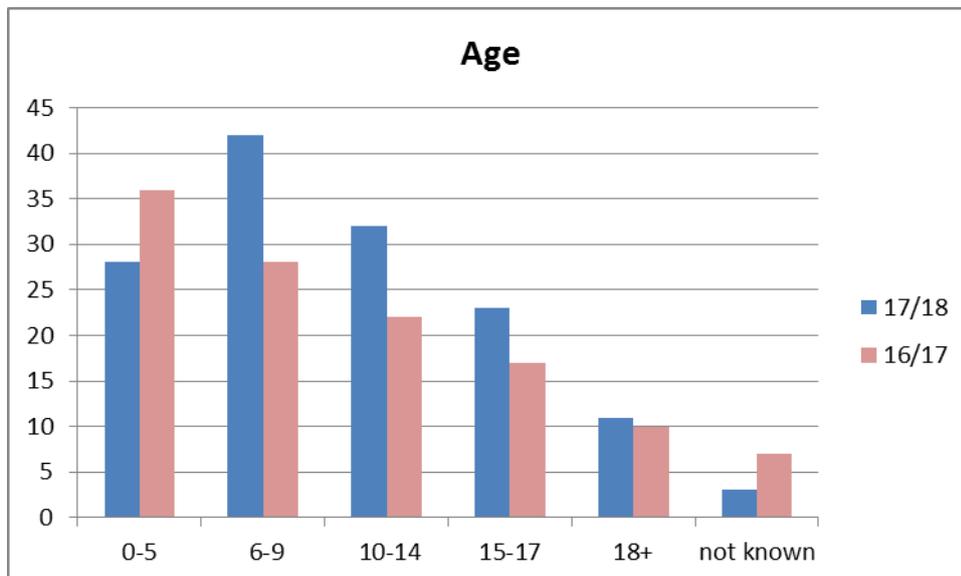
The figures shown below for 2017-18 also include enquiries and therefore not a true comparison to 2016-17.

	Letter	E-mail	Complaint Form	Telephone	In Person	Online	Social networking
202017- 18	19	85		24	2	7	2
202016- 17	16	33	4	28	1	9	

6. Monitoring Information

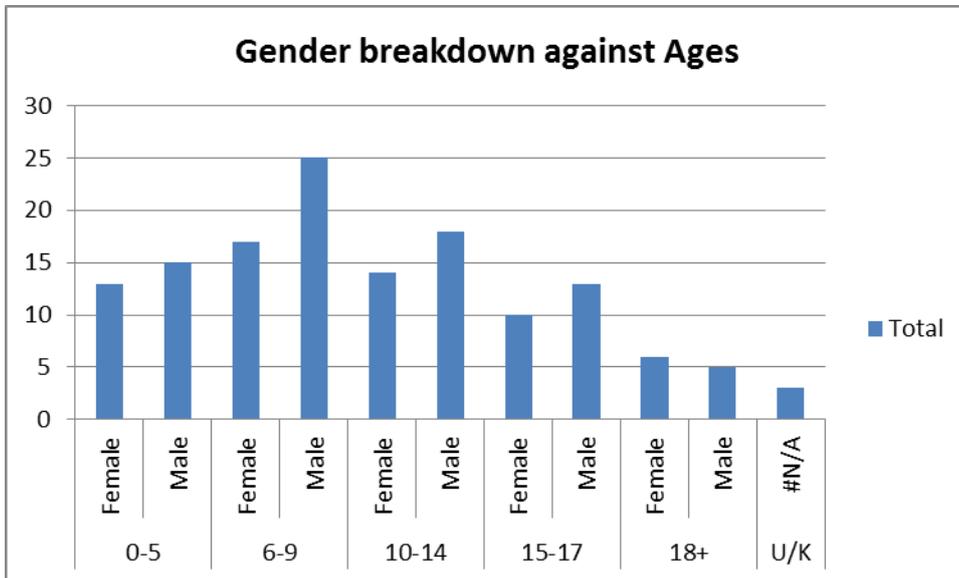
6.1 Age & Gender

The figures below show all children associated with complaints, which could be more than one child. There have been increases across age ranges 6-9, 10-14 and 15-17, with a slight increase in those 18+.



