



## PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE AGENDA

**7.00 pm**

**Tuesday  
6 September 2022**

**Council Chamber -  
Town Hall**

Members 12: Quorum 5

### **COUNCILLORS:**

Ray Best  
Patricia Brown  
Joshua Chapman  
Jason Frost (Chairman)

Laurance Garrard  
Linda Hawthorn  
Christine Smith  
David Taylor

Bryan Vincent  
Frankie Walker (Vice-Chair)  
Julie Wilkes  
Darren Wise

### **CO-OPTED MEMBERS:**

#### **Statutory Members representing the Churches**

Jack How (Roman Catholic  
Church)

#### **Statutory Members representing parent governors**

Julie Lamb, Special Schools

Non-voting members representing local teacher unions and professional associations:  
Ian Rusha (National Union of Teachers).

**For information about the meeting please contact:  
Luke Phimister 01708 434619  
luke.phimister@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.

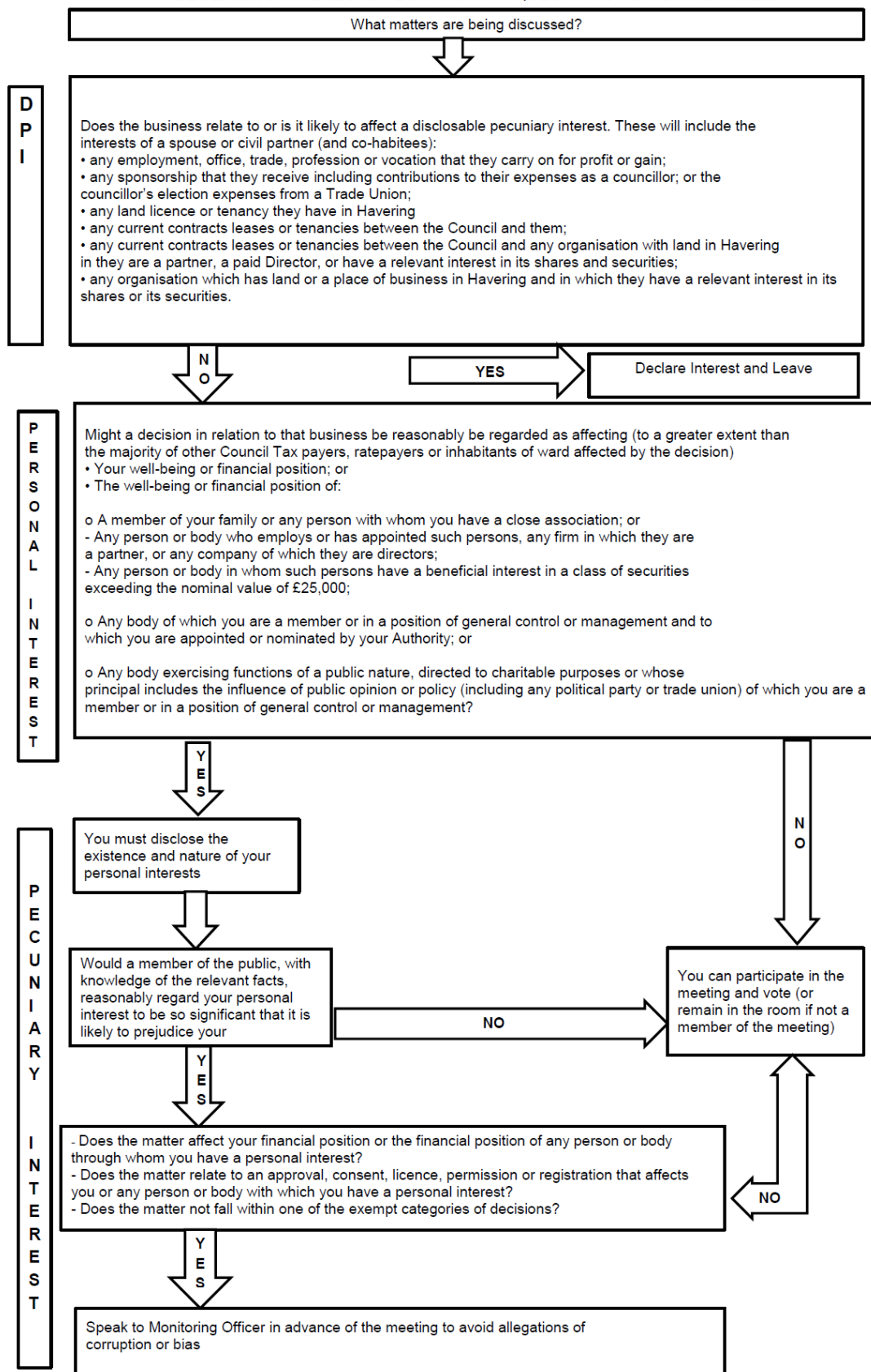
Sub-Committees will often establish Task and Finish Groups to examine specific areas in much greater detail. These groups consist of a number of Members and the review period can last for anything from a few weeks to a year or more to allow the Members to comprehensively examine an issue through interviewing 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:

- Drug, Alcohol & sexual Services
- Health & Wellbeing
- Health O & Scrutiny
- Adult Care
- Learning and Physical Disabilities
- Employment & Skills
- Education
- Child Protection
- Youth Services
- Fostering & Adoption Services
- Education Traded Services
- Early Years Services
- Looked after Children
- Media
- Communications
- Advertising
- Corporate Events
- Bereavement & Registration Services
- Crime & Disorder

**DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF**



## **AGENDA ITEMS**

### **1 CHAIRMAN'S ANNOUNCEMENTS**

The Chairman will give details of the arrangements in case of fire or other event that may require the meeting room or building's evacuation.

### **2 APOLOGIES FOR ABSENCE**

To receive apologies for absence (if any).

### **3 DISCLOSURE OF INTERESTS**

Members are invited to disclose any interest in any of the items on the agenda at this point of the meeting.

*Members may still disclose any interest in an item at any time prior to the consideration of the matter.*

### **4 MINUTES** (Pages 1 - 4)

To agree as a correct record the minutes of the meeting held on 12 July 2022 (attached).

### **5 CHILDREN'S SERVICES ANNUAL COMPLAINTS AND COMPLIMENTS REPORT 2021-22** (Pages 5 - 40)

Attached.

### **6 ADULT SOCIAL CARE COMPLAINTS AND COMPLIMENTS REPORT 2021-22** (Pages 41 - 46)

Attached.

### **7 POLICE EXTRACTIONS AND RESPONSE TIMES** (Pages 47 - 54)

Report attached.

### **8 SCHOOL EXPANSION UPDATE INCLUDING STRATEGIC DIRECTION IN RESPONSE TO DEMAND FOR SEN PLACES**

Report to follow.

**Zena Smith**  
**Democratic and Election Services Manager**

This page is intentionally left blank

**MINUTES OF A MEETING OF THE  
PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE  
12 July 2022 (7.00 - 9.16 pm)**

**Present:**

**COUNCILLORS**

<b>Conservative Group</b>	Jason Frost, Joshua Chapman, Christine Smith, David Taylor and Ray Best
<b>Havering Residents' Group</b>	Laurance Garrard, Linda Hawthorn and Julie Wilkes
<b>Labour Group</b>	Frankie Walker (Vice-Chair) and Patricia Brown
<b>East Havering Residents Group</b>	Darren Wise

**1 CHAIRMAN'S ANNOUNCEMENTS**

The Chairman advised those in the Chamber what to do in case of an emergency.

**2 APOLOGIES FOR ABSENCE**

Apologies were received from Cllr John Wood.

Mr Ian Rusha and Ms Julie Lamb sent apologies but were present via Zoom.

Cllr Best was late to join the meeting.

**3 DECLARATION OF INTERESTS**

There were no disclosures of interests.

**4 COMMUNITY SAFETY SERVICE UPDATE**

The Sub-Committee received a presentation from the Community Safety & Intelligence Service Manager.

Members were updated on the structure of the Community Safety Team and also the crime statistics in the Borough from the previous year compared to the previous 2 years. Members noted a reduction notifiable offences in the Borough by 4% from 2019-20 and 12% compared to 2018-19 with anti-social behaviour and robbery/ theft reducing during and after the COVID-19 pandemic due to residents working from home more, however, domestic

violence and abuse increased during and after the COVID-19 pandemic. Members were updated on the Violence against Women and Girls initiative within the Borough and also the Men's only helpline, both in place to help victims come forward to report cases of domestic abuse.

Members noted the 6 priorities of the service as set out below:

- 1) Reducing violence in the Borough as it makes up 32% of all crimes in Havering.
- 2) Tackling VAWAG and domestic abuse as a wider issue
- 3) Reducing reoffending in the Borough
- 4) Tackling the rising seriousness of youth violence and exploitation
- 5) Reducing the level of crime in the Borough's Town Centres. 20% of all crimes committed are in Romford Centre, but the service are focusing on reducing crime in all Centres in the Borough.
- 6) Using communications to improve the resident's view on the safety within the Borough.

The Sub-Committee noted the revised 3 year plan will be submitted to Cabinet and Council for agreement.

The Sub-Committee made no recommendations.

