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CHILDREN & LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE AGENDA

7.00 pm	Tuesday 8 December 2020	VIRTUAL MEETING				
Members 9: Quorum 3						
COUNCILLORS:						
Judith Holt (Chairman) Robby Misir (Vice-Chair) Gillian Ford	Tony Durdin Tele Lawal Sally Miller	Dilip Patel Carol Smith Reg Whitney				
CO-OPTED MEMBERS:	Statutory Members representing the Churches	Statutory Members representing parent governors				
	Lynne Bennett, Church of England Jack How, Roman Catholic Church	Julie Lamb, Special Schools Kathy Freeman, Primary Schools				
Non-voting members represe lan Rusha (NEU)	nting local teacher unions and pro	ofessional associations:				

For information about the meeting please contact: Taiwo Adeoye - 01708 433079 taiwo.adeoye@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.

What is Overview & Scrutiny?

Each local authority is required by law to establish an overview and scrutiny function to support and scrutinise the Council's executive arrangements. Each overview and scrutiny sub-committee has its own remit as set out in the terms of reference but they each meet to consider issues of local importance.

The sub-committees have a number of key roles:

- 1. Providing a critical friend challenge to policy and decision makers.
- 2. Driving improvement in public services.
- 3. Holding key local partners to account.
- 4. Enabling the voice and concerns to the public.

The sub-committees consider issues by receiving information from, and questioning, Cabinet Members, officers and external partners to develop an understanding of proposals, policy and practices. They can then develop recommendations that they believe will improve performance, or as a response to public consultations. These are considered by the Overview and Scrutiny Board and if approved, submitted for a response to Council, Cabinet and other relevant bodies.

Sub-Committees will often establish Topic Groups to examine specific areas in much greater detail. These groups consist of a number of Members and the review period can last for anything from a few weeks to a year or more to allow the Members to comprehensively examine an issue through interviewing expert witnesses, conducting research or undertaking site visits. Once the topic group has finished its work it will send a report to the Sub-Committee that created it and will often suggest recommendations for the Overview and Scrutiny Board to pass to the Council's Executive.

Terms of Reference

The areas scrutinised by the Committee are:

- Pupil and Student Services (including the Youth Service)
- Children's Social Services
- Safeguarding
- Adult Education
- Councillor Calls for Action
- Social Inclusion



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 AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

(if any) - receive.

3 PROTOCOL ON THE OPERATION OF CHILDREN & LEARNING OVERVIEW AND SCRUTINY SUB- COMMITTEE MEETINGS DURING THE COVID-19 PANDEMIC RESTRICTIONS (Pages 1 - 4)

4 DISCLOSURE OF INTERESTS

Members are invited to disclose 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.

5 MINUTES (Pages 5 - 10)

To approve as a correct record the minutes of the meeting of the Committee held on 17 September 2020 and authorise the Chairman to sign at a later date.

6 **PROTOCOL FOR PRE-DECISION SCRUTINY** (Pages 11 - 18)

The Sub-Committee to note the content of the Protocol on Pre-Decision Scrutiny

7 QUARTER TWO 2020/21 - PERFORMANCE INFORMATION UPDATE (Pages 19 - 40)

Report and presentation attached.

8 CHILDREN'S SOCIAL SERVICES BUDGET (Pages 41 - 50)

Report attached.

9 CHILDREN'S SERVICES ANNUAL COMPLAINTS REPORT 2019-20 (Pages 51 - 72)

Report attached.

10 CHILDREN'S SERVICES COMPLAINTS COMMENTS & COMPLIMENTS POLICY (Pages 73 - 102)

Report attached.

Andrew Beesley Head of Democratic Services



LONDON BOROUGH OF HAVERING

PROTOCOL ON THE OPERATION OF OVERVIEW & SCRUTINY SUB- COMMITTEE MEETINGS DURING THE COVID-19 PANDEMIC RESTRICTIONS

1. Introduction

In accordance with the Local Authority and Police Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panels Meetings (England and Wales) Regulations 2020, all meetings of Overview & Scrutiny Sub- Committee held during the Covid-19 restrictions will take place in a 'virtual' format. This document aims to give details on how the meetings will take place and establish some rules of procedure to ensure that all parties find the meetings productive.

2. Notification of Meeting

Once the date for a meeting has been set, an electronic appointment will be sent to all relevant parties. This will include a link to access the virtual meeting as well as guidance on the use of the technology involved.

3. Format

For the duration of the Covid-19 restrictions period, Overview & Scrutiny Sub- Committee meetings will be delivered through video conference call, using Zoom software. Instructions sent with meeting appointments will cover how to use the software. Additional IT support will also be provided to any Member requesting this in advance of the meeting.

4. Structure of the Meeting

Although held in a virtual format, Overview & Scrutiny Sub-Committee Meeting will follow, as far as is possible, the standard procedure for these meetings, with the following principal stages:

- Chairnan's annoucnements
- Apologies for absence
- Disclosures of interest
- Minutes of the previous meeting
- Presentation and consideration of reports

5. Technology Issues

Agendas setting out the items for the meeting will be issued in advance in the normal way, to all parties, in accordance with statutory timetables. The agenda will also be published on the Council's website – <u>www.havering.gov.uk</u> in the normal way. The guidance below explains how the meeting is to be conducted, including advice on what to do if participants cannot hear the speaker and etiquette of participants during the meeting.



Remote access for members of the public together with access for the Press will be provided via a webcast of the meeting at <u>www.havering.gov.uk</u>.

If the Chairman is made aware that the meeting is not accessible to the public through remote means, due to any technological or other failure of provision, then the Chairman shall temporarily adjourn the meeting immediately. If the provision of access through remote means cannot be restored within a reasonable period as determined by the Chairman in consultation with the Clerk, then the remaining business will be considered at a time and date fixed by the Chairman. If he or she does not fix a date, the remaining business will be considered at the next scheduled ordinary meeting of the Overview & Scrutiny Sub-Committee.

6. Management of Remote Meetings for Members

The attendance of Members at the meeting will be recorded by the Democratic Services Officer clerking the meeting. The normal quorum requirements for meetings as set out in the Council's Constitution will also apply to a virtual meeting of Audit Committee.

Democratic Services Officers will monitor participant involvement during the virtual call to ensure that there are no drop outs. Members will be informed at the beginning of the meeting to use the chat function if they have missed part of the debate, and to requestfor the clerk or Chairman to recap briefly over what was said.

In the event that a Member's video feed has failed but he/she is able to hear what is being said then the Member should confirm as such using the chat function to the clerk.

In the event that a Member's audio and video feed has failed then the Chairman will invite the Committee to determine whether to proceed or adjourn the meeting to a later date.

7. Etiquette at the meeting

For some participants, this will be their first virtual meeting. In order to make the hearing productive for everyone, the following rules must be adhered to and etiquette observed:

- The meeting will be presided over by the Chairman who will invite participants to speak individually at appropriate points. All other participants must remain silent or muted until invited to speak by the Chairman;
- If invited to contribute, participants should make their statement, then wait until invited to speak again if required;
- If it is possible, participants should find a quiet location to participate in the Zoom meeting where they will not be disturbed as background noise can affect participants.
- If there are intermittent technological faults during the meeting then the Chairman will ask the speaker to repeat from the point where the disruption started. Whilst intermittent disruption is frustrating, it is important that all participants remain professional and courteous.
- The Committee Procedure Rules as shown in the Council's Constitution will apply to the meeting in the normal way, as far as is practicable.



8. Meeting Procedures

Democratic Services Officers will facilitate the meeting. Their role will be to control conferencing technology employed for remote access and attendance and to administer Member interaction, engagement and connections on the instruction of the Chairman.

The Council has put in place a technological solution that will enable Members participating in meetings remotely to indicate their wish to speak via this solution. This will be via the 'raise hand' function in the Participants field of the Zoom software used for the meeting.

The Chairman will follow the rules set out in the Council's Constitution when determining who may speak, as well as the order and priority of speakers and the content and length of speeches in the normal way.

The Chairman, at the beginning of the meeting, will make reference to the protocol for the meeting.

Members are asked to adhere to the following etiquette during remote attendance at the meeting:

- All Councillors and participating officers are asked to join the meeting no later than twenty minutes before the start to allow themselves and Democratic Services Officers the opportunity to test the equipment.
- Any camera (video-feed) should show a non-descript background or, where possible, a virtual background relating to Havering and Members should be careful to not allow any exempt or confidential papers to be seen in the video-feed.
- During general discussion, rather than raising one's hand or rising to be recognised or to speak, Members attending remotely should avail themselves of the remote process for requesting to be heard and use the 'raise hand' function in the participants field of the Zoom software.
- Members may only speak when invited to by the Chairman of the meeting.
- Only one person may speak at any one time.
- All speakers and attendees, both Councillors and members of the public, are welcome to remain on the Zoom call until the conclusion of the meeting. The meeting will also be webcast so that it can be viewed by non-participants.
- When referring to a specific report, agenda page, or slide, participants should mention the report, page number, or slide so that all Members have a clear understanding of what is being discussed at all times

Any voting will be conducted by the Clerk asking Members of their voting intentions The Democratic Services Officer will announce the result of the vote and the Chairman will then move on to the next agenda item.

A record of votes and how individual Members voted will be appended to the minutes, following the meeting.

Any Member participating in a remote meeting who declares a disclosable pecuniary interest, or other declarable interest, in any item of business that would normally require them to leave the room, must also leave the remote meeting. The Democratic Services Officer or meeting facilitator will move the Member to the Zoom waiting room until the item is complete, and then return them to the meeting.



9. Public Access to Meeting Documentation following the Meeting

Members of the public may access minutes, decision notices and other relevant documents through the Council's website. <u>www.havering.gov.uk</u>

For any further information on the meeting, please contact taiwo.adeoye@onesource.co.uk, tel: 01708 433079

Public Document Pack Agenda Item 5

MINUTES OF A MEETING OF THE CHILDREN & LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE VIRTUAL MEETING 17 September 2020 (7.00 - 8.45 pm)

Present:

Councillors Judith Holt (Chairman), Robby Misir (Vice-Chair), Gillian Ford, Sally Miller, Dilip Patel and Carol Smith

Co-opted Members: Parent Governors Julie Lamb and Kathy Freeman

Church Representatives: Jack How

Non-voting Member - Union: Ian Rusha

Apologies for absence were received from Councillor Reg Whitney and Lynne Bennett.

Councillors Tony Durdin and Tele Lawal were absent.

34 PROTOCOL ON THE OPERATION OF CHILDREN & LEARNING OVERVIEW AND SCRUTINY SUB- COMMITTEE MEETINGS DURING THE COVID-19 PANDEMIC RESTRICTIONS

The Committee considered the protocol and **NOTED** its contents.

35 DISCLOSURE OF INTERESTS

There were no disclosures of interest.

36 MINUTES

The minutes of the meeting of the Committee held on 13 February 2020 were agreed as a correct record and would be signed by the Chairman at a later date.

37 **PERFORMANCE REPORT UPDATE - QUARTER ONE**

The Sub-Committee received the quarter one performance indicators (PIs) update. The PIs were the standards by which performance of services are measured within the Council. The update provided an overview of performance against the eight performance indicators selected for monitoring by the Sub-Committee in 2019/20 as the final meeting of the 2019/20 financial year was cancelled due to the Covid-19 pandemic and lockdown.

The Sub-Committee had not had the opportunity to consider which indicators it wanted to receive during 2020/21.

The report outlined that seven of the indicators have been given a Red Amber Green - RAG status; five have a status of Green and two indicators have a Red.

The report provided the following highlights and potential areas for improvement:

The percentage of 16-18 year olds who were not in education, employment or training (NEET), or not known was recorded at 3.1%, which was lower than this time last year (3.3%). It was stated that Havering's annual performance of 2.9% for last year was also lower than the national figure of 5.5% and the regional performance of 4.2%.

The report detailed that the number of apprentices aged 16-18 recruited in the borough had dropped as at quarter 1 (the academic year up to April 2020) but for the 19+ cohort, performance remained on track to achieve the target of 850 starts. It was clarified that the apprenticeship targets for the year had been reduced in line with national performance for the previous academic year, in light of the challenges presented by Covid-19.

The percentage of Initial Child Protection Conferences held within 15 days had increased when compared to both the previous quarter and the same point last year. The report explained that the main contributing factor has been the close working between Safeguarding Support Unit and the social work teams to ensure early notification of a conference needing to be convened and reminding social workers and team managers of the purpose of initial and review strategy meetings in line with London Child Protection procedures. It was stated that remote working during the Covid-19 pandemic and the use of virtual conferences had also had the benefit of increasing the availability of Child Protection Conference Chairs, which also contributed to the improved performance.