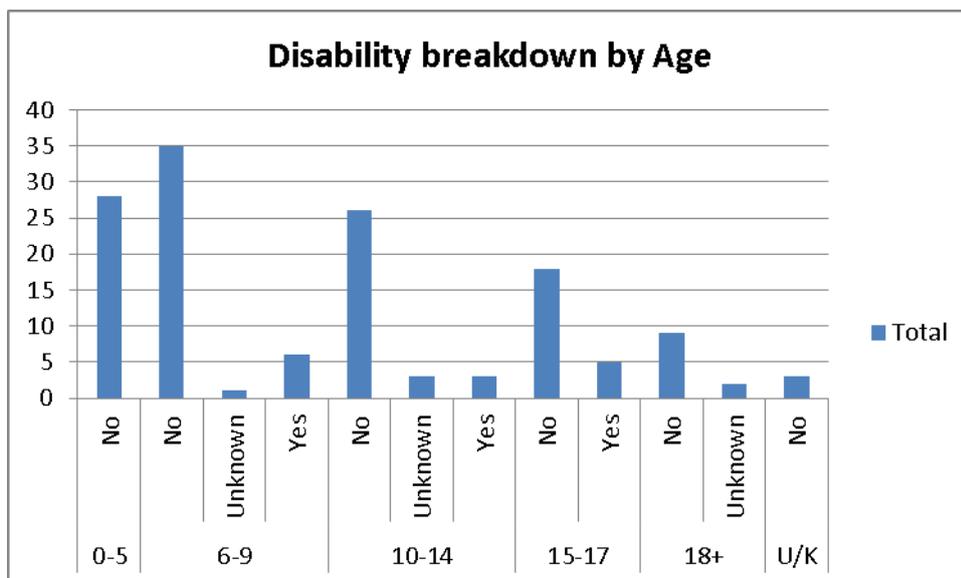
note: 2016-17 age range category 15-19 changed to 15-17 and 18+ for 2017-18

Below shows the breakdown of female and male children within each age range. The number of male children is the highest across all age ranges, except for 18+, where there are a slightly higher number of female children. This data will be reported going forward, however as this is the first year reported there is no comparative data.



6.2 Disability

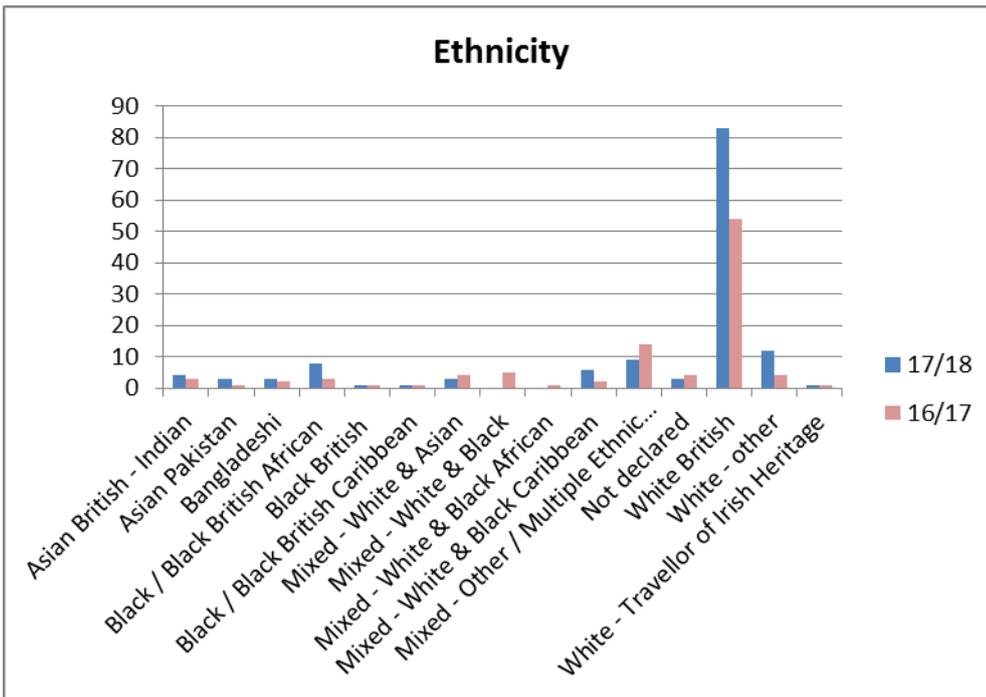
Within the chart below it shows where a disability is recorded as yes or no. However on exploring this further, there were two children with a visual impairment, one with a hearing impairment and one with a speech impairment. It should be noted that the breakdown relates to only two children, with one child having visual, hearing and speech impairments. Children's Services may need to look at how disability is recorded going forward.



