Public Document Pack



ADJUDICATION AND REVIEW COMMITTEE AGENDA

| 7.00 pm | Thursday 5 September 2019 | Town Hall |
|--|---|--|
| Members 8: Quorum 3 | | |
| COUNCILLORS: | | |
| Conservative Group (4) | Residents' Group (1) | Upminster & Cranham Residents' Group (1) |
| Ray Best (Vice-Chair) Joshua Chapman Timothy Ryan (Vice-Chair) Matt Sutton (Chairman) | Ray Morgon | Linda Van den Hende |
| Independent Residents Group' (1) | Labour Group (1) | |
| Jeffrey Tucker | Denis O'Flynn | |
| | ation about the meeting pleas hard Cursons Tel: 01708 4324 | |

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 21 May 2019 and to authorise the Chairman to sign them.

5 UPDATE ON CORPORATE COMPLAINTS (Pages 5 - 28)

Report and appendices attached.

6 LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN (LGSCO) ANNUAL REVIEW LETTER 2018/19 (Pages 29 - 74)

Report and appendices attached.

7 PRESENTATION ON THE COUNCIL'S CORPORATE COMPLAINT POLICY AND PROCEDURE/UPDATE ON SERVICE AREA COMPLAINTS (Pages 75 - 86)

Report and appendix attached.

8 ADULT SOCIAL CARE ANNUAL COMPLAINTS REPORT 2018/19 (Pages 87 - 108)

Report and appendix attached.

9 CHILDREN'S SERVICES ANNUAL COMPLAINTS REPORT 2018/19 (Pages 109 - 128)

Report and appendix attached.

Andrew Beesley Head of Democratic Services This page is intentionally left blank

Agenda Item 4

MINUTES OF A MEETING OF THE ADJUDICATION AND REVIEW COMMITTEE Committee Room 2 - Town Hall 21 May 2019 (7.00 - 7.30 pm)

Present:

COUNCILLORS

| Conservative Group | Ray Best (Vice-Chair), Joshua Chapman, Timothy Ryan (Vice-Chair) and Matt Sutton (Chairman) |
|---|--|
| Residents' Group | Ray Morgon |
| Labour Group | Denis O'Flynn |
| Upminster & Cranham Residents' Group | +Linda Hawthorn |

+ Substituting for Councillor Linda Van den Hende

Apologies were received for the absence of Councillors Jeffrey Tucker and Linda Van den Hende (Councillor Linda Hawthorn substituting).

All decisions were taken with no votes against.

1 CHAIRMAN'S ANNOUNCEMENTS

The Chairman gave details of arrangements in case of fire or other event which may require the evacuation of the meeting room or building.

2 DECLARATIONS OF INTERESTS

There were no disclosures of interest.

3 MINUTES

The minutes of the meeting of the Committee held on 7 March 2019 were agreed as a correct record and signed by the Chairman.

It was noted that the new IT system in Housing had led to a system of accountability by service area which allowed complaints to be resolved in a quicker timescale.

4 UPDATE ON CORPORATE COMPLAINTS AND STATUTORY COMPLAINTS FOR QUARTER 4

The data presented showed a considerable improvement in quarter 4 (Q4) results for complaints. Changes t corporate timescales had led to a reduced performance on stage 2 complaints in February 2019 but this had recovered in March to 93%. This new way of working allowed more time for a complaints investigation.

There had been a rise in the number of statutory complaints received fir both adults and children's social care. Whilst response times had improved from 49% to 63% a revised method of managing these complaints was being considered.

Officers felt that the rise in adult social care complaints had been principally due to issues relating to the Allied Healthcare Company failing nationally as a company. Other providers supported adult social care in taking on care packages that Allied Healthcare was no longer able to provide. One alternative provider in particular took on a significant number of new packages resulting in an increase in issues such as late or missed calls. The issues that emerged were dealt with they become known, however the service did see an increase in complaints as a result. The Director of Adult Services added that she regretted the poor quality experienced by residents during this period. A Member thanked the director for her work to deal with the Allied Healthcare situation.

Most children's services complaints related to service standards and issues around social worker behaviour. Of the four stage 2 complaints received, two had now been resolved and two were ongoing. Officers would provide a breakdown of complaints by area of Havering and this could be included within a future annual report to the Committee.

Only one Ombudsman complaint had been upheld with a penalty. There had also only been one stage 3 corporate complaint in the period under review and this had not been upheld. Only 7 of 64 corporate complaints referred to the Ombudsman had been upheld.

The Committee noted the report.

5 WORK PROGRAMME

It was agreed that the quarterly update on quarterly and statutory complaints should continue to be taken at each meeting. The annual complaints reports for adults and children's services would be brought to the August meeting of the Committee. The Annual Letter from the Local Government and Social Care Ombudsman would be brought to the March meeting. It was also agreed that a presentation would be taken at the August meeting on how the complaints process currently worked and variations in how complaints are dealt with in areas such as housing and social care. The Committee would then decide if any further scrutiny work of the complaints process was needed and agree the scope of this.

Chairman

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Agenda Item 5



ADJUDICATION AND REVIEW COMMITTEE

5 September 2019

| Subject Heading: | Update on Corporate Complaints |
|------------------------------------|--|
| SLT Lead: | Andrew Blake-Herbert |
| Report Author and contact details: | Carol Ager <u>carol.ager@havering.gov.uk</u> 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] |



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. Some changes to the Corporate timescales were made, effective 1st October 2018. Turnaround was set to 1 working days for Stage 1 complaints and 25 working days for Stage 2 complaints. Services should aim to respond to 95% of cases within time.

Statistics are reported to Committee on a quarterly basis.

This report attaches written information for Members to consider on complaint statistics for Quarter 1, indicating numbers received and performance on timeliness and quality. It also includes quarterly statistics for Statutory complaints; information follows.

RECOMMENDATIONS

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

- 1. The Corporate Complaints Performance Statistics for Quarter 1 (April June 2019).
- 2. The Statutory Complaints Performance Statistics for Quarter 1 (April June 2019)
- 3. Decisions made by both the Local Government and Social Care Ombudsman (LGSCO) and 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 1st quarter performance statistics for all complaints under the procedure is attached as **Appendix 1**.

In short, the council received 490 Stage 1 complaints during the period April to June 2019. 96% of them (469) were responded to within the required timescale of ten days.

The council received 84 requests for escalation to Stage 2 of the process, 89% (75) of them dealt with within 25 days, in line with current timescales.

This equates to an escalation request rate of 17% however, this is reduced to 5% when considering the number of cases that were not escalated to Stage 2. When compared to the same period in the previous year, 2018/19, the request for escalation rate is lower than the previous 20%. The percentage of cases actually taken through the Stage 2 process is the same as the previous year.

The following table provides an easy view of complaints completed at Stages 1 and 2.

| | April | May | June |
|----------------------------|-------|-----|------|
| Stage 1 percentage to time | 95% | 94% | 98% |
| Stage 2 percentage to time | 83% | 92% | 94% |
| Cumulative percentage | 93% | 93% | 97% |
| Stages 1 & 2 | | | |

There has been a marked improvement in performance across this quarter and the results are pleasing.

Statutory Complaints Performance Statistics

Quarter 1 Statutory complaints statistics are shown at Appendix 2.

The number of statutory complaints received in 2019-20 by Adult Social Care in Q1 totalled 19 and Children's Services totalled 20. There has been a significant decrease in the number of complaints by 44% compared to Q1 in 2018/19 (36) for Children's Services, while there has been a very slight decrease of 5% in Adult Social Care complaints compared to 2018-19 (20).

For Adults, of those complaints responded to in Q1 (16), 69% were responded to within the 20 day timescale. Of those complaints responded for Children's, 67% were responded to within the 20 day timescale. Figures provided in the chart are shown as the number responded to within a 20 day timescale against the number of complaints, with some complaints either still ongoing or on hold.

Adult Social Care complaints in Q1 mainly involved financial issues, mainly disputes over charges and standards of care provided. Children's Services complaints were mainly in relation to social workers and their intervention with families and lack of support during this period.

Ombudsmen Decisions

During Quarter 1 there were 19 decisions by Local Government and Housing Ombudsmen, as follows:

- 9 x Closed after initial enquiries: No further action (Children's Services; Leisure; Environment (3); Planning; Housing; Council Tax & Benefits; Business Rates)
 4 x Closed after initial enquiries: Out of jurisdiction (Adult Services; Environment; Housing (2))
 2 x Closed: Premature (Housing)
 1 x Net unheld: No molodministration
- 1 x Not upheld: No maladministration (*Planning*)
- 1 x Upheld: Maladministration, injustice with penalty **S** (Children's Services)
- 1 x Upheld: Maladministration, no injustice **S** (Housing)

There was one Housing Ombudsman decision during the period, which found no maladministration.

See table below for comparison of significant (S) decisions made for Quarter 1 in 2018 and 2019:

| Significant decisions (where maladministration and injustice found) | | | | | | | | | | |
|---|-----|-------------------------------|---|---------------------|--|--|--|--|--|--|
| | Qua | Quarter 1 2018 Quarter 1 2019 | | | | | | | | |
| Maladministration, injustice with penalty | 1 | Adult Services | 1 | Children's Services | | | | | | |
| | | | | | | | | | | |
| Maladministration, no injustice | 0 | | 1 | Housing | | | | | | |

Quarter 1 Ombudsman decisions are shown in more detail on attached Appendix 2.

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 three appendices:

Appendix 1 – Quarter 1 Complaints statistics

Appendix 2 – Quarter 1 Statutory Complaints statistics

Appendix 2 – Ombudsman Activity Report for Quarter 1

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 revision of timescales to the Corporate Complaints Policy and Procedure, with effect from 1st October 2018, we have to respond to Stage 1 complaints in 10 days, 25 days for a Stage 2 and 30 working 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 1 2018: | | | | Performance for Quarter 4 2018: | |
|--|-----|--|-----|---|--------|
| Stage 1 percentage to time overall (427/452) | 95% | | | Stage 1 percentage to time overall | 78% |
| Stage 2 percentage to time (67/92) | 73% | Performance for Quarter 1 2019: | | (390/499) | , 0, 0 |
| Stage 3 percentage to time (No cases) | 0% | Stage 1 percentage to time overall (469/490) | 96% | Stage 2 percentage to time (93/115) | 81% |
| | | Stage 2 percentage to time (75/84) | 89% | Stage 3 percentage to time | 0% |
| | | Stage 3 percentage to time | % | | |
| Performance for Quarter 3 2018: | | (No cases) Stage 1 & 2 cumulative score | 95% | Performance for Quarter 2 2018: | |
| Stage 1 percentage to time overall (315/411) | 77% | (544/574) | | Stage 1 percentage to time overall 80% (383/480) | |
| Stage 2 percentage to time (61/69) | 88% | | | Stage 2 percentage to time | |
| Stage 3 percentage to time (No cases) | 0% | | | 84% (82/98) Stage 3 percentage to time (One case) | 0% |

Senior Leadership Support team 8th August 2019

| | | S | stage 1 | | | | | Stage | ge 2 | | |
|---|--------|--------------|----------|---------|------------|--------|--------|-----------|---------|-------|------------|
| | Number | Closed in 10 | | Closed | Still open | Number | Closed | Closed in | Closed | Still | Still open |
| | Logged | days | days (%) | over 10 | | Logged | in 25 | 25 days | over 25 | open | and in |
| | | | | days | | | days | (%) | days | | time |
| | | | | | | | | | | | |
| Asset Management | 3 | 3 | 100% | | | | | | | | |
| Benefits (A-K) | 3 | 3 | 100% | | | | | | | | |
| Benefits (L-Z) | 4 | 4 | 100% | | | 3 | 3 | | | | |
| Bereavement Services | 1 | 1 | 100% | | | 1 | 1 | 100% | | | |
| Business Rates | | | | | | | | | | | |
| Businesses | | | | | | | | | | | |
| Cemeteries | 2 | 2 | 100% | | | | | | | | |
| Communications (Inc Living Magazine) | | | | | | | | | | | |
| Community Involvement (Inc Volunteers) | | | | | | | | | | | |
| Community Safety | 1 | 1 | 100% | | | | | | | | |
| Council Tax | 17 | 16 | 94% | 1 | | 3 | 3 | 100% | | | |
| Crematorium | | | | | | | | | | | |
| Customer Services | 10 | 10 | 100% | | | 4 | 4 | 100% | | | |
| Equality & Diversity | | | | | | | | | | | |
| Housing - Anti Social Behaviour | 8 | 7 | 88% | 1 | | 3 | 3 | 100% | | | |
| Housing - Other | 63 | 58 | 92% | 5 | | 13 | 9 | 69% | 3 | 1 | |
| Housing - Repairs | 66 | 65 | 98% | 1 | | 11 | 7 | 64% | 4 | | |
| Human Resources | | | | | | | | | | | |
| ICT / Web team | | | | | | | | | | | |
| Learning & Achievement | | | | | | | | | | | |
| Legal & Governance | | | | | | 1 | 1 | 100% | | | |
| Leisure Centres and Sport | 2 | 2 | 100% | | | | | | | | |
| Library Services (Inc Having Museum) | 2 | 2 | 100% | | | | | | | | |
| Parks and Open Spaces (Inc allotments) | 14 | 12 | 86% | 2 | | 1 | 1 | 100% | | | |
| Planning & Building Control | 17 | 16 | 94% | 1 | | 5 | 5 | 100% | | | |
| Public Health | 1 | 1 | 100% | | | 1 | 1 | 100% | | | |
| Public Protection (Inc Trading Standards, | | | | | | | | | | | |
| Environmental Health & Noise Nusiance) | 9 | 6 | 67% | 3 | | 3 | 3 | 100% | | | |
| Regeneration | | | | | | | | | | | |
| Registrar Services (Inc Birth, Death and Marriages) | 1 | 1 | 100% | | | | | | | | |
| Roads and Pavements (Inc Street Lighting) | 55 | 55 | 100% | | | 12 | 11 | 92% | 1 | | |
| Social Care Adults | 1 | | 0% | 1 | | 1 | 1 | 100% | | | |
| Social Care Children's | | | | | | | | | | | |
| Street Cleansing (Inc Trees) | 47 | 45 | 96% | 2 | | 3 | 3 | 100% | | | |
| Traffic and Parking Control | 108 | 104 | 96% | 4 | | 12 | 12 | 100% | | | |
| Transactional Services | | | | | | | 1 | | | | 1 |
| Waste and Recycling | 55 | 55 | 100% | | | 7 | 7 | 100% | | | 1 |
| Total | 490 | 469 | 96% | 21 | 0 | 84 | 75 | 89% | 8 | 1 | . 0 |