The report informed the Sub-Committee that the number of new in-house foster carers successfully approved amounted to four between April and June 2020 and a further 3 to 4 approvals were expected within the next quarter. At the beginning of the Covid-19 pandemic there was a higher volume of enquiries from people who were at home but many of these were discounted by the service or discounted themselves.

It was noted that there had been a lack of marketing options and visibility in the community due to Covid-19 however there have been an on-going presence on Facebook and Instagram and a local radio campaign in August 2020.

The percentage of care leavers (aged 19-21) in education, employment or training at the end of Quarter 1 was above target at 55.7%. The Leaving Care Team had continued to support experienced young people into education, employment and training, with specific actions including:

- liaising with the Department for Work and Pensions (DWP) and Havering Works for courses to upskill, and for funding;
- continuing to work with foster carers and placement providers in supporting young people to access apprenticeship opportunities;
- continuing to provide on Future Mentors programme a group of local volunteers who provide one-to-one coaching a care leaver to assist with job/college course searches, applications, and preparing for interviews (training for mentors would begin in August / September 2020);
- encouraging young adults to attend a Zoom event (Uni Connect) hosted by 6 universities to discuss a care leaver's journey into higher education - covering UCAS applications, lecture tasters, Q&As with undergraduate care leavers and more.

The report outlined the following areas of potential areas for improvement:

- The average number of children missing from education in quarter 1 was higher than both the previous quarter and the same point last year. The performance in this area had been impacted by the Covid-19 pandemic and lockdown with more Children identified as Missing from Education (CME) due to the situation. Admissions generally closed in all local authorities following the lockdown and therefore children who had moved were not being admitted to new schools, and were therefore counted as CME.
- The team continues to advise and liaise with schools and parents and was actively working to ensure both the safeguarding of children and the best outcomes for pupils.
- The report indicated that the number of apprentices aged 16 to 18 recruited in the borough was behind target. The service continue to work with local employers and training providers to promote apprenticeship opportunities, and with Prospects (the commissioned targeted Information, Advice and Guidance services provider), to maintain high levels of participation. In

light of Covid-19, the team was looking to secure external grant funding opportunities and develop a programme which targets 16-24 year olds in Havering seeking education, employment and apprenticeship opportunities.

The Sub-Committee was informed that Prospects had secured GLA funding to deliver a mentoring programme in Havering and would be working with local Alternative Providers and Pupil Referral Unit settings to support Year 11 learners at risk of becoming Not in Education, Employment, or Training.

The percentage of looked-after children who ceased to be looked after as a result of permanency (Adoption and Special Guardianship Order) represented one child who was adopted in Quarter 1, with no children made subject of an Special Guardianship Order. This reflected a downturn in children placed for adoption in 2019/20.

It was stated that adoption orders were delayed as a result of court responses to the Covid-19 pandemic. The number of children with placement orders and matched with adopters had increased in recent months and over time this would be reflected in the percentage of children adopted.

It was agreed that the comprehensive list of indicators relevant to the Sub-Committee would be circulated following the meeting.

The Sub-Committee noted the content of the report.

38 ADOPT LONDON EAST - ANNUAL REPORT

The Sub-Committee received the annual report for Adopt London East. The report provided a summary of the development and functions of the agency including performance information for 2019/20. Appended to the report was the Havering specific performance information.

The report outlined that all adoption agencies are required to provide an annual report to their governing bodies and to elected Members in all partnership Local Authorities.

The Sub-Committee was informed that the service went live in October 2019 and the report therefore focussed on performance in quarter 3 and 4 of 2019/20 and on adoption performance in Havering throughout 2019/20 based on the Adoption and Special Guardian Leadership Board (ASGLB) data returns.

The report informed the Sub-Committee that statistical returns measured long-term trends but Adopt London East in-house statistical records

provided clear evidence of early improvements in performance and activity since go-live.

It was stated that the transition from four Local Authority teams to one integrated service had its complexity and challenges had been encountered in respect of pre-transition performance, service staffing, casefile information transition and demand for adoption support services. It was noted that there had been substantial progress made in all areas.

The Sub-Committee was informed that only one team manager had joined Adopt London East and the service had been able to recruit three further team managers from within the service. The service currently had 15 permanent staff in place and 3 interim social workers.

The quarterly Adoption and Special Guardianship Leadership Board report for all Local Authorities have been analysed to provide a service baseline. It indicated that performance hade declined in all Local Authorities in the 6 months prior to the Adopt London East go-live. The decline in performance was linked to a number of factors including adoption service staff leaving, higher levels of sickness absence, caseload transitions and a delay in operational go-live.

The sub-committee noted that adoption performance was measured over one and three year cycles and improvements therefore took time to be fully captured in the data returns. Early indicators were however monitored closely within the service.

It was stated that performance in respect of child matches had improved considerably. Adopter approvals were predicted to decline further in Q3 and Q4 due to the decline in numbers of adopters in early stages of approval. Early stage applications had though increased from month to month and improvements were predicted for 2020/21.

The Sub-Committee noted that demand for adoption support services had increased considerably as had the number of children requiring a placement. In the last reporting year, a total of 57 children were placed. It was likely that less children would be placed this year due to the slowdown in quarters one and two but a total of 167 children were currently receiving a family finding service.

The demand for adoption support had shown an increase along with improved support for families which would improve outcomes for adopted children and families.

The report outlined that any savings made from an increase in the number of adopters available to accept a placement would be re-invested into service improvement to ensure the service was able to meet identified increased demands. In response to the time delays experienced in the adoption process, the Head of Regional Area Adoption explained that it was a service and also a national challenge. There were two sets of delays, one that was national in terms of court work being over pressured before adding Covid as a further pressure. The other challenge being that care proceedings had not been as effective because they were clearly past the process of ensuring that the children were safeguarded and their future made secure.

The Sub-Committee was informed the delay in adoption of children from BME backgrounds and in particular black backgrounds was a national issue. This was attributed to systemic and socioeconomic factors that meant black families were less likely to have the income and the wealth to be able to afford houses with spare bedrooms and often some families did not feel that they would be considered for adoption, which was also a perceptional issue. It was mentioned that Havering performed considerably better than the national average in this regard

In response to a Member of the sub-committee, the Head of Regional Area Adoption informed the Sub-Committee that the service had been inundated with requests for post-adoption support it. It was stated that it was a pattern that adoption agencies have seen with the growth of regional adoption agencies and expectations of adopters have increased.

The Sub-Committee noted the content of the report.

Chairman

Agenda Item 6



Children and Learning Overview & Scrutiny Sub-Committee 8 December 2020

Subject Heading:	Protocol for Pre-Decision Scrutiny				
SLT Lead:	Abdus Choudhury – Deputy Director of Legal & Governance				
Report Author and contact details:	Taiwo Adeoye – Democratic Services Officer taiwo.adeoye@onesource.co.uk				
Policy context:	Overview & Scrutiny				
Financial summary:	There are no significant financial implications.				

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

Communities making Havering Places making Havering Opportunities making Havering Connections making Havering

[X] [] []

SUMMARY

In response to the COVID-19 outbreak, all committee meetings, including overview & scrutiny, were suspended in Havering until the end of May 2020. With the support of Group Leaders, a phased return of virtual committee meetings occured with Overview & Scrutiny Board meeting monthly prior to the scheduled return of meetings from September 2020.

The purpose of this report is to demonstrate how overview & scrutiny can support the Council's transition from lockdown through an emphasis on pre-scrutiny of forthcoming executive decisions. To facilitate, a pre-scrutiny protocol is proposed for adoption.

RECOMMENDATIONS

That the Sub-Committee note the content of the Protocol on Pre-Decision Scrutiny attached at Appendix A.

REPORT DETAIL

In response to the COVID-19 outbreak, Havering suspended all Council, Cabinet and committee meetings until the end of May 2020. A phased re-introduction of virtual meetings followed thereafter with Overview & Scrutiny Board leading the Council's overview & scrutiny obligations with the wider set of scrutiny committees returning over the summer months.

Overview and scrutiny has the potential to play a significant role in assisting in the Council's recovery from the pandemic in the months ahead and to provide a critical friend in identifying areas for improvement should there be further spikes in the virus which require additional periods of lockdown.

Alongside post-scrutiny call-in, pre-decision scrutiny provides the opportunity for backbench members to undertake the checks and balances of impending key executive decisions. By challenging assumptions and assessing what risks might arise from the implementation of a decision, Scrutiny provides the opportunity to influence and improve decisions before they are finalised and actively contributes towards the development of future policy and changes to key service provision.

In addition, it helps to develop a positive working relationship between Overview & Scrutiny and the Executive and recognises the contribution Overview & Scrutiny can make towards the running of the Council. Indeed, in recent weeks the Leader of the Council has encouraged Overview & Scrutiny to scrutinise a number of forthcoming key decisions. Where such requests are received, the Chairman of Overview & Scrutiny Board will liaise with members to determine whether pre-decision scrutiny should be undertaken.

Pre-decision scrutiny should feature as part of Overview & Scrutiny Board's work programme with regular monitoring of the forthcoming decisions of the Leader's Forward Plan of key decisions. A copy of the most recent Forward Plan is referenced elsewhere on the agenda. The Council is required to give 28 days' notice of a planned key executive decision.

Similarly to arrangements for the administration of call-in, responsibility for considering requests for pre-decision scrutiny rests with Overview & Scrutiny Board.

Historically, there has been an absence of engagement in pre-decision scrutiny with post-scrutiny call-in being the option of choice. To build upon recent discussions aimed at promoting pre-decision scrutiny and to provide guidance to Members and facilitate its introduction, a draft protocol has been produced for consideration which is attached to this report.

IMPLICATIONS AND RISKS

Legal Implications and Risks

It is a matter for overview & scrutiny to determine how it wishes to conduct pre-decision scrutiny. The proposed protocol complements guidance which has been issued under section 9Q of the Local Government Act 2000 and under paragraph 2(9) of Schedule 5A to the Local Democracy, Economic Development and Construction Act 2009.

Finance Implications and Risks – None

HR Implications and Risks – None

Equalities Implications and Risks - None

BACKGROUND PAPERS

None

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Overview & Scrutiny Protocol – Pre-decision Scrutiny

WHAT IS PRE-DECISION SCRUTINY?

Cabinet and Overview and Scrutiny recognise that in order for effective scrutiny to happen they need to work together for the benefit of the Council and to improve decision-making.

The Council is required to give 28 days' notice of a planned key decision. The decisions are brought to scrutiny as drafts of the final cabinet or delegated decision report.

The range of possible outcomes may include support for a decision, a different view on the way forward, the flagging up of concerns (e.g. in relation to the consultation process), or a recommendation that the decision should be deferred pending further work etc. It does not mean that decisions will necessarily be changed or withdrawn, however it gives an opportunity for those decisions to be more informed. Pre-decision scrutiny can be viewed as non-Executive Members performing a 'critical friend' role in relation to the Executive.

Overall, pre-decision scrutiny can help the decision-making process by:

Providing an impartial perspective – scrutiny can gather its own evidence to contribute towards the decision-making process, and consult those directly affected by the decision impartially and independently.

Challenging assumptions and making evidence-gathering more robust – scrutiny can look at projections relating to the impact of the decision – financial, social, economic, environmental – and consider whether those projections and assumptions are justified.

Developing realistic plans and targets – scrutiny can help to develop challenging but realistic targets that will be impartial and focused on outcomes rather than outputs.

Securing ownership and buy-in to the final decision – engaging with scrutiny will help the executive to understand the expectations of the wider group of elected councillors and, by extension, the public.

WHAT PRE-DECISION SCRUTINY IS NOT

Pre-decision scrutiny does not replace decision-making. It is not intended to blur the lines of accountability, which will always rest with the Executive.

Pre-decision scrutiny is not the same as general service or policy development / formulation. Separate to pre-decision scrutiny there are occasions where scrutiny is already involved at an earlier point in the development of policy or service proposals.

WHY IS A PROTOCOL NEEDED?

The aim of this protocol is to set out an agreed way of working with the Cabinet, in line with the Council's Constitution, to facilitate the proper role of Overview and Scrutiny in respect of pre-decision scrutiny.