6.3 Ethnicity

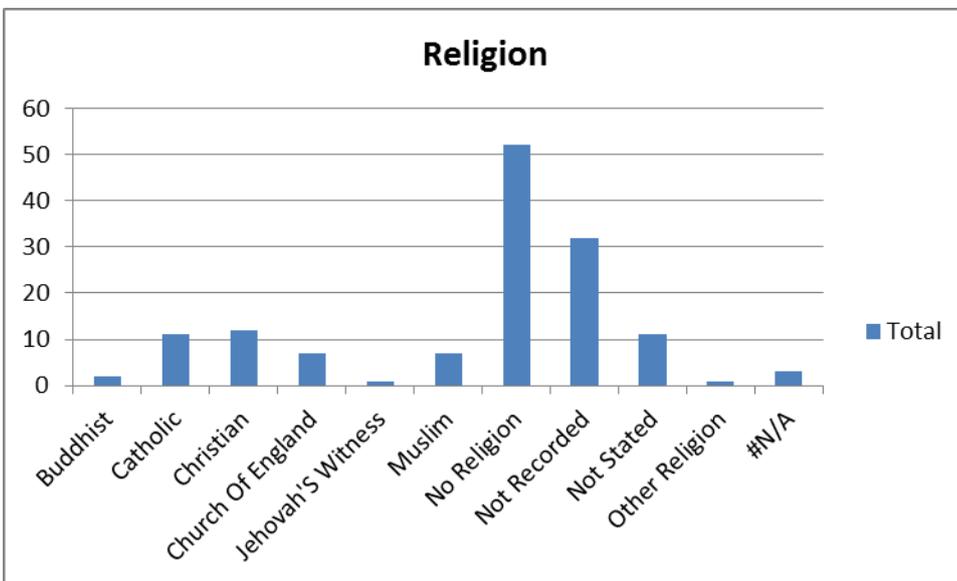
'White British', as reflected in the borough's demographic makeup, is the highest. There also shows that there continues to be increasing representations from differing ethnic

backgrounds accessing the complaints process, in particular 'Black/Black British African' and 'Mixed – White & Black Caribbean' and 'White other'.



6.4 Religion

There is a high number recorded as 'no religion' or 'not recorded' and recording practices will need to be addressed with the introduction of the new social care system. However there is representation from differing religious faiths accessing the complaints process.