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Appendix 1

Contact Type

Quarter 1 2018/19









Corporate Complaints Report - Quarter 1 - April to June 2019

| | Carry Over | | April | | | Мау | | | | | Jur | ne | | Total |
|---------------------------------|----------------------------|----------------|-------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|----------------------|-----------------|
| | Cumulative (Apr - Sept) | Stage 1 logged | | 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 (%) | Cumulativ e* |
| Asset Management | | | | | | 2 | 100% | | | 1 | 100% | | (70) | 3 |
| Benefits (A-K) | | | | | | 3 | | | | | | | | 3 |
| Benefits (L-Z) | | 1 | 100% | 1 | 100% | 2 | | 1 | 100% | 1 | 100% | 1 | 100% | 4 |
| Bereavement Services | | | | | | | | | | 1 | 100% | 1 | 100% | 1 |
| Business Rates | | | | | | | | | | | | | | 0 |
| Businesses | | | | | | | | | | | | | | 0 |
| Cemeteries | | 1 | 100% | | | | | | | 1 | 100% | | | 2 |
| Communications (Inc Living | | | | | | | | | | | | | | 0 |
| Community Involvement (Inc | | | | | | | | | | | | | | 0 |
| Community Safety | | | | | | | | | | 1 | 100% | | | 1 |
| Council Tax | | 6 | 100% | 2 | 100% | 7 | 86% | 1 | 100% | 4 | | | | 17 |
| Crematorium | | | | | | 3 | | 2 | | - | | | | 3 |
| Customer Services | | 4 | 100% | | | - | | | | 3 | 100% | 2 | 100% | 7 |
| Equality & Diversity | | · · · · | 20070 | | | | | | | | | | 20070 | 0 |
| Housing - Anti Social Behaviour | | 4 | 100% | 2 | 100% | 1 | 100% | 1 | 100% | 3 | 67% | | | 8 |
| Housing - Other | | 22 | 86% | 5 | 80% | 20 | | 3 | | 21 | | 5 | 60% | 63 |
| Housing - Repairs | | 17 | 100% | 5 | | 26 | | 1 | | 23 | | 5 | | 66 |
| Human Resources | | | 100/0 | 5 | 2070 | 20 | 5070 | | 10070 | 23 | 10070 | | 100/0 | 0 |
| ICT / Web team | | | | | | | | | | | | | | 0 |
| Learning & Achievement | | | | | | | | | | | | | | 0 |
| Legal & Governance | | | | | | | | | | | | 1 | 100% | 0 |
| Leisure Centres and Sport | | 1 | 100% | | | | | | | 1 | 100% | - | 100/0 | 2 |
| Library Services (Inc Having | | 2 | 100% | | | | | | | - | 10070 | | | 2 |
| Parks and Open Spaces (Inc | | 4 | 75% | 1 | 100% | 6 | 83% | | | 4 | 100% | | | 14 |
| Planning & Building Control | | 5 | | 3 | 100% | 7 | | 2 | 100% | 5 | | | | 17 |
| Public Health | | 1 | 100% | 5 | 100/0 | , | 00/0 | 1 | | 5 | 10070 | | | 1 |
| Public Protection (Inc Trading | | 4 | | 2 | 100% | 3 | 67% | | 10070 | 2 | 100% | 1 | 100% | 9 |
| Regeneration | | · · · | 30/0 | | 100/0 | | 0770 | | | | 100/0 | - | 100/0 | 0 |
| Registrar Services (Inc Birth, | | | | | | | | | | 1 | 100% | | | 1 |
| Roads and Pavements (Inc Street | | 22 | 100% | 3 | 100% | 23 | 100% | 4 | 75% | 10 | | 5 | 100% | 55 |
| Social Care Adults | | | 100/0 | 5 | 100/0 | 1 | | 1 | | 10 | 10070 | | 100/0 | 1 |
| Social Care Children's | | | | | | - | 070 | | 10070 | | | | | 0 |
| Street Cleansing (Inc Trees) | <u> </u> | 14 | 98% | | | 18 | 94% | 1 | 100% | 15 | 100% | 2 | 100% | 47 |
| Traffic and Parking Control | l | 40 | | 2 | 100% | 30 | | 5 | | 38 | | <u></u> | 100% | 108 |
| Transactional Services | ł | 40 | 100% | 3 | 100% | 50 | 5770 | <u> </u> | 100% | 50 | 5578 | 4 | 10076 | 0 |
| Waste and Recycling | ł | 13 | 100% | 1 | 100% | 20 | 100% | 1 | 100% | 22 | 100% | 5 | 100% | 55 |
| | 0 | | 10070 | ¥ | 10070 | 172 | 10070 | | 10070 | 157 | | | 10070 | 490 |
| Stage 1 Logged (Total) | 0 | 101 | | | | 1/2 | | | | 13/ | | | | 490 |
| Completed in 15 days (%) | | | 95% | | | | 94% | | | | 98% | | | |
| Stage 2 logged (Total) | | | | 28 | | | | 24 | | | | 32 | | 84 |
| Completed in 20 days (%) | | | | | 83% | | | | 92% | | | | 94% | |

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



| Cumulativ | | int figures <i>I</i> | April 19 - I | Viarch 20 |) | | | | | | | | | |
|---|-----------------|----------------------|--------------|-----------------|----------|--------------------|-----------|-----------|-------------------|---------------|---|----------------------|--------------|--------------------|
| | Cumulative | | | | | / | | // | | | | | | |
| | numbers | | | | | / | | | /.~~ / | | .2 | 1. | | $ \sim 1 $ |
| | logged April 17 | X ⁰ | .9 | | | | <u> </u> | | p ^{et} | ^{NS} | ș ^t // x | s ^{et} // Š | V // | A 12 |
| | - March18 | 0/00/10/31 | April 12 | N81'19 | June'19 | 111 ¹²⁹ | AUBUST 19 | Septer | bei 19 Octobei | 19 Novemb | e ¹¹⁵⁵ Se ^{cent} | Januari Januari | 20 Februa | N ³¹ 20 |
| | (Stage 1&2) | 00 | N | N ^{II} | 14. | 10. | And And | 11 50 | // 0° | | // ∿° | // \ ³ ` | // ५० | Nr. |
| Asset Management | 3 | 0.52% | 0 | 2 | 1 | | | | | | | | | |
| Benefits (A-K) | 3 | 0.52% | 0 | 3 | 0 | | | | | | | | | |
| Benefits (L-Z) | / | 1.22% | 2 | 3 | 2 | | | | | | | | | |
| Bereavement Services | 2 | 0.35% | 0 | 0 | 2 | | | | | | | | | |
| Business Rates | | 0.00% 0.00% | 0 | 0 | 0 | | | | | | | | | |
| Businesses | | | 0 | 0 | 0 | | | | | | | | | |
| Cemeteries | 2 | 0.35% 0.00% | 1 | 0 | | | | | | | | | | |
| Communications (Inc Living | 0 | | 0 | 0 | 0 | | | | | | | | | |
| Community Involvement (Inc | 1 | | 0 | 0 | 1 | | | | | | | | | |
| Community Safety Council Tax | 20 | | 0 | 0 | T V | | | | | | | | | |
| Council Tax Crematorium | 20 | | 0 | 0 | 4 | | | | | | | | | |
| Customer Services | 14 | | 0 | 5 | 5 | | | | | | | | | |
| Equality & Diversity | 0 | | 4 | 0 | 0 | | | | | | | | | |
| Havering Music School | 0 | | 0 | 0 | 0 | | | | | | | | | |
| Housing - Anti Social Behaviour | 11 | | 6 | 2 | 3 | | | | | | | | | |
| Housing - Other | 76 | | 27 | 23 | 26 | | | | | | | | | |
| Housing - Repairs | 77 | 13.41% | 22 | 27 | 26 28 | | | | | | | | | |
| Human Resources | 0 | | 0 | 0 | 0 | | | | | | | | | |
| ICT / Web team | 0 | 0.00% | 0 | 0 | 0 | | | | | | | | | |
| Learning & Achievement | 0 | 0.00% | 0 | 0 | 0 | | | | | | | | | |
| Legal & Governance | 1 1 | 0.17% | 0 | 0 | 1 | | | | | | | | | |
| Leisure Centres and Sport | 2 | 0.35% | 1 | 0 | 1 | | | | | | | | | |
| Library Services (Inc Having | 2 | | 2 | 0 | 0 | | | | | | | | | |
| Parks and Open Spaces (Inc | 15 | | 5 | 6 | 4 | | | | | | | | | |
| Planning & Building Control | 22 | | 8 | 9 | 5 | | | | | | | | | |
| Public Health | 2 | | 1 | 1 | 0 | | | | | | | | | |
| Public Protection (Inc Trading | 12 | | 6 | 3 | 3 | | | | | | | | | |
| Regeneration | 0 | | 0 | 0 | 0 | | | | | | | | | |
| Registrar Services (Inc Birth, Death | 1 | 0.17% | 0 | 0 | 1 | | | | | | | | | |
| Roads and Pavements (Inc Street | 67 | 11.67% | 25 | 27 | 15 | | | | | | | | | |
| Social Care Adults | 2 | 0.35% | 0 | 2 | 0 | | | | | | | | | |
| Social Care Children's | 0 | | 0 | 0 | 0 | | | | | | | | | |
| Street Cleansing (Inc Trees) | 50 | | 14 | 19 25 | 17 | | | | | | | | | |
| Traffic and Parking Control | 120 | | 43 | 35 | 42 0 | | | | | | | | | |
| Transactional Services | 0 62 | 0.00% 10.80% | 0 14 | 0 21 | 0 27 | | | | | | | | | |
| Waste and Recycling | 574 | 10.80% | 14 | 196 | 189 | 0 | | 0 | 0 | 0 | 0 | 0 | σ | <u> </u> |
| Total Complaints logged | | | 109 | | 109 | 0 | | <u>II</u> | 0 | 0 | 0 | 0 | 401/ (0 | U |
| Overall % of complaints 1&2 complete | ed within time | | | 95% | | | | | | | | | #DIV/0 | |

Cumulative complaint figures April 19 - March 20

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Complaint Reasons

Corporate Complaints Report - Quarter 1 - April to June 2019

| | Availating | wice service | | Dusingervice | abiityot | | ude of curanity of | envice | |
|--------------------------------------|------------|-------------------------------------|--------------|---------------|-------------------|------------|--|----------------|-----------|
| | JULY OF . | elivery | Not keepinse | or ren | Cost of Servi | Le station | ude of centre introduction of suitability of | | / |
| | vallon | ate Dervice | ot kee omis | augitty price | 10 ⁵ O | att at | nper iitabin | other | 10131 |
| | A. | <u>↓ ⁶ 5⁶</u> | 41° bi | | | <u> </u> | S. | 0 ¹ | ~~ |
| Asset Management | | 1 | | 2 | | | | 1 | |
| Benefits (A-K) | | 2 | | 1 | | | 1 | 1 | · · · · · |
| Benefits (L-Z) | | 5 | | 1 | | | 1 | | |
| Bereavement Services | | | | 1 | | | | | |
| Business Rates | | | | 1 | | | 1 | | |
| Cemeteries | | | | 1 | | | 1 | | |
| Communications (Inc Living | | | | | | | | | |
| Magazine) Council Tax | | 5 | | 7 | 1 | 5 | | 3 | 2 |
| Crematorium | | | | , | | | | | 2. |
| Customer Services | | | 1 | 5 | | 4 | | 4 | 14 |
| Community Safety | 1 | | | | | · · · · | | · · · · | |
| Housing - Anti Social Behaviour | 2 | 1 | 3 | 2 | | 3 | | | 1 |
| Housing - Other | 5 | 12 | 8 | | | 11 | | 11 | |
| Housing - Repairs | 1 | 10 | | | | 5 | 4 | 27 | |
| Learning & Achievement | | | | | | - | | | |
| Legal & Governance | | | | 1 | | | | | |
| Leisure Centres and Sport | 1 | | | 1 | | | | | |
| Library Services (Inc Having | | | | | | | | | |
| Museum) | | | | 2 | | | | | |
| Parks and Open Spaces (Inc | | | | | | | | | |
| allotments) | 2 | | 1 | 7 | | 1 | 4 | | 1 |
| Planning & Building Control | | 4 | 5 | 6 | | 2 | 4 | 1 | 2 |
| Public Health | | | | 2 | | | | 2 | |
| Public Protection (Inc Trading | | | | | | | | | |
| Standards, Environmental Health & | | | | | | | | | |
| Noise Nusiance) | | | 3 | 2 | | 2 | 1 | 2 | 10 |
| Registrar Services (Inc Birth, Death | | | | | | | | | |
| and Marriages) | | 1 | | | | | | | |
| Roads and Pavements (Inc Street | | | | | | | | | |
| Lighting) | 6 | 5 | 5 | 28 | 2 | 6 | 13 | 2 | 6 |
| Social Care Adults | | | | | | | | 2 | |
| Social Care Children's | | | | | | | | | (|
| Street Cleansing (Inc Trees) | 5 | 4 | 3 | 25 | | 4 | 3 | - | 50 |
| Traffic and Parking Control | 9 | 2 | 15 | 37 | 14 | 19 | 16 | 7 | 11 |
| Transactional Services | | | | | | | | | (|
| Waste and Recycling | 3 | 4 | 5 | 29 | 2 | 7 | 3 | 10 | 63 |
| Total: | 35 | 54 | 55 | 203 | 21 | 69 | 59 | 78 | 574 |

Page 17

Appendix 1

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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 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 March 2019

| Performance for April to June 2019 (Quarter1) in short is there | fore: | |
|---|-------|---|
| Stage 1 percentage to time overall | 49% | |
| Stage 2 percentage to time | 0 | 0 |
| Stage 3 percentage to time | 0 | 0 |
| Stage 1 & 2 cumulative score | | |

Social Care Complaints team

50%

1

29%

2

3

| | Stage 1 | | | | | | | | | | |
|--------------------------------|---------|---------|-----------|---------|------------|--------|--------|-----------|--------|----------|------------------|
| | | | | | Over 20 | | Closed | Closed in | Closed | days and | Explanation of |
| | Number | Within | Within 20 | Over 20 | days and | | | | | | late response to |
| | Logged | 20 days | days (%) | days | still open | Logged | days | (%) | days | open | Stage 1&2 |
| Social Care Adults - Statutory | 19 | 11 | 58% | 5 | 1 | | | | | | |
| Children's Services- Statutory | 20 | 8 | 40% | 4 | 7 | 3 | 1 | 33% | | | 2 on hold |
| Total | 39 | 19 | 49% | 9 | 8 | 3 | 1 | 33% | | 0 | |

Showing this quarters performance

40%

| | Carry Over | Carry Over April May June | | | | | ne | | 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 | | | | | | | | | | | | | | |
| Stage 1 Logged (Total) | | 3 | | | | 12 | | | | 4 | | | | 19 |
| Completed in 20 days (%) | | | 100% | | | | 50% | | | | 50% | | | |
| Stage 2 logged (Total) | | | | | | | | | | | | | | |
| Completed in 20 days (%) | | | | | | | | | | | | | | |
| | | | | | | | | | | 1 | | | | |
| | Carry Over | | Арі | ril | | | May | | | | Jur | ne | | 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* |
| Children's Services - Statutory | | | | | - | | | | | - | | | | |
| Stage 1 Logged (Total) | | 5 | | | | 8 | | | | 7 | | | | 20 |

Completed in 20 days (%)



N.B There can be more than one complaint reason



| | Adults | Childr | en |
|---------------------|--------|--------|----|
| Complaint Withdrawn | | 7 | 2 |
| Not Upheld | | 3 | 4 |
| Partially Upheld | | 5 | 2 |
| Upheld | | 1 | 4 |





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Ombudsman Activity Report Quarter 1 2019/20 April to June 2019

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: Maladministration, with penalty | HO: Resolved locally - No further action | Not upheld: No further action |
|------------------------------------|--|---|---|---|--|---|--|---------------------------|-------------------------------------|--|--|-------------------|--------------------------|--|---|----------------------------------|
| Adult Social Care | Adult Services | | | | | | | | | 1 | | | | | | |
| Children's Services | Children's Services Learning & Achievement | | | | 1 | | | | | | 1 | | | | | |
| ല്ല്ല് Operating Officer വ വ | Leisure Centres Libraries | | | | | | | | | | 1 | | | | | |
| ກ ກັ Neighbourhoods | Environment Planning & Building Control Public Protection | | | | | | | | 1 | 1 | 3 | | | | | |
| Housing | Housing (incl repairs) | | | | | | 1 | | | 2 | 1 | 2 | 1 | | | |
| oneSource | Council Tax & Benefits Business Rates Legal Services | | | | | | | | | | 1 | | | | | |
| | Total : | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 1 | 4 | 9 | 2 | 1 | 0 | 0 | 0 |

Ombudsman Activity Report Quarter 2019/20 April to June 2019

Decisions



| urther | action | |
|----------------|---|----|
| urther | action | |
| Close | d: Premature | |
| d afte | r initial enquiries - out of jurisdiction | |
| | | |
| no furt ion | her action | |
| losed | after initial enquiries - no further acti | on |
| of juri | sdiction | |
| | | |
| urther | action | |
| | action | |
| | | |
| urther with | | |

Ombudsman Activity Report Quarter 2019/20 April to June 2019

Outcomes



Appendix 3

Ombudsman Activity Report Quarter 2019/20 April to June 2019

Significant decisions from Local Government and Social Care Ombudsman or Housing Ombudsman

1. Miss X - Housing

Miss X complained the Council had failed to accept a homeless application from her in April 2018, then again in October 2018. She said she and her children were currently living with family members and they did not have a home. She wanted the Council to consider her application and provide her family with accommodation. The Ombudsman found the Council was at fault for the way it ended its duty to prevent Miss X from becoming homeless. However, this did not cause her any significant injustice and fault was not found in relation to the other parts of her complaint. A service improvement recommendation was made to address the fault that was found.

Ombudsman decision: Upheld - Maladminstration, no injustice

2. Mrs B - Children's Services

Mrs B complained that the Council failed to pay her the correct rate of fostering allowance for Child C when she transferred as a foster carer to a different authority. The Council accepted it had no records as to why it paid a lower rate for this child and offered a remedy of £7000. Ombudsman found there was fault by Council agreed it should pay Mrs B £7000. **Ombudsman decision: Upheld - Maladminstration, injustice with penalty**



ADJUDICATION AND REVIEW COMMITTEE

5 September 2019

| Subject Heading: | Local Government and Social Care Ombudsman (LGSCO) Annual Review letter 2018/19 |
|------------------------------------|---|
| SLT Lead: | Andrew Blake-Herbert |
| Report Author and contact details: | Carol Ager <u>carol.ager@havering.gov.uk</u> 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] |



This report provides Members of Adjudication and Review details relating to the Local Government and Social Care Ombudsman's Annual Review letter.

In October 2015 responsibility for reporting and liaising with the LGSCO was moved to the CEO Complaints team within the Senior Leadership Support office. The Senior Complaint and Investigation Manager became the Link Officer for all Ombudsman transactions, assuming the responsibility from Democratic Services.

The purpose of the change was to ensure a smooth transition from Stage 2 complaints through Stage 3 and to the Ombudsman. Case officers, having carried out a Stage 2 investigation and potentially prepared papers for a Stage 3 Member Panel, will be familiar with the complaint and able to assist with Ombudsman enquiries.