Protocol for pre-decision scrutiny of Forward Plan items

- 1. Overview and Scrutiny Board will monitor and review the Council's Forward Plan of forthcoming key decisions (as standing items on agenda) to determine which items they would like an input into before decisions are made by the Cabinet or the individual decision maker with delegated responsibility. Members will be notified by email when an item is added to the Forward Plan. Members will have 5 calendar days to make a request for pre-decision scrutiny to the Chairman and Clerk of O&S Board.
- 2. It is permissible for the Leader or individual Cabinet Members to suggest topics for pre-decision scrutiny however the decision to accept rests with the Board. The request, stating reasons, will be made in writing to the Chairman and Clerk of the Board within 5 calendar days of the item being added to the Forward Plan.
- 3. Where a request has been received in accordance with Points 1 or 2 above, the clerk of the O&S Board will write to O&S Board Members giving up to 5 working days for the suggestion to be accepted onto the agenda for the next scheduled meeting. A majority of Members from the committee is required to achieve this. In the event of a tie, the Chairman will have a second and casting vote. That a suggestion is rejected does not prevent the use of call-in at a later date. The matter will progress for consideration by Cabinet or delegated decision maker and be available for call-in subject to any exemption.
- 4. Where pre-decision scrutiny of a forthcoming key decision is agreed by the Overview & Scrutiny Board, a draft copy of the Cabinet report or Executive Decision will be provided. Where necessary and following consultation with the Chairman, an extraordinary meeting of Board or committee will be convened in accordance with procedure rules.
- 5. The relevant Cabinet Member, Director, Assistant Director and/or appropriate officer(s) will attend the Overview and Scrutiny meeting to present the draft report and answer any questions posed by members of the committee.
- 6. The Overview and Scrutiny Board discusses the report and identifies any points it would like addressed in the final report to be presented before Cabinet or the individual decision maker with delegated responsibility; this could include any alternative recommendations which the Board consider necessary.
- 7. Unless the proposal is different from that which the decision-maker is subsequently required to consider, the pre-decision scrutiny of the subject prevents the opportunity for call-in once the decision is made by the Cabinet or the individual decision maker with delegated responsibility.

<u>Appendix B</u>

Pre-decision Scrutiny Timetable

		Calendar days before decision due date
1	Notice of intended key decision published (minimum)	28
2	Last date for request for pre-decision scrutiny to be submitted to Chairman and committee clerk	23
3	Determination by O&S Board Members of request for pre- decision scrutiny	15
4	Publication of O&S Board agenda, including draft Cabinet or delegated decision report	9-12
5	O&S Board meeting	1-4
9	Intended date of decision	0

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CHILDREN AND LEARNING OVERVIEW AND SCRUTINY SUB-COMMITTEE 8 DECEMBER 2020

Subject Heading:	Quarter 2 performance information			
SLT Lead:	Jane West, Chief Operating Officer			
Report Author and contact details:	Lucy Goodfellow, Policy and Performance Business Partner (Children, Adults and Health) (x4492)			
Policy context:	The report sets out Quarter 2 performance relevant to the Children and Learning Sub- Committee			
Financial summary:	There are no direct financial implications arising from this report. However adverse performance against some performance indicators may have financial implications for the Council.			
	All service directorates are required to achieve their performance targets within approved budgets. The Senior Leadership Team (SLT) is actively monitoring and managing resources to remain within budgets, although several service areas continue to experience financial pressure from demand led services.			

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

Communities making Havering Places making Havering Opportunities making Havering



SUMMARY

This report supplements the presentation attached as **Appendix 1**, which sets out the Council's performance within the remit of the Children and Learning Overview and Scrutiny Sub-Committee for Quarter 2 (July to September 2020).

RECOMMENDATIONS

• That the Children and Learning Overview and Scrutiny Sub-Committee notes the contents of the report and presentation and makes any recommendations as appropriate.

REPORT DETAIL

- 1. The report and attached presentation provide an overview of the Council's performance against the six performance indicators that have been selected for monitoring by the Children and Learning Overview and Scrutiny Sub-Committee in 2020/21.
- 2. In Quarter 1, the eight indicators reported in 2019/20 were carried forward and reported to the sub-committee. This was because the final meeting of the 2019/20 financial year was cancelled due to the Covid-19 pandemic and lockdown, therefore the Children and Learning Overview and Scrutiny Sub-Committee did not initially have the opportunity to consider which indicators it wished to receive during 2020/21.
- 3. Since then, the sub-committee has reviewed the list of indicators that are reported regularly within Children's Services and selected six new indicators to receive for the remainder of the financial year. The presentation, attached at Appendix 1, highlights areas of strong performance and potential areas for improvement.
- 4. Tolerances around targets have been agreed for 2020/21 performance reporting and performance against each performance indicator has therefore been classified as follows:

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- **Red** = outside of the quarterly target and outside of the agreed target tolerance, or 'off track'
- Amber = outside of the quarterly target, but within the agreed target tolerance
- Green = on or better than the quarterly target, or 'on track'
- 5. Where performance is rated as '**Red**', '**Corrective Action**' is included in the report. This highlights what action the Council will take to improve performance.
- 6. Also included in the report are Direction of Travel (DoT) columns, which compare:
 - Short-term performance with the previous quarter (Quarter 1, 2020/21)
 - Long-term performance with the same time the previous year (Quarter 2, 2019/20)
- 7. A green arrow (\uparrow) means performance is better and a red arrow (\checkmark) means performance is worse. An amber arrow (\rightarrow) means that performance has remained the same.
- 8. In total, six performance indicators have been selected for the sub-committee to monitor and all six are available for reporting this quarter. All six indicators have also been assigned a RAG status.



Quarter 2 indicator summary

In summary, of the 6 indicators:

- 2 (33%) have a status of Green
- 1 (17%) has a status of Amber
- 3 (50%) have a status of Red

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no direct financial implications arising from this report. However adverse performance against some performance indicators may have financial implications for the Council.

All service directorates are required to achieve their performance targets within approved budgets. The Senior Leadership Team (SLT) is actively monitoring and managing resources to remain within budgets, although several service areas continue to experience significant financial pressures in relation to a number of demand led services, such as Children's Services. SLT officers are focused upon controlling expenditure within approved directorate budgets and within the total General Fund budget through delivery of savings plans and mitigation plans to address new pressures that are arising within the year.

Legal implications and risks:

Whilst reporting on performance is not a statutory requirement, it is considered best practice to regularly review the Council's progress.

Human Resources implications and risks:

There are no HR implications or risks arising from this report.

Equalities implications and risks:

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

(i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;

(ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;

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

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

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the

Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants. Equality and social cohesion implications could potentially arise if performance against the following indicators currently rated as Red does not improve:

- % of Contacts progressing to Early Help
- % of LAC aged under 16 who have been looked after continuously for at least 2.5 years and living in the same placement for at least 2 years
- % of Education, Health and Care (EHC) assessments that are completed within 20 weeks

The attached presentation provides further detail on steps that will be taken to improve performance and mitigate these potential inequalities.

BACKGROUND PAPERS

Appendix 1: Quarter 2 Children and Learning Performance Presentation 2020/21

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Quarter 2 Performance Report 2020/21

Children and Learning O&S Sub-Committee



About the Children and Learning O&S Sub-Committee Performance Report

- Overview of the Council's performance against the indicators selected by the Children and Learning Overview and Scrutiny Sub-Committee
- The report identifies where the Council is performing well (Green), within arget tolerance (Amber) and not so well (Red).
- Where the RAG rating is 'Red', 'Corrective Action' is included in the presentation. This highlights what action the Council will take to improve performance.



OVERVIEW OF CHILDREN'S SERVICES INDICATORS

- 6 Performance Indicators are now reported to the Children and Learning Overview & Scrutiny sub-committee
- Performance data is available for all 6 indicators this quarter
- All 6 indicators have been given a RAG status



Quarter 2 indicator summary

In summary, of the 6 indicators: 2 (33%) have a status of Green 1 (17%) has a status of Amber 3 (50%) have a status of Red

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Quarter 2 Performance – Children's Services

Indicator and Description	Value	Tolerance	2020/21 Annual Target	2020/21 Q2 Target	2020/21 Q2 Performance	Short Term DOT against Q1 2020/21		Long Term DOT against Q2 2019/20	
% of Contacts progressing to Early Help	Higher is better	+/-5%	30%	30%	28.15	¥	30.4%	¥	37%
% of LAC aged under 16 who have been looked after continuously for at least 2.5 years and living in the same placement for at least 2 years*	Higher is better	+/-10%	70%	70%	56.6%	¥	57.9%	¥	73.2%
% of former relevant young people at age 8-21 who are in education, employment or training	Higher is better	+/-5%	75%	75%	71.8%	↑	66.1%	1	48.7%
% LAC with an up to date pathway plan in place	Higher is better	+/-10%	70%	70%	72.7%	1	60%	-	N/A

*Also includes children who are placed for adoption and whose adoptive placement together with their previous placement last for at least 2 years



Quarter 2 Performance – Children's Services (contd.)

Indicator and Description	Value	Tolerance	2020/21 Annual Target	2020/21 Q2 Target	2020/21 Q2 Performance	Short Term DOT against Q1 2020/21		Lon	Long Term DOT against Q2 2019/20	
% of LAC cases with supervision in the last three months	Higher is better	+/-10%	95%	95%	96.1%	1	92.7%	-	N/A	
% 1 Education, Health and Care HC) assessments that are mpleted within 20 weeks	Higher is better	+/-10%	72%	72%	48%	≯	68%		N/A	


Highlights

Percentage of LAC with an up to date pathway plan in place - Performance data relating to pathway plans for our looked after young people who are approaching adulthood is reviewed weekly in ISS. There has been additional focus on this throughout September to ensure that all children age 16 years and up have been transitioned from a care plan to a pathway plan on the system. In addition to the timeliness of plans, there remains a focus on ensuring that young people are engaged with the pathway planning process and that their voice is evident. The IRO service are also playing a pivotal role, via LAC reviews, in ensuring a pathway assessment has been completed by 15 years and 9 months, in line with statutory requirements. This, coupled with regular monitoring of performance, has contributed to improved performance in this area over the first half of this year.

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Percentage of LAC cases with supervision in the last three months - Performance in relation to case supervision for ooked after children cases is currently strong and above the year end target. A new systemic case supervision template has been embedded in Liquidlogic, enabling regular performance reporting in this area, which is closely monitored by the Head of Service and Group Managers and discussed at weekly performance meetings. Although the service's policy is that case supervision should take place every three months, we are trialling a 2 monthly cycle for LAC and child in need cases, and monthly for child protection cases. Group and peer supervision has also been introduced to provide a more collaborative approach to decision making, and challenge of practice on behalf of the child or young person.

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Improvements required

Percentage of contacts progressing to Early Help - The volume of contacts received in the year to date is down compared with the previous year, partly due to the schools being initially closed and then open to a limited number of pupils for part of the year due to the Covid-19 pandemic. Many Health services have also been closed or operating differently as a result of Covid, which has further impacted on contact and referral volumes. Due to the complexity of contacts that *have* been received, proportionately more have progressed to an assessment of some form (whether that is by Early Help or Children's Social Care), compared to the same point last year but our target is for a slightly greater proportion (30%) to progress to Early Help. The Early Help service has seen an increase in referrals to EH universal services directly from General Practitioners in relation to peri-natal mental health and also from the Speech and Language Team (SALT) for referrals into the Ready, Steady Talk programme to assist with early identified speech, see and communication delay. There have also been increased referrals in for baby massage, starting solids and the Butterflies group, which is believed to be a result of Health colleagues catching up with 1 and 2 year old checks.

Percentage of LAC 16 years and under who have been continuously looked after for 2.5 years and in the same placement for 2 years - As part of our longer term plans to improve placement stability, we have developed a systemic training offer for all carers with adolescents (including independent fostering agency carers) and an internal training and development programme for social workers and managers around effective placement planning. The systemic training, which involves a therapeutic parenting approach, commenced for in-house carers on 30th September 2020 and will conclude in December 2020. This forms a part of our longer term plans to improve stability and resilience by providing good and enduring quality for all our children in care, regardless of the complexity of their needs. The Assistant Director has convened a working group to focus on placement stability and an action plan is in place, with progress being made.

Percentage of EHC Assessments that are completed within 20 weeks – The short term direction of travel for this indicator is down but it should be noted that the end of Quarter 2 is 30th September, therefore performance will always be lower in this quarter as schools, who contribute to the process, are closed during the summer holidays.

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Improvements required (contd.)