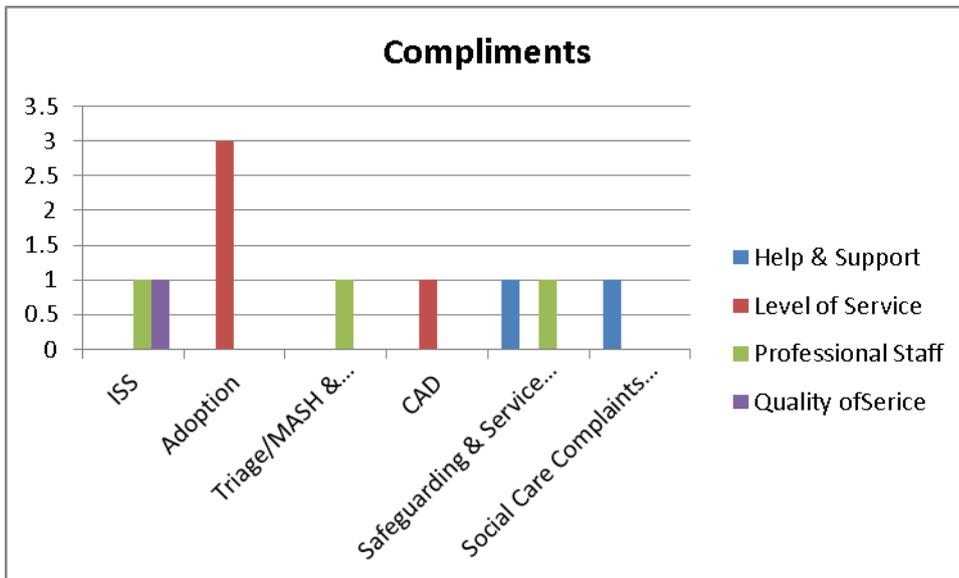
7. Members Correspondence

There was a slight increase in the number of member enquiries during 2017-18 (63) compared to 2016-17 (61), with 62% being responded to within timescale.

	202017-18	202016-17
Members Correspondence	63	61

8. Compliments

Compliments are still quite low and efforts will need to be made to encourage staff to ensure that compliments received are sent to the Social Care & Information Team to be logged. Adoption had the highest number of compliments relating to the level of service provided.



Some examples of compliments received are given below:

'to formally record the positive feedback you received from the family at the recent Child Protection Conference. The parents stated that you were hard working, had listened to them, progressed the Child Protection Plan and that they were very grateful to you for all you had done.' – **INTERVENTION & SUPPORT SERVICES**

A headteacher says – 'very impressed with the professional manner '...' spoke to parents and children. Whilst all concerned were put at ease all parties were left with a clear understanding as to what is acceptable and unacceptable behaviour. I have no doubt that '...'s involvement will have already had a positive impact on the family. ' – **TRIAGE/MASH & ASSESSMENT**

'We have had a long journey firstly trying to get our son '...' a diagnosis and then trying to mould a sometimes inflexible system to allow him to be the best '.....' he can. We have the scars, both physical and mental, to prove how tough this fight has been.

Occasionally, in amongst the darkness, we meet a source of light and I'm happy to say that '.....' is a brilliant example of that. Nothing is too much trouble for him and what he says he will do he does. And quite often he will go further than we expected.

Never underestimate how much these things, no matter how small, mean to the families that you are dealing with. Having someone fight your corner in such a professional and caring way is amazing.' – **CHILDREN & ADULTS WITH DISABILITIES**

‘to thank you personally for steering me in the right direction and your help in this matter’. –
SOCIAL CARE COMPLAINTS & INFORMATION

‘Mr and Mrs J..... (carers) where very impressed with how you engaged the children, generally C..... is reluctant to engage with professionals and the carers advised that you completed some direct work with the children in a way they have not seen any social workers do. They advised that the children really enjoyed the time you spent with them, so much so that they didn’t want you to leave – **SAFEGUARDING & SERVICE STANDARDS UNIT**

‘say thank you to everyone involved in organising this years panto. A..... loved it, she actually said on the way home “can we see Beauty and the Beast every year” so it really did go down well’ - **ADOPTION**

9. Conclusion

Children’s Services are striving forward with their vision for children and young people, looking at providing support and ensuring that not only focus is on children and young people, but taking a whole-family approach. This is being achieved through embedding systemic practice across the service, improving workforce stability and development, and enabling social workers to spend more time with families. Complaints can help to shape the service provided by identifying those areas that could improve and those areas that are working well, by way of compliments.

It has been acknowledged that there is a greater need for improvement in responding to complaints in a timely manner and with the increased capacity built into the Social Care Complaints & Information Team it is hoped that this will help to support Children’s Services in a positive way.