## **5 WORK PROGRAMME DISCUSSION**

Members of the Sub-Committee discussed items for the work programme for future meetings. The items raised at the meetings are listed below:

- Update on the revised CCTV decision
- Strategic direction on sufficient provision for SEN schools
- Briefing's from the Directors of Children's and Adult's
- Local Area Co-ordination
- Passenger transport
- In-borough supported living – delivered, occupied & future plans
- School places expansion programme
- Areas of scrutiny from previous Sub-Committees that have been merged

Some members raised questions on the voting rights of co-optees and where are recommendations from the Sub-Committee submitted to which officers explained that answers would be provided after the meeting.

As part of the discussions, Cllr Chapman wished to put forward a motion to have his items formally entered onto the work programme. The clerk explained that a formal motion was not needed as all items are submitted onto the work programme and then the Chair and fellow Sub-Committee members agree the priority and order of which items will be presented at which future meeting. The Chairman advised members to send any further ideas for work programme items via email to the Chairman and the clerk.



---

**Chairman**

This page is intentionally left blank



## PEOPLE OVERVIEW & SCRUTINY SUB-COMMITTEE – 6 September 2022

<b>Subject Heading:</b>	Children's Services Annual Complaints and Compliments Report 2021-22
<b>SLT Lead:</b>	Robert South
<b>Report Author and contact details:</b>	Johannah Philp, 01708 431998 <a href="mailto:johannah.philp@haverling.gov.uk">johannah.philp@haverling.gov.uk</a>
<b>Policy context:</b>	As part of the remit of the Children Act 1989 Representations Procedure (England) Regulations 2006'
<b>Financial summary:</b>	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	[]

## **SUMMARY**

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 and to publish an Annual Report.

The Children's Services Annual Complaints and Compliments Report for 2021–22, attached as Appendix 1, sets out Children's Services statutory complaints and compliments received during this period, as well as Members' correspondence.

## **RECOMMENDATIONS**

1. That Members note the content of the Children's Services Annual Complaints and Compliments Report 2021-22 attached as Appendix 1.
2. That Members note the continued learning from complaints and the recognition of good practice through compliments.

## **REPORT DETAIL**

1. The 2021-22 report shows improvements in children's services with the number of complaints raised against the service, decreasing by 10% compared to 2020-21. Alongside a reduction in the number of enquiries made in the year. There continued to be a consistent number of complaints escalating to Stage 2 investigations compared to 2020-21. No complaints were escalated to Stage 3 in year. There were 4 Ombudsman Investigations, of which two were not progressed, one was found to be Maladministration (no injustice), and one Maladministration & Injustice which resulted in a £300.00 good will payment being made.
2. Improvements were seen as the number of complaints against the Triage/MASH & Assessment service which decreased by 22% in 2021/22. Despite the decrease in complaints, it is noted that almost half of the complaints received were in relation to attitude/behaviour of staff and inaccurate information being given or recorded. Although a large number were not upheld. However, the Intervention Support Service saw a significant increase (27%) in the number of complaints in 2020/21 compared to 2021/22.
3. The increase in complaints received by Intervention Support were primarily linked to attitude/behaviour of staff, lack of communication, and standard of service not met. As stated in the report the availability and capacity of staff

has continued to be the biggest challenge for Children's Services. The reporting year to the Department for Education ending 30 September 2021 saw a 75% increase in leavers compared with the year before, contributing to an increase in our turnover rate, from 14.1% in 2020 to 24.9% in 2021.

4. As stated 2021-22 saw complaints regarding 'attitude/behaviour of staff' increased by 27% compared to 2020-21. However, given the challenges many families have been facing with the cost of living crises and high levels of this is not unexpected. There have been significant improvements in the number of complaints received for inaccurate information reducing by 75% in 2021/22 compared to 2020/21. There has also been improvements in lack of communication and standard of service not met.
5. A large increase in the volume of contacts in September 2021 coincided with a large number of complaints from partners and families in relation to a lack of communication. Several strategies were put in place with partners to address the issues around communication and access to senior managers to address any issues. A lack of IT equipment including mobile telephones for SW's has been addressed by escalation from the Director of Children's Services.
6. The number of complaints upheld and partially upheld accounted for 44% (17) and (18) 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. It is important to note that there has been a significant increase, 64% in the number of complaints upheld, 17 in 2021/22 compared to 6 in 2020/21.
7. Response times have declined in 2021/22 with 30% (24) responded to within the 10 working day timeframe, 35.4% (28) within 11-20 days and 34% (38) taking over 20 days. Efforts will continue to improve response times, while recognising the increased complexities of cases and balancing the priorities of the service. Complaints continue to be received by email (37) as the preferred method with the next preferred method being online (24).
8. Monitoring information is based on the child(ren) within the family unit in which a complaint was made. During 2021-22 there a decrease across ages 0-5, and 10-14 with an increase of complaints involving children age 6-9, 15-17, and 18+. the highest increase being in the age group of 15-17. There are a low number of children that had a recorded disability, with the majority having Autism/Aspergers syndrome in 2021-22, which is similar to 2020-21. We know that overall we have low numbers of children accessing SEN Support in Schools, however the number of requests for Education, Health and Care Plan assessments has increased and we expect to see this continue in 2022/23. White British children have the highest representation and reflects the borough's population make up.

9. The number of compliments received in 2021-22 is lower than we would like (16) however this could be more about compliments not being shared with SCCI. Continued efforts to encourage staff within Children's Services to share compliments so these can be logged to reflect more accurately the good work being done.
10. The Complaints and Compliments action plan has been refreshed and will be monitored at quarterly meetings between the Social Care Complaints and Information Team, and the Children's Services Senior Management Team

## **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:**

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

There are no legal implications in noting the content of the Annual Report.

### **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.

This page is intentionally left blank



## Children's Services

### Annual Complaints and Compliments Report 2021 – 2022

Prepared for: Robert South, Director Children's Services

Prepared by: Johannah Philp Complaints & Information Team Manager

## Contents

Executive Summary .....	3
Introduction .....	4
Complaints .....	4
1.1 Ombudsman Referrals .....	4
1.2 Total number of complaints .....	5
1.3 Stages .....	5
1.4 Teams .....	5
1.5 Reasons .....	7
1.6 Outcomes & Learning .....	8
1.7 Response times .....	9
1.8 Expenditure .....	10
1.9 How Complaints were received .....	10
Monitoring Information .....	10
2.1 Age and Gender .....	10
2.3 Disability .....	11
2.4 Ethnicity .....	12
2.5 Religion .....	12
Members Correspondence .....	13
Compliments .....	13
Conclusion .....	14
Complaints and Compliments Action Plan .....	17

## 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 reporting period April 2021 to March 2022.

Children's services saw a 10% decrease in the number of complaints received during 2021-22. 79 complaints were received of which 17 were upheld, 17 were partially upheld, 25 were not upheld and 19 were withdrawn. The service saw improvements in most of the areas highlighted as concerns by complainants from the previous year, with the exception of the attitude/behaviour of staff. However, although this increased to 19 concerns about staff, only two of the complaints were upheld.

There was a very small increase escalating to a Stage 2 complaints, with seven investigations in total for 2021/22 compared to six in 2020-2021. There were a further 6 requests for Stage 2 investigations, that were not progressed through successful meetings with complainants to resolve issues.

There was a decrease in the number of compliments in 2021-22(16) compared to 2020-21(22) although, it is possible that whilst individual workers are receiving positive comments these are not necessarily being shared. The relevance of capturing all compliments received continues to be highlighted across all service areas.

The majority of issues raised were made on behalf of children and we continue to see low levels of complaints received directly from children and young people. The relaunch of our Mind of My Own (MOMO) App to allow children and young people to give feedback is a priority for children's services to ensure we put their voices at the heart of our work.

Since coming out of the Covid-19 pandemic lockdowns, Havering Council has continued to experience increased pressure on many service areas in the Council. Within Children's Services the availability and capacity of staff has continued to be the biggest challenge for Children's Services. A government study in 2019 prior to the pandemic highlighted the struggle local authorities were facing in recruiting experienced permanent Social Workers, this has only been exacerbated by the pandemic and Havering is no exception to these challenges. Findings by the Department for Education (DfE) Workforce report for 2021 highlighted nationally a significant increase in the number of children and family Social Workers leaving the profession during 2021 (the highest numbers in the last five years). It also highlighted a rise in vacancies from the previous year (again the highest number in the last five years), a rise in sickness rates and a rise in the number of agency workers nationally. All of which has been seen within Havering's Children's workforce.

Coupled with the workforce challenges, Children's Services has continued to see increased demand throughout 2021-22 from the previous year. The number of contacts and referrals received increased by 7% and 3% respectively, while the number of children entering care during the year increased by 85% (or by 19% when compared to 2019/20).

Demand modelling makes clear that we can expect contacts to continue to grow through to 2024, both as a result of the pandemic and as a result of the cost-of-living impact on families. The impact of the Covid-19 pandemic on many residents is complex and ongoing. We are seeing many families requiring support that have not accessed services before and may not have done so had it not been for the adverse effects of the pandemic. The most common assessment factor in Havering remains 'domestic abuse against the parent', although the number of assessments identifying this as a factor reduced by 7% when compared with 2020/21 (but increased by 25% when compared with 2019/20). We have also seen an increase in assessments identifying mental health of the child as a factor (up by 9% compared to 2020/21 and 58% compared to 2019/20), as well as a 13% increase in contacts relating to neglect.