LGSCO and Housing Ombudsman decisions are reported to Committee on a quarterly basis.

Attached to this report is a copy of the Local Government and Social Care Ombudsman report for 2018/19, detailing the number of decisions made by them against the council.

RECOMMENDATIONS

That the Committee consider and discuss the following:

- 1. The Annual Review letter from Local Government and Social Care Ombudsman for 2017/18
- 2. The council's Ombudsman Activity report and any differences between the council's records and those contained within LGSCO Annual letter

REPORT DETAIL

The Annual Review letter from Local Government and Social Care Ombudsman for 2018/19

This year, the LGSCO received 95 complaints and enquiries about Havering Council, against 94 the previous year. With similar numbers, the noticeable changes are represented by an 87.5% increase in Children's Service complaints and a 20% decrease in Housing complaints

In the year, the LGSCO made 90 decisions on complaints made against Havering Council, compared to 101 the previous year. Of those 90, detailed investigations were carried out into 14 cases. Nine of them were Upheld and five Not Upheld, which gives an Uphold Rate of 64%. This compares to 63% in similar authorities.

While the Uphold Rate appears high, compared to the previous year's 44%, it should be noted that there were a higher number of detailed investigations in 20017/18 (23) with ten being Upheld.

For the first time this year, the Ombudsman's office has published compliance statistics, where the Council is recognised for complying with Recommendations made by the Ombudsman in their Decisions.

It is pleasing to note that in the nine cases Upheld by the LGSCO, all recommendations were met within the timescales set out by the investigators.
In the last month, the LGSCO has launched an interactive map of council performance on their website. The data is linked to published decisions and any service improvements that have been agreed by each council.

The intention is to put an emphasis on authority compliance with investigations; it is a useful tool for comparing our own performance against that of neighbouring authorities, or those with a similar demographic.

The council's Ombudsman Activity report and any differences between the council's records and those contained within LGSCO Annual letter

The Ombudsman recognises that the numbers reported by them on their Annual Review letters do not necessarily tally with those recorded by councils. This is because the Ombudsman's office may close a complaint without making any enquiries of the council, for example, if it is apparent that the complainant has not exhausted the council's complaints process, they may be referred back to the authority in the first instance

During 2018/19 the council received 65 decisions by Local Government and Housing Ombudsmen, as follows:

| 25 x Closed after initial enquiries: No further action Adult Services (4); Children's Services (2); Environment (8); Planning & Building Control (1); Public Protection (1); Housing (7); Council Tax & Benefits (2) |
|---|
| 12 x Closed after initial enquiries: Out of jurisdiction |
| Adult Services (1); Environment (3); Housing (7); Council Tax & Benefits (1) |
| 11 x Closed: Premature |
| Children's Services (7); Environment (2); Housing (2) |
| 6 x Not Upheld: No maladministration |
| Planning & Building Control (2); Housing (4) |
| 1 x Upheld: No further action <i>Environment</i> S |
| 5 x Upheld: Maladministration, injustice with penalty S Adult Services (3); Learning & Achievement (1); Housing (1) |
| 3 x Upheld: Maladministration, injustice, no penalty S Adult Services (1); Planning & Building Control (1); Council Tax & Benefits |
| (1) |
| |

There were two Housing Ombudsman decisions:

1 x Maladministration, injustice with penalty **S**.

1x No Maladministration

While the statistics recorded by the council may not fully align with those reported by LGSCO, data relating to decisions, described in this report as Significant, tend to agree.

The LGSCO Annual Report shows nine upheld decisions against the council, which agrees with the five Maladministration, Injustice with Penalty, three

Maladministration, Injustice without Penalty decisions and one Upheld, No Further Action the council has recorded, and shown on the Ombudsman Activity Report at Appendix 2.

Following the reporting of the Annual Review letter last year, all Ombudsman decisions are now published on the Havering website, unless specifically requested by the complainant not to publish, in order to preserve their anonymity.

In his letter to authorities, the Ombudsman, Michael King recognised the pressures for many local authorities and recommends the report 'Under Pressure', which is the outcome of a significant piece of research carried out by his office this year; a copy is attached as Appendix 3.

IMPLICATIONS AND RISKS

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

BACKGROUND PAPERS

Attached are two appendices:

- Appendix 1 Local Government and Social Care Ombudsman Annual Review Letter
- Appendix 2 Ombudsman Activity Report for 2018/19
- Appendix 3 Report: Under Pressure

Local Government & Social Care OMBUDSMAN

24 July 2019

By email

Andrew Blake-Herbert Chief Executive London Borough of Havering

Dear Mr Blake-Herbert

Annual Review letter 2019

I write to you with our annual summary of statistics on the complaints made to the Local Government and Social Care Ombudsman about your authority for the year ending 31 March 2019. The enclosed tables present the number of complaints and enquiries received about your authority, the decisions we made, and your authority's compliance with recommendations during the period. I hope this information will prove helpful in assessing your authority's performance in handling complaints.

Complaint statistics

As ever, I would stress that the number of complaints, taken alone, is not necessarily a reliable indicator of an authority's performance. The volume of complaints should be considered alongside the uphold rate (how often we found fault when we investigated a complaint), and alongside statistics that indicate your authority's willingness to accept fault and put things right when they go wrong. We also provide a figure for the number of cases where your authority provided a satisfactory remedy before the complaint reached us, and new statistics about your authority's compliance with recommendations we have made; both of which offer a more comprehensive and insightful view of your authority's approach to complaint handling.

The new statistics on compliance are the result of a series of changes we have made to how we make and monitor our recommendations to remedy the fault we find. Our recommendations are specific and often include a time-frame for completion, allowing us to follow up with authorities and seek evidence that recommendations have been implemented. These changes mean we can provide these new statistics about your authority's compliance with our recommendations.

I want to emphasise the statistics in this letter reflect the data we hold and may not necessarily align with the data your authority holds. For example, our numbers include

enquiries from people we signpost back to your authority, some of whom may never contact you.

In line with usual practice, we are publishing our annual data for all authorities on our website, alongside our annual review of local government complaints. For the first time, this includes data on authorities' compliance with our recommendations. This collated data further aids the scrutiny of local services and we encourage you to share learning from the report, which highlights key cases we have investigated during the year.

New interactive data map

In recent years we have been taking steps to move away from a simplistic focus on complaint volumes and instead focus on the lessons learned and the wider improvements we can achieve through our recommendations to improve services for the many. Our ambition is outlined in our <u>corporate strategy 2018-21</u> and commits us to publishing the outcomes of our investigations and the occasions our recommendations result in improvements for local services.

The result of this work is the launch of an interactive map of council performance on our website later this month. <u>Your Council's Performance</u> shows annual performance data for all councils in England, with links to our published decision statements, public interest reports, annual letters and information about service improvements that have been agreed by each council. It also highlights those instances where your authority offered a suitable remedy to resolve a complaint before the matter came to us, and your authority's compliance with the recommendations we have made to remedy complaints.

The intention of this new tool is to place a focus on your authority's compliance with investigations. It is a useful snapshot of the service improvement recommendations your authority has agreed to. It also highlights the wider outcomes of our investigations to the public, advocacy and advice organisations, and others who have a role in holding local councils to account.

I hope you, and colleagues, find the map a useful addition to the data we publish. We are the first UK public sector ombudsman scheme to provide compliance data in such a way and believe the launch of this innovative work will lead to improved scrutiny of councils as well as providing increased recognition to the improvements councils have agreed to make following our interventions.

Complaint handling training

We have a well-established and successful training programme supporting local authorities and independent care providers to help improve local complaint handling. In 2018-19 we delivered 71 courses, training more than 900 people, including our first 'open courses' in Effective Complaint Handling for local authorities. Due to their popularity we are running six more open courses for local authorities in 2019-20, in York, Manchester, Coventry and London. To find out more visit <u>www.lgo.org.uk/training</u>.

Finally, I am conscious of the resource pressures that many authorities are working within, and which are often the context for the problems that we investigate. In response to that situation we have published a significant piece of research this year looking at some of the

common issues we are finding as a result of change and budget constraints. Called, <u>Under</u> <u>Pressure</u>, this report provides a contribution to the debate about how local government can navigate the unprecedented changes affecting the sector. I commend this to you, along with our revised guidance on <u>Good Administrative Practice</u>. I hope that together these are a timely reminder of the value of getting the basics right at a time of great change.

Yours sincerely,

Michael King Local Government and Social Care Ombudsman Chair, Commission for Local Administration in England

Local Authority Report:London Borough of HaveringFor the Period Ending:31/03/2019

For further information on how to interpret our statistics, please visit our website

Complaints and enquiries received

| Adult Care Services | Benefits and Tax | Corporate and Other Services | Education and Children's Services | Environment Services | Highways and Transport | Housing | Planning and Development | Other | Total |
|------------------------|---------------------|------------------------------------|--|-------------------------|------------------------------|---------|-----------------------------|-------|-------|
| 15 | 6 | 1 | 15 | 3 | 16 | 28 | 9 | 2 | 95 |

| Decisions | made | | | | Detailed Investigations | | | | |
|--|-----------------|---|--------------------------------------|------------|-------------------------|-----------------|-------|--|--|
| Incomplete or Invalid | Advice Given | Referred back for Local Resolution | Closed After Initial Enquiries | Not Upheld | Upheld | Uphold Rate (%) | Total | | |
| 4 | 5 | 35 | 32 | 5 | 9 | 64 | 90 | | |
| Note: The uphold rate shows how often we found evidence of fault. It is expressed as a percentage of the total number of detailed investigations we completed. | | | | | | | | | |

Satisfactory remedy provided by authority

| Upheld cases where the authority had provided a satisfactory remedy before the complaint reached the Ombudsman | % of upheld cases | | | | |
|--|----------------------|--|--|--|--|
| 0 | 0 | | | | |
| Note: These are the cases in which we decided that, while the authority did get things wrong satisfactory way to resolve it before the complaint came to us. | | | | | |

Compliance with Ombudsman recommendations

| Complaints where compliance with the recommended remedy was recorded during the year* | | Complaints where the authority complied with our recommendations on- time | Complaints where the authority complied with our recommendations late | Complaints where the authority has not complied with our recommendations | |
|---|---|--|---|---|-------------------|
| | 0 | 9 | 0 | 0 | Number |
| | 9 | | 100% | - | Compliance rate** |

Notes:

* This is the number of complaints where we have recorded a response (or failure to respond) to our recommendation for a remedy during the reporting year. This includes complaints that may have been decided in the preceding year but where the data for compliance falls within the current reporting year.

** The compliance rate is based on the number of complaints where the authority has provided evidence of their compliance with our recommendations to remedy a fault. This includes instances where an authority has accepted and implemented our recommendation but provided late evidence of that.

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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: Upheld: Maladministration, injustice with penalty | HO: No maladministration | HO: No further action | HO: Resolved locally - No further action | Not upheld: No further action | |
|-------------------------|--|---|---|---|--|---|---|---------------------------|-------------------------------------|---|---|-------------------|---|--------------------------|-----------------------|---|----------------------------------|---------|
| Adult Social Care | Adult Services | | | | 3 | 1 | | | | 1 | 4 | | | | | | | 9 |
| Children's Services | Children's Services Learning & Achievement | | | | 1 | | | | | | 2 | 7 | | | | | | 9 |
| Chief Operating Officer | Culture and Customer Services | | | | | | | | | | | | | | | | | 0 |
| D Neighbourhoods | Environment Planning & Building Control | | | | | 1 | | 1 | 2 | 3 | 8 | 2 | | | | | | 14 4 |
| Neighbourhoods | Public Protection Housing (incl repairs) | | | | 1 | | | | 4 | 7 | 1 | 2 | 1 | 1 | | | | 1 23 |
| oneSource | Council Tax & Benefits Business Rates | | | | | 1 | | | | 1 | 2 | | | | | | | 4 |
| | Legal Services Total: | 0 | 0 | 0 | 5 | 3 | 0 | 1 | 6 | 12 | 25 | 11 | 1 | 1 | 0 | 0 | 0 | 0 65 |

Decisions



Directorate/Service Area

| tial enquiries - n ut of jurisdiction stice, no penalt | Y | Classed after | in ini a la constante a | a s function and a second |
|--|---------------------|---------------|-------------------------|--|
| , injustice with p | 1 | | | - no further action out of jurisdiction |
| t Upheld; no ma ty 10 further action | | | initial enquines | |
| o further action maladministrati stice, no penalty | | | | |
| ure Closor | d after initial enq | | | - no further action, |
| stice with penal | | | | |
| er action | | | | Closed: Premature |
| Closed after ut of jurisdiction stice, no penalty | | | | |
| 4 | 5 | 6 | 7 | 8 |
| | | | | |



Outcomes

Appendix 2

Significant decisions from Local Government or Housing Ombudsmen **Quarter 1**

1. Mr X

Mr X complained on behalf of his mother that the council did no carry out a financial assessment before charging her for care she received. Onbudsman found some evidence of fault by the council **Ombudsman decision: Upheld - Maladminstration, Injustice with penalty**

2. Miss X

Miss X, complained the Council did not properly assess her application for a dropped kerb. The Council agreed to reassess Miss X's application and the Ombudsman was satisfied this provided a suitable remedy for the complaint.

Ouarter 2

1. Ms B

The Ombusman 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 - Maladminstration, 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 - Maladminstration, Injustice with penalty

Pa 3 ∰Mr X

Not 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. staff arrival.

Ombudsman decision: Upheld - Maladminstration, Injustice, No penalty

Quarter 3

1. Mr & Mrs X

Mr & Mrs X complained the Council was at fault for the way it determined their neighbour's planning application. The Council failed to evidence its decision making and failed to follow its complaints procedure. Although the Ombudsman did not consider the Council's decision or handling of Mr and Mrs X's complaint would have been different had the faults not occurred. The Council agreed to pay Mr and Mrs X £200 to recognise the uncertainty caused by the fault identified and review its procedures.

Ombudsman decision: Upheld - Maladminstration, Injustice with penalty

Ouarter 4

1. Miss M

Miss M complained about the Council's response to her reports of damage and drainage problems at her property. The Housing Ombudsman found service failure in the council's handling of Miss M's reports about the drainage issues but no maladministration in respect of the reports of damage to the property. The Council was ordered to pay Miss M £200 in recognition of the inconvenience caused.

Housing Ombudsman decision: Upheld - Maladminstration, with penalty

2. Miss D

Miss D complained the Council delayed billing her for council tax, failed to evidence that she owes the amount claimed, gave her inaccurate information and unreasonably sent bailiffs to her property without writing to her first. There is no fault in how the Council billed Miss D. The Council accepts it should have written to Miss D before referring the arrears to the bailiffs after a nine year gap. The Council agreed to remove the bailiff fees. That, plus an apology and deduction of £100 from Miss D's council tax arrears is satisfactory remedy for Miss D's distress at having to deal with bailiffs after no contact from the Council for nine years.

Ombudsman decision: Maladminstration, injustice with penalty

3. Miss X

The Council failed to give a housing application the correct priority. If it had given the right priority the complainant could have made a successful bid by the end of 2014. The Council caused injustice as the complainant continued to live in a flat that was too small. Since 2016 the complainant has suffered anti-social behaviour from a neighbour which the Council did nothing to help her with. The Council agreed to apologise to the complainant, give her the correct housing priority backdated to July 2014 and make a payment of £4000 to Miss X to reflect the injustice its actions caused her. **Ombudsman decision: Upheld - Maladminstration, Injustice with penalty**

4. Mr & Mrs X

Ms C complained that the final bill she received from the Council in March 2018, about her mother's care home fees, was too high. Ms C says the bill indicated her mother's respite care home placement became permanent on 25 February 2016. However, Ms C says this only happened several weeks later. The Ombudsman found there was a lack of communication with Ms C by the Council. The Council agreed to apologise to Ms C and revise the final bill.

Ombudsman decision: Upheld - Maladminstration, Injustice with penalty

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Local Government & Social Care OMBUDSMAN



Under Pressure the impact of the changing environment on local government complaints

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Ombudsman's foreword



Over the last decade local government has gone through the most intense period of change in a generation.

Significant budget reductions, changing demand on services, and technological advances have required councils to adapt how they provide services. Councils are not only completely restructuring how services are delivered, most have had to ask themselves tough questions to strike the balance between the things they would like to do, and those they must.

The Local Government and Social Care Ombudsman has been here throughout, investigating complaints and putting things right where individuals have suffered as a result of mistakes. At the heart of this report is a series of real world case examples highlighting where we have seen things go wrong.

While change is necessary, and can be a catalyst for making improvements, in the cases we investigate we have seen instances where the way major change has been managed has been at the centre of the injustice found.

It is important to note that we look at the current climate through the lens of complaints and

the experiences of people who have been let down. Most people receive good services from their council, despite the significant pressures authorities are under. We also recognise the level of financial constraint placed upon councils. For example, the National Audit Office (NAO) in a <u>recent report</u> concluded that funding for local government has been reduced substantially while pressures on councils have been exacerbated by growing demand for services.