The Social Care Complaints & Information Team are also looking to move towards a more customer-focussed way of dealing with complaints and again, with the added support in the team, this will help to have arrangements in place to undertake briefing/training sessions within teams and provide a platform for young people to raise their concerns through sessions arranged at the Cocoon.

PAGE DELIBERATELY LEFT BLANK

10. Complaints Action Plan

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
S47 – parents not given sufficient information about process	<ul style="list-style-type: none"> Determination of S47 needs to be consistent. Clear explanation/information about process 	<ul style="list-style-type: none"> Process already in place that two senior managers sign off S47s. Social workers to give clear and concise information about process 	Triage/MASH & Assessment	On-going	Children-focussed leaflets were produced on S47 and Looked after Children (LAC) to explain the process and were launched on 3 April 2017. We are continuing to develop this offer across the service.
Important information is not always recorded appropriately	<ul style="list-style-type: none"> Information leading to an action/decision should be recorded in detail. Information needs to be recorded accurately 	<ul style="list-style-type: none"> Work is already being undertaken to look at improved recording across the service. Assessments to identify clearly fact from opinion and identify the source of the information. 	All	On-going	<p>Managers continue to carry out case file audits to ensure recording is appropriate.</p> <p>Introduction of 'Obsession with Assessments' training/briefing sessions introduced to reinforce the need for accurate reporting.</p> <p>Introduction of Liquid Logic from December 2018 will also help this.</p>
Better communication around contact arrangements and case progression	<ul style="list-style-type: none"> Communication around changes in contact with families. Communication gap when social worker leaves. 	<ul style="list-style-type: none"> To explore better communication re contact arrangements and case progression Use of generic emails to ensure continued communication when a social worker leaves service areas to ensure consistency. 	All	On-going	Management arrangements were strengthened during 2014-2015 and a further restructure of teams took place in 2016-17 and in 2018 to assist in improving practice overall. It is improving and ensuring better communication with families and better handovers is being addressed in supervision and through the Council's Personal Development Review (PDR) process. The embedding of systemic supervision across the service is also improving this.
S7 reports/court reports – inaccurate information/interpretation of information		Managers to quality assure and sign off all reports that go to Court			

Improved response times	<ul style="list-style-type: none"> • Responses need to be completed in a timely manner. 	<ul style="list-style-type: none"> • Complaints to be tracked on a weekly basis by Senior Leadership Team within Children's Services 	Assistant Director/SLT	On-going	
-------------------------	--	---	------------------------	----------	--

This page is intentionally left blank

APPENDIX 2

Children's Services - Education Services

Annual Report 2017 – 2018 Complaints and Compliments

**Prepared for: Trevor Cook,
Assistant Director for Education Services**

**Prepared by: Veronica Webb,
Complaints & Information Team Manager**

	Contents	Pages
	Executive Summary	3
1	Ombudsman Referrals	3
2	Total Number of Complaints	3
2.1	- Service Areas	3-4
2.2	- Reasons	4
2.3	- Outcome	4
2.4	- Response Times	5
3	Members Correspondence	5
4	How complaints were received	5
5	Compliments	5
6	Conclusion	5

Executive Summary

Education has a small number of Corporate Complaints within the year, with many complaints relating to schools and may need to be referred to their own complaints process. Information is still collated in relation to these type of complaints and are referred to as enquiries within this report.

The response times have greatly improved with a 100% being responded to within timescale.

Learning and Achievement went through structural changes during 2016-17, resulting in changing senior management arrangements, and the restructuring of some teams, which impacted on response times. Since then, the service area has been relatively stable, which has resulted in improved response times across complaints. Although member enquiries are slightly down efforts will be made to improve response times.

1. Ombudsman referrals

There were no Ombudsman enquiries for 2017-18.

	Apr 17 Mar 18	Apr 16 Mar 17	Apr 15 Mar16
Closed after initial enquiries no further action		1	
Maladministration			
No investigation			1
No maladministration after investigation			
Ombudsman discretion			
Investigation with Local settlement			
Outside Jurisdiction			
Investigation Discontinued			
Premature/Informal enquiries			2
Total		1	3

2. Total number of complaints

The total number of Corporate Complaints have dropped significantly by 67% from 18 in 2016-17 to 6 in 2017-18, and are reported within the Corporate Complaints reports. Enquiries are complaints received that relate to schools, academies or colleges that may need to be taken through their own complaints procedure. Enquiries have dropped by 30% from 60 in 2016-17 to 42 in 2017-18.