Former relevant young people at age 18-21 who are in education, employment or training - The slightly lower performance for the aged 18 to 21 cohort (compared to the 19-21 cohort which was reported to this sub-committee previously) reflects the current challenges around Covid-19 and the complexity of the young people coming into care in their late teens and already disengaged with EET. Staying Put arrangements continue to be promoted for post 18 year olds requiring additional support and access to EET.

COVID-19 has had an adverse effect on many of our young adults, especially those working in retail, hospitality, health and hair and beauty and those on zero hour contracts. It is anticipated as before that following this second lockdown, some care leavers will have to re-apply for their positions rather than automatically returning, and the team continues to work closely with these individuals.

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Wookshops focussing on CV writing and interview skills and with guest speakers from local colleges, universities, Job Centre and local companies are planned. Future projects include trips to universities and careers events and the Leaving Care team are planning Functional Skills training via the Virtual School at The Cocoon when it re-opens.

The Future Mentors Scheme will be another layer of support towards supporting Care leavers to engage in EET. This project will provide care leavers with a mentor from the community who will encourage the young person to engage with EET. For those young adults with significant and chronic mental health needs or substance misuse difficulties, ongoing work is taking place to stabilise and support with a view to some re-introduction of EET activities.

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Any questions?



Children's Social Care

The following indicators are all reported on a monthly basis within the service and are therefore available for quarterly reporting to the Overview and Scrutiny Sub-Committee.

Contacts, Referrals, Assessments

% of Contacts progressing to Early Help

% of referrals to Children's Social Care progressing to assessment

% of assessments completed within 45 working days

Child Protection

% of Initial Child Protection conferences held within 15 days

% of children and young people de-registered from a Child Protection Plan whose plan lasted less than 3 months

% of children and young people de-registered from a Child Protection Plan whose plan lasted more than 2 years

% of children becoming subject of child protection plan for second / subsequent time within two years

Looked After Children

% of looked after children with three or more placements during the year

% of LAC aged under 16 who had been looked after continuously for at least 2.5 years who were living in the same placement for at least 2 years, or are placed for adoption and their adoption and their adoptive placement together with their previous placement, last for at least 2 years

% of looked after children at 31 March placed outside LA boundary and more than 20 miles from where they used to live

% of looked after children who contributed their views to a statutory review

% of looked after young people of school age with an up to date Personal Education Plan

% of all looked after young people with an up to date medical (also reported separately for below school age and school age cohorts)

% LAC with an up to date pathway plan in place

Fostering and Adoption

Average time between court decision and child being matched with prospective adopters (days) for children who have been adopted

% Children who wait less than 14 months between entering care and moving in with their adopting family

Average time between a child entering care and moving in with their adoptive family for children who have been adopted (in days)

% of looked after children who ceased to be looked after who were adopted

% of looked after children who ceased to be looked after as a result of a special guardianship order

% of looked after children who ceased to be looked after as a result of permanency (Adoption and Special Guardianship Order

% of LAC placed in LBH foster care

Total number of in-house foster carers

Number of new in-house foster carers

Leaving Care

% Care Leavers with an up to date pathway plan in place

% of young people leaving care over the age of 16 who remained looked after until their 18th birthday.

% of looked after children that leave care at 18 and remain living with their foster carers (Staying Put)

% of former relevant young people aged 19-21 who were in suitable accommodation

% of care leavers who are parents and retaining care of their children

% of young people leaving care who are in higher education aged 19-21

% of former relevant young people aged 19-21 who were in education, employment or training

% of former relevant young people aged 19-21 who were NOT in education, employment or training (NEET)

% of former relevant young people at age 18-21 who are in education, employment or training

Missing Children

Number of children missing from care

Number of children missing from home

% of return home interviews (RHI) offered within 72 hours.

Workforce and case supervision

% of LAC with 2+ changes of social worker in the last 12 months

Number of children & young people experiencing 3+ changes of social worker within the last 12 months

- % CIN cases with supervision in the last three months
- % LAC cases with supervision in the last three months
- % CP cases with supervision in the last three months

Learning and Achievement

The reporting frequency for these indicators varies. For example, those relating to attainment, progress and the offer of school places are reported annually. Others, such as the post-16 indicators and those associated with attendance, can be reported on a quarterly or termly basis using local (provisional) data, with validated data published annually.

Early Years

Number of early education offers extended to disadvantaged 2 year olds (termly using provisional local data, validated data from the DfE will be lagged)

% of 3 and 4 year olds who have access to an early education entitlement place if their parents wish *(as above)*

% of early years providers judged to be good or outstanding (quarterly)

School readiness - % of children achieving a good or better level of development at age 5 (annual)

Schools

% children in good or outstanding schools (quarterly)

% of parents receiving an offer of their first choice school (annual)

<u>Attendance</u>

Primary school persistent absence rate (termly using provisional local data, validated data from the DfE is released annually)

Secondary school persistent absence rate (as above)

% of average attendance in Primary schools (as above)

% of average attendance in Secondary schools (as above)

Number of children missing from education (monthly)

Progress

Pupil progress in 8 subjects, from the end of primary school to the end of secondary school ('Progress 8' score) *(annual)*

Average Attainment 8 score (annual)

<u>Post-16</u>

% of 16-18 year olds who are not in education, employment or training (NEET), or not known (quarterly)

Number of apprentices (aged 16-18) recruited in the borough (quarterly)

Number of apprentices (aged 19+) recruited in the borough (quarterly)

Special Educational Needs and Disabilities (SEND)

% of Education, Health and Care (EHC) assessments that are completed within 20 weeks (quarterly / termly data can be reported locally but validated data is annual)

% of all pupils with EHC plan (as above)

Education outcomes for Children Looked After

% attendance for children looked after (annual)

Outcomes for Children Looked After - % Fixed Term Exclusions (annual)

KS1 outcomes for Children Looked After – % working at or beyond expected standard *(annual)*

KS2 outcomes for Children Looked After – % working at or beyond expected standard *(annual)*

% of young people leaving care achieving 5 GCSEs at grade A*-C Inc. English and Maths *(annual)*

% of 16 to 19 year old care leavers who are in education, employment or training *(quarterly)*

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CHILDREN AND LEARNING OVERVIEW AND SCRUTINY SUB-COMMITTEE 8 DECEMBER 2020

Subject Heading:	Children's Social Services Budget
SLT Lead:	Robert South, Director of Children's Services
Report Author and contact details:	Amar Barot, Strategic Finance Manager, Children's Services, email: <u>amar.barot@havering.gov.uk</u> tel: 01708 431121
Policy context:	The report sets out Children's Directorate Budget as relevant to the Children and Learning Overview and Scrutiny Sub- Committee
Financial summary:	There are no direct financial implications arising from this report.

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

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



This Report sets out a monitoring position for the Children's Directorate for 2020/21 based on figures up to Period five (31st August). The report provides a full statement on the estimated costs and lost income relating to the COVID pandemic and provides details of the pressures faced by the service.

RECOMMENDATIONS

The Sub-Committee is recommended to receive and note the report.

REPORT DETAIL

1. EXECUTIVE SUMMARY

- 1.1. This Report sets out a full monitoring position for the Children's Directorate for 2020/21 based on figures up to Period five (31st August). The report provides a full statement on the estimated costs and lost income relating to the COVID pandemic and provides details of the pressures faced by the service.
- 1.2. The report then considers the period five position on the Business as Usual including emerging pressures and also savings that are unlikely to be achieved in 2020/21 due to delays caused by the pandemic.

2. FINANCIAL IMPACT OF THE COVID PANDEMIC

2.1 Expenditure on the COVID Pandemic.

The Council has been incurring expenditure since March relating to the COVID Pandemic. The costs to date for 2020/21 and projected costs for the remainder of the year for the Children's Directorate are set out below.

Table 1: COVID Expenditure

COVID Expenditure – 2020/2021	(April - August) £m	Projection to Year End £m
Children's	0.236	0.836

During 2020/21, the pressures already being faced in the Directorate have been compounded due to COVID with additional risks being identified as follows:

- Demand across the Directorate's provision has grown significantly as the consequences of the pandemic is experienced across communities in the Borough. Additional demand pressure will be related to domestic abuse, mental health issues, socio-economic challenges, and "hidden" familial abuse and criminal/sexual exploitation.
- There remains a considerable challenge to recruit and retain foster carers, due to the highly competitive nature of this sector and places pressure on the Council to use external placements, which cost significantly more.
- The recruitment and retention of qualified social workers is likely to prove a challenge as the Service moves in recovery phase as a result greater numbers of staff leaving the profession both nationally and locally.
- There is a possibility of staff shortages in the future, as the test and trace programme expands, which may lead to more staff being required to self-isolate.
- Greater pressures are expected for Leaving Care, due to an expanding over 18s population, especially former relevant UASC together with an expansion of statutory duties to the age of 25.
- There is a significant risk within the external placements market, including SEN Transport and placements, due to an increase of costs incurred during the pandemic being distributed back to LAs.

• School transport arrangements have had to be reworked to allow safe travel, adding a further resource pressure on service delivery.

The financial implications on budgets for 2020/21 continue to be appraised fully during the year to see the effects of Covid-19 and recovery plans, and any further peaks of the pandemic that may have an impact on demand for services in the autumn. The actual spend at period five is £0.236m, although the Directorate is projecting Covid-19 related expenditure of £0.836m for 20/21.

2.2 Loss of Income during the pandemic

The lockdown resulted in most of the Children's Services Directorate's income generating services being suspended. The table below sets out the losses of income by department for the first five months of the year and a forecast of the likely income shortfall to year end.

Table 2: COVID Income Loss

COVID Income Loss	(April - August) £m	Projection to Year End £m
Children's	0.629	1.510

Children's Services

Children's Social Care – With the closure of schools for majority of primary and secondary pupils there have been income losses to services in the Children's Directorate during periods of temporary closure, including Children's Centres and My Place. Financial risk related to loss of rental income and fees and charges is £0.200m.

Learning and Achievement Service - The Catering Service is forecasting a significant loss of income due to reduced charges for catered meals in schools associated with school closures and reduced numbers in schools. The full year estimate of lost income is circa £3.8m, but this has been mitigated by reduced spend on produce, and staffing (subject to successful Furloughing), resulting in a net effect of £0.290m. The financial impact is constantly being reviewed since schools reopened in September. The Adult College is forecasting a significant loss of income due to reduced fees and grants associated with current course closures, and reductions in provision from September 2020. The full year estimate is circa £0.370m.

In addition, the loss of income from the cancellation of HES courses and services provided to schools as part of the Traded Services model as well as reduction in provision from September 2020 is approximately £0.650m.

The total loss of income due to Covid for the Children's Directorate is currently projected at £1.510m for 2020/21.

3 PERIOD FIVE (NON COVID) AND SAVINGS

- 3.1 Understandably the focus during lockdown has been on our response to the crisis and delivering a comprehensive safe service to our businesses and the most vulnerable members of our community. There are new pressures in services experiencing greater demand but also potential efficiencies through different ways of working adopted during lockdown.
- 3.2 Nationally, local authorities are facing increasing costs in delivering Children's Services. A survey of London authorities identified that in 2017/18 all bar one Council had a deficit on their high-needs budget and only six did not have a deficit on their Children's Social Care budget. This is ongoing and represents a significant challenge for authorities. Whilst there have been increases in budget allocations, these have not kept pace with increased costs. The number of complex cases has increased nationally, resulting in more children with specialist EHCP needs requiring specialist provision outside of mainstream education. Nationally, Looked after Children numbers continue to rise. The extension of responsibility for SEND and of young people leaving care to the age of 25, and the costs of UASC over 18's have resulted in significant additional budget pressures for Children's Services.
- 3.3 The paragraphs below set out the service reported position at the end of August for the Children's Directorate and an estimate of the potential outturn position from all known information. The table below sets out non COVID departmental variances and projected variances from the savings originally agreed in February. The paragraphs below then detail these variances.

Service	Revised Budget (£m)	BAU Forecast Variance (£m)	MTFS Tracker Shortfall (£m)	BAU & MTFS Shortfall (£m)
Children's	42.346	1.678	0.467	2.145

Table 3 Non-COVID Department projection

Children's Directorate

The projected overspend at period five for the Children's Directorate is $\pounds4.491$ m, which is a $\pounds0.206$ m decrease on the period four forecast of $\pounds4.697$ m. The BAU overspend at period five amounts to $\pounds1.678$ m.