This report is the culmination of research into our casework to identify the common themes where change can contribute towards service failure. It presents four key areas that councils can particularly look out for when carrying out change work. Each area incorporates a number of learning points, demonstrated by case studies from our complaints.

They are:

- > Accommodating longer backlogs
- > Reviewing eligibility criteria
- Using new partnerships and delivery arrangements
- > Restructuring and redesigning services

This report doesn't claim to have all the answers to the problems. In the context of the vast range of services local authorities provide, we know that a relatively small number of complaints are brought to us. Nevertheless, we hope this report can help authorities. Firstly, by being a useful aide memoire when planning any major change projects. In particular, we hope this is helpful to chief executives and monitoring officers in ensuring sound corporate governance is maintained during periods of transformation.

Secondly, it helps councils harness the learning from our investigations to improve services for local people. There are suggested questions to pose, especially to help leaders and elected members provide the challenge to make sure successful change happens, without adverse impacts and unforeseen negative consequences.

This report also confirms our approach to taking account of change and resource pressures when investigating individual complaints. While we understand the challenges councils are experiencing, and realise that change and restructure can explain some service failures, it cannot excuse them. We cannot make concessions for failures attributed to budget pressures; we must continue to judge authorities in line with relevant legislation, standards, guidance and their own policies.

Given that providing local services increasingly comes from complex partnership models, it is also unsurprising we are increasingly using our powers to hold councils accountable for the actions of contractors, and other private, public and voluntary organisations, providing services on their behalf. It is clear from our investigations that the need for councils to maintain clear oversight and establish strong governance arrangements over external partners has never been greater.

This report also helps to set out our approach to looking at change and improvement when making our recommendations to put things right. We are increasingly having to probe whether service failures in individual cases point to policies and practices that could be improved. If we find others have, or could have been affected, we will recommend reviews of cases and policy. Only by doing this can we maximise the learning opportunities from our investigations for the benefit of all authorities.

Alongside this report we are also launching our revised Principles of Good Administrative Practice. We have done this in consultation with the sector, and this provides the framework against which we will continue to hold bodies in our jurisdiction to account.

Ultimately, the message is clear – don't throw out the rule book when working under pressure. The basic principles of good administration are more important than ever when undergoing momentous change and breaking new ground. As respected former chief executive Max Caller CBE said, in a recent best value report: *"In local government there is no substitute for doing boring really well. Only when you have a solid foundation can you innovate."*

Michael King

Local Government and Social Care Ombudsman

December 2018

Note on the case studies

Throughout this report we reference case studies from our investigations. Click the links to read the full decisions (where available) on our website. At the end of the report there is also a complete index of the nearly 40 cases we've used.

We publish all our decisions, except in a small proportion of cases where to do so may risk anonymity of those involved. Our published cases are searchable at www.lgo.org.uk/ decisions.

Accommodating longer backlogs

Faced with budget pressures, all councils have looked hard at the level of service they have to, rather than want to, deliver. They have also considered what the law and guidance say about essential service standards and how quickly they must respond.

An overriding theme in many of our investigations is delay, caused by a backlog of requests for service. The backlogs then impact on the workload of staff and their ability to respond in what is felt to be reasonable timescales.

The Ombudsman's approach

When investigating a case, the presence of delay does not necessarily mean we find a council at fault. We consider whether timescales have a statutory basis, and look at what steps the council has taken to explain what is happening and to anticipate and respond to increasing pressures. We also focus on what impact the delay has had on the complainant and whether it has caused injustice.

Typical issues and recommendations to improve services

Our investigations have found faults that councils say were caused by staff shortages in critical areas, often over a prolonged period causing serious backlogs in work. Examples include:

- > Occupational Therapists unable to assess a person's home
- > Delays of months in processing homelessness applications
- > Delays processing housing benefit claims.

To address these issues, the actions councils agree to implement are often around improving workload management, using short term staff to tackle backlogs and carrying out wider reviews of the service area concerned.

Case Study (16005108):

We found the council at fault for taking too long to carry out a financial assessment of a grandparent to look after their grandson. The council took four years and then refused to backdate the allowance it calculated. The council blamed limited resources for its failures. We said this did not affect our recommendations or excuse the delay.

Case study (16002971):

We found the council failed to decide a homeless application for fifteen months. The council said it did not have enough staff to issue written decisions to everyone asking for help and cuts had made the team unable to cope with the workload. The council has carried out a review of its housing options service and increased capacity for advice and issuing formal decisions.

Case study (16016533):

A woman applied to the council for housing benefit and council tax reduction. When the council refused both, she appealed. The council refused her housing benefit appeal but then, as the law requires it to do, did not refer her case to the Tribunal. It said it was prioritising older cases. We found the council had a backlog of over 500 cases caused by a lack of resources.

Learning from complaints

Council scrutiny functions should use our decisions and agreed actions to hold the executive to account. Where the council has made a commitment to restructure, change work practices or provide short term capacity fixes, scrutiny committees could review the situation after six or twelve months to see whether change has achieved the desired outcomes.

Reviewing eligibility and charging policies

Councils have put policies under careful scrutiny to consider what they have to provide, versus what they have discretion about.

The Ombudsman's approach

We continue to focus on what legislation says must and should happen. We will also consider how councils have justified any departure from what statutory guidance says should happen.

Often it is not a binary question for councils to simply choose to provide a service or not. In many cases councils must exercise discretion to consider individual circumstances. We will be critical where councils adopt blanket policies that fail to anticipate wider consequences.

Typical issues and recommendations to improve services

1. Ensure the new service standard is lawful

Councils must ensure changes to policies, thresholds and assessment criteria are lawful. Redesign programmes need to consider how to carefully involve sources of advice on governance and the law, at a stage where they can influence what happens.

Case study (16018163):

We found the council at fault for offering an 'enablement service' for people leaving hospital to live in care homes, helping them adapt to living more independently. The council thought it could avoid the cost associated with free entitlement to intermediate care and reablement for six weeks, by using a subtly different approach and name. We found it was not fully complying with the Care Act. The council has reviewed its approach because of our investigation.

Case study (17018747):

The council decided that to manage demand, it would only investigate reports of statutory noise nuisance once it received complaints from three different people about the same issue. A woman complained about loud noise affecting her property but, because of where she lived, it was very unlikely the noise would affect others, so the council had dismissed her complaints. Our investigation found more than 6,000 other complaints had been dismissed too. The council agreed to change its policy and publicise this so other people who lost out could hear about it.

2. Ensure decisions about service provision are based on assessed needs

We have found councils at fault for raising eligibility thresholds to qualify for services, particularly in adult social care, as a means to save money. Instead of starting by assessing needs, developing a care plan and then meeting eligible needs, councils have made resource-led decisions, sometimes missing out the care plan stage altogether.

We have also found examples where councils have imposed targets or informal policies to restrict services. For example, in case (15008823) there was no formal policy but instead a direction to social work teams to only give a maximum of four weeks respite care.

Frontline staff are sometimes at risk of having professional judgement overshadowed by the pressure to meet financially driven targets. We have found examples where councils have missed out the needs assessment stage altogether, or where assessments have been used to justify funding-driven changes in care. In one case (14015230), a council introduced a new policy for direct payments. It decided it would not provide payments to support carers who were also going out to work. The council did not properly consider the individual circumstances of the case or the impact of a reduced budget on the family. It assumed the carer would take time off work, but she could not do so.

Case study (15006450):

We found a council had imposed a target for reducing the number of planning control site visits. While there is nothing inherently wrong about such a target we found it risked improperly influencing professional judgement. Instead of deciding on a case by case basis whether a visit was necessary, officers may have been influenced by how many had taken place already.

Case study <u>(16000780)</u>:

We found a council had reduced care by half for a young person with significant needs without explaining the basis for the decision. Frontline staff believed the council had adopted a blanket policy of a maximum number of days of respite support per year. We said this raised significant questions about the way the Council makes decisions about the level of care it will provide. This should be based on assessed needs and imposing a blanket maximum level would be inappropriate.

Case study <u>(16017084)</u>:

We found the council had made significant cuts to a package of care for an elderly person without carrying out a needs assessment. Comments from a key decision maker suggested the council had started from the perspective of needing to make substantial cuts, rather than meeting the person's needs. We said this may indicate an inappropriate attempt to ration resources.

Case study (16015946):

We found a council had introduced banding for certain types of disability to save money in its adult social care budgets. Once it decided the person's disability fell into a particular band, it meant the person's funding could not exceed a certain level. We found this approach did not follow what the Care Act requires. Councils can use bandings as a guide, but the assessment tool this council used was designed to ration resources.

To address these issues, the actions councils agree to implement often include improving the support to staff, for example in one case through a staff forum to help them meet Care Act statutory duties.

Councils also agreed to review policies. Just as crucially, they review the application of these polices to ensure decisions flow from correctly made assessments.

Learning from complaints

Scrutiny committees should review complaints information in the wake of councils reviewing and changing eligibility polices. This will allow them to assess whether the revised policies, and their application, are making permanent improvements.

Councils should give the necessary support, and foster the right culture, to allow frontline staff to appropriately challenge management decisions and hold the line on what their assessment of the situation needs.

3. Properly consult on, and communicate, intended changes

Councils should normally consult with relevant service users and stakeholders before making major changes to services. They should also give service users fair warning of changes, and avoid them experiencing an unexpected drop in resource or support.

Our investigations have found examples where this hasn't happened and the first a service user has known about a change has been a dramatically reduced service.

Case study (14010195):

The council had changed its policy on supporting short respite breaks, raising thresholds because of budget cuts. It had not set out the new criteria; it just said it would provide services for children with an unspecified high level of need. We decided the lack of a published criteria meant families could not work out what services they were entitled to. The council agreed to publish clear criteria having carried out more consultation with parents and carers.

Case study (15003872):

The council changed its home to school transport policy and consulted on it. However, it did not explain the implications of the policy change in a clear and obvious way. It did not explain how it would measure home to school distances so parents could not engage effectively in the consultation. We received a number of complaints on this same issue.

To address these issues, councils typically agree to give more notice to service users when making significant changes to charging arrangements.

4. Ensure frontline staff are suitably informed to advise service users effectively

Major changes in policies, thresholds and charging can be poorly communicated to frontline staff. We have found cases in fostering and adult social care where crucial changes to services, with significant financial implications for service users, have been made without involving frontline staff – leaving staff unable to guide people towards decisions in their best interests.

Our investigations have found these failures to communicate involving managers as well as frontline staff.

To address these issues, councils typically agree to improve handbooks, guidance notices and provide regular training for frontline staff.

Case study (16006379):

The council changed its policy for foster parents, expecting them to meet all costs of care, including transporting foster children to school, from their fostering allowance. Managers and social workers involved were not properly made aware of the change for far too long. We found the council had failed to correctly interpret the law and guidance and failed to implement the policy clearly or fairly.

Learning from complaints

Councils should make use of their own complaint information to identify service areas where frontline staff are insufficiently briefed or trained. This can head off issues that may escalate to us.

5. Properly explain and justify decisions

We have found examples where councils have lawfully changed policies for support but not properly explained how they came to their decisions, for example for post 16 transport for young people with special educational needs.

Record keeping and clear, evidence-based decision making is always important but particularly critical when councils implement new policies. Complainants can then compare their experience with that of others benefiting from previous arrangements, and rightly demand to know why they have been treated differently.

Case study (16002530):

A council changed its policy for respite care as part of budget savings. The new policy set a maximum of two weeks respite care per year with anything more needing to be exceptional. We found the council did not explain why it had reduced care for an adult with serious care and support needs. This was the third complaint where this council had not explained decisions to reduce support. The council agreed to reassess needs and give a clear explanation of how identified support would meet eligible care needs.

Delivering services through new organisations, partnerships and commercial arrangements

Councils increasingly deliver services through new organisations, partnerships and commercial arrangements with contractors. Some councils have undergone major change programmes, transferring all back office functions or entire service areas to other organisational structures. The common example is waste and recycling services where most councils use private contractors. But almost no service area is out of scope for this type of change. Recent complaints have involved external delivery of services as diverse as school admissions, planning control and enforcement.

Almost all councils will now have some service areas provided externally with varying contract management arrangements to hold these to account. Some make this arrangement visible and clear: "council x working with organisation y to deliver service z". Others have created largely separate brands or organisational structures, sometimes with less visible lines of accountability back to the council and a lack of public recognition about who is responsible.

The Ombudsman's approach

We hold councils to account for the actions of organisations working on their behalf – councils are entitled to outsource the service, but they cannot outsource the responsibility. Where appropriate, in our investigations we also name contractors and organisations providing services on behalf of councils – particularly if we believe recommendations to consider contracting arrangements can improve the service and prevent further injustices.

Typical issues and recommendations to improve services

1. Properly manage contractors

Councils have varying levels of experience and capacity to manage external contracts. Many are highly skilled with strong teams providing expertise. Others, recognising their relative lack of experience have gone into partnership with other councils. However, expertise in commercial procurement and contract management needs to be accompanied by an understanding of the values and duties expected of a public authority. The standards and statutory frameworks governing local authorities apply equally when operating in a commercial environment or when delivering services through other arrangements.

We have found examples where councils have failed to invest in sufficient experience or where that expertise was not rooted in the principles of good public administration.

Case study <u>(16013981)</u>:

The council used a private company as its agent to manage a loan scheme to renovate empty properties to a decent standard. The company was wound up and an audit report found the council had overlooked or overridden management controls, procedures and other requirements when it set up the company. It had not properly understood the scheme or company. Our complainant had been left out of pocket because she did not get the money back she expected, having carried out improvements. Because of the audit and our investigation, the council made significant improvements in how it manages this type of relationship.

2. Ensure the local market is sufficiently developed to provide necessary services

As well as large scale contracts with private sector organisations, many councils have used procurement to stimulate local provider markets, for example in adult social care. This has the benefit of helping the local economy, encouraging growth in small business and supporting provision that is grounded in and understands local demand. However, we have found examples of fault in this kind of approach, particularly where one council had unrealistic expectations of that market.

Case study <u>(16007469)</u>:

A man was separated from his wife for 10 months because there was no home care available in his area. The man's wife, who has mobility problems, should have returned home with the help of a care package following a hip operation. But to get the support needed, she was placed in a residential home, some 15 miles away because the council's contracted providers did not have the capacity to care for her.

The council had agreed contracts with a smaller number of preferred care providers, each solely responsible for delivering all homecare services in their zone, in an effort to improve stability in the local market. The newly contracted provider in the woman's area did not have enough capacity to provide care to meet her needs.

We found the council at fault for allowing the woman to be placed in the dementia unit and not revising her care and support plan when her circumstances changed. Throughout our investigation we found other people may have been similarly affected by the council's contracting arrangements. We urged other councils to look carefully at our findings if they are reviewing commissioning models.

3. Get the administrative basics right with new delivery arrangements

We have been working with councils coming together to form combined authorities to help them put in place appropriate complaint procedures. We have found examples where councils have set up new structures without the right processes in place. In some cases, the procedures are there but new staff are not aware of how to use them.

Many councils have gone into joint working partnerships with other councils to share back office arrangements and generate efficiencies.

Case study (15016155):

Two councils set up a new company to provide back office administrative functions including support for home to school transport. The company initially worked without an appeal process in place, contrary to the statutory guidance recommendations. We found confusion among staff in the company and council about how to appeal. The council agreed to put clear information on its website, and that of the company, and to raise staff awareness.

Case study (16003062):

A council had outsourced some services, including housing. It was unclear how the council's complaint team would liaise effectively with those newly outsourced areas of responsibility. The person that complained to us had faced a prolonged period without accommodation, sofa surfing and sleeping rough, then in unsuitable temporary accommodation for nearly a year. He had to complain to us because the council had not dealt properly with his complaint about this. The council agreed to review and improve complaint handling, including about outsourced services.

Restructuring and redesigning services

Councils, like all large organisations, undergo frequent restructures. Pressures have increased the scale and pace of change with restructuring designed to reduce waste, overheads and improve ability to focus on service delivery.

The Ombudsman's approach

Restructuring and service redesign is no excuse for fault. Effective management of change should mean the risks to business continuity are properly assessed and mitigated.

Typical issues and recommendations to improve services

Councils sometimes cite restructuring as an explanation for poor service. They say reorganisation intended to improve services or deliver the same with less results in a period of poorer service. Frequent staff changes, loss of corporate memory and lack of continuity of contact with vulnerable service users are significant issues. This can involve changed technology and changes to processes as well as staffing.

Examples include a complaint (<u>16007253</u>) where the council blamed restructuring for a lack in continuity of care because officers with experience of an individual's case left, causing delay and inconsistent advice. Another (<u>15004018</u>), where the council was significantly overdue assessing an elderly lady's needs when she returned home from nursing care. It said restructuring caused heavy officer workloads resulting it what it described as totally unacceptable delays in reassessment.