Children's Services have continued to use learning from complaints and compliments to help shape services. Our systemic model of practice is focused on relational, strengths-based practice as well as inviting feedback loops to reflect on our practice. Children's Services will respond to the areas of improvement identified in this report and continue to utilise good practice examples to showcase what works well.

## Introduction

The 'Children Act 1989 Representations Procedure (England) Regulations 2006' govern complaints, representations and compliments received about Children'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 of Children's Services within 5 working days. The Director must issue their decision within 15 working days of receiving the recommendations.

## Complaints

### 1.1 Ombudsman Referrals

During 2021- 2022 we saw a decrease in the number of Ombudsman enquiries which dropped to four enquiries compared to the six enquiries in 2020-21. This is positive performance and suggests that initial complaint responses are improving in quality.

One found maladministration with injustice; relating to the delay in response to complaint handling, this resulted in an apology being issued along with a good will payment of £300.00. The Ombudsman finding also suggested that the local authority review their Special Guardianship leaflets to ensure that information was up to date in relation to support available through PAC-UK.

	Apr 21-Mar 22	Apr 20-Mar 21	Apr 19-Mar 20
Maladministration (no injustice)	1		
Maladministration & Injustice	1	2	2
No maladministration after investigation		1	2
Ombudsman discretion			
Investigation with Local settlement			
Outside Jurisdiction	1		
Investigation Discontinued	1		
Premature/Informal enquiries		2	1
Closed after initial enquiries – no further action		1	1
<b>Total</b>	<b>4</b>	<b>6</b>	<b>6</b>

## 1.2 Total number of complaints

During 2021-2022 we saw a slight (2.6%) decrease in the number of enquiries received (74) compared to 2019-20 (76). Enquiries do not fall within the remit of statutory or corporate complaints and are not included in any further data within this report.

There were a total of 79 complaints that went through the formal Stage 1 process in 2021-2022. This means that 2.09% of the children and young people receiving services within Havering Children's Services made a formal complaint. This was a 10 % decrease in the number of complaints received compared to 2020-21 (87).

There was an increase by one for complaints progressing to Stage 2 with a total number of seven for the year. There were a further 6 requests for Stage 2 investigations, that were not progressed through successful meetings with complainants to resolve issues

No complaints were escalated to Stage 3 this reporting year.

	Enquiries	Stage 1	Stage 1 escalated to Stage 2	Stage 3 Review Panel
2021-22	74	79	7	0
2020-21	76	87	6	1

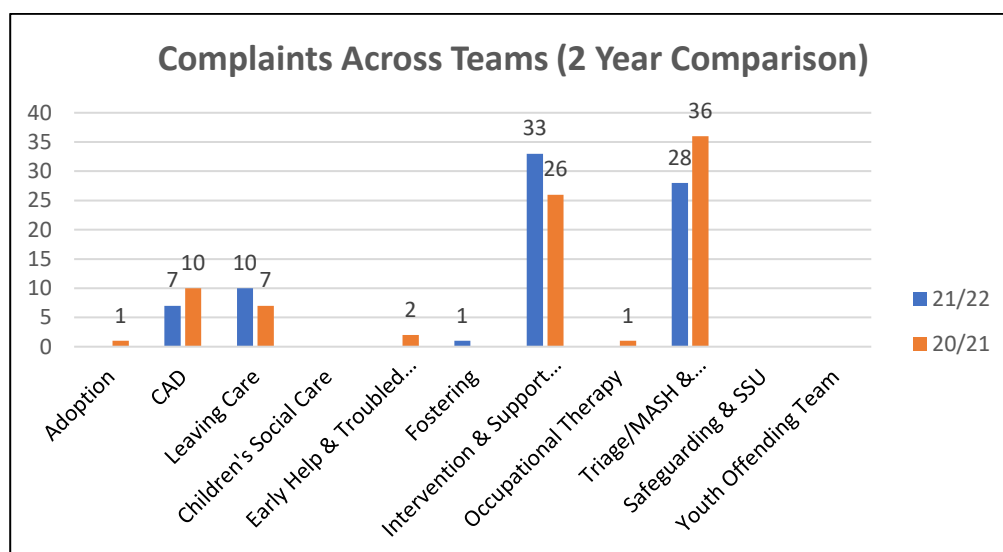
## 1.3 Stages

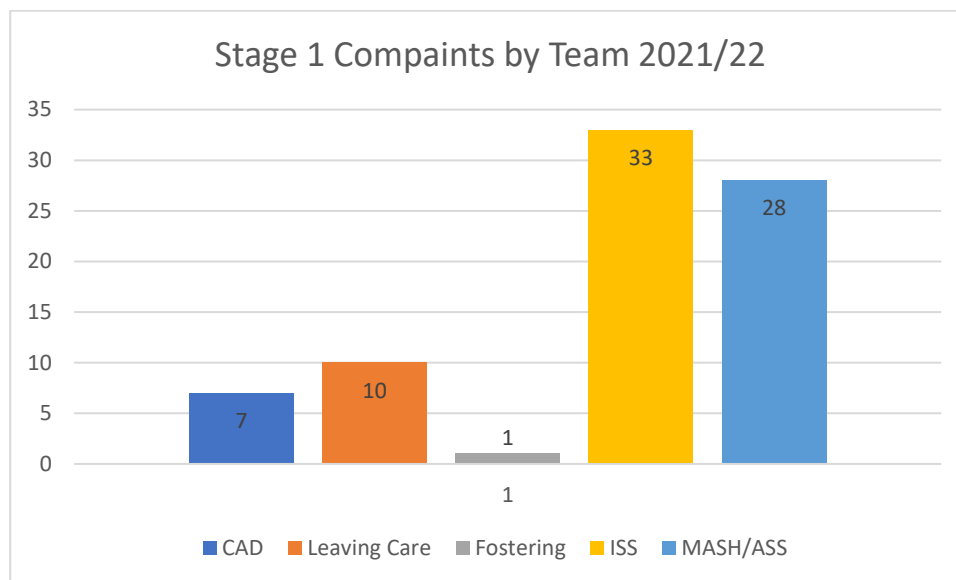
There are a very small number of complaints that have escalated to a stage 2 investigation in 2021-2022. The increase of one investigation remains below 9% of the total number of Stage 1 complaints.

Of the seven Stage two complaints in 2021- 2022, three complaints remain ongoing in 2022-2023, two were withdrawn, one partially upheld with apology given, and one upheld with apology given, training identified, and financial adjustment made.

No complaints were taken to Stage 3 Review Panel in 2021/22.

## 1.4 Teams





Improvements were seen in the number of complaints against the Triage/MASH & Assessment, with a decrease of 22% in 2021/22 compared to 2020/21. Despite the decrease in complaints, it is noted that almost half of the complaints received were in relation to attitude/behaviour of staff and inaccurate information being given or recorded.

The Intervention Support Service saw a large increase (27%) in the number of complaints from 26 in 2020/21 to 33 in 2021/22. The three main reasons for these complaints were attitude/behaviour of staff, lack of communication, and standard of service not met.

As stated, the availability and capacity of staff has continued to be the biggest challenge for Children's Services. The year ending 30 September 2021 saw a 75% increase in leavers compared with the year before, contributing to an increase in our turnover rate, from 14.1% in 2020 to 24.9% in 2021. Havering is not unique. The DfE Children's social work workforce report 2021 in England highlighted the number of children and family Social Workers leaving during 2021 was 4,995, up by 16% compared to 2020 (the highest number in the last 5 years). Nationally vacancy rates were up by 7% from last year (again the highest number in the last 5 years). In Havering, our vacancy rate on the 30 September 2021 increased only marginally but from an already high figure of 28.4% in 2020, to 29.1%. Nationally, sickness rates rose to 3.1% and although Havering saw a reduction from 3.6% to 2.0% absence, this is likely to be underreported, as sickness of agency workers is not recorded in the same way. The use of agency workers increased only very slightly nationally and shows a reduction in Havering, but this represents a 'snapshot' on 30 September each year and does not reflect the rise in the use of agency staff in year, specifically in the ISS (Intervention Support Services) service where there was a significant churn with some agency staff not staying for long periods. The impact of the increase in staff turnover and high caseloads caused by vacancies will account for the reduction in communication and staff not meeting standards of service.

A large increase in the volume of contacts in September 2021 coincided with a large number of complaints from partners and families in relation to a lack of communication. Several strategies were put in place with partners to address the issues around communication and access to senior managers to address any issues. A lack of IT equipment including mobile telephones for SW's has been addressed by escalation from the Director of Children's Services.