The <u>Learning and Achievement Service</u> is forecasting a BAU underspend of £0.024m at period five, including projected unachieved MTFS of £0.100m.

At period five, the Children With Disabilities Placement budget is currently forecast to underspend by £0.013m, this position is made up of £0.160m overspend on Direct Payments which will be offset with the underspend of £0.156m on Short Breaks spend due to reduction in spend on commissioned holiday clubs (FIG & DABD) not going ahead due to COVID19.

The forecast for SEN Transport is currently £0.950m lower than the actual spend in 2019/20, but this is still a forecast overspend of £0.162m against the revised budget. The forecast will be subject to change and will continue to be closely monitored as demand for transport will also increase due to social distancing which will be linked to increase in unit cost.

Reduction in Education Support Grant (ESG) leaves a shortfall against the cost of providing LA statutory services, in spite of the savings made centrally and a contribution from LA maintained schools to meet the cost of central services. The Education Services team has reduced its operational costs by £0.590m through various service transformations, and contributions from schools thereby reducing the shortfall to £0.888m. Further mitigations (increased traded income target £0.100m, 'Fines' income target £0.150m, savings £0.050m) were planned to reduce

the pressure to £0.600m, but this is proving challenging due to COVID-19.

Underspends in the Learning & Achievement Service includes: £0.019m in HIAS Development Leadership; £0.055m in Quality Assurance, Personnel Quality & Schools Provision & Commissioning and £0.014m in CWD Placements.

In <u>Children's Services</u>, the forecast BAU position at period five is an overspend of £2.169m, included projected unachieved MTFS of £0.367m.

Pressures continue to be experienced in relation to significant demand in the following areas: Leaving Care and UASC over 18 where changes to statutory duties for care leavers which is extended up to age 25 has resulted in an increase of 100% in numbers for this year within the Service. There are currently 22 young people with UASC status over the age of 18 with a further 14 transitioning from the Intervention and Support Service. This number is likely to increase as some of the young people are coming into care post 17 with a historically underfunded budget to meet these demand pressures.

There is continued pressure in S17 budget due to high cost of homeless families despite robust screening and assessment. The project to progress this area of work has been delayed due to Covid-19, the Service has been unable to recruit to specialist worker post despite extensive work on recruitment and retention.

The LAC Placements budget is currently underspent by £0.186m due to the numbers of young people presenting as LAC remaining stable in the last quarter.

The DSG High Needs Block has a carried forward deficit from 2019/20 of \pounds 1.1m. Current level of spending is \pounds 4.6m with a further overspend projected for 2020/21. Havering's allocation for the High Needs Block DSG funding increased by \pounds 3.5m compared to 2019/20, and the Schools Funding Forum has agreed to transfer \pounds 0.500m from the Schools Block. This will result in a projected overspend on the DSG High Needs Block for 2020/21 of \pounds 2.7m.

4. MONITORING SAVINGS 2020-21

- 4.1 Due to the current COVID-19 pandemic, much of the work to realise the 2020-21 savings was suspended and/or delayed. As stated above all the proposals will be reviewed as part of the recovery strategy. At present out of the £1.039m savings approved by Members in the 2020-21 budget cycle, it is presumed only £0.572m of the savings will be achieved and £0.467m potentially unachieved.
- 4.2 A list of the unachievable savings are listed below:

FIS Ref	Description	Total Forecast Variance 2020/21
COM03	Review of Transport	45
CH7	Scale and spread of Pathways Innovation Programme in Children's Social Care	50
PLACE07	Fostering recruitment and retention	125
PLACE08	Early Help and education inclusion	100
PLACE09	SEND passenger transport (existing MTFS saving).	100
PLACE06	Children's Centres - PLACE06	47
Children's Total		467

Table 4 Unachieved Savings

IMPLICATIONS AND RISKS

Financial implications and risks: Finance comments are contained within the main body of the report at period 5 2020/21, due to the subject matter of the report. There are no further financial implications arising from this report.

Legal implications and risks: The Authority has a number of statutory obligations to children and young people set out primarily in the Children Act 1989 and the Children and Families Act 2014. Whilst this Report focusses on the global spend in relation to these duties it is likely that the Authority would be acting unlawfully if it did not meet the needs of those qualifying for support and assistance.

Otherwise there are no apparent legal implications of noting the content of this Report.

Human Resources implications and risks: There are no immediate Human Resource implications arising from the report at this stage and any specific workforce impact is difficult to assess at the present time. However, any future savings proposals or changes to the funding regime that impact on staff numbers, will be managed in accordance with both statutory requirements and the Council's Managing Organisational Change & Redundancy policy.

Equalities implications and risks:

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

(i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;

(ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;

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

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

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

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CHILDREN & LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE 8 DECEMBER 2020

Subject Heading:	Children's Services Annual Complaints Report 2019-20
SLT Lead:	Robert South
Report Author and contact details:	Veronica Webb, 01708 432589 Veronica.webb@havering.gov.uk
Policy context:	An annual report is required as part of the remit of the Children Act 1989 Representations Procedure (England) Regulations 2006'
Financial summary:	There are no financial implications as this report is for information purposes and is required as part of the statutory complaints regulations

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

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The Children's Services Complaints Annual report for 2019-20, attached as Appendix 1 provides information about the numbers and types of complaints handled by the Children's Service during 2019-20, as well as Members' correspondence. It

is a requirement under the Children Act 1989 Representations Procedure (England) Regulations 2006 that the complaints annual report be published.

RECOMMENDATIONS

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



- Complaints in 2019-20 decreased by 25% in 2019-20(80) compared to 2018-19(106). With a small number of complaints made by young people (8). The number of enquiries more than trebled relating to ongoing Court proceedings or Court decisions outside of Children's Services remit. There continues to be a steady number of complaints escalating to Stage 2 investigations in 2019-20 (6) and is at the same level as in 2018-19.
- Many complaints received continue to be regarding the unwelcomed intervention of Children's Services and reflected in Intervention & Support Services receiving the highest number of complaints in 2019-20 and 'attitude/behaviour of staff' being the highest reason. There has been a decrease of complaints received by Triage MASH & Assessments by 59% in 2019-20(13) compared to 2018-19(32).
- 3. In 2019-20 complaints regarding 'inaccurate information' decreased significantly by 77% (5) compared to 2018-19 (22) resulting from continued audits and quality assurance by Team Managers during the assessment process. Children's Services continue to use the Quality Assurance framework and other feedback loops to guage standards provided to children and families.
- 4. The number of complaints upheld and partially upheld accounted for 24% (19) and 15% (12) respectively of the total complaints. Those upheld or partially upheld resulted in an apology, linked to the need to provide explanation or further information about the reasons for intervention or particular parts of the

process that initially may not have been clear. How information is given, and the consistency should be explored.

- 5. Complaints received were mainly by email (38) with the next preferred method by telephone (22). Response times improved in 2019-12 with 67% (51) responded to within the 20 working day timeframe. Efforts will continue to improve response times, while recognising the increased complexities of cases and balancing the priorities of the service.
- Increased expenditure in 2019-20 for Independent Investigators of £19,531.65 resulted from Stage 2 investigations carried over from 2018-19 and costs associated with Stage 3 Review Panels. Payments made as resolutions to complaints totalled £8,200 in 2019-20.
- 7. Monitoring information is based on the child(ren) within the family unit in which a complaint was made. There were increases of those aged between 15-17 and 18+ in 2019-20. Male children were higher across most age groups except 0-5 and 15-17. Children recorded with a disability was low across all ages, and diagnosed with mainly Autism or Aspergers Syndrome. 'White British' children highest representation and reflects the borough's population make up with 'White and Black Caribbean' and 'any other Black Background' increasing in 2019-20. Children of 'Catholic, 'Christian' or 'Church of England' faiths increased in 2019-20.
- 8. The number of compliments received is very low in 2019-20 and disappointing, although it is not representative of the good work that is happening within Children's Services. Compliments to be logged to ensure these can be reported in 2020-21.
- 9. Complaints are playing an important role in service improvements, and this is evident with the number of complaints regarding inaccurate information showing a significant decrease in 2019-20. The Children's Service Improvement Board will continue to look at quality assurance and learning from complaints, whilst also linking to appropriate training.

IMPLICATIONS AND RISKS

Financial implications and risks:

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

There are no new financial implications or risks arising from this report, which is for information purposes. It should be noted however that any material increase in investigations following on from complaints could result in additional costs to the

authority, which is being managed as part of the overall financial management responsibilities of the service.

Legal implications and risks:

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

Human Resources implications and risks:

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

Equalities implications and risks:

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

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

Note: 'Protected characteristics' are: age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment. The missing categories not reported within the 2019-20 report will be reported on in future reports.

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



Children Services

Annual Report 2019 – 2020 Complaints and Compliments

Prepared for:

Robert South, Director Children Services

Prepared by: Veronica Webb Complaints & Information Team Manager

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1. Executive Summary

Children's Services complaints fall within the remit of 'The Children Act 1989' and 'The Children Act 1989 Representations Procedure (England) Regulations 2006' which includes the requirement to publish an annual report. This report covers the period April 2019 to March 2020.

Children's Services are committed to use complaints to help support improvements and practice within the service and welcomes all feedback.

Improvements have been evidenced with the decrease in the number of complaints regarding 'inaccurate information' and this has been achieved through the continued efforts and focus of Team Managers in reviewing and scrutinising the assessment process. We have also continued to focus on embedding a consistent approach to threshold application and timeliness of intervention to ensure that families receive access to the right service at the right time.

There was an increase of enquiries in 2019-20 compared to the previous year, however we are pleased to see a reduction in the number of stage one complaints and a consistently low number of these escalating to stage two. Our staff continue to benefit from certified training in systemic practice and input from our clinical team, which results in the development of skills in undertaking difficult conversations and co-producing interventions to ensure the most positive outcomes. We have also been proactively linking our quality assurance activity with the complaints processes to ensure learning is fed back into the service.

It is worth acknowledging that some complaints made are regarding issues beyond our control, for example; court timetables, allocation of resources by partner agencies and eligibility for services. We will continue to ensure that our communication with parents and carers is effective, and that the reasons for decisions being made are explicit and understood. During 2019-20 we embedded a more consistent approach to having a face to face conversation at the point of initial enquiry, and we have found this to be effective in preventing escalation and reducing anxiety.

The increase in complaints from families and young people aged 15-17 and in particular those aged 18+ is reflective of the age demographic of those we support. The number of adolescents accessing statutory services has increased significantly in recent years, with over half of our children in care population aged 14+. We encourage young people to use their voice and let us know if there is something they are unhappy with or we could have done better. We received eight complaints directly from young people last year. We will always encourage young people to have a conversation with their allocated worker before a formal complaint is made, to see if concerns can be addressed and issues resolved in an informal way.

Looking forward, 2020-21 has provided us with significant challenges and but also a number of opportunities to engage with our service users differently. The use of virtual platforms has been effective in some instances and we will take the learning from this forward in to our continued response to complaints and enquiries. We also continue to remind staff to highlight compliments and comments, so as to ensure a fair and balanced reflection of the feedback received about the services delivered and the impact this has on our service users.

2. Introduction

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

There are three stages covered within the regulations as follows:

Stage 1 – Local Resolution

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

Stage 2 – Formal Investigation

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

Stage 3 – Review Panel

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

3. Complaints Received

3.1 Ombudsman referrals

The number of Ombudsman enquiries decreased in 2019-20 (6) from 2018-19 (9). Two found maladministration with injustice relating to foster care (from 2018-19) and the handling of complaint.

	Apr19- Mar20	Apr18- Mar19	Apr17- Mar18
Maladministration (no injustice)			
Maladministration & Injustice	2	1	1
No maladministration after investigation	2		
Ombudsman discretion			
Investigation with Local settlement			
Outside Jurisdiction			
Investigation Discontinued			
Premature/Informal enquiries	1	6	1
Closed after initial enquiries – no further action	1	2	
Total	6	9	3

3.2 Total number of complaints

The total number of complaints decreased in 2019-20 (80) by 25% from 2018-19 (106). There were eight complaints made directly by young people. The number of enquiries almost trebled and increased by 206% in 2019-20 compared to 17 in 2018-19. Many enquiries involved ongoing Court proceedings, or Court decisions that were outside the remit of Children's Services.

	Enquiries	Stage 1	Stage 1 escalated to Stage 2
2019-20	52	80	6
2018-19	17	106	6

3.3 Stages

There were six escalations to Stage 2 in 2019-20, which has remained at the same level as in 2018-19. Four escalated to Stage 3 Review Panels, three of which escalated from complaints in 2018-19.