	Corporate Complaint	Enquiry	Total
2017/18	6	36	42
2016/17	18	42	60
2015/16	31	35	69

2.1 Service Areas

The breakdown of service areas were not available for Corporate Complaints. The following table below shows the breakdown of enquiries received and as expected the highest number (26) are those for Education & Schools referred to the relevant education provision.

	Adult Education	Attendance Behaviour & Traveller Support Service	Early Years	Education Inclusion and Support	Education & Schools	School Admissions	Short Breaks
17/18	1	1	1	1	26	3	3

2.2 Reasons

Below shows the breakdown of reasons for Corporate Complaints. 'Staff attitude or incompetence' was the highest reason, although a low number these related to parents not happy on receipt of school attendance letters resulting in fines.

Availability of service	Dispute decision	Late delivery or slow service	Not keeping our promises	Quality and reliability of service	Staff attitude or incompetence	Suitability of service
1		1	1		3	

The table below shows the breakdown of reasons for enquiries and relate to those complaints relating to school, academy or college issues. The main reason 'level of service' related mainly to complaints raised by parents about how schools were dealing with bullying. There were some general issues around appropriate clothing and lack of support. Bullying was also a main theme reflected in 'safeguarding issues' raised by parents.

Behaviour of staff	Delay in service	Dispute decision	Incorrect information	Lack of Communication	Level of Service	Need of service	Quality of Service	Safeguarding issues
3		5			18	1		9

2.3 Outcome

Of the Corporate Complaints received, four were not upheld and explanation was given, one was partially upheld and explanation given, one was upheld and apology given in relation to EHCP assessment delay.

	Partially Upheld	Upheld	Not Upheld
Corporate	1	1	4

Enquiry outcomes are shown below with 20 being 'information given' to advise of the correct process, 12 were referred to the school/college/academy directly, two 'no further action' and those that had 'other' were referred to an alternative process.

	Information given	No Further Action	Referred to school	Other
Enquiries	20	2	12	2

2.4 Response times

Education have improved their response times for Corporate Complaints in 2017-18, with 100% being responded to within timescale compared to 72% in 2016-17.

	Within 15 days		Outside of timescale	
	Apr 17- Mar 18	Apr 16- Mar 17	Apr 17 – Mar 18	Apr 16- Mar 17
Corporate Complaints	6	13	0	5

3. Members' Correspondence

Members correspondence has decreased by 55% to 22 in 2017-18 compared to 49 in 2016-17, with 82% being responded to within timescale. This is slightly down from 2016-17 where 84% were responded to within timescale.

	2017/18	2016/17
Members Correspondence (from MP's & Cllrs)	22	49

4. How Complaints were received

Email was the preferred method of contact for Corporate Complaints in 2017-18, as it was in 2016-17.

Email	Letter	Online
4	1	1

5. Compliments

There were few compliments recorded for Education in 2017-18, however of those received three were for Catering and the support and advice given to the schools, one was for the help, support and guidance provided by Education Inclusion & Support from a Headteacher. Education will need to encourage and remind staff to ensure compliments are sent to the Complaints Team for logging and recording.

6. Conclusion

Education Services complaints are dealt with through the Corporate Complaints process and as such, the detailed breakdown of information is recorded where available.

The information collated for those complaints that relate to schools/academies/colleges are recorded as enquiries within this report. Although this is only a snapshot of complaints, this does provide information on particular themes arising. In 2017-18 this was around bullying and the way schools were dealing with this issue.

As Education has a very small number of Corporate Complaints, this report has been included as an additional appendix as part of the Children's Services Statutory Complaints Annual Report.

Education Services Annual Complaints Report 2017-18

This page is intentionally left blank