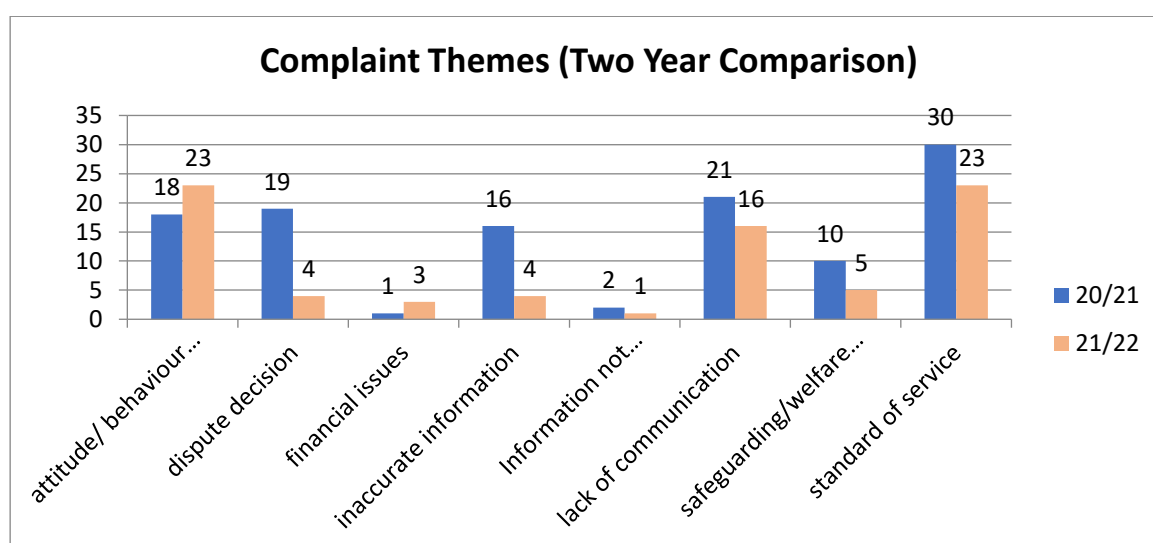
There are now clear communication pathways in place to ensure that partners and families are informed of outcomes of contacts by way of letter communication. There are also strategic leads linked to school clusters to keep an open-door communication in place. Structure charts of the service are shared out to cluster leads and the Designated Safeguarding Leads (DSL's) to support partners being able to reach the correct person in a timely manner. A newsletter is also to be shared starting from September 2022 which will offer partners updates to service changes.

Care Resources saw a very slight increase in complaints rising from 7 in 2020/21 to 10 in 2021/22, five of these complaints were due to standards of service not met, four of which were upheld with apologies given and for one complainant a financial adjustment was made.

Within our Children and Adults with Disabilities (CAD) services we have seen more demand for services, despite this, there has been a decrease in the number of complaints from 10 in 2020/21 to 7 in 2021/22. We saw a significant increase with children returning to school post-Covid-19 lockdowns in behaviour support requests (113% increase in 2021-22 compared to 2020-21, and up by 52% compared to 2019/20) as well as an ongoing increase in children receiving Education, Health and Care Plans. We are working with our safeguarding partners and third sector colleagues to respond to a decrease in children being 'school ready' and to ensure the continued identification of Young Carers.

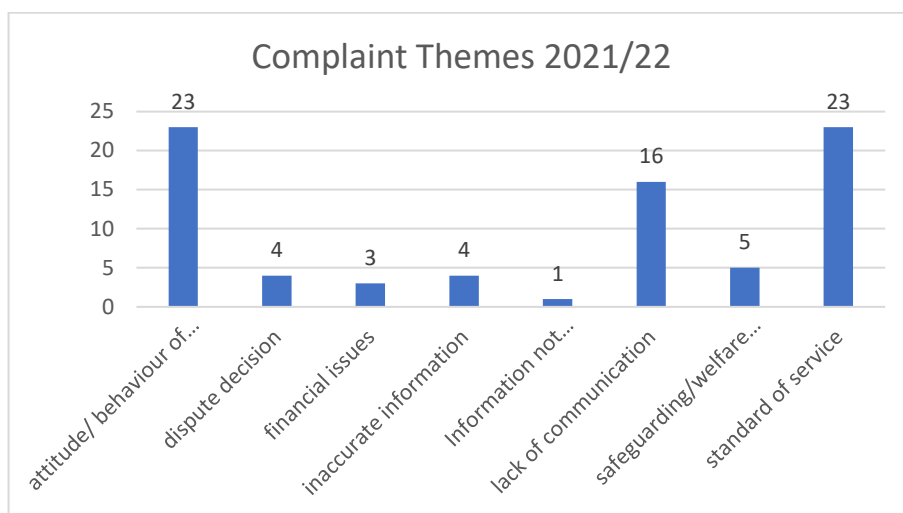
## 1.5 Complaint Themes

Complaints vary in their content but there are some important themes that we can learn from in the service to improve practice and enable us to develop better relationships with children, young people and their families. Every complaint received is carefully considered and enables us to review our processes and practices.



As you can see from the table above the themes with the two highest number of complaints in 2020-2021 were the standard of service and lack of communication. During 2021-2022 there has been improvements and a reduction in the number of complaints and improvements across all areas other than financial issues and the 'Attitude/behaviour of staff'. However, given the challenges many families have been facing with the cost-of-living crises and high levels of this is not unexpected. Encouragingly for Children's Services there has been a significant drop in the number of complaints for 'Disputing Decision' which has reduced from 19 to just 4 (78%). 'Inaccurate Information' complaints have also reduced from 16 to 4 (75%). Lack of Communication has gone from 21 to 16 (23%) and 'Standard of Service' from 30 to 23 (23%).

In 2021- 2022 the biggest increase in the number of complaints was about the 'Attitude/behaviour of staff' which increased by 27%. However, less than a third of the reported complaints in this area were upheld or partially upheld. Many complaints giving 'attitude/behaviour of staff' were in relation to parents being unhappy about the decisions that had been made and reflects partly on what could be seen as unwelcomed decisions or professional challenge. The service has relaunched our systemic model of practice and we are working with staff on the use of professional language or jargon when we are discussing or planning with families so that families, can recognise themselves and the concerns of professionals within assessments, reports, and plans. We are also using one to one supervisions and group supervisions to invite reflections from staff as to their relationships with children and families and how our interventions are empowering families.



## 1.6 Outcomes & Learning

Learning from complaints forms part of Havering's quality assurance framework and is used to plan actions and improvements both on a strategic level as well as for individuals both practitioners and supervisors.

During 2021-2022 the number of complaints that were 'upheld' decreased by more than half. However, those 'partially upheld' more than doubled (28) compared to 2020-21(12). Complaints 'not upheld' rose slightly by 5% in 2021-22(40) compared to 2020-21(38).

For those complaints upheld or partially upheld these resulted in an apology, linked to further information or explanation being provided, as shown in the breakdown of upheld complaints below. This appears to be reflected in the increases shown in 'lack of communication' and 'inaccurate information'. Consideration needs to be given on how information is communicated to ensure this is given in a clear and concise way and that it is understood by children, parents, and carers. This is key to ensure they are always aware of either the reasons for intervention or the limitations for Children's Services to intervene where there may be discord among separated parents or family members in relation to children. Part of the action plan for 2022-2023 will focus on how information and planning is communicated to parents/families to ensure consistency and to provide awareness of the role of Children's Services when it comes to their intervention.

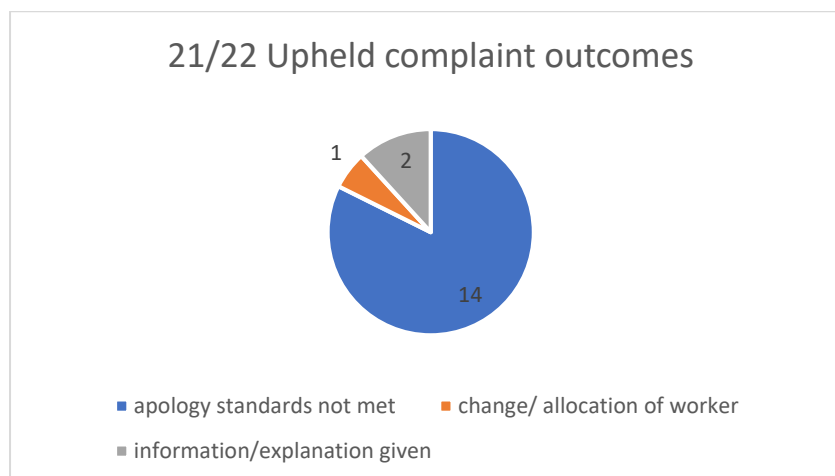
Whilst there were improvements in the number of complaints regarding inaccurate information showed an increase during 2020-21 and although the pandemic has caused pressures on staff resources, this will need to be revisited through quality assurance and the continued audits of case records. During 2020-21 Children's Services have developed Case Recording Standards which details the roles and responsibilities of all staff in the timeliness and accuracy of records. This is available to all staff and will be further developed as part of a Staff Handbook in 2021-22.

As much as the pandemic has provided accelerated progression in the use of technology in our working lives, it has become evident that the impact of face-to-face conversations cannot be replicated digitally and now that restrictions have been lifted, it is the service position that all visits are undertaken in person, unless there is valid reason not to.