3.4 Teams

There was a slight increase in the number of complaints received by Intervention & Support Services in 2019-20 compared to 2018-19. This is reflective of unwelcomed intervention by Children's Services. Increases were also evident across Children & Adults with Disabilities Team (CAD) of 50% (12 in 2019-20; 8 in 2018-19), and Fostering, although low in numbers doubled in 2019-20. The number of complaints received by Triage/MASH & Assessment has decreased significantly by 59% in 2019-20 (13) from 2018-19 (32).



3.5 Reasons

The breakdown of reasons for complaint shows that 'attitude/behaviour of staff' is the highest reason followed by 'standard of service'. Where 'attitude/behaviour of staff' was the reason the majority of these complaints were about the unhappiness of family members/parents about a social worker's involvement, the decisions they have taken or, the lack of support for the parent or family member, which may not always be in line with the needs of the child or children.

Continued efforts by social work staff to be mindful of the sensitivities with families, particularly where there are relationship breakdowns and ensure that all parties are listened to and their feelings and wishes are accurately represented.



Below shows the comparison between 2019-20 and 2018-19. 'Attitude/behaviour of staff' and 'standard of service' decreased in 2019-20 by 27% (36 in 2019-20; 49 in 2018-19) and 21% (15 in 2019-20; 19 in 2018-19) respectively.

In 2019-20 'inaccurate information' decreased significantly compared to 2018-19 by 77% (5 in 2019-20; 22 in 2018-19). This has resulted from the continued audits and quality assurance by Team Managers who scrutinise assessments around potential bias and accurate recording of information during the assessment process.

Children's Services continue to use the Quality Assurance framework and other feedback loops to understand the standards of service provided in the community to children and families. The reintroduction of the audit programme gives children and families a greater say in service delivery and development and provides feedback from parents and young people for each audit completed. Citizen Space also provides an online platform for families and professionals to give their views.



3.6 Outcomes & Learning

Of the total number of complaints for 2019-20 (80), 48% not upheld,

24% upheld and 15% partially upheld. Complaints withdrawn totalled 11 in 2019-20, due to information or consent not provided, also following initial enquiries establishing ongoing Court proceedings.

Complaint	Upheld	Partially	Not
Withdrawn		Upheld	Upheld
11	19	12	38

Below shows the breakdown of the various outcomes for complaints upheld. There could be many elements to complaints and the outcomes mainly resulted in an apology given and information or explanation given. These are the two highest outcomes, and possibly linked to where a worker had not fully explained a particular part of the process, the need for intervention or provided information in a timely manner. Children's Services should explore how information is given, and whether this is consistent and what appropriate steps can be taken to improve in this area.



3.6.1 General Themes and Trends 2019-20

'Attitude/behaviour of staff' continue to be the highest reason or complaint. Continued efforts by Children's Services to ensure that staff clearly explain the need for particular interventions, keep families updated and informed about the process, whether that is where a child and family agree to a voluntary arrangement under s20, child protection process under s47, or where a child may be looked after under s17. Also through continued promotion of Havering's Face to Face Model advocating for purposeful, planned and focused (PPF) Practice evidenced by establishing a clear purpose, only intervening when Children's Services can help, ensuring that there is a plan that responds to identified need, and a sharp focus on how to achieve change.

It is encouraging to see the decrease in the number of complaints regarding 'inaccurate information'. The scrutiny by Team Managers on quality assurance of assessments and plans had a positive impact and is reflected in the percentage decrease in complaints relating to 'inaccurate information in 2019-20.

In 2019-20, the number of complaints made directly by young people was low (8). Attempts to establish whether this is because of the focused work with young people and the alternative avenues they may have to raise concerns is resulting in the low numbers. Also whether concerns are being dealt with in a positive way, resulting in less of a need to make formal complaints.

Complaints data is shared with the Quality Assurance Team and the Children's Service Improvement Meeting on a quarterly basis. Quality Assurance activity triangulates the trends and incorporates into the audit activity and training from the Social Care Academy.

3.7 Response times

Statutory complaints timeframes are 10 working days with a further 10 working days at Stage 1. The response times in 2019-20 have improved with 64%(51) responded to within the 20 working days timeframe, compared to 52% in 2018-19 (48). Continued efforts to meet statutory timeframes to improve response times are required as well as balancing the priorities of the Service while recognising the increased complexities with cases.

	Within 10 days		11-20 days		Over 20 days	
	Apr19-	Apr18-	Apr19-	Apr18-	Apr19-	Apr18-
	Mar20	Mar19	Mar20	Mar19	Mar20	Mar19
Stage 1	19	18	32	30	29	44
%	24	17	40	28	36	42

4. Expenditure

The majority of expenditure shown for Independent Investigators, relates to six Stage 2 investigations from 2018-19, with costs also associated with Stage 3 Review Panels held in 2019-20. The majority of costs for Stage 2 investigations undertaken in 2019-20 will be shown in 2020-21. The costs for payments is the total paid to complainants, resulting from Stage 3 recommendations carried over from 2018-19 and Ombudsman investigations.

	Publicity/ leaflets	Independent investigators	Payments	Total
Apr 2019 – Mar 2020		£19,531.65	£8,200	
Apr 2018 – Mar 2019		£5,346.45	£200.00	£5,546.45

5. How Complaints were received

In 2019-20 the preferred method of contact was email, with those preferring the telephone as the next method, as in 2018-19. Online has remained at the same level in 2019-20.

	Letter	E-mail	Complaint Form/Leaflet	Telephone	In Person	Online	Social networking
2019-20	3	38	2	22	2	13	
2018-19	12	55	6	18	3	13	2

6. Monitoring Information

6.1 Age & Gender

Monitoring information has been based on all children within the family unit, where a complaint has been made, however may not relate to all children within the family.

The number of complaints involving families with young people between the ages of 15-17 has increased slightly by 6% in 2019-20 (17) compared to 2018-19 (16) and 18+ has more than doubled in 2019-20 (34) compared to 2018-19 (15). Although there is an apparent increase, the number of complaints for Care Resources, which includes the Leaving Care Team, has decreased in 2019-20.



The gender breakdown against age below shows that for those age ranges 10-14; 6-9 and 18+ has a higher number of male children to female children, while those aged 0-5 and 15-17 female children has the highest number.



6.2 Disability

The number of children recorded with a disability is low across all ages. The majority of children with a disability diagnosed with Autism or Aspergers syndrome, with other disabilities recorded as behaviour, communication, learning disability, mobility and visual impairment.



6.3 Ethnicity

Children are represented across a number of ethnic backgrounds. 'White British' is the highest as reflected in the borough's population make up. The number of 'White and Black Caribbean', as well as 'any other Black Background' has increased in 2019-20.



6.4 Religion

Families of 'Catholic', 'Christian' or 'Church of England' faiths have increased in 2019-20. There are 26 recorded as 'Unknown' and recording of religion will need to be looked at by Children's Services.



7. Members Correspondence

Members' correspondence increased by 17% in 2019-20 with 91% being responded to within timescale.

	2019- 20	2018- 19
Members	55	47
Correspondence		
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8. Compliments

There were very few compliments recorded for Children's Services during 2019-20 (3). Children's Services will need to ensure that compliments are logged, so that these may be reported in 2020-21 report.

9. Conclusion

Although the number of complaints have decreased in 2019-20, the number of Stage 2 investigations have stayed at the same level. The move towards having initial meetings with complainants may impact on the number of Stage 1 complaints escalating, however with the Covid-19 situation it is not clear how this will impact on complaints in 2020-21.

Complaints are playing an important role in service improvements and the Children's Service Improvement Board looks at quality assurance and learning from complaints, while also linking to appropriate training. This is evident in the decrease in the number of complaints regarding inaccurate information due to the continued quality assurance and audits.

Although Children's Services may be receiving compliments, teams to be reminded to forward compliments for recording purposes, as the numbers may not be representative of compliments actually received and the recognised work being done within teams.

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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 Social workers to be clear with parents as to why we are involved (purpose) and what our involvement will look like (plan) 	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 Q C C	 Information leading to an action/decision should be recorded in detail. Information needs to be recorded accurately 	 Clear links between the purpose as to why we are involved, our analysis and plans for actions based on our understanding as to what change needs to happen 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. 	 Improved understanding as to when and why information got lost between whom and identification of how best to improve means of communication To explore better 	All	On-going	Management arrangements were strengthened during 2014-2015 and a further restructure of teams took place in 2016-17 and in 2018 to assist in improving practice overall. It is improving and ensuring better communication with families and better handovers is being

		 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 introduce the new worker and share the existing Social Care Plan. 			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. 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 atton of information					Managers to quality assure and sign off all reports that go to Court
In proved response thes 70	 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 –	 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 PPF model of practice, including considerations of the relationship between the practitioner and different family members. This new template, in addition to staying focused on purpose and plan prompts social workers to become more reflective regarding the information they are inputting into the assessments. Following the restructure,	Assessment & ISS	Quarterly review of audit findings which is tracked via SMT	

Page Representatives/	 Clearly identify role and 	 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. Supervision informed by systemic practice principles including conversations about the self of the supervisee and how their lived experiences are informing their assessments At the commencement of a 	Complaints &	On-going	
Advocates	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 	Information Team		
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 specify whether the case is being transferred/reallocated and communicate to families. 	All	On-going	
	•	•			

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CHILDREN & LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE 8 DECEMBER 2020

Subject Heading:	Children's Services Complaints Comments & Compliments Policy
SLT Lead:	Robert South
Report Author and contact details:	Veronica Webb, 01708 432589 Veronica.webb@havering.gov.uk
Policy context:	As part of the remit of the Children Act 1989 Representations Procedure (England) Regulations 2006'
Financial summary:	There are no direct financial implications arising from this report. However adverse performance against some performance indicators may have financial implications for the Council.

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	[]



Local authorities have a statutory requirement to set up a complaints process which is set out in section 26 Children Act 1989 and The Children Act 1989 Representations Procedure (England) Regulations 2006.

The Policy sets out how Children's Services will deal with statutory complaints and compliments.

RECOMMENDATIONS

1. That Members note the content of the Children's Services Complaints, Comments and Compliments Policy attached as Appendix 1.

REPORT DETAIL

- Children's Services works to the principles of the Local Government & Social Care Ombudsman's 'Principle of Good Administrative Practice' and the National Complaints Managers Group's 'Good Practice Guidance for handling complaints concerning adults and children social care services (England) 2016.'
- 2. The Policy outlines the statutory complaints process for Children's Services for children or young people that are looked after by the local authority or child(ren) in need; children in fostering, adoption or Special Guardianship arrangements, and care leavers to the local authority. Parents, someone with parental responsibility or a person with sufficient interest in the child whose views the Authority consider relevant can make a complaint on behalf of a child or young person, with the consent and views of the child where appropriate.
- 3. Statutory complaints cover the social care functions of Children's Services in relation to a child or young person looked after by the local authority, a child in need, or in adoption, fostering and Special Guardianship arrangements and care leavers to the local authority.
- 4. Complaints involving matters going to Court do not need to be taken through the complaints process
- 5. Complaints involving other organisations or another local authority may need referring to the relevant organisation or local authority. Where appropriate Children's Services will provide a coordinated response.
- 6. Where a complaint has been investigated under the complaints procedure or by the Local Government & Social Care Ombudsman or Parliamentary & Health Service Ombudsman; or where there are court proceedings, tribunals or disciplinary or criminal proceedings, this will not be considered. Data subject requests and Freedom of Information requests do not fall within the complaints arrangements.

- 7. Confidentiality will be maintained, unless legally obliged to disclose or it is believed that an individual is unsafe or at risk of harm. The time limit for making a complaint is 12 months.
- 8. There are three stages in the process:
- Stage 1. The Service will try and seek local resolution and respond within 10 20 working days. If dissatisfied the complaint can escalate to Stage 2.
- Stage 2 independent investigation, carried out by an Independent Investigator and Independent Person. The reports are sent to the local authority, adjudicated on by the Assistant Director/Director, who will respond giving their decision providing the reports. The Stage 2 takes between 25 – 65 working days to conclude from the date the Statement of Complaint is agreed. If dissatisfied the complaint can escalate to Stage 3.
- Stage 3 Review Panel, its purpose is to review the Stage 2 investigation. The Panel is held within 30 working days and the Chair will provide recommendations to the Assistant Director/Director within 5 working days following the Panel. The Assistant Director/Director will respond giving the decision within 15 working days following receipt of recommendations.
- Complaints or other feedback, including compliments, may be made in various ways and support or assistance can be provided for those making a complaint, through advocacy or alternative methods of contact. Children's Services welcomes and uses feedback to support learning and development across the service.
- 10. Children's Services are committed to using complaints as a learning tool to help improve practice and standards and compliments to inform good practice, through quarterly Service Improvement Boards.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no direct financial implications arising from this report. However adverse performance against some performance indictors may have financial implications for the Council.