Case study <u>(16008982)</u>:

In an extreme case, a council couldn't explain a decision about implementation of a new parking zone. It could not say why it had made the decision or how it was made. It said this was because of funding cuts, staff turnover and restructures. It said all the people involved had left the council and major, yearly restructures for the past few years meant entire teams and departments had changed or been deleted.

Learning from complaints

Alongside conventional restructuring, increasing numbers of councils are redesigning services using business tools. Often these focus on the experience of service users as a driver for shaping resources and processes around meeting their needs.

This is an excellent opportunity to use insight from complaints as a tool for improvement. Handling complaints is a quantifiable and significantly reduceable cost for council services. Insight from complaints can also point to waste. One example might be where an assessment process takes up an unjustifiable level of resource or leads to so much delay that the long term consequences (for example of delay getting aids and adaptations to the home) outweigh savings.

Checklist of things to avoid

Taking longer to act and accepting longer backlogs

- > Properly plan for the impact on service provision of increased staff workloads
- > Understand essential service standards and statutory duties
- > Explain what is happening to people receiving, and in need of, services

Reviewing eligibility and charging policies

- > Ensure the new service standard is lawful
- > Ensure decisions about service provision are based on assessed needs
- > Properly consult on, and communicate, intended changes
- > Ensure frontline staff are suitably informed to advise service users effectively
- > Properly explain and justify decisions

Delivering services through new organisations, partnerships and commercial arrangements

- > Properly manage contractors
- > Ensure the local market is sufficiently developed to provide necessary services
- > Get the administrative basics right with new delivery arrangements

Restructuring and redesigning services

- > Properly plan for the impact of frequent staff changes
- > Have strategies to avoid a loss of corporate memory
- > Ensure continuity with vulnerable service users
- > Carefully consider the impact of technological changes

Questions for councillors and scrutiny committees

Locally elected councillors have the democratic mandate to scrutinise the way councils carry out their functions and hold them to account.

We have identified some questions and approaches that elected members – and in particular leaders and scrutiny committees – can pose to challenge whether change work will have adverse impacts and unforeseen negative consequences.

- > How is the council planning for the impact on service users of change programmes?
- > How is the council ensuring that changes to eligibility criteria are lawful, based on need, and properly communicated?
- > How is the council properly managing any organisations acting on its behalf and embedding clear lines of accountability for dealing with complaints and concerns?
- > How is the council ensuring service redesigns avoid a loss of corporate memory and retain continuity for vulnerable service users?
- > How is the council using its own complaint information to anticipate problem areas for service users or training needs of its own staff?
- > How is the council demonstrating it learns from Ombudsman investigations?

Scrutiny Committees could:

- review complaints information in the wake of councils reviewing and changing eligibility polices. Assess whether the revised policies, and their application, are making permanent improvements
- > review the situation after six or twelve months to see whether any change programmes are achieving the desired outcomes without adverse impacts to service users

Appendix: The case studies

This is an index of the cases we used to compile our findings in this report.

Click the hyperlinks to read the full decisions.

Browse and search for all our published decisions at <u>www.lgo.org.uk/decisions</u>

Accommodating longer backlogs

(17000317) The council seriously delayed taking action to get Mr D a new chair he needed as his mobility deteriorated. Mr D had Parkinson's disease, lived at home with his wife and had an adapted home. An NHS occupational therapist found that Mr D was having problems with his chair and referred the matter to the council in February 2016. The council did not contact a contractor until August, six months later. Mr D died in October before the council could install the chair. We found that the council was having serious problems filling occupational therapist vacancies. The council improved management of workloads and stepped up efforts to fill therapist vacancies.

(16005834) Ms A came to the council area to flee domestic violence from her husband. She made a homeless application in June 2015 and the council placed her and her younger child in interim bed and breakfast accommodation. It took the council just under a year to decide her application. The statutory code expects councils to make this type of decision in 33 days. Having decided to accept a homeless duty for Ms A, the council took no further action for another six months apart from giving some advice. This meant Ms A stayed in bed and breakfast accommodation with her young, autistic child for over 20 months. Ms A kept telling the council the bed and breakfast was unsuitable for her child. It did nothing to check whether it was suitable. The council said the delay was caused by extreme staff shortages. During our investigation, the council arranged suitable alternative accommodation. It also agreed to our recommendation to make a significant payment to Ms A.

(16016533) Mrs X applied to the council for Housing Benefit and council tax reduction in August 2016. The council refused her application and Mrs X appealed against the decision in September 2016. The council refused her appeal and Mrs X asked for an appeal to the Tribunal in December 2016. Mrs X then complained to us because the council had not passed her appeal on to the Tribunal by February 2017. Our investigation found the council had a backlog of over 500 appeals waiting to be passed on to the Tribunal, the oldest being two years old. Rules say councils should pass on requests to the Tribunal as soon as possible and we say this should be within four weeks. The council agreed to report to us quarterly about action to review the backlog and make progress on outstanding appeals. It aimed to fully deal with the backlog and then review procedures to ensure it processes all appeals within two months, in line with council tax appeal guidance.

(16005108) The council failed to carry out a financial assessment of Ms B to decide if she qualified for help to look after her grandson under a residence order. Despite Ms B asking for help many times over four years, saying she was struggling financially to look after her grandchild, it did not respond other than by making a one-off payment. It took the council four years to carry out a financial assessment. Once it did this, it decided Ms X qualified for a significant weekly allowance. It refused to backdate it for the four years she had been asking for help. The council blamed limited

resources for not being able to properly make up for its failures over the four year period. While we were sympathetic to these problems, we would not adjust our recommendations based on a wider assessment of the financial pressures on the council. The council agreed to pay Ms B what she was owed from 2011 until 2015 to make up the loss. It also agreed to ensure it carried out future financial assessments promptly. We also noted the council's practice had improved considerably.

(17001994) The council took over five months to decide Miss X's homelessness application. Guidance says councils should make these decisions within 33 days of accepting an application. The council said the delay was due to high caseloads and staff absences. It paid a financial remedy to Miss X and reviewed the suitability of her interim accommodation.

(16002971) Ms A was made homeless after her landlord evicted her. She approached the council for help five times over fifteen months. The council failed to meet its duty to decide on her homelessness application each time. It made provisional decisions but did not write to Ms A, so she could not ask for a review or appeal to the court. The council also wrongly said Ms A couldn't get emergency B&B accommodation without a written decision from it. The council said it did not have enough staff to issue formal decisions to everyone asking for help and cuts had made the team unable to cope with the workload. The council has carried out a review of its housing options service and is increasing capacity for advice and issuing formal decisions.

Reviewing eligibility and charging policies

(16015420) The council failed to properly assess the care needs of Mr E and his sister/carer Miss D. The Care Act means the council has a duty to assess Mr E and Miss D's eligible needs and provide care plans. The council did not provide indicative personal budgets as the Care Act guidance suggests. Its decisions to cut Mr E's services stretch back over several years. Many of these decisions were motivated by a desire to save money which we found outweighed the council's duty to meet eligible needs. Its failure to create care plans led to a reduction in services meaning neither Mr E nor Miss D's needs were met. For example, Mr E did not attend courses at college because of his behavioural problems, and alternatives such as internet based tutors were cut. After our investigation the council reassessed needs, paid a financial remedy and reviewed its procedures to provide indicative personal budgets. It has also created a new forum to help support staff meet statutory duties and focus on eligible need so support plans correctly promote independence, wellbeing, choice and control.

(16006379) In 2014 the council changed its policy for foster parents, expecting them to meet all costs of care, including transporting foster children to school, from their fostering allowance. This meant Mr and Mrs X had to pay to take their foster child Y to school despite being eligible for free home to school transport. The council's foster care finance handbook was unclear and unhelpful about school transport. Managers and social workers involved were not properly aware of the change until late 2015 and even in 2016 council officers were still unclear about how the policy worked. We found this change in policy was flawed. It failed to interpret the law correctly and left the policy unclear and unfair for some people. Mr and Mrs X unnecessarily had to pay for over 3,000 miles of travel, taking Y to and from school. The council reimbursed Mr and Mrs X. Because the fault may have affected many other foster carers the council reviewed its handbook and policy, and wrote

to carers asking them to complain if they felt they had wrongly been denied free home to school transport.

(16010469) Mr B's mother had a care package which the council charged for, based on its assessment of what she spent on disability related items. In 2016 the council changed its policy to award set amounts for disability related expenditure. This was based on how much in disability benefits the person claimed. People could appeal if they felt their expenses were higher than the allowance paid. The new policy said people might have to send receipts to the council to evidence expenditure. We found the council didn't properly explain the new policy to Mr B or his mother either before, or during the assessment. This meant Mr B did not keep receipts and when he challenged the allowance as not being enough he couldn't provide evidence.

(16014233) Mr Y had dementia and received care at home from an agency. He used a combination of council commissioned and private carers. He got extra income from a War Disability Pension. Until 2015 the council had a policy to disregard this type of pension when calculating what people had to pay for care. The council then changed its policy to include income from War Disability Pensions.

It did not consult on the new policy or give any advance notice to people potentially affected by this change. The council was entitled to change its policy but we found it should have done more to warn people about such a significant change to charging. Because Mr Y had dementia it should have taken more care to make sure he understood the change. Government guidance says councils should give people time to pay off new, unexpected bills. If the council had properly warned Mr Y's family it could have made alternative arrangements for his care. Because of our investigation the council agreed to look at ways to give more notice to service users when making significant changes to charging. It waived Mr Ys outstanding balance and apologised to the family.

(16004846) The council introduced a new post-16 transport policy for young people with special educational needs and disabilities. It said this was necessary because of cuts to the council's budget. The new policy restricted help with transport to families in exceptional circumstances only. It would, for example, look at the length and complexity of the journey and whether parents could reasonably be expected to provide transport themselves. Several people complained to us about how the council considered their applications. We found no fault with the new policy. The council, faced with new funding pressures was entitled to ask if parents could provide transport themselves, taking into account their working partners, access to vehicles and income. However, we found the council did not explain how the panel had made its decisions. It agreed to refer cases back to the Panel, record how it reached its decisions and the evidence it had used to make them.

(16018163) Mr X's father, Mr Y, was discharged from hospital after an amputation. The council said he needed support to regain his independence, helping him adapt to his new situation. It said enablement support would help him recover and regain mobility to return home. Its policy was to immediately charge for this support, rather than allowing the first six weeks free as the law requires.

The council used two approaches: one 'recovery programme' that is NHS funded, bed-based intermediate care and one 'enablement service' that is provided in care homes, helping people to

prepare to live at home again. We found that its 'enablement' service was no different to bed-based intermediate care. Just referring to intermediate care by another name does not allow the council to charge for it. Statutory guidance says councils must provide intermediate care and reablement free of charge for the first six weeks.

When we pointed this out to the council it said it would have to withdraw its enablement service if it could not charge for the first six weeks. We recognised the financial pressures on the council but said its duties under the Care Act were clear. It must promote wellbeing and independence, intervene early, help people retain or regain skills and confidence and help avoid them getting worse.

We recommended the council review its policy to ensure it is compliant with the Care Act, specifically regarding charging for enablement care. We also asked the council to write to other adults who received care to increase their independence and arrange to refund their costs for the first six weeks of their enablement package.

(15006450) Mr X complained the council failed to properly assess a planning application for development near his home. We found the council's planning procedure guidance includes a site visit assessment process to decide if a visit is necessary. The guidance had a '70% no site visit' target to help cut the cost of the service. We recognised site visits take time and involve cost. We also recognised the financial and time pressures facing the council. However, we said the very significant target of 70% no visits carried the risk that meeting the target might improperly influence the exercise of case officer's professional judgment. The council has reviewed its approach to planning application site visits.

(16004530) The council arranged social care support for Ms S including help with household tasks. The council introduced a new charging policy and reassessed service users. Even though Ms S's care plan did not change and the council did not reassess her finances, it reduced her Disability Related Expenditure. It told her 10% was the maximum allowed without taking account of her individual circumstances. It gave misleading and inaccurate advice and put the onus on Ms S to challenge reduced benefits rather than making appropriate enquiries and assessments. Following our investigation the council agreed to review its policy for financial reassessments. This put the onus on the council to make enquiries to get the facts rather than rely on vulnerable people to challenge reductions in benefits.

(14015230) Mrs B was a single parent, working full time, and with two children. She had a package of care for her older child who had significant disabilities and needed almost constant supervision. The council introduced a new policy to cut costs, and reduced the support it would give Mrs B. The policy was to no longer provide direct payments to support carers who were going out to work. We found the Council's application of this policy unfairly restricted its ability to consider Mrs B's circumstances, even when it was clear her child would not have support while she was at work.

We found no evidence the council considered Mrs B's circumstances. It did not consider the impact on Mrs B of her having a reduced care budget. Instead it assumed she would take time off work, even though she made it clear she did not have enough leave to do so. As well as personal
remedies, the council agreed to revise its policy to ensure it could not be interpreted as an absolute bar on payments for supporting a child when a parent is working.

(16002530) Mr X's son was in his late 40s with Downs' syndrome and severe learning difficulties. He lived at home and was cared for by his parents who are both elderly. For many years he went to a day centre for five days a week, had eight days weekend care and 28 days respite care per year. The council then changed its policy for respite care to save money. The new policy set a maximum of two weeks respite per year. Anything over this needed to be exceptional. This resulted in a reduction in Mr X's care.

We found the council provided no reasons for the change in Mr X's level of service. His care assessment did not explain how a reduction in care would still meet his eligible needs, which had not changed. This was the third complaint we investigated where the council had not explained its decisions to reduce support. It agreed to reassess Mr X's and his parents' needs and give a clear explanation, if necessary, of how any reduced support will still meet their eligible care needs.

(14010195) Miss X was a single mother of two children. Her youngest son Y was disabled and a child in need. Miss X asked the council to provide short breaks support, wanting a support worker to take her son to youth activities once a week during term time. The council decided Y did not qualify for support and that universal services would meet his needs.

The council had recently changed its approach, raising thresholds for eligibility for short breaks because of budget pressures. Its criteria were not spelt out, only that it would now only provide services to children with the highest need, which was unspecified. We found the lack of published criteria meant Miss X could not work out what services Y was entitled to. The council agreed to publicise clear criteria having consulted with parents and carers about them.

(16000780) Mr Y was a young man who lived at home with his parents and younger sister. He had medical conditions and received council support for several years. He had six nights a month at a respite centre and 18 days a year at a day / holiday club. As he approached adulthood his parents contacted the council about transition planning. The council took too long to assess his needs, agree funding and implement respite care. It reduced Mr Y's care package by half, but there was no suggestion his needs had reduced. We found the council had not explained how it decided to reduce respite care, based on Mr Y's needs. Social worker records suggested they understood the council was adopting a blanket 'maximum' number of respite days per year. The council agreed to review its policy and procedures.

(15008823) Miss Y lived with her sister and brother in-law. She had learning disabilities and required care. She had recently been diagnosed with dementia meaning she needed more care and supervision. She had a personal budget to cover attendance at a day centre, domiciliary care and respite care. The council approved savings in its health and social care budget equivalent to 278 weeks respite care in the financial year. It did not produce a new policy but directed social work teams that the maximum amount of respite they could award someone was four weeks. This meant it reduced respite care to Miss Y without completing a needs assessment. This meant the council was not providing care based on need but based on the requirement to save money. The council

agreed to review its process, award respite that had been missed, and provide a similar remedy to other service users affected by its blanket policy.

(15003872 and others) The council's policy for free home to school transport had been to provide free travel if the child's school was the catchment area school or designated school, or if the nearest school was beyond the statutory distance. To save money it introduced a new policy to only provide free transport if the nearest suitable school was beyond the statutory distance. Catchment or priority admission areas would no longer apply.

The council consulted appropriately on the new policy. However, we found it provided unclear information it to parents. It did not warn parents about the change in a clear and obvious way. In particular, it failed to be clear about how it would measure distances, causing confusion about whether it would use walking or driving routes.

(15018169 and others) The council provided specialist home to school transport to some families whose children have disabilities or special educational needs. It changed its policy and decided some families were no longer eligible, despite the families' needs not changing. We found the council could not explain how it had made its decisions, explain how it had taken account of individual circumstances and supporting evidence. The council agreed to review its decisions on the cases of four families that complained to us. It agreed to review its procedures for school transport appeals.

(16017084) The council made significant cuts to Mrs C's care package without an assessment of needs. Management comment was that the existing direct payments package was too substantial and reflective of residential care rather than home care so needed to be cut back substantially. We found that while councils must always have due regard to public purse, care provision should be based on assessed need and where no evidence exists of appropriate assessment, this sort of comment may indicate inappropriate attempts to ration resources.

(17018747) The council introduced a new policy for dealing with noise complaints. It said it would only act when three different people complained about the same issue. The council had introduced the policy to address resourcing issues. A woman complained over the course of three years about loud noises from a generator in a neighbouring property. As she was the only person affected, she couldn't meet the criteria for investigation.