Of the one Ombudsman Investigation that was partially upheld the main reason for this was the significant delay the complainant experienced at Stage 1 of the process; this is an area that requires improvement for Children's Services. The Assistant Director and Complaints & Information Team Manager are working collaboratively to achieve more timely responses.

	Upheld	Partially upheld	Not upheld	Withdrawn	Total
21/22	17	18	25	19	79
20/21	6	28	40	13	87





During 2021-22 whilst the number of Covid-19 lockdowns reduced, the pandemic remained a national issue with some services in the council still being diverted to meet the national crisis. It is acknowledged that with the Covid-19 pandemic, came changes to ways of working, with some face-to-face contact being restricted, and pressures put on families impacting on family life.

Children's Services reflected on these challenges and refreshed our systemic model of practice, providing in-house practice application workshops aimed at practice improvement. The workshops focused on 'the doing' aspects of our Face-to-Face Model in relation to use of questions as interventions and permission-seeking to increase levels of safety and trust with children and families. Further training is being undertaken to allow staff to focus on whether interventions are purposeful, planned and focused to both improve how we work with children and families and to improve and further decrease the number of complaints. Alongside this there has been further learning and support materials for staff online, including online webinars on Domestic Abuse.

Children's Services have undertaken a significant amount of work to improve the forms and processes on the case management system to improve accuracy and efficiency. Further work is planned within 2022 – 2023.

## 1.7 Response times

Stage 1 complaint responses within 10 working days went down slightly in 2021-22(24) compared to 2020-21 (27), there was also a decrease in those being responded to within 11-20 working days. 65.8% of complaints were responded to within 20 working days. The number of complaints being responded to over 20 days improved slightly to 34%. This is an area covered in the complaint team improvement plan and the manager is working closely with the Assistant Director to ensure there are improvements in this area.

	Within 10 days		11-20 days		Over 20 days	
	Apr 21- Mar 22	Apr 20- Mar 21	Apr 21- Mar 22	Apr 20- Mar 21	Apr 21- Mar 22	Apr 20-Mar 21
<b>Stage 1</b>	24	27	28	31	27	29
<b>%</b>	30.3%	31%	35.4%	36%	34.1%	33%

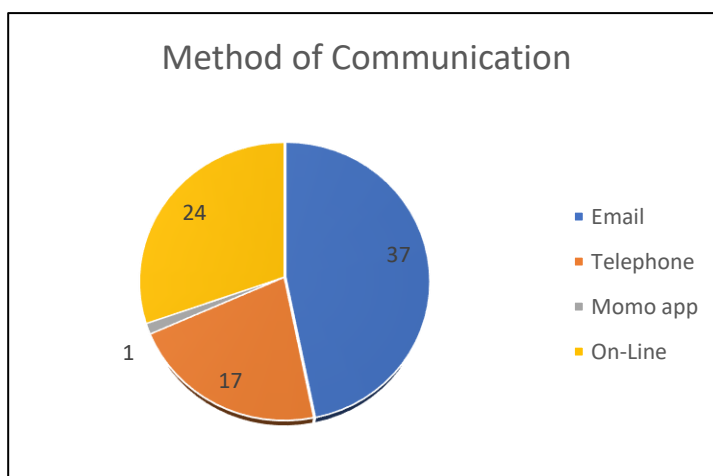
## 1.8 Expenditure

The cost of independent investigations increased significantly in 2020-21, due to the complexities of the complaints. This resulted in a 57% increase in spend year on year, it is not expected that this will increase again in 2022/23 due to the work being done to reduce the number of Stage 2 complaints.

	Publicity/ leaflets	Independent investigators	Payments	Total
Apr 2021 – Mar 2022		£14,413		£14,413
Apr 2020 – Mar 2021		£6,087		£6,087

## 1.9 How Complaints were received

Email remained the preferred method of contact during 2021-22 but decreased by 35% compared to 2020-21. The number choosing to complain online has increased by 33% which is encouraging. Complaints received by telephone have increased in 2020-21 by 35%, it is important to note that telephone calls are always followed up with an email outlining the content of the conversation. Given the numbers of complaints received by email and telephone, there may still be thought to be given to the user experience of the online form.



	Letter	Email	Telephone	MOMO App	Online
2021-22	0	37	17	1	24
2020-21	1	57	11	0	18

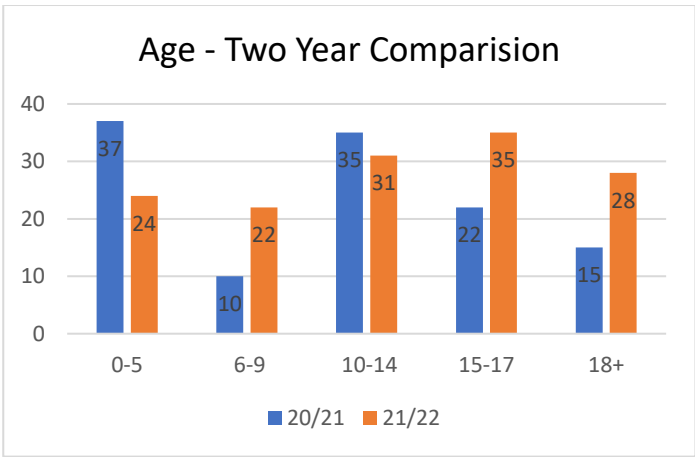
## Monitoring Information

Whilst the monitoring information within the report is based on the child/young person the complaint is in relation to, we are able to record that of the 79 Stage 1 complaints received, 67 were submitted by parents or family members, 7 were submitted by young people receiving social care support and 5 were submitted by advocates on behalf of the young person.

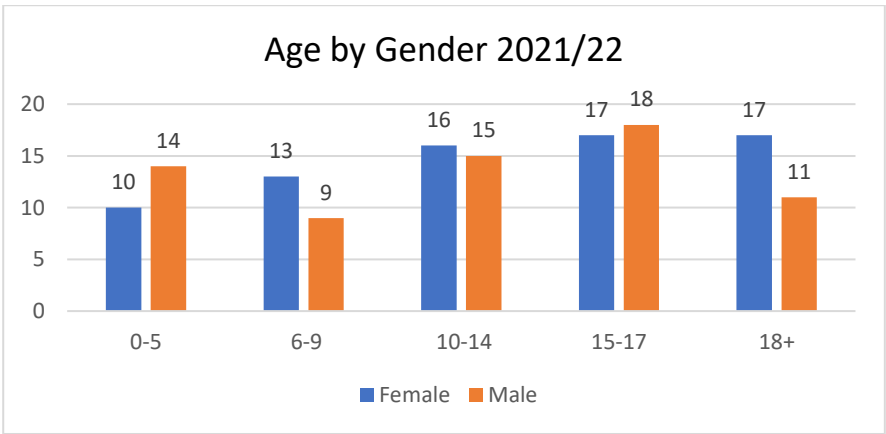
## 2.1 Age and Gender

It should be noted that data collected for the monitoring information will include all children within a family unit from which a complaint is made.

During 2021-22 there a decrease across ages 0-5, and 10-14 with an increase of complaints involving children age 6-9, 15-17, and 18+.

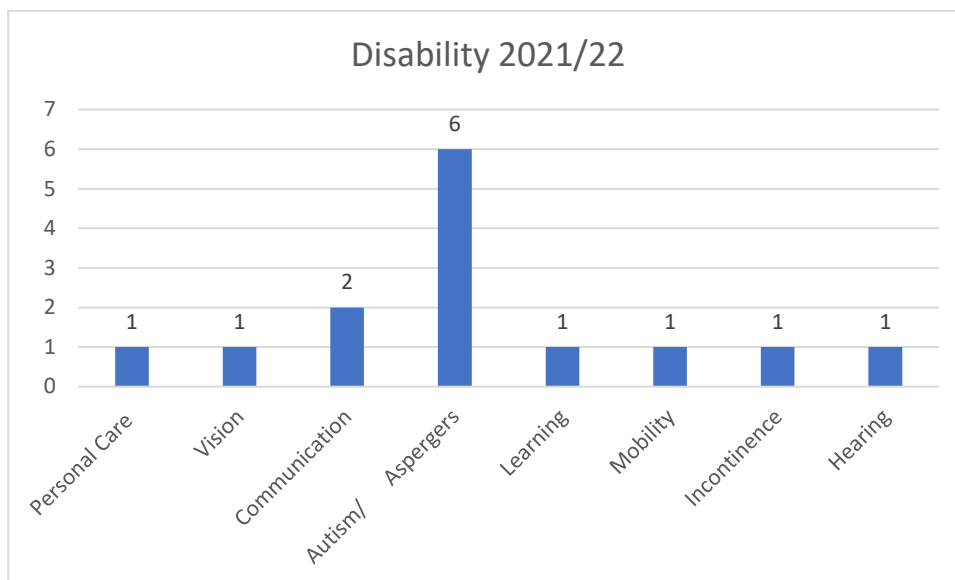


Across age ranges 0-5 and 15-17 there were a higher number of complaints in relation to males in 2021/11. Complaints relating to females were higher across age ranges 6-9, 10-14, and 18+.