All service directorates are required to achieve their performance targets within approved budgets. The Senior Leadership Team (SLT) is actively monitoring and managing resources to remain within budgets, although several service areas continue to experience significant financial pressures in relation to a number of demand led services, such as Children's Services. SLT officers are focused upon controlling expenditure within approved directorate budgets and within the total General Fund budget through delivery of savings plans and mitigation plans to address new pressures that are arising within the year.

Legal implications and risks:

As stated in the Report the Authority has a duty to set up a complaints process under s 26 (3) Children Act 1989.

The proposed policy complies with the legislative requirements and there are no legal implications in noting the content of the policy.

Human Resources implications and risks:

The recommendations made in this report do not give rise to any identifiable HR risks or implications that would affect either the Council or its workforce.

Equalities implications and risks:

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

(i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;

(ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;

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

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

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



Children's Social Care Complaints, Comments and Compliments Policy

V1.0

Document Control

Document details

Title	Children Social Care Complaints, Comments and Compliments Policy
Version number	V0.1
Status	Draft
Author	Complaints & Information Team Manager
Lead officer	Head of Business Management
Approved by	Non key Executive Decision
Review date	
Supersedes	
Target audience	Staff and residents

Version history

N/A

Related to

Version	Status	Date	Dissemination/Change
V0.1			
V0.2			
V0.3			
V0.4			
V0.5			

Approval history

Version	Status	Date	Approved by
V1.0			

Equality Impact Assessment record

Date	Completed by	Review date
1.11.20	Veronica Webb	1.7.21

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Introduction

Purpose

Local authorities have a statutory requirement to process complaints, which is set out in section 26 Children Act 1989 and The Children Act 1989 Representations Procedure (England) Regulations 2006

Policy summary

Havering Council provides a wide range of services to many people, and we aim to deliver these services to the highest possible standards. Your complaints, compliments, comments and concerns are important to us.

We would like to hear any comments about our services and anything you would like to compliment us about. We are also aware that things go wrong, and that you may not always be satisfied with a service we have provided to you. We are committed to listening to our children and young people, so that we can make improvements to the services we provide.

Scope

This policy sets out how the Council will deal with compliments and statutory complaints for Children's Social Care. Non-statutory complaints are dealt with under the Council's Corporate Complaint Policy and Procedure; details can be found at:

https://www.havering.gov.uk/info/20047/consultations_complaints_and_feedback/208/complaints

Timescales

This Policy will apply from January 2021 onwards. It will be subject to review periodically to reflect any changes in legislation or Council practice.

Policy

Principles of good complaint handling

Havering Council works to the National Complaints Managers Group's <u>Good Practice</u> <u>Guidance for handling complaints concerning adults and children social care services</u> (<u>England</u>) 2016 principles and Local Government & Social Care Ombudsman's 'Principle of Good Administrative Practice:

- **Principle One**: ensure that the complaints process is accessible;
- **Principle Two**: ensure that the complaints process is straightforward for children and young people and their representatives;
- **Principle Three**: ensure that appropriate systems are in place to keep children and young people informed throughout the complaints process;
- **Principle Four**: ensure that the complaints process is resolution focused; and
- Principle Five: ensure that quality assurance processes are in place to enable organisational learning and service improvement from complaints and customer feedback.

Who can complain?

- A child or young person (a parent or someone with parental responsibility for a child/young person) who is either looked after by the local authority or is a child in need.
- A child or young person, or an individual involved in fostering, adoption or Special Guardianship arrangements.
- A care leaver to the Local Authority
- Someone acting on behalf of a child or young person who the local authority considers has sufficient interest in the child and whose views the Council consider to be relevant. Consent and views will be sought from the child where appropriate.
- Someone who is acting on behalf of a child or young person who is unable to make a complaint due to:
 - lacking capacity within the meaning of the Mental Capacity Act 2005 and who is deemed to be acting in their best interest
- An adult relating to a child or young person but not on behalf of the child or young person. The local authority will determine if there is sufficient interest in the child's welfare and seek the child or young person's consent where appropriate.
- Anonymous complaints will be recorded and considered by the Complaints Manager and/or relevant service area manager, where appropriate.

Why complain?

If you are dissatisfied about a service, you have received from Children Services we would welcome your feedback and will use this to improve both your experience of the service and how services can be improved in the future.

Children's Services is committed to responding appropriately to complaints and will take appropriate steps to remedy service failures identified arising from complaints. Where complaints do not show service failure, an explanation will be provided.

Children's Services will regularly review the lessons learnt from complaints to improve the quality of the service provided.

Time limit for complaints

There is a 12-month limit in which a complaint can be made from the time that the matter occurred. If your complaint is older than 12 months we may still be able to consider it if there are extenuating circumstances that led to the delay of the complaint being made, and it is still possible to investigate the complaint effectively and fairly.

What can complaints be about?

In general terms anything related to the actions/omissions of Children's Services in connection with a child or young person who is looked after or in need, such as:

- An unwelcome or disputed decision;
- Concern about the quality of a service;
- Delay in decision making or providing a service
- Delivery or non-delivery of services
- Quantity, frequency, change or cost of a service
- Attitude or behavior of staff;
- Application of eligibility and assessment criteria;
- Application of a local authority policy which impacts on a child or young person
- Assessment, care management and review;
- Change/closure of service;
- Financial issues; and

- Working practices which are contrary to Havering's policies on:
 - Health and Safety
 - Equal Opportunities
 - o Racial, Harassment or Bullying

The Council will always treat complainants with courtesy and respect and Council staff have the right to be treated the same. Rude, violent, threatening or abusive behaviour towards Council staff will not be tolerated.

Complaints involving Court proceedings

The Council will not usually consider complaints raised where the subject matter is being considered in legal proceedings such as care, adoption and special guardianship proceedings. The Complaints Manager will decide after taking legal advice whether the complaint can be taken under the statutory procedure without prejudicing any ongoing proceedings.

Complaints about other organisations

If a complaint concerns another organisation such as health, or an independent provider services, the Council will determine if the complaint can be taken under the statutory procedure. If not, the Council will forward the complaint to the relevant organisation with the consent of the person who complains or the person using the services as appropriate. If the complaint relates to two or more local authorities, the complaint should be considered by the local authority who has responsibility for the child. Co-operation between the organisations to provide a coordinated response will be sought where possible.

What these complaints arrangements cannot be used for

- Where it is determined that a person making complaint does not meet the requirement of who can complain
- Complaints that have already been investigated under all stages of the complaints procedures.
- Complaints that are being or have been investigated by the Local Government & Social Care Ombudsman or the Parliamentary & Health Service Ombudsman.
- Where there are concurrent investigations i.e. Court proceedings, Tribunals, Disciplinary or Criminal proceedings.
- Alleged failure to comply with a data subject request under the Data Protection Act 1998.
- Alleged failure to comply with a request for information under the Freedom of Information Act 2000.

Where the local authority decides that a complaint is not a complaint as specified above, then

- It is not required to consider the complaint, and
- As soon as is reasonably practicable, notify the complainant in writing of its decision and the reasons.

Confidentiality

The confidentiality of all personal information will be maintained and will not be disclosed outside Havering Council without permission unless legally obliged to do so. If it is,

however, believed that an individual is unsafe or at risk of harm, information will be passed on to the appropriate authority or service to action.

What happens when a complaint is made?

When a formal complaint is made, the Social Care Complaints Team will contact the person to ensure that the complaint is fully understood and where possible, discuss what they would like to happen to resolve the complaint and any support needed, such as advocacy.

The complaint will be taken at Stage 1:

Stage 1 - Local Resolution

- Acknowledged within 3 working days.
- Discussed and agreed with you and advised on how it will be handled
- Progressed from date complaint is agreed and/or required consent information is received. Where a meeting or telephone conference would be appropriate, a response will be sent within 10 working days from the date of the meeting/telephone conference being held.

Stage 1 will be responded to within 10 working days with a further 10 working days with agreement

If you remain dissatisfied you can request to progress your complaint to the next stage (Stage 2) which will involve the following:

Stage 2 – Independent Investigation

- Investigated by an Independent Investigator and an Independent Person (IPs). The Independent Person ensures the investigation is carried out fairly and in the best interests of the child.
- Discussed between the complainant and the IPs to agree a Statement of Complaint.
- Investigated by IPs accessing relevant records and interviews with staff and producing their individual reports.
- Adjudicated following receipt of the IPs' reports by the Assistant Director/Director.
- Concluded when the adjudication decision and the reports are sent to you.

Stage 2 will take between 25 – 65 working days from date Statement of Complaint is agreed and signed.

If you remain dissatisfied you can request to progress your complaint to Stage 3. This will involve the following:

Stage 3 – Review Panel

- A Stage 3 Review Panel will be held within 30 working days and you will be notified of the date.
- You can make representation to the Panel either in writing or in person
- The Review Panel will review the Stage 2 investigation but not reinvestigate the complaint.
- Following the Review Panel the Chair will provide its recommendations to the Director/Assistant Director of Children Services within 5 working days.
- The Director/Assistant Director will send decision to you within 15 working days following receipt of Chair's recommendations.

The outcome of a complaint will be in writing explaining how the complaint has been considered, the conclusions reached and any remedial action necessary.

Mediation may be considered as a way to help resolve the complaint and this will be discussed if appropriate.

The person who raised the complaint with us will be kept informed about any changes and the progress of their complaint including any delays with an explanation.

Getting help to complain or feedback

Advocacy support or assistance with alternative methods of contact to make a complaint can be accessed by contacting the Social Care Complaints and Information Team on 01708 432589.

How to complain or provide feedback

Write to:

Social Care Complaints & Information Team London Borough of Havering Town Hall, Main Road, Romford, RM1 3BB

Telephone: 01708 432589

Talk to your Social Worker or Advocate.

Complete an online form using the following link: <u>https://www3.havering.gov.uk/Pages/ServiceChild/Make-a-complaint-about-social-care.aspx</u>

By using Mind of My Own (MOMO) app.

Fax: 01708 434114

Email your complaint to: <u>SCCI@havering.gov.uk</u> (when you click the above link, it will open a new email for you however if you prefer to type in the email address yourself it is SCCI@havering.gov.uk)

What to do if I am still not satisfied?

Complaints, which are made against a local authority, are the responsibility of the Local Government & Social Care Ombudsman (LGSCO) who has the necessary remit to cover local government issues. The Parliamentary and Health Service Ombudsman has the authority to carry out joint investigations of health and social care complaints.

The LGSCO can be contacted if dissatisfied with the outcome of a complaint. The LGSCO would expect a complaint to have gone through all three stages, before investigating a complaint. However they may consider early referrals.

The Ombudsmen can be contacted: In writing: Local Government & Social Care Ombudsman (LGSCO), PO Box 4771, Coventry CV4 0EH

Telephone: 0300 061 0614 (Mon - Fri 8.30am - 5.00pm, except public holidays). Calls to 03 numbers will cost no more than calls to national geographic numbers (starting 01 or 02) from both mobiles and landlines, and will be included as part of any inclusive call minutes or discount schemes in the same way as geographic calls

Text: texting 'call back' to 0762 480 3014 you may be charged by your provider for sending the text message

Text phone via the Text Relay service (formerly Typetalk)

Online: If you have a complaint, please use the <u>complaint form</u>

Website: http://www.lgo.org.uk/adult-social-care

Monitoring and review

Feedback on complaints and the method by which feedback is obtained will be reviewed regularly. This information will be used to help inform and review complaints handling.

An annual report will be produced by the Complaints Manager and will be presented to the management board and the relevant committee(s), including an action plan which will be reviewed regularly throughout the year to identify learning and service improvements. The final report will be published on the Council's website. Quarterly reports will also be presented to Service Improvement Boards to inform and review service areas within Children's Services.

Compliments

When compliments are received, teams and staff are asked to share these with the Social Care Complaints and Information Team, who will log these and keep a record of compliments received year on year. These are used as a tool to inform good practice, give feedback to staff and to record positive comments received from our children and young people, their representatives and carers.