We found the policy did not meet statutory obligations. The council cannot refuse to investigate complaints of statutory nuisance, even if only one person has complained. Over the course of our investigation, we uncovered that more 6,000 other noise complaints had been declined because of the faulty policy. As a result of our investigation, the council agreed to change its policy, including removing the filter for the amount of people having to complain, and publicise this so other people who lost out could hear about it.

(16015946) The council was at fault for how it reduced the level of respite care for Mrs N and her transport provision for her adult son Mr P who has complex needs. The council introduced maximum budget levels, and decided that Mr P's disability fell into a certain band. Therefore his funding could not exceed a certain level. The Care Act says that councils can use bandings as a guide but statutory guidance says such systems are unlikely to work in complex cases such as this.

The council's decision to ask the family to part fund the transport to the day care centre appeared to be part of a general withdrawal of provision and a cost cutting exercise. The decision was not based on assessment of need and therefore was not made as the Care Act requires. We also found the council was using an outdated assessment tool to calculate the amount of support offered to people. The council agreed to change its policy to make it compliant with the Care Act and to review cases of other people potentially impacted by use of the assessment tool.

Delivering services through new organisations, partnerships and commercial arrangements

(16013981) The council used a private company as its agent to manage a loan scheme to renovate empty properties to a decent standard. Ms X applied for a loan to be paid back by the company in lieu of rental income until the loan was paid off. The company subsequently stopped trading and went into receivership. An internal audit found significant weaknesses in how the council managed its relationship with the company. It found the council had overlooked or overridden normal management controls, procedures and statutory requirements when it set up the scheme. It had not properly understood the scheme or how the company operated it.

Ms X spent her own money to renovate the property believing she would get the money back. This did not happen. The company did not pay money to Ms X on behalf of the council, despite the council paying it. Following our investigation the council agreed to pay the outstanding rent owed, an additional amount for interest and continue paying guaranteed rent. The council made significant improvements to how it manages this type of relationship to prevent similar things happening again.

(16009086) Mrs X complained to the council that the care agency the council commissioned to provide her with domiciliary care repeatedly failed to provide what it was charging for. All councils use care agencies to provide care for people on their behalf. Our investigation into this complaint found the council seemed to expect Mrs X to simply accept the terms of the council's care contract without having any informed choice or transparency about what she was getting. It did not review the situation when it became clear the contracted hours were not matching her needs. As a result, she paid extra for periods of care she didn't need and didn't get because of the framework the council had set.

(16007469) The council placed the Mr A's wife, Mrs A, in a care home for 10 months because there was no home care available. She spent this time in a dementia unit despite not having dementia. The council used to have over 75 arrangements with home care providers but did not have enough capacity to meet demand. It went through a procurement exercise and contracted with 12 prime providers, transferring 3,500 people to the new contracts. However, no provider was willing to

provide the care Mrs A required at home so she had to stay in the care home. This meant Mr A had to travel a 30 mile round trip to visit his wife every day.

We found that the council should have decided Mrs A's needs took precedence over its concerns about the implications of it spot contracting with a specific provider to give Mrs A care at home. The council agreed to pay Mr and Mrs A for distress and cover the cost of transport expenses for the 10 months. The council agreed to consider other people affected by the same fault and so it reviewed other short-term residential placements. Where these lasted more than eight weeks it considered payments for distress and travel. It agreed to try to source suitable homecare providers and ensure care and support plans are up to date.

(15016155) Ms X couldn't appeal against the council's refusal to grant her daughter free home to school transport. The council had transferred many administrative functions to a company, shared with another council. The company initially operated without an appeal process. We found evidence of considerable confusion and miscommunication about policies by staff in the council and its company. Company staff, acting for the council, were unclear about how Ms X could appeal, if at all. Because of our investigation the council put clear advice on its website, and that of the company, about how to appeal and made company staff aware of the correct process.

(16003062) The council offered unsuitable interim accommodation to a homeless man with mental and physical health problems. For three and a half months he was without accommodation, sleeping rough and sofa surfing. He lived in unsuitable temporary accommodation for eleven and a half months more than necessary. The man had to complain to the us because the council did not deal with his complaint in accordance with its procedures. Our investigation found the council was outsourcing some services and it was unclear how the in-house complaint team would liaise with those outsourced services. We asked the council to review and improve its complaint handling arrangements, including those for outsourced services.

Restructuring and redesigning services

(16007253) Mr X complained about the council not investigating his complaint about a care agency's failure to provide domiciliary care for his mother. We found the council had accepted the care provider's investigation without properly considering the evidence, such as timekeeping, records of service delivery and changes to care. It took the council six months to respond to the complaint. The council said this was because of restructuring of its adult social care service which meant officers had moved on, and this had caused delays and inconsistencies in communicating with Mr X.

(17000056) Mr B complained to the council about a double glazing company. He asked for advice on what action could be taken about it. After taking more information from Mr B the council ignored Mr B's request for a reply over a five month period, before finally responding to say it could not deal with his request because he did not live in its area. He complained to the council and it did not reply to his complaint. When we investigated what happened, the council said the poor responses it gave were because of departmental restructuring. (14016547) The council took eight months to make a decision about Ms A's homelessness application, putting her and her children in unsuitable temporary accommodation during the wait. The council told us the delay was because of staff restructuring and a large backlog of cases.

(15004018) Mrs B moved to a nursing home and was diagnosed with a degenerative illness. She said she wanted to return home and asked the council to assess her needs. The social worker suggested this would best be done in three months. The council failed to carry out the assessment. Eventually, after Mrs B complained, the council carried out a new assessment, five months after it said it would. Our investigation found the delay was because of poor coordination between different social work teams. The council said this was because it was going through restructuring and staff were carrying heavy workloads. The council said further restructuring and a new electronic recording system would prevent this reoccurring.

(15016912) The council wrongly refused to accept Mrs X's homelessness application until she was actually homeless. It then took no action when she asked for help. Mrs X had to formally complain before the council assessed her as homeless. During this time, she had to stay with friends and sleep on sofas. It is likely the council would have offered Mrs X temporary accommodation during this time if it had dealt with her application properly. After she complained the council accepted a full housing duty for Mrs X and agreed to backdate her application to the point it should have accepted her to give her higher priority. The council told us the problems Mrs X experienced were caused by restructuring across its housing department, with new procedures being put in place at the time Mrs X asked for help.

(15016358) The council failed to process Mr B's complaint about unauthorised development by his neighbours. It didn't acknowledge or deal with his later complaint about this. It did nothing until our investigation. It then investigated the situation and decided it did not cause Mr B harm. It then failed to tell Mr B this decision. The council accepted it gave Mr B exceptionally poor service explaining it was undergoing restructuring and drafting a new enforcement policy at the time. This meant enforcement complaints were not being processed as they should have been.

(15013519) Mr and Mrs C complained the council failed to fully remedy faults identified by a stage two statutory children's social care complaint investigation. This was about when their child was removed from the family home and placed with alternative carers. The independent investigation found poor record keeping, and a lack of consistency and good practice by the council. It explained these were partly because it was using temporary staff on agency contracts as social workers. It said these staff didn't have in-depth knowledge and experience of the council's procedures and might have lacked the commitment of permanent employees. It said the poor consistency was down to frequent staff changes handling the children's cases. The investigation said restructuring of social teams and work was a factor. The council had subsequently taken appropriate steps to prevent this reoccurring.

(16008982) The council started to implement a Controlled Parking Zone but then decided to use the funding for other things. Mr X complained the council had wasted money and he had lost out as a result. The council told us it couldn't explain who made the decision not to go ahead with the Zone or how and why it was made. It could not explain out of date information on its website about

the decision. It blamed funding cuts, staff turnover and restructures. It said all the people involved in the decision had left the council, and there had been major annual restructures since 2010 meaning entire teams and departments had been changed or deleted.

(16006391) Miss X's grandson, B, was a young man with complex needs needing routine and consistency. As his carer, Miss X wanted the council to plan for his transition to adult life. We found the council had failed to properly plan and prepare for this or provide appropriate respite for Miss X. The council explained this was partly due to significant reorganisation of its services. We said the council lost sight of a vulnerable young person and his carer at a critical point in B's life and when Miss X was struggling to fulfil her caring role. As part of our remedy, the council agreed to urgently review its transition to adulthood policies, including closely monitoring cases to ensure delays did not happen again. We referred to a nearby Council as having good practice for transition management. We pointed out other councils have faced similar staffing and resource issues but still provided suitable transition support to the most vulnerable people in their areas.

Local Government and Social Care Ombudsman PO Box 4771 Coventry CV4 OEH

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ADJUDICATION & REVIEW COMMITTEE, 5 SEPTEMBER 2019

| Subject Heading: CMT Lead: Report Author and contact details: | PRESENTATION ON THE COUNCIL'S CORPORATE COMPLAINT POLICY AND PROCEDURE/UPDATE ON SERVICE AREA COMPLAINTS John Jones Deputy Director of Legal and Governance Richard Cursons, 01708 432430, richard.cursons@onesource.co.uk |
|---|---|
| Policy context: Financial summary: | An overview of the Council's Corporate Complaint Policy and procedure will be presented at the meeting. No impact of presenting of the overview itself which is for review only. |
| | · · · · · · · · · · · · · · · · · · · |

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

An overview of the Council's Corporate Complaint Policy and procedure will be presented at the meeting. Members will also have the opportunity to ask service specific questions.

RECOMMENDATIONS

1. The Committee to note the presentation and agree any further actions required.

REPORT DETAIL

The Committee will receive a presentation on the Council's Corporate Complaint Policy and procedure.

IMPLICATIONS AND RISKS

Financial implications and risks: None of this covering report.

Legal implications and risks: None of this covering report.

Human Resources implications and risks: None of this covering report.

Equalities implications and risks: None of this covering report.

APPENDICES

Appendix A – Council's Corporate Complaint Policy and procedure presentation.



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The Council's Corporate Complaint Policy and Procedure

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What is a complaint?

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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

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- Has three stages
- Stage 1 is considered within Service Areas
- Stage 2 is reviewed by the Chief Executive
 - Stage 3 Member Review Panel

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Stage 1

- Acknowledged within three working days
- Full response sent within ten working days following receipt into the Council

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Stage 2

- Acknowledged within three working days
- Full response sent within 25 working days following receipt into the Council

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Member Review Panel (Stage 3)

If the complaint is not the subject of a formal decision making process or Policy decision, the customer can ask for the matter to be considered by Councillors.

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Where next?

Customers who remain unhappy with the outcome of their complaint have the option to ask the Local Government and Social Care Ombudsman or Housing Ombudsman to investigate.

The Council co-operates with any investigation carried out by either organisation.

Cleaner, Safer, Prouder Together

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Questions?

Cleaner, Safer, Prouder Together



Thank you

Cleaner, Safer, Prouder Together

Agenda Item 8



ADJUDICATION & REVIEW COMMITTEE - 21 AUGUST 2019

| Subject Heading: | Adult Social Care Annual Complaints Report 2018/19 |
|------------------------------------|--|
| 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 | Х |
|-------------------------------|----|
| 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 16 July 2019.

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



APPENDIX 1

ANNUAL REPORT 2018/19

ADULT SOCIAL CARE

Complaints, Comments and Compliments

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

Prepared by: Veronica Webb Complaints & Information Team Manager

ADULT SOCIAL CARE ANNUAL REPORT 2018-19

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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 2018 to March 2019.

Complaints have continued to decrease over the last few years with the learning from complaints being embedded in the service and its provision. Adult Social Care continue to have a number of complaints involving finance disputes and steps will need to be taken to make sure that information and communication around financial implications are robust. This should improve with closer monitoring.

Adult Social Care are in the process of moving to a new social care system, Liquid Logic which should be implemented during 2019-20. This should improve recording practices across the service area.

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.

Complaint response times have improved slightly from 2017-18 and continued efforts need to be made to ensure that complaints are responded to within a timely manner. From 2019/20, the Social Care Complaints & Information Team has additional resources to support managing the complaints process. Whilst the number of complaints is lower, complexity is greater, which meant that monitoring and responses throughout 2018-19 was impacted. It is expected that for 2019/20 the team will be more proactive and customer focussed as a result.

In February 2018 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. 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 was a key priority for 2018/19 and will continue to be for 2019/20.

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:

Local resolution

Informal- Where a complaint involves a regulated service, is a minor concern, or where a complainant does not wish to take it through the formal process.

Formal - 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 2018/19 by Adult Social Care was 9,907 (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 Deprivation of Liberty) was just under 15,700, in addition to this there were also 1053 safeguarding enquiries undertaken. 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 2018/19 at some point in the year was approx 6,900, 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

There were two enquiries resulting in 'maladministration injustice with penalty' relating to change in care provision from respite to permanent, and the treatment of deprivation of assets. The one 'maladministration injustice no penalty', was from 2017-18 with the decision received in 2018-19 relating to home care delivery. Further enquiries during 2018-19 resulted in four being closed after initial enquiries, one out of jurisdiction and one premature.

| | Apr18 | Apr17 | Apr 16 |
|--|-------|-------|--------|
| | — | - | - |
| | Mar19 | Mar18 | Mar17 |
| Maladministration (no injustice) | | | |
| Maladministration Injustice with penalty | 2 | 2 | |
| Maladministration injustice no penalty | 1 | | 4 |
| No maladministration after investigation | | 1 | |
| Ombudsman discretion | | | |
| -Cases under investigation/ongoing | | | |
| -Investigation not started/discontinued | | | 1 |

| No evidence of maladministration/service failure | | | 1 |
|---|---|---|---|
| Closed after initial enquiries: no further action | 4 | 3 | |
| Closed after initial enquiries: out of jurisdiction | 1 | 2 | |
| Premature/Informal enquiries | 1 | 1 | 2 |
| Total | 9 | 9 | 8 |

4.2 Total number of complaints

The total number of statutory complaints has continued to decrease over the last three years, with 91 being received in 2018-19, which is a 16% drop from 2017-18.

| Total Number of Statutory Complaints | | | | | | | | | |
|--------------------------------------|---------|---------|--|--|--|--|--|--|--|
| 2018/19 | 2017/18 | 2016/17 | | | | | | | |
| 91 | 108 | 121 | | | | | | | |

4.3 Stages

There were decreases during 2018-19, across all stages, with 24 enquiries, 66 formal and 25 informal complaints compared to 2017-18.

| | Enquiry | Formal | Informal | Joint health and adult social care formal complaint |
|-----------------|---------|--------|----------|--|
| Apr 18 – Mar 19 | 24 | 66 | 25 | |
| Apr 17 – Mar 18 | 34 | 75 | 33 | |

4.4 Teams

The highest number of complaints in 2018-19 was regarding 'external home care', which was a 23% increase from 2017-18. The total number of commissioned hours for 2018-19 was 699,911. Complaints involving external home care, commissioned hours totalled 16,578.50 and represents 2% of the total commissioned hours for home care.

The next highest were complaints with senior management involvement recorded under 'Adult Social Care'. These complaints required reviewing decisions, resulting in either a change of provision or waiver/ adjustment of fees. There were also increases across 'external residential/nursing homes', Mental Health, Quality and Brokerage (involving commissioning) and Safeguarding. All other teams had a decrease in the number of complaints received.



4.5 Reasons

'Standard of service' is the highest reason for complaints received. It should be noted that categories were streamlined during 2018-19 with some categories being merged into one. Standard of service now includes reasons such as quality of service, level of service and need of service. Many of these complaints related to external home care regarding times of visits, some related to level or quality of care and were linked with charges. 'Financial issues' is the next highest reason and reflects the link between the standard of service following invoices received 'disputing decision'.



The comparison shows that attitude/behaviour of staff has increased in 2018-19 to 16 compared to 4 in 2017-18. Many of these were family members who were not happy with the social worker and decisions made. It has been noted that where a person does have

capacity and family members may not agree with the decision, the social workers will respect the wishes of the service user which is not always welcomed by family members.