### 2.3 Disability

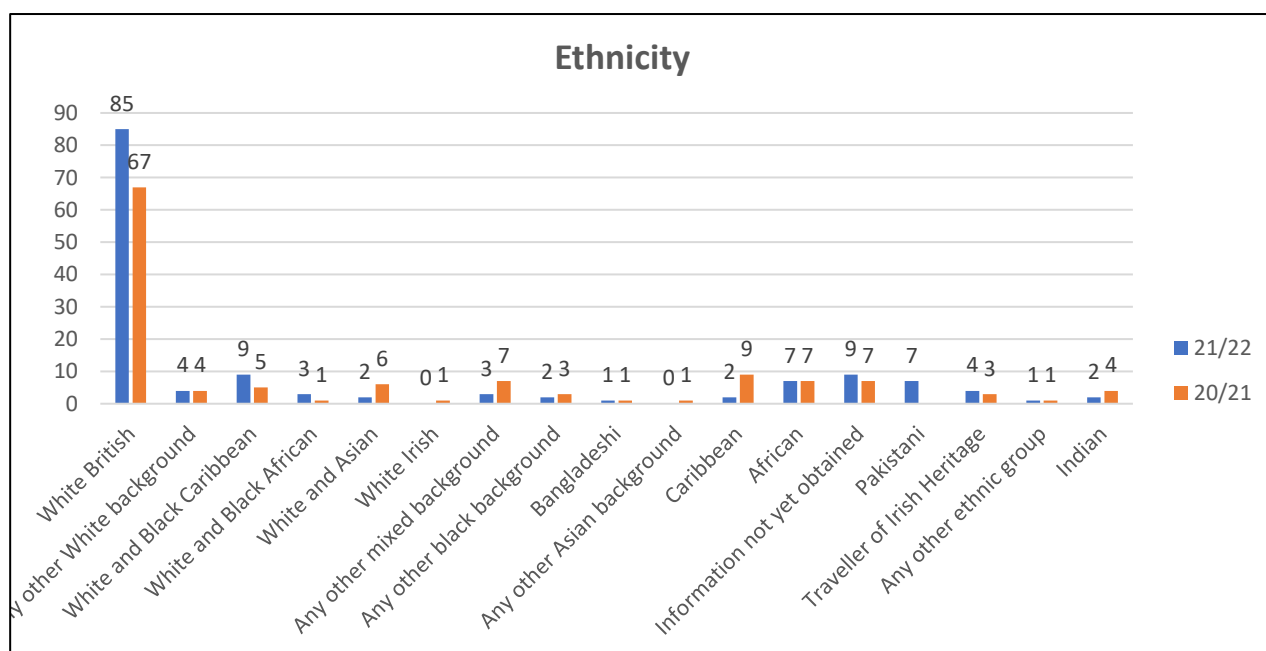
There are a low number of children that had a recorded disability, with the majority having Autism/Aspergers syndrome in 2021-22, which is similar to 2020-21. We know that overall we have low numbers of children accessing SEN (Special Educational Needs) Support in Schools, however the number of requests for Education, Health and Care Plan assessments has increased and we expect to see this continue in 2022-23.



## 2.4 Ethnicity

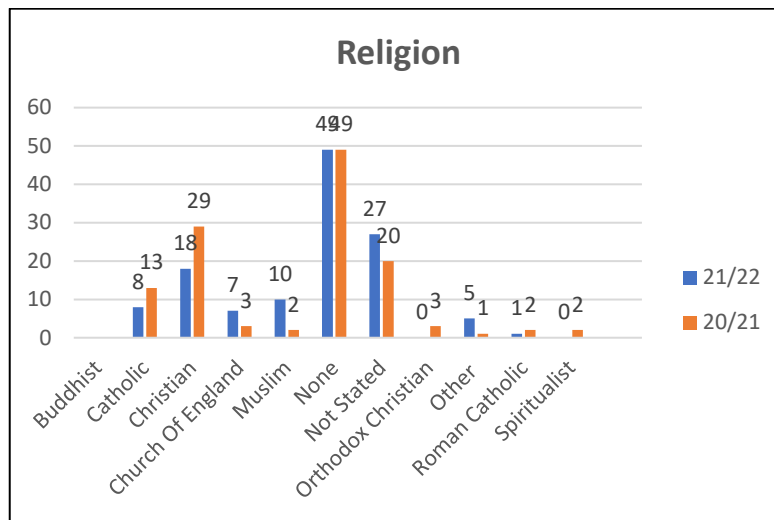
The high number of 'White British' continues to reflect the population within Havering however is not representative of the service users across Children's Services. There are representations across many ethnicities with slight increases shown across White and Black Caribbean and Pakistani.

As part of the work being undertaken by the service to understand the disproportionate representation of some BAME groups in our statutory services, we need to ensure that all families and young people feel able and empowered to complain or to share compliments and good news.



## 2.5 Religion

These figures are defined by how people report their religion and we do not group together. There is a significant increase in those recorded as having 'none' and this may be reflective of the number of children within age-range 0-5. Those recorded as 'Other' have had a slight increase in 2021-22 and include Hindu, Sikh, and those choosing to declare simply 'other'. There has also been an increase in those choosing not to record their religion.



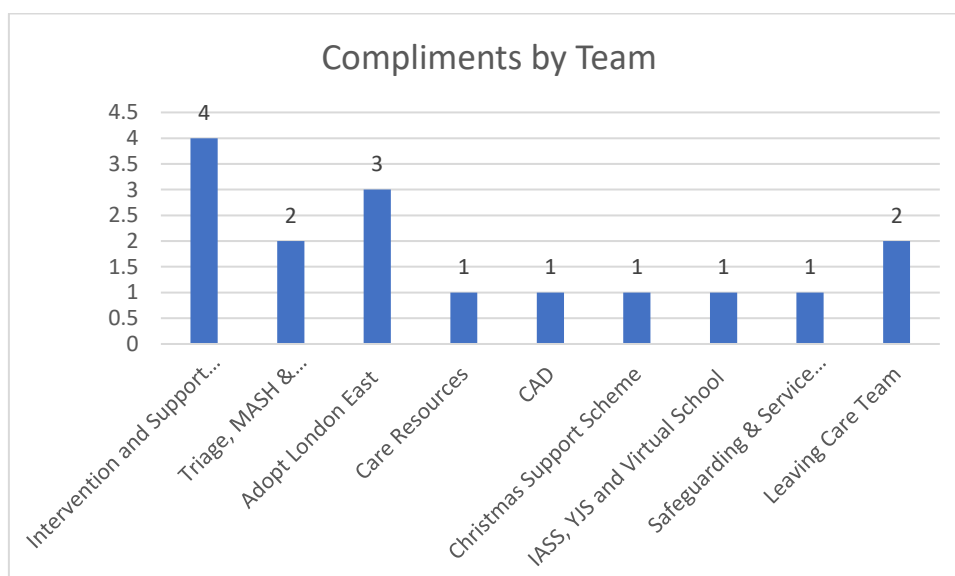
## Members Correspondence

The number of Members correspondence decreased by 23% in 2021-22 (56) compared to 2020-21 (69) however there was a decline in those being responded to within timeframe with only 71.5% percent meeting targets. Timescales is an area for improvement in 2022-2023.

	2021-22	2020-21
Members Correspondence	56	69

## Compliments

There has been a decrease in the number of compliments in 2021-22(16) compared to 2020-21(22), however, this could be due to them not being directed to SCCI (Social Care Complaints & Information), this is something that will need to be cascaded to staff and managers as a reminder for recording purposes and the capturing of good practice for Children's Services, this could also be due to the impact of the pandemic. It is particularly encouraging to see that the Intervention Support Service received the highest number of compliments, and that even though received the highest number of complaints, that their good work was appreciated. 50% of the compliments recorded are from other professionals either internally or externally.



Some examples of the appreciation shown are given below:

1. Appreciation shown for a Social Worker (Adopt London)

*"I have no words to describe my gratitude to X, she has been 'a rock' to me fighting our corner and getting us desperately need support. She continues to support us and with her help I am starting to believe in myself again. As a parent I believed I had failed, she has allowed me to see that I had not had the support or resources I needed to succeed, and she has given us as a family the confidence is putting into practice what are learning in order to support our amazing daughter."*

2. Appreciation shown for a Social Worker (CAD (Children and Adults with Disabilities))

*"I am writing to express my gratitude for the way in which my application for Respite was dealt with by X. I am truly thankful for being appointed X to deal with my application as X was very patient, professional, dependable and displayed empathy the right amount of empathy. She was able to communicate effectively including actively listening, providing a good explanation of the process and a non-judgmental attitude. X came across as honest, transparent and caring which I greatly appreciate Teju also had the ability to identify and understand my needs effectively."*

*I am overall pleased with the service I have received, and I therefore wanted to express my gratitude".*

3. Appreciation shown for Head Of Business Management (Children's)

*"Thank you, X, for helping me I just got an email from Mr Councillor X addressing how it was processed on certain dates I emailed him back for his support but I told Mr Councillor X it was already sorted out by X . I never have complained about this or about you which is why I needed to email you all you done was support me explaining the situation I waited patiently."*

4. Appreciation shown for a Social Worker (Fostering)

*"The process was really smooth."*

*"X was fantastic. We couldn't rate her highly enough. She was efficient, flexible and respectful. She's a lovely person."*

5. Appreciation shown for a Social Worker (ISS)

*"I am so grateful you intervened and took control of the situation, given the circumstances it was at such short notice and maybe out of the blue. Your professionalism as left me speechless, and I hope others look up to you and take on board how you approached and dealt with my situation. Again, Thank you so much for the outcome that's in the best interest in keeping me involved in my son's life. I cannot thank you enough X !!"*

6. A care leaver showing appreciation for their key worker (Care Resources)

*"Thank you so much for today. I honestly appreciate it and I am so blessed that god blessed me with a social worker like you, I'm really at my lowest right now and really needed this. You are like an angel that god sent down to me. I thank you again for always being there when I need you. I will always appreciate and hope that you get and achieve everything that you want because you absolutely deserve it"*

## Conclusion and recommendations

Although we have seen a decrease in the number of complaints in 2021-22, we continue to see a small number that escalate to a Stage 2 investigation. There has been an improvement in the use of informal meetings with complainants that has resolved a number of issues and resulted in several complaints not progressing to a Stage 2 investigation. The service and complaints team will continue to advocate meetings and monitor the impact this may have on the number of Stage 1 complaints escalating.