Learning from complaints and compliments

Children Services is committed to using feedback we receive to support learning and development across the service, and to improve practice and standards.

Appendix 1: Complaints Process Flow Chart



If you remain unhappy with the outcome of your complaint you can contact the Local Government & Social Care Ombudsman – please see Page 8 of the Policy for contact details



Equality & Health Impact Assessment (EqHIA)

Document control

Title of activity:	Children Services Complaints & Compliments Policy
Lead officer:	Veronica Webb, Complaints & Information Manager Business Management, Adult Social Care
Approved by:	Caroline May, Head of Business Management Business Management, Adult Social Care
Date completed:	01/11/2020
Scheduled date for review:	July 2021

Please note that the Corporate Policy & Diversity and Public Health teams require at least <u>5</u> working days to provide advice on EqHIAs.

Did you seek advice from the Corporate Policy & Diversity team?	Yes / No
Did you seek advice from the Public Health team?	Yes / No
Does the EqHIA contain any confidential or exempt information that would prevent you publishing it on the Council's website?	Yes / No

Please note that EqHIAs are **public** documents and must be made available on the Council's <u>EqHIA webpage</u>.

Please submit the completed form via e-mail to EqHIA@havering.gov.uk thank you.

1. Equality & Health Impact Assessment Checklist

Please complete the following checklist to determine whether or not you will need to complete an EqHIA and ensure you keep this section for your audit trail. If you have any questions, please contact EqHIA@havering.gov.uk for advice from either the Corporate Diversity or Public Health teams. Please refer to the Guidance in Appendix 1 on how to complete this form.

About your activity

1	Title of activity	Children's S	ervices Complaints I	Policy
2	Type of activity	Policy		
3	Scope of activity	This policy sets out how the Council will deal with complaints and compliments about Children's Services.		
4a	Are you changing, introducing a new, or removing a service, policy, strategy or function?	Yes		
4b	Does this activity have the potential to impact (either positively or negatively) upon people (9 protected characteristics)?	Yes	If the answer to <u>any</u> of these questions is 'YES' ,	If the answer to <u>all</u> of the questions (4a, 4b & 4c) is 'NO' ,
4c	Does the activity have the potential to impact (either positively or negatively) upon any factors which determine people's health and wellbeing?	Yes / No	please continue to question 5 .	please go to question 6 .
5	If you answered YES:	Please complete the EqHIA in Section 2 of this document. Please see Appendix 1 for Guidance.		
6	If you answered NO:			

Completed by:	Veronica Webb, Complaints & Information Manager, Business Management, Adult Social Care
Date:	01/11/2020

2. The EqHIA – How will the strategy, policy, plan, procedure and/or service impact on people?

Background/context:

It is a statutory requirement for local authorities to have a system for receiving representations by, or on behalf of, users of those services under the Children Act 1989 Representations Procedure (England) Regulations 2006

The policy for Children's Services complaints and compliments has been produced in line with the regulations and the guidance published by the Department of Education & Skills 'Getting the Best from Complaints'.

The aim of the revised policy and procedures is to provide a person-centred and flexible approach to handling of complaints, which is easy and accessible and puts the focus on the needs of the child, as well as informing service improvements.

*Expand box as required

Who will be affected by the activity?

Any child or young person who wish to make a representation or raise a complaint about Children's Services, as well as parents, foster carers and other adults who may wish to complain on behalf of a child or young person. The complaint process allows access to anyone wishing to make a complaint.

*Expand box as required

Protected Characteristic - Age: Consider the full range of age groups		
Please tick (v the relevant k		Overall impact:
Positive		
Neutral	x	
Negative		*Expand box as required

Evidence:

The majority of complaints received are by parents or carers of children or young people. Of those complaints received, in 2019-20 the majority involved children aged between 15-17 years. There was an increase of those aged 18+ in 2019-20, more than doubled compared to 2018-19

Havering population statistics for mid-2016 showed an increase in young adults aged between 20-49 years.

*Expand box as required

Sources used:

Children's Annual Complaint Report 2019-20 Havering Data Intelligence Hub

*Expand box as required

Protected Characteristic - Disability: Consider the full range of disabilities; including physical mental, sensory and progressive conditions			
Please tick (1	Overall impact:	
the relevant k	oox:		
Positive			
Neutral	x		
Negative		*Expand box as required	
Evidence:	Evidence:		
The majority of children were recorded as not having a disability during 2019-20, although those that did indicate a disability were for Autism/Aspergers Syndrome, communication, and learning or mobility disability.			
		*Expand box as required	
Sources used:			
Children's Annual Complaints Report 2019-20			
		*Expand box as required	

Protected Characteristic - Sex/gender: Consider both men and women

Please tick (v the relevant b		Overall impact:	
Positive			
Neutral	X		
Negative		*Expand box as required	
Evidence:			
		males across ages 0-5 and 15-17 are higher than males, while age I, 15-17 and 18+ involve a higher number of male children/young people.	
Havering po females for a	-	on statistics for mid-2016 showed a higher number of males against 0-5 and 6-9.	
		*Expand box as required	
Sources us	ed:		
	Children's Complaints Annual Report 2019/20 Havering Data Intelligence Hub		
		*Expand box as required	
Protected C groups and		cteristic - Ethnicity/race: Consider the impact on different ethnic palities	
Please tick (1	Overall impact:	
the relevant b	50X:		
Positive			
Neutral	x		
Negative		*Expand box as required	
Evidence:		· · · · · · · · · · · · · · · · · · ·	
those of 'Wh Although the	nite ar ere is	/hite British' decreased in 2019-20 from 2018-19 with an increase of nd Black Caribbean' and 'Any other Black Background' heritage. a reduction in those that are 'White British' in 2019-20 this remains the presentative of Havering's population.	

Havering's population is 83% White British and 17% BAME.

*Expand box as required

Sources used:

Children's Annual Complaints Report 2019/20 Havering Data Intelligence Hub

*Expand box as required

		cteristic - Religion/faith: Consider people from different religions or
Please tick (<u> </u>	hose with no religion or belief
the relevant b		Overall impact:
Positive		
Neutral	x	
Negative		*Expand box as required
Evidence:		
		e highest recorded religion in 2019-20 with representations from the n of England', 'Muslim', 'Roman Catholic' faiths.
		*Expand box as required
Sources us	ed:	
Children's Annual Complaint Report 2019-20		
		*Expand box as required
Protected C lesbian, gay		cteristic - Sexual orientation: Consider people who are heterosexual,
Please tick (Overall impact:
the relevant b		
Positive		
Neutral	x	
Negative		*Expand box as required

Evidence:

Information on sexual orientation for children is not being collected, however the policy and procedures are aimed at looking at the individual needs and to provide appropriate support, which should be non-discriminatory. As no data is held, an interim assessment will be carried out in 12 months.

*Expand box as required

Sources used:

*Expand box as required

_			
Protected Characteristic - Gender reassignment: Consider people who are seeking,			
undergoing or have received gender reassignment surgery, as well as people whose			
aender iden	gender identity is different from their gender at birth		
Please tick (Overall impact:	
the relevant k			
	<i>.</i>		
Positive			
Neutral	x		
Negative		*Expand box as required	
Evidence:			
support, whi	ch sh	re aimed at looking at the individual needs and to provide appropriate ould be non-discriminatory. As no data is held, an interim assessment in 12 months. *Expand box as required	
Sources us	ed:		
		*Expand box as required	
Protected C		cteristic - Marriage/civil partnership: Consider people in a marriage or	
Please tick (Querell impact	
FIEASE LICK (r)	Overall impact:	

the relevant box:

Positive			
Neutral	x		
Negative			
E vidence:		*Expand box as required	
Evidence:			
Information on marriage/civil partnership for children is not being collected, however the policy and procedures are aimed at looking at the individual needs and to provide appropriate support, which should be non-discriminatory. As no data is held, an interim assessment will be carried out in 12 months.			
		*Expand box as required	
Sources us	ed.		
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		*Expand box as required	
Drotootod (Nh a ra		
Frolected C	nara	cteristic - Pregnancy, maternity and paternity: Consider those who	
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Sources	used:
---------	-------

*Expand box as required

Socio-economic status: Consider those who are from low income or financially excluded backgrounds		
Please tick (v the relevant b		Overall impact:
Positive		
Neutral	x	
Negative		*Expand box as required
Evidence: Information on socio-economic status for children is not being collected, however the policy and procedures are aimed at looking at the individual needs and to provide appropriate support, which should be non-discriminatory. As no data is held, an interim assessment will be carried out in 12 months.		
Sources us	ed:	*Expand box as required *Expand box as required

Health & Wellbeing Impact: Consider both short and long-term impacts of the activity on							
a person's physical and mental health, particularly for disadvantaged, vulnerable or at-risk							
U 1	groups. Can health and wellbeing be positively promoted through this activity? Please use						
the Health and Wellbeing Impact Tool in Appendix 2 to help you answer this question.							
Please tick (v	′) all	Overall impact:					
the relevant							
boxes that ap	ply:						
Positive		*Expand box as required					
		Do you consider that a more in-depth HIA is required as a result of					
Neutral		this brief assessment? Please tick (\checkmark) the relevant box					
Neutral							
Negotivo		Yes Ll No Ll					
Negative							

Evidence:

The policy is child-focused and will be looking at individual needs, with appropriate support being provided as required, which should be non-discriminatory.

*Expand box as required

Sources used:

*Expand box as required

3. Outcome of the Assessment

The EqHIA assessment is intended to be used as an improvement tool to make sure the activity maximises the positive impacts and eliminates or minimises the negative impacts. The possible outcomes of the assessment are listed below and what the next steps to take are:

Please tick (\checkmark) what the overall outcome of your assessment was:



4. Action Plan

The real value of completing an EqHIA comes from the identifying the actions that can be taken to eliminate/minimise negative impacts and enhance/optimise positive impacts. In this section you should list the specific actions that set out how you will address any negative equality and health & wellbeing impacts you have identified in this assessment. Please ensure that your action plan is: more than just a list of proposals and good intentions; sets ambitious yet achievable outcomes and timescales; and is clear about resource implications.

Protected characteristic / health & wellbeing impact	Identified Negative or Positive impact	Recommended actions to mitigate Negative impact* or further promote Positive impact	Outcomes and monitoring**	Timescale	Lead officer
Sexual Orientation	This information has not been collected and is not information readily available within social care database.	Complaints are to be recorded within the new social care database, Liquidlogic.	This will be dependent on the systems and how this information can be easily extracted. A new social care database, Liquidlogic, has been implemented and it will need to be explored if this characteristic is included.	July 2021	Veronica Webb
Gender reassignment	This information has not been collected and is not information readily available within social care database.	Complaints are to be recorded within the new social care database, Liquidlogic.	This will be dependent on the systems and how this information can be easily extracted. A new social care database, Liquidlogic, has been implemented and it will need to be explored if this characteristic is included.	July 2021	Veronica Webb

Marriage/civil partnership	This information has not been collected and is not information readily available within social care database.	Complaints are to be recorded within the new social care database, Liquidlogic.	This will be dependent on the systems and how this information can be easily extracted. A new social care database, Liquidlogic, has been implemented and it will need to be explored if this characteristic is included.	July 2021	Veronica Webb
Pregnancy/maternity/ paternity	This information has not been collected and is not information readily available within social care database.	Complaints are to be recorded within the new social care database, Liquidlogic.	This will be dependent on the systems and how this information can be easily extracted. A new social care database, Liquidlogic, has been implemented and it will need to be explored if this characteristic is included.	July 2021	Veronica Webb
Socio-economic status	This information has not been collected and is not information readily available within social care database.	Complaints are to be recorded within the new social care database, Liquidlogic.	This will be dependent on the systems and how this information can be easily extracted. A new social care database, Liquidlogic, has been implemented and it will need to be explored if this characteristic is included.	July 2021	Veronica Webb

Add further rows as necessary

* You should include details of any future consultations and any actions to be undertaken to mitigate negative impacts

** Monitoring: You should state how the impact (positive or negative) will be monitored; what outcome measures will be used; the known (or likely) data source for outcome measurements; how regularly it will be monitored; and who will be monitoring it (if this is different from the lead officer).

5. Review

In this section you should identify how frequently the EqHIA will be reviewed; the date for next review; and who will be reviewing it.

Review:
This will be reviewed annually as part of the Children's Complaints Annual Report.
Scheduled date of review: June 2021
Lead Officer conducting the review: Complaints & Information Team Manager

*Expand box as require

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