There has been an increase in 2018-19 regarding 'financial issues', which as indicated above, refer to invoices/fees of care received which are in dispute, mainly through family members. 'Safeguarding issues' have also increased in 2018-19 these referred to concerns in relation to care received and discharge arrangements.

| | attitude/ behaviour of staff | change of service | Data protection | delay in service | delay to implement a service | dispute decision | Eligibilty | Family dispute | 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 | standard of service |
|---------|---------------------------------|-------------------|-----------------|------------------|---------------------------------|------------------|------------|----------------|------------------|----------------------|-----------------------|---------------------|-----------------------|------------------|-----------------|---------------------------|--------------------|---------------------|---------------------|
| 2018/19 | 16 | 4 | | 11 | | 18 | 1 | | 26 | | 6 | | 8 | | | | | 13 | 47 |
| 2017/18 | 4 | 1 | | 6 | 7 | 19 | | | 11 | 3 | 8 | 1 | 14 | 36 | | | 23 | 2 | |

4.6 Outcomes & Learning

Of the 91 complaints received in 2018-19, 38 were not upheld, 15 were partially upheld and 12 were upheld. Complaints withdrawn were due to either information not being provided or consent not being given. There were a further 14 complaints that were referred to an alternative service/provision in which the outcome is not known.

| | | Upheld | Partially Upheld | Not Upheld | Complaint Withdrawn |
|---|-------|--------|---------------------|---------------|------------------------|
| 1 | 18/19 | 13 | 16 | 38 | 12 |
| | 17/18 | 51 | | 52 | 5 |

Categories for outcome description below has also been streamlined and therefore some categories below have changed during 2018-19 with 'information/explanation given' and 'apology standards not met' have replaced, 'explanation and apology'. The highest outcome for 2018-19 is 'information/explanation being given'. When exploring further, although information or explanations may have been given, retention of information is always dependent on when this was given as it may have been at a time of crisis for the family. However it is noted that recording practices for financial information being given to clients/families has dipped from 2017-18 when in March 2018, 81.7% finance charging case note were being recorded appropriately whereas in March 2019 this was reported as 64.3%. Staff will need to be reminded to ensure that where financial information is discussed that this is recorded appropriately.

| | | | | | | Complaint | Explanation | | | No action/ | | | | | | |
|-------|-----------|-----------|-----------|-----------|-----------|-------------|-------------|------------|-------------|----------------|----------|---------|-------------|----------|----------|------------|
| | | | | | | Withdrawn/ | | | Information | further action | | | | | | |
| | | | | | Council's | referred to | Apology | | /Explanati | required | | | referred to | | | |
| | apology | change in | change of | | position | different | | | on given | | Reassess | | alternative | | Services | |
| | standards | practice/ | allocated | change of | remains | procedure | | financial | - | | ment/ | records | service/pr | Reimburs | re- | Training |
| | not met | policy | worker | provision | unchanged | | | adjustment | | | Review | amended | ovision | e - ment | instated | identified |
| 18/19 | 12 | 5 | 2 | 0 | 15 | | | 4 | 22 | | | 2 | 14 | | | 1 |
| 17/18 | | 14 | | | | 5 | 36 | 16 | 11 | 3 | 6 | | | 6 | 2 | 8 |

4.6.1 Learning from Complaints

During 2018-19 Adult Social Care identified areas which require further improvement regarding assessments and how these are completed, ensuring that budget information is included, start and end dates of provision are accurately shown. Interim measures have been put in place to audit assessments by a senior manager requiring a decision on an individual's care needs. With the introduction of the new Adult Social Care system, this should also ensure that assessments are completed thoroughly and will still require authorisation by a senior manager.

The financial charging case note and checklist will still need to be monitored as recording has slipped slightly and is not at the level it was at the end of 2017-18. It has also been highlighted that care needs to be taken not to rely on financial information given previously when there is a change of need, to ensure clients and family are clear about the financial implications when a change of need is required.

Where direct payments are used for respite placements clear direction/guidance needs to be given to residential/nursing homes. Also contracts in place should be signed by individual or family member, particularly essential for third party top-ups.

There is still a need for staff to ensure clarity of information and communication throughout all service areas so that standards improve.

4.6.2 Learning from the Ombudsman

Change in provision and the financial implications associated with that change needs to be clearly communicated and budgetary information needs to be included within the assessment. Deprivation of assets and property disregard is being highlighted in many LGSCO reports and Adult Social Care will need to take particular care and attention when dealing with these complaints, but also to be mindful of the time taken in dealing with these type of complaints.

4.7 **Response times**

Of the 91 complaints received, it is noted that 13% (12) were not progressed due to for example either consent/information not being provided. The total number responded to therefore was 79. The number of complaints responded to within the 20 working day timescale in 2018-19 was 61% (48 of 79), 39% (31) responded to over the 20 day timescale.

Of the 91 complaints, 34 involved external agencies, three did not progress. Some complaints were referred directly to the agency to respond, others would require input from the agency to determine whether a financial adjustment would be required.

From early 2019/20, additional resources are now in the Social Care Complaints & Information Team to ensure response times are managed and followed up as they should be. Through 2018/19, due to complexity of the complaints case work, the Team experienced some difficulties in supporting the Service to meet deadlines effectively. Processes are continually being reviewed to improve response times and with capacity increasing the team will be looking to work more closely with managers.

| | Within 10 days 11-20 days | | | | Over 20 c | lays | | | |
|------------------------------|---|--------------|--|----------------------|--------------|------|----------------------|--------------|--|
| | Apr18- Mar19 % | Total no. | | Apr18- Mar19 % | Total no. | | Apr18- Mar19 % | Total no. | |
| Informal/Formal | 35 | 28 | | 25 | 20 | | 39 | 31 | |
| Total no. | | | | | | | | | |
| 2017/18 | | 25 | | | 32 | | | 50 | |
| Of the 2018/19 to providers: | 18/19 total, response times for all complaints involving external | | | | | | | | |
| External providers | 15 | 14 | | 7 | 6 | | 12 | 11 | |

4.8 Monitoring information

4.8.1 Age

There has been a slight increase in those aged 85+ in 2018-19 compared to 2017-18 with significant decreases of 79% and 64% in ages 65-74 and 55-64 respectively with slight decreases in the middle age ranges and those aged 75-84.

| | under 18 | 18- 24 | 25- 34 | 35- 44 | 45- 54 | 55- 64 | 65- 74 | 75- 84 | 85+ | undeclared |
|-------|-------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----|------------|
| 18/19 | | 3 | 4 | 4 | 2 | 4 | 3 | 22 | 43 | 6 |
| 17/18 | | 7 | 5 | 5 | 8 | 11 | 14 | 24 | 39 | 2 |

The gender breakdown below shows that of those aged 85+ there is a particularly high number of females and slightly higher across ages 25-34, 35-44, 65-74 and 75-84.



4.8.2 Disability

As reflected in the number of those aged 85+ many have a personal care support need, as well as difficulties with 'memory and cognition'. The number not recorded has increased slightly and care will need to be taken that information is obtained.

| | Access & Mobility | Hearing | | 5 | Known | | Physical Disability | | Mental | Other Vulnerable People | | Visual impairment | Not recorded |
|-------|----------------------|---------|---|---|-------|----|------------------------|----|--------|-------------------------------|---|----------------------|-----------------|
| 18/19 | 9 | | | 4 | | 44 | | 22 | 1 | | 1 | 1 | 9 |
| 17/18 | | | 1 | 9 | 1 | | 74 | 20 | 3 | 1 | 3 | | 3 |

4.8.3 Ethnicity

As with the population of Havering, 'White British' is the highest with 77 in 2018-19, although dropped slightly from 2017-18, with a wider spread of those from Black/Black British backgrounds.

| | Asian / Asian | Asian British - | Black British - | British/Any | Black British - | Black | White Any other White background | | White - English | | Not declared |
|-------|---------------|--------------------|--------------------|-------------|--------------------|-------|--|-----|--------------------|---|-----------------|
| 18/19 | | | 4 | 1 | 1 | 1 | | 77 | | | 7 |
| 17/18 | 1 | 1 | 4 | | 1 | | 3 | 100 | 1 | 1 | 3 |

4.8.4 Religion

There is a wide cross section of religions that have been recorded during 2018-19, with those from Jehovah's Witness, Jewish and Muslim religions being represented.

| | | | | Church of | Jehovah's | | | No | Not | Not | Other |
|-------|----------|----------|-----------|-----------|-----------|--------|--------|----------|----------|--------|----------|
| | Buddhist | Catholic | Christian | England | Witness | Jewish | Muslim | Religion | recorded | stated | religion |
| 18/19 | | 4 | 6 | 26 | 2 | 2 | 2 | 3 | 30 | 15 | 1 |
| 17/18 | 1 | 11 | 13 | 42 | | | | 2 | 23 | 23 | |

4.8.5 Marital Status

It is encouraging to note that those not recorded has improved in 2018-19 compared to 2017-18 and efforts will need to be continually made to ensure information is obtained. Of the complaints made, 19 were 'married' and 16 were 'widowed'.

| | Divorced | Married | Not recorded | Other | Separated | Single | Unknown | Widowed |
|-------|----------|---------|-----------------|-------|-----------|--------|---------|---------|
| 18/19 | | 19 | 38 | 1 | 1 | 5 | 11 | 16 |
| 17/18 | 1 | 30 | 43 | 1 | 2 | 14 | 6 | 18 |

4.8.6 Sexual Orientation

This information may still be perceived by residents as being very sensitive information and therefore the number not recorded is still high at 72 in 2018-19, although lower than in 2017-18 with 13 being 'heterosexual' and 6 'preferring not to say'.

| | Heterosexual | Not recorded | Prefer not to say |
|-------|--------------|-----------------|-------------------------|
| 18/19 | 13 | 72 | 6 |
| 17/18 | 12 | 92 | 11 |

5 How we were contacted

Email has been the preferred method of contact during 2018-19 with telephone being the next preferred method. The new Adult Social Care system has not yet been implemented, however this may have an impact on how clients and their families will be contacting the service in future.



6 Expenditure

There was publicity expenditure incurred during 2018-19 of £531.25 and a remedy/time and trouble payment of £1,300.

| | Publicity £ | Payment £ | Total £ |
|--------------------|----------------|--------------|------------|
| Apr 2018- Mar 2019 | 531.25 | 1,300 | 1,851 |
| Apr 2017- Mar 2018 | 581.25 | | |

7. Compliments and resident satisfaction

Compliments have increased slightly in 2018-19 to 52 from 49 in 2017-8, which is encouraging and staff should continue to send their compliments to log for reporting purposes. There has been an increase across most teams with both the Area Community Teams and Client Finance showing significant increases, as well as increases across external residential/nursing homes, JAD and Learning Disabilities Team. Senior managers who are recorded under Adult Social Care have also received compliments.

7.1 Compliments



Some examples of compliments received are given below:

An appreciative client writes about his social worker 'How can I begin to tell you how much I appreciate all the hard work you've put into caring and guiding me throughout the past seven months..... I cannot express how happy I am and I have tears now because I cannot believe how lucky I am. Thank you, thank you and thank you again.' (ACT South)

A daughter sends a thank you card to her dad's social worker 'I just want you to know how I cannot express how much I appreciate all you have done for my dad and what a great

support you have been to me..... I want you to realise what a difference you made... you showed real emotion and a real passion for your job.' (ACT North)

A friend writes in 'I would like to thank you for the way in which you have managed the arrangements for xxx affairs. We would also like to say how professional and caring the funeral was carried out xxx was treated with great respect and dignity, the service was very personal and touching.' (Client Finance)

A professor writes 'Can I express my thanks to you and your colleagues at Havering....., the quality and responsiveness of Havering's management of this case has been excellent, and is a credit to public services.' (Adult Social Care)

Parents write 'Thank you for all that you have done to support xxxx, that he is progressing so well is I'm sure very much due to your perseverance in obtaining the best possible for him to continue with his development.' (Learning Disabilities)

A husband shows his gratitude 'I would just like to thank you for funding my wife in the care home I am very grateful.' (Financial Assessment & Benefits)

A sister tells of her gratefulness for the support given to her brother '.....so easy to talk to, attentive, patient - explaining things in ways that both my brother and I could understand and so relaxing to be around even my brother spoke up and if you knew my brother you would know that is something that doesn't happen often. Thanks to xxxx my brother has agreed to three personal care visits a week and I feel happy with this and feel that this is going to make a big difference to us both. ' (Preventative & Assessment now Havering Access Team/Review Team)

A daughter writes in about the home care for her mother 'I am writing to you to say what an excellent service the company provides to my Mother....

Mum has 4 carers a day and every single one of them is so kind and patient with her. Since last October Mum has had several serious health issues the main one being a bleed on her brain. Her recovery was remarkable and I truly believe this is because staff were so supportive and very positive with her and our family......I will never be able to thank everyone enough for all their hard work and support so I was hoping this letter would go towards recognizing my gratitude.' (Home Support Services)

A grateful niece writes to a residential home a year after her aunt's death 'I don't know where the time has gone since then but, the passing of time has not diminished the level of gratitude I and the rest of my aunt's family would like to express for the care and compassion shown by the Manager and her team during the time my aunt was in their care..... We were all relieved that Was allowed to spend her final days at Ashgrove as, for her it had become her home.' (Ashgrove Care Home)

7.2 Adult Social Care Outcomes Framework – Survey 2018/19

The annual statutory survey for Adult Social Care shows that there has been a slight increase in people using our services reporting overall satisfaction of 62% in 2018/19 compared to 60% in 2017/18.

Other key outcomes from the Adult Social Care survey for 2018/19 are shown in the table below:
| | 18/19 | 17/18 |
|---|-------|-------|
| % Service User who are satisfied with their quality of life | 78.3% | 79.6% |
| % Service User who have control over daily lives | 74.8% | 77% |
| % Service User who feel they have as much social contact as they like | 45.6% | 45% |
| % Service User overall satisfaction | 62% | 60% |
| % Service Users who find it easy to find information about services | 67.9% | 74% |
| % Service Users who feel safe | 69.5% | 71% |
| % Service Users who think services make them feel safe | 89.8% | 88% |

8. Members Enquiries

There were 114 member enquiries during 2018-19 which is a 40% increase from 2017-18 (68) with 75% being responded to within timescale.

9. Conclusion

Complaints continues to be a good tool to direct service improvements and Adult Social Care complaints have decreased over the last few years as the learning is taken on board by the Service.

There should not be complacency and continued monitoring and steps taken to ensure that Adult Social Care always strive towards a high quality standard of service,

Although response times have improved slightly, it is acknowledged that there was not the close monitoring and management of complaints during 2018-19 and with continued reviews of processes and closer working with managers within Adult Social Care that further improvements can be made.



APPENDIX 1

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 | Improved recording of information given on financial assessment and charges | Financial assessment case note implemented in 2016/17. Forms introduced to be signed by service user/financial representative (JAD only) Compliance with completion monitored by: Monthly performance reporting 1-1 supervision | • All | Ongoing | Case note to continue to be used to record information on advice and guidance given, including date. Ensure form signed by service user. Senior management to meet with individuals where case note recording identified as an ongoing concern. Implement in the new care management system |
| Cack of accessible information about apult social care more generally leading to complaints about level of service / incorrect information | Reviewing information to ensure it is available and accessible, and provided to people in timely fashion | 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. | Head of Integrated Care Head of Joint Commissioning Unit | March 2020 and ongoing Implemented February 2018 and for review by March 2020 | Redesigned locality model to include other Council departments and external agencies on virtual or co-located basis. |
| Percentage of complaints responded to within timescales needs to improve | Response times require improvement | 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 | All Head of Integrated Care Head of Joint Commissioning Unit | Ongoing | Quarterly presentation to senior management team on complaints performance. Head of Integrated Care reviews all members enquiries weekly to ensure response within timescale. Improved engagement with providers and other agencies is ongoing. |

ADULT SOCIAL CARE ANNUAL REPORT 2018-19

| 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 | | 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. | 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 prvices | Confidence that invoices reflect actual delivery | Brokerage to ensure that invoices provide evidence of actual service delivery | Brokerage Team | Ongoing | New Active Homecare Framework established January 2017. Improved use of CM2000 by providers on the framework |
| Anges in provision (or funding provision (or fu | That financial implications are clear for service users and their financial representatives where there is a change of service | 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. | Information to service users and their financial representatives needs to be clear that liability to charging for such visits will remain. | Updated charging policy –need to implement changes and make sure all are clear. | Care Management, Brokerage and Financial Assessment and Benefits. | March 2020 | Non-Residential Charging Policy is being reviewed and consulted on in 2019/20 for implementation by April 2020 |

Adult Social Care Annual Complaints Report 2018-19

¹ This includes where the funding body changes from the council to the NHS for example

ADULT SOCIAL CARE ANNUAL REPORT 2018-19

| Issues Identified | Lessons Learnt | Action to be taken | Department | Timescale | Review |
|--|--|--|--------------------------------|-----------|--|
| Assessments/ Reviews need to be completed appropriately with budget information, relevant signatures, clear recording showing start and end dates of provision. | Assessments need to be completed to ensure compliance with Care Act | Monitoring and authorisation of assessments –this should be picked up via new social care system | • ASC | Ongoing | March 2021. The new Care Management System (Liquid Logic) will go live for ASC in Autumn 2019. It is anticipated this will support improved recording |
| Respite arrangements via direct payments | Providers need to have clear information of how direct payments should be treated for respite to ensure correct charging levels. | Joint Commissioning Unit to review arrangements | Joint Commissioning Unit | Dec 2019 | April 2020 |
| Peor Communication | Communication between teams i.e. finance and care management needs improving to ensure changes that have financial implications are actioned in timely manner. Clarification when case is closed to an individual rather than the service. Messages taken need to be clear and concise and referred on in a timely manner. | Service management to pick up with teams and raise in team meetings, 121s etc. | • All | Ongoing | |

ADULT SOCIAL CARE ANNUAL REPORT 2018-19

| Issues Identified | Lessons Learnt | Action to be taken | Department | Timescale | Review |
|--|---|--|--|------------|--------------|
| Contracts not being signed for top-up arrangements | Contracts should be signed to ensure compliance with top-up fee arrangements. | A project to review top up arrangements is underway to be completed by April 2020. | Joint Commissioning Unit | April 2020 | Sept 2020 |
| Resources | Resources need to be sufficient to ensure timely responses to complaints and that there is sufficient capacity to ensure process is robust. | • Senior Management have identified resource issues within the team that has led to a lack of resilience. This has been addressed through deployment of temporary resources with permanent recruitment underway. | Business Management | July 2019 | January 2020 |

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Agenda Item 9



ADJUDICATION & REVIEW COMMITTEE - 21 AUGUST 2019

| Subject Heading: | Children's Services Annual Complaints Report 2018/19 |
|------------------------------------|--|
| 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 | Х |
|-------------------------------|----|
| 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 9 July 2019.