Complaints play an important role in identifying and embedding service improvements. Currently due to the workforce issues response times are not being consistently met. This is having a negative impact on taking the learning from complaints to the service in a timely manner and takes up staff time in chasing outstanding complaint responses. The current Assistant Director of Children's services was appointed during the 2021-2022 and has a clear plan with the manager of the complaints team in taking forward learning in a more robust timely manner.

Liquid Logic, the Social Care case recording system will be further developed and should prove a better tool to record and report complaints, however this will now start to be used until 2022/23 once the necessary enhancements have been implemented.

The recording and monitoring of complaints is continually being reviewed and it is recognised that performance in this area needs to be improved, this is something that the Complaints & Information Team Manager and Assistant Director of Children's Services will collaborate on in 2022/23.

Children's Services Improvement Board looks at quality assurance and learning from complaints, while also linking to appropriate training and, going forward, quarterly meetings will be held with the Children's Services Senior Management Team to review performance and monitor progress against the action plans on any complaints received in the preceding quarter.

Although Children's Services may be receiving compliments, teams again need 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. Managers and staff will be reminded to record compliments with the Complaints & Information Team

**PAGE DELIBERATELY LEFT BLANK**



## Complaints and Compliments Action Plan

	Task / Action	Owner	By Date	Intended Outcome / Impact	Target Completion Date	Quarterly Update
1	<p>Review and update process for receiving, allocating and responding to complaints within Children's Services including clear roles and responsibilities.</p> <p>Development of a robust structure within the process, as to tasks that should be completed within the ten-day response timescale e.g., phone call to complainant.</p>	Tara Geere/ Johanna Philp	By May 22	Response timescales will be improved with a clear process in place, and regular senior management oversight.	Revised process to be in place by <b>31/7/22</b>	
2	<p>Quarterly meetings between SCCI team and children's senior management team to be diarised.</p> <p>The purpose of this will be to review any complaints and compliments from the preceding quarter, discuss themes/learning/ reflection of disproportionality and follow up on any current or overdue tasks</p>	Tara Geere	By April 22	Improved management oversight of complaints will improve timeliness and quality of responses	First meeting took place 11/7/22 and EMM by end July	
3	<p>Bi-annual practice week to include a 'lessons learned from complaints' session for all social care staff and managers.</p> <p>Purpose being to come to gather to consider themes and learning from complaints and compliments received in the preceding six months as well as learning from what happened at each stage to prevent escalation.</p>	<p>Lynne Adams / Candice Stephens</p> <p>Practice Development Manager</p>	By April 22	Learning from complaints becomes a whole service task, with clear evidence for Ofsted as to how we feed learning from complaints back into the service	To be in place for Practice Week <b>Nov 2022</b>	

4	All managers to ensure that compliments are captured and shared with SCCI team for collation and reporting; to take responsibility for ensuring that a log of all compliments forwarded is kept up to date	All Heads of Service, Group Managers and Team Managers	From April 22	Compliments are recognised and celebrated with the workforce and any learning from good practice is utilised.	On-going	
5	Children's Services Case Recording Standards to be a regular discussion item at service and team meetings, and case recording to be a standard item within the PDR for all case holding practitioners and managers.	All Heads of Service and Group Managers	From April 22	Improved case recording should result in fewer complaints regarding improper or inaccurate recording of information.	To be in all PDRs for 2022/23	
6	Introduction of a more formal process for learning from complaints, local and national serious case reviews / rapid reviews to be shared consistently across the service and partners.	Kate Dempsey / Practice Development Manager	From April 22	Practice development and learning is disseminated across the service to ensure positive changes occur as a result of serious incidents.	TBC	
7	Sufficient information about the purpose of interventions with families, along with detail about the process and next steps to be shared with all relevant parents and children. To be evidenced as part of case recording and reviewed in supervision and quality assurance activity. Training re purposeful, planned and focused interventions to be revisited with all staff teams and how that sits with customer service.	Tamsyn Basson/ Helen Harding/ Petra Schmidt	From April 22	Reduction in the number of complaints where families have not been provided sufficient information about Children's services interventions	Training by September 2022	
8	Process to be developed for families to be notified in writing of any significant changes to service delivery, and the reasons why	Tamsyn Basson /	From April 22	Improved communication regarding significant changes should result in fewer	September 2022	

	e.g., new social worker or any significant decisions made (for example, family time arrangements, change of care plan or end of intervention)	Helen Harding		complaints regarding poor communication		
9	All managers to be responsible for Quality assuring documents and ensuring compliance with data protection regulation (GDPR) within key documents such as assessments and care plans before they are shared; to be checked through quality assurance processes	All Heads of Service, Group Managers and Team Managers	April 22	All information shared is relevant, proportionate and compliant with our duties under data protection regulation, therefore reducing the likelihood of complaints in this area.	On-going	
10	All staff to have GDPR training	All Heads of Service, Group Managers and Team Managers	By September 22	To ensure improved understanding of the legislation and to work within guidelines/ our duties under the data protection regulation.		
11	Review of the CAD services caseloads to ensure capacity for EHCP and improve timescales.	Caroline Penfold	By September 22			

This page is intentionally left blank

## APPENDIX 2

# Children's Services - Education Services

## Annual Report 2021 – 2022 Complaints and Compliments

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

**Prepared by: Johannah Philp,  
Complaints & Information Team Manager**

	<b><u>Contents</u></b>	<b><u>Pages</u></b>
	<b>Executive Summary</b>	<b>3</b>
<b>1</b>	<b>Ombudsman Referrals</b>	<b>3</b>
<b>2</b>	<b>Total Number of Complaints</b>	<b>4</b>
2.1	- Service Areas	4
2.2	- Reasons	5
2.3	- Outcomes	7
2.4	- Enquiries	7
	- Response Times	8
<b>3</b>	<b>Members Correspondence</b>	<b>9</b>
<b>4</b>	<b>How complaints were received</b>	<b>9</b>
<b>5</b>	<b>Compliments</b>	<b>10</b>
<b>6</b>	<b>Conclusion</b>	<b>10</b>

## **Executive Summary**

At London Borough of Havering we believe we have a contribution to make in improving outcomes for children and young people by supporting education providers to be as effective and efficient as they can be in their day to day work.

The service works with schools, academies, colleges and early years providers to provide critical education services. With a long established history, we have strong partnerships and relationships with key stakeholders in these institutions ensuring high quality day-to-day support.

As well as providing support for education settings, the service also has statutory responsibilities for ensuring high quality provision for children from early years, to reception, and throughout all their schooling to aged 18, and up to 25 years for those young people with learning difficulties and disabilities (LDD), as well as the statutory responsibility for the placement of those children and young people, via the statutory admissions process and early education entitlement placement processes.

The service also provides support for children and young people with special educational needs and disabilities across education and social care, and are responsible for implementing the legislation under the Children and families Act 2014, working together to bring about coordinated support for children, young people and their families. Collectively they are responsible for the Education Health and Care assessment and planning process, support from advisory teachers and educational psychologists in schools and the children social care statutory processes around Children in need, Child protection and looked after Children.

The number of Corporate complaints significantly increased within the year, with many complaints relating to schools, that may need to be referred to their own complaints process. Information is still collated in relation to these type of complaints and are referred to as enquiries within this report.

Overall response times have delined slightly with 65.3% being responded to within timescale compared to 68% in 2020/21, however, the number of complaints received has almost doubled from 29 in 2019/20 to 75 in 2020/21.

The service area has been relatively stable, however, response times may have been impeded due to increased pressure as the country came out of lockdown. Efforts will need to be made in order to improve response times, across complaints. Although member enquiries are slightly down, efforts will be made to improve response times for both corporate complaints and enquiries.

### **1. Ombudsman referrals**

Encouragingly there have been zero Ombudsman enquiries for 2021/22 compared to 1 maladministration during 2020/21.