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



APPENDIX 1

Children Services

Annual Report 2018 – 2019 Complaints and Compliments

Prepared for:

Tim Aldridge, Director Children Services

Prepared by: Veronica Webb, Complaints & Information Team Manager

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1. Executive Summary

Children's services complaints have continued to increase over the last few years, alongside a backdrop of growing demand and increasing complexity of needs.

The continued overarching theme of complaints is where families disagree with the rationale behind interventions taking place, or are not clear on why some decisions are taken. While statutory processes are often necessary, and the right thing to do to keep a child safe, they can be overwhelming and emotive times for families. In some cases, families may not be ready to engage with services and therefore not all interactions will have a positive outcome. Our systemic model of practice, which we have been developing and implementing over the last 18 months, focusses on reducing the number of statutory interventions and working with families in a way that identifies strengths and builds resilience. The training for our staff in systemic practice develops skills in having difficult conversations and co-producing interventions to ensure the most positive outcomes.

The number of Stage 2 requests increased in 2018-19 and efforts are on-going to resolve as many complaints prior to escalation to Stage 2. It is acknowledged that the Social Care Complaints Team were not as effective as in recent years due to depletion of staff, however this is being addressed, leading to a more proactive team going forward. There have been improvements in 2018-19 for those complaints being responded to within the statutory timescales, and the Social Care Complaints Team will continue to work closely with managers and the Complaints Manager will be attending regular monitoring meetings with the Senior Management Team to ensure that this improvement continues. action

In the past there have been separate reports for Children's Services and Learning & Achievement. However Learning & Achievement complaints are reported corporately, and complaints in relation to the Children and Adults with Disabilities Team has been incorporated within the Children's report over the last few years. A separate report was not required, however information involving schools has been incorporated within this Executive Summary as follows.

Of the 25 enquiries received and recorded in 2018-19 involving schools these were referred to the relevant school or academy to be taken through their own complaints procedure. 40% (10) of these were referrals via Ofsted with 60% (6) related to bullying. Other enquiries related to issues around how teachers dealt with particular situations involving their child, or how the school was being managed.

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.

Complaints Received Ombudsman referrals

There was one enquiry which found maladministration and injustice in relation to foster care with six premature/informal enquires and two closed after initial enquires. The decision for the enquiry from 2017-18 found maladministration and injustice with no further action required in relation to Education Health & Care Plan

| | Apr18- Mar19 | Apr17- Mar18 | Apr16- Mar17 | |
|--|-----------------|-----------------|-----------------|--|
| 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 | 6 | 1 | 2 | |
| Closed after initial enquiries – no further action | 2 | | | |
| Total | 9 | 3 | 6 | |

3.2 Total number of complaints

The total number of Stage 1 complaints in 2018-19 has increased by 15% (106) compared to 2017-18 (90), with the total number of enquiries reduced by 66% (17) from 2017-18 (50). Enquiries do not form part of the statutory process and therefore are not included further in this report.

The number of complaints received directly from young people has dropped by half in 2018-19 to 9 from 18 in 2017-18. This will need to be explored as to the reasons which could be as a result of direct work with young people to resolve issues they have at an early stage

| | Enquiries | Stage 1 | Stage 1 escalated to Stage 2 |
|---------|-----------|------------|------------------------------------|
| 2018/19 | 17 | 106 | 6 |
| 2017/18 | 50 | 90 | 1 |
| 2016/17 | 43 | 92 | 1 |

3.3 Stages

During 2018-19 there were six escalations to Stage 2, this is a significant increase from one in 2017-18. It is recognised that for the main part of 2018-19 complaints were not managed as effectively in previous years due to depletion of staff within the Social Care Complaints & Information Team. There were no Stage 3 Reviews in 2018-19.

3.4 Teams

The Triage/MASH & Assessment Team received the highest number of complaints during 2018-19, which has almost doubled from 2017-18, with Intervention & Support Services second highest.

The types of complaints received by these services continue to be the same theme where intervention is unwelcomed by parents which included disagreement on information contained within assessments, unhappy with children being put on a child protection plan, unannounced visits undertaken by social workers.

Children & Adults with Disabilities Team complaints have doubled to eight in 2018-19 from four in 2017-18. These referred to Education & Health Care Plans (EHCP) and the level or delay in providing equipment, or provision such as Speech and Language Therapy.



3.5 Reasons

The number of complaints regarding attitude/behaviour of staff has risen by 78% from 11 in 2017-18 to 49 in 2018-19. However, the majority of the complaints received reflected where parents were unhappy with the social worker where they perceived information within assessments was misleading, inaccurate, or did not reflect individual's views with a bias towards one parent. This type of complaint reason tended to be where parents were no longer together and had an acrimonious relationship. Social work staff will need to think about and be mindful of how sensitively they work with parents particularly during times of parental separation and to ensure that they respectfully listen to all parties and accurately record their wishes and feelings in relation to their children.

Inaccurate information was the second highest and reflects some of the reasons regarding attitude/behaviour, whereby one parent did not agree with the content of an assessment and felt their views were not taken into account. Where there was inaccurate information within an assessment that could be amended, these were. Team Managers will be responsible for quality assuring assessments with particular scrutiny around potential bias and accurate recording of information during the assessment process.

Standard of service was the next highest and related to level or lack of support that parents or young people were receiving or felt they should be receiving. Social Workers will need to explore the level of support which families are receiving from Children's Services during the assessment and planning phases.



Below is a comparison of complaint reasons between 2018-19 and 2017-18. There have been increases across attitude/behaviour of staff, delays in service, dispute decisions, financial issues, inaccurate information, safeguarding issues and standard of service. Performance Development Reviews (PDR) core competencies will be discussed during team meetings on a quarterly basis to ensure that Social Workers are engaging with children and families in a respectful and collaborative manner. Teams can use quarterly complaints summaries to evaluate how children and families score attitudes and behaviours within professional relationships.

Team Managers will ensure that any anticipated disruption in service delivery is counted by support from colleagues in other teams within the service area. Children's Services will continue to use the Quality Assurance framework and other feedback loops to understand the standards of service delivered in the community to children and families.

It should be noted that the categorisation for reasons changed during 2018-19 and therefore categories such as standard of service has combined to include level of service, quality of service and non-delivery of service.



3.6 Outcomes & Learning

There were 14 complaints withdrawn during 2018-19, which was either through the Service resolving the concerns or where the relevant consent or information was not provided. The majority of complaints were not upheld (40), with 34 being partially upheld and 18 upheld.

| Complaint Withdrawn | Upheld | Partially Upheld | Not Upheld | |
|------------------------|--------|---------------------|---------------|--|
| 14 | 18 | 34 | 40 | |

Below shows the breakdown of those complaints upheld. It should be noted that there may be more than one outcome to a complaint, which may have a number of complaint elements within it. This could result in an apology being given along with a financial adjustment, or information/explanation given along with an apology and could be a combination of up to three i.e. apology being given, information/explanation and change in practice/policy.



3.6.1 General Themes and Trends 2018/19

Although 'attitude/behaviour of staff' was the highest reason for complaint the general theme is about the intervention and the type of intervention that may occur by social workers within Children's Services. Clarifying the need for intervention may not always be possible, especially in relation to child protection concerns and therefore the Service may need to look at ways to minimise the impact to families when intervention occurs.

Inaccurate information and recording practices needs to be reinforced, and with the implementation of the Liquid Logic system for Children's Social Care records this should address this area. Children's Services will also undertake quality assurance of assessments and plans and use service user feedback to reduce / minimise this from happening. Social Workers could also invite families to reflect on the progress of the assessment or intervention at various phases of engagement with them to make sure that their lived experience is fully understood.

There has been a reduction in the number of young people making complaints directly and this could be due to the utilisation of the Cocoon which has resulted in young people being able to discuss their concerns in an informal environment with early resolution.

3.7 Response times

Response times have decreased in 2018-19 and it is noted that during this time the Social Care Complaints & Information Team were depleted and impacted on effectively managing and ensuring responses were dealt with within the required timescales. However, managers also need to understand the importance of responding within timescale and although it is acknowledged that there may be competing priorities, it should be noted that delays in responding leads to escalations, which require more of their time.

| | Within 10 days | | ays 11-20 days | | Over 20 days | |
|---------|----------------|--------|----------------|--------|--------------|--------|
| | Apr18- | Apr17- | Apr18- | Apr17- | Apr18- | Apr17- |
| | Mar19 | Mar18 | Mar19 | Mar18 | Mar19 | Mar18 |
| Stage 1 | 18 | 15 | 30 | 28 | 44 | 47 |
| % | 17 | 21 | 28 | 31 | 42 | 48 |

4. Expenditure

Expenditure incurred for a Stage 2 investigation and time and trouble payment relates to a complaint in 2017-18 which concluded in 2018-19. Expenditure for the Stage 2 investigations for 2018-19 will be shown in 2019-20.

| | Publicity/ leaflets | Independent investigators | Payments | Total |
|---------------------|------------------------|------------------------------|----------|-----------|
| Apr 2018 – Mar 2019 | | £5,346.45 | £200.00 | £5,546.45 |
| Apr 2017 – Mar 2018 | | | | |

5. How Complaints were received

Email and telephone are the preferred method of contact in 2018-19, although it is noted that complaints received on-line have increased, while those received by letter has decreased

slightly. From the table below, 2017-18 also included enquiries and therefore does not show a true comparison to 2018-19.

| | Letter | E-mail | Complaint Form | Telephone | In Person | Online | Social networking |
|---------|--------|--------|-------------------|-----------|--------------|--------|----------------------|
| 2018/19 | 12 | 55 | 6 | 18 | 3 | 13 | |
| 2017/18 | 19 | 85 | | 24 | 2 | 7 | 2 |

6. Monitoring Information

6.1 Age & Gender

There has been an increase in the number of children 18+ involved in complaints in 2018-19, for those leaving care requiring support with finances. There was a decrease across all other age ranges.



The breakdown below shows the gender breakdown against age. Within the 0-5 and 6-9 age group the majority are female, while for the older age groups from 10 years old onwards are mainly male.



6.2 Disability

The breakdown below shows that the majority of children are recorded as not having a disability. However it is noted that a number of entries are blank and this may be improved going forward with the Liquid Logic system which may provide more detailed information. From those that indicate a disability, these refer to an Autism/Aspergers Syndrome diagnosis, communication, learning or mobility disability.



6.3 Ethnicity

There has been a decrease in the number of 'White British' in 2018-19 compared to 2017-18, with increases in those with an 'African' heritage, 'Mixed-White & Black', 'Caribbean' and 'Asian other'.



6.4 Religion

Information recorded shows that 'no religion' status is the highest, with 'Christian' being the second highest. It is encouraging to see that a number of different religions have been

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recorded and efforts should be made to ensure this information is captured consistently. Children's Services to ensure that all relevant demographics are recorded on the case files at the point of allocation.



7. Members Correspondence

During 2018-19 a decision was taken that members correspondence reports were not circulated due to difficulties with reports being produced via CRM. However those recorded for Children's Services in 2018-19 are provided below, with 72% (34 of 47) being responded to within timescale.

| | 2018/19 | 2017/18 |
|------------------------|---------|---------|
| Members Correspondence | 47 | 63 |
| | | |

8. Compliments

The total number of compliments received in 2018-19 increased from 10 in 2017-18 to 19. This also includes compliments received for Learning & Achievement, who with Children and Adults with Disabilities Team both received the highest. Figures are still low and efforts need to be made to ensure that compliments are sent for recording purposes.



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Some examples of compliments received are given below:

A father writes to an Advanced Practitioner 'thank you for all the help and care you have given ... and myself over the last 6 months. I do not think we would be where we are now without your professional and caring approach.'

A mother gives positive comments during a Child Protection Conference Review stating that the social worker had helped and listened to her during work with herself and her children and had experienced a very positive working relationship with the social worker.

A foster carer is thrilled about the child she is caring for being nominated for an award at school and writes to the Advanced Practitioner.. 'if it wasn't for your support and guidance he would not be where is now.'

A father writes to the Social Care Complaints Manager 'I do appreciate that this has taken up a large amount of your time, so I thank you for that.'

A Court Magistrate is impressed with a Youth Offending Services Practitioner report to Court and described it as 'a report of the highest quality.'

9. Conclusion

There has been a significant increase in the number of complaints for Children's Services. Complaints can be very emotive where a number of parents do not accept decisions and the interventions by Children' Services. This has resulted in a number of parents remaining dissatisfied and wanting to progress to Stage 2, resulting in a very high number of Stage 2 requests within 2018-19.

Unfortunately the increase in both the number of complaints and the number of Stage 2 progressions impacted on the effectiveness of the Social Care Complaints Team at a time when the team was depleted for most of 2018-19. However, going forward we are looking to develop the team to be more proactive, customer focused and more effective. Plans to include complaints within the recently implemented Liquid Logic Children's Social Care system should assist with closer monitoring and improvements with response times.

Closer working with teams will also be essential in ensuring that managers take responsibility for responding to complaints within timescale and that they are supported to do so. Attending team meetings will be a way to do so and these will need to be planned effectively.

With the complexity of complaints involving children, the family dynamics that can be involved in these type complaints and the increasing volume, care needs to be taken to ensure that complainants feel able to complain, feel supported and confident that their complaint will be dealt with in a fair and thorough way. This may sometimes result in timescales being exceeded, however complainants need to be kept informed and updated throughout the process.

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10. Complaints Action Plan

| Issues Identified | Lessons Learnt | Action to be taken | Department | Timescale | Review |
|---|---|--|------------------------------------|--|--|
| S47 – parents not given sufficient information about process | Parents to be provided with all relevant information about child protection processes at the beginning of our engagement with a family. Clear explanation/ information about process | Team managers sign off S.47's in the service Social workers to give clear and concise information about process | Triage/MASH & Assessment ISS | On-going | Leaflets not distributed due to possible changes. Will look at information sharing processes over the next 6 months to look at developing an information resource for children and families. |
| Important information is not always recorded appropriately Page 125 | Information leading to an action/decision should be recorded in detail. Information needs to be recorded accurately | 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 Twice yearly practice week audits. Monthly case file audits by team managers. | Managers continue to carry out case file audits to ensure recording is appropriate. Introduction of 'Obsession with Assessments' training/briefing sessions introduced to reinforce the need for accurate reporting. Introduction of Liquid Logic from December 2018 will also help this. |
| Better communication around contact arrangements and case progression | Communication around changes in contact with families. Communication gap when social worker leaves. | To explore better communication re contact arrangements and case progression All families will be notified in writing when there are significant changes in service delivery for example, a change of Social Worker. The allocated Social Worker will also complete a handover whenever this is possible to | AII | 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. |

| | | introduce the new worker. | | | Use of generic emails to ensure continued communication when a social worker leaves service areas to ensure consistency. |
|---|--|---|---------------------------|---|--|
| S7 reports/court reports – inaccurate information/interpret ation of information | | | | | Managers to quality assure and sign off all reports that go to Court |
| Improved response times | Responses need to completed in a timely manner. | Complaints to be tracked on a weekly basis by Senior Leadership Team within Children's Services | Assistant Director/SLT | On-going | Complaints representation on quarterly monitoring meetings with SLT. |
| Assessments – Page 126 | data breaches from copy and pasting source of information to be clearly identified care re bias of father's views information from professional discussions may be backtracked. | The ICS assessment templates have been remodelled in line with our systemic model of practice. This allows more time for social workers to reflect on the information they are inputting into the assessments. Following the restructure, management oversight and grip has been strengthened thereby allowing for greater quality assurance of assessments. The allocation system of work in the assessment service has been strengthened which has reduced caseloads and the urgency for work to be completed in a fast paced environment. This will allow more thoughtful and reflective time thereby strengthening practice. | Assessment & ISS | Quarterly review of audit findings which is tracked via SMT | |

| Representatives/ Advocates | Clearly identify role and level of formality for someone acting on someone else's behalf | At the commencement of a complaint Complaints & Information Team clarify role of individual acting on someone else's behalf and to understand that role throughout the process | On-going | |
|-------------------------------|--|--|----------|--|
| General communication | Telephone contacts to be followed up in writing Clarify when a case is closed to an individual rather than service. | Will be picked up within teams and through the new social care system. Workers are to clearly specif whether the case is being transferred/reallocated and communicate to families. | On-going | |
| | • | • | | |

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