## 2. Total number of complaints

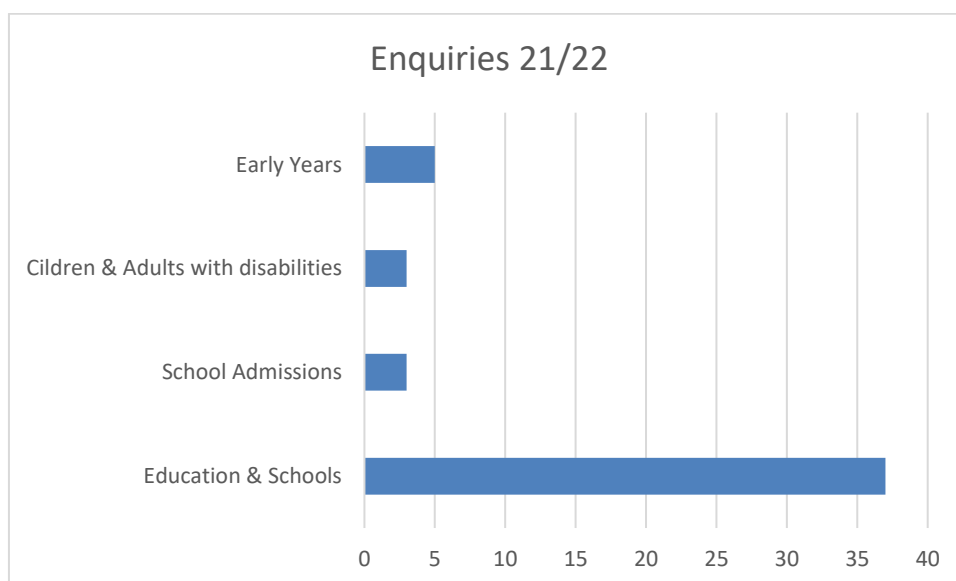
The total number of Corporate Complaints have significantly increased from 7 in 2020-21 to 26 in 2021-22, and are reported within the Corporate Complaints reports. Enquiries have also increased from 32 in 2020-21 to 49 in 2021/22. Enquiries are complaints received that relate to schools, academies or colleges that may need to be taken through their own complaints procedure. It is likely that the low number of complaints in 2020/21 are as a result of the pandemic, many schools were still restricting attendance in line with Government policy, and many parents are likely to have had other priorities during such a difficult time.

	Corporate Complaint	Enquiry	Total
<b>2021/22</b>	<b>26</b>	<b>49</b>	<b>75</b>
<b>2020/21</b>	<b>7</b>	<b>32</b>	<b>39</b>
<b>2019/20</b>	<b>22</b>	<b>35</b>	<b>57</b>

### 2.1 Service Areas

The following table shows the breakdown of enquiries received. As expected the highest number (37) are those for Education & Schools, referred to the relevant education provision.

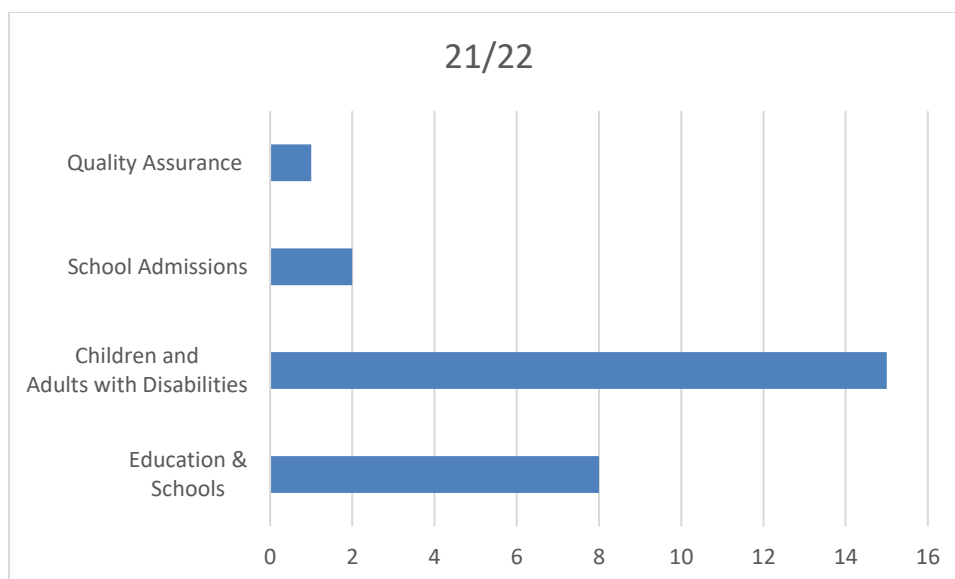
	Education & Schools	School Admissions	Cildren & Adults with disabilities	Early Years
21/22	37	3	3	5





The following table shows the breakdown of Corporate complaints received.

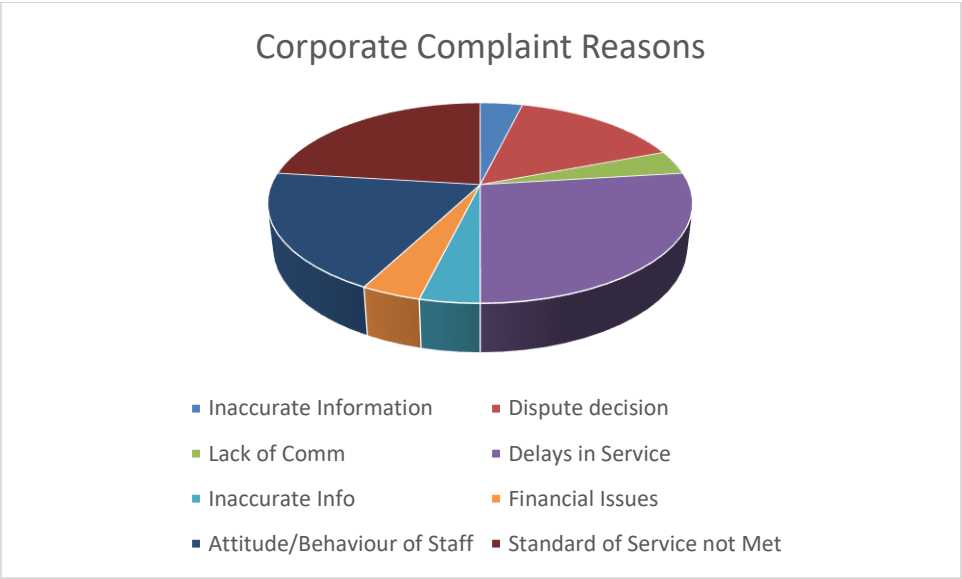
	Education & Schools	Children and Adults with Disabilities	School Admissions	Quality Assurance
21/22	8	15	2	1



## 2.2 Reasons

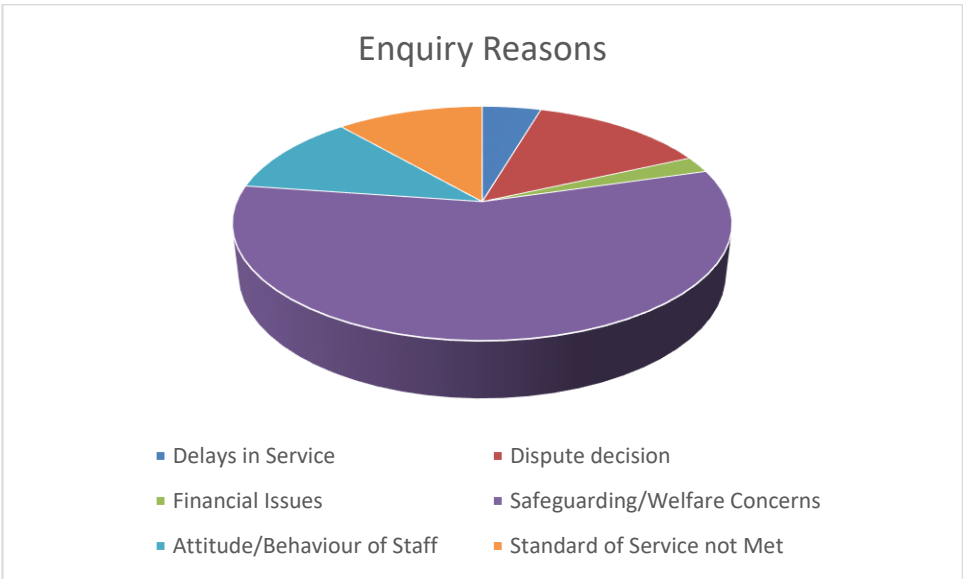
Below shows the breakdown of reasons for Corporate Complaints. 'Delays in service, disputing decisions and standards of service not being met and attitude/behaviour of staff are the main reasons for complaints.

Inaccurate Information	Dispute decision	Lack of Comm	Delays in Service	Inaccurate Info	Financial Issues	Attitude/Behaviour of Staff	Standard of Service not Met
1	4	1	7	1	1	5	6



The table below shows the breakdown of reasons for enquiries and relate to those complaints relating to school, academy or college issues. The main reason by far is 'safeguarding/welfare concerns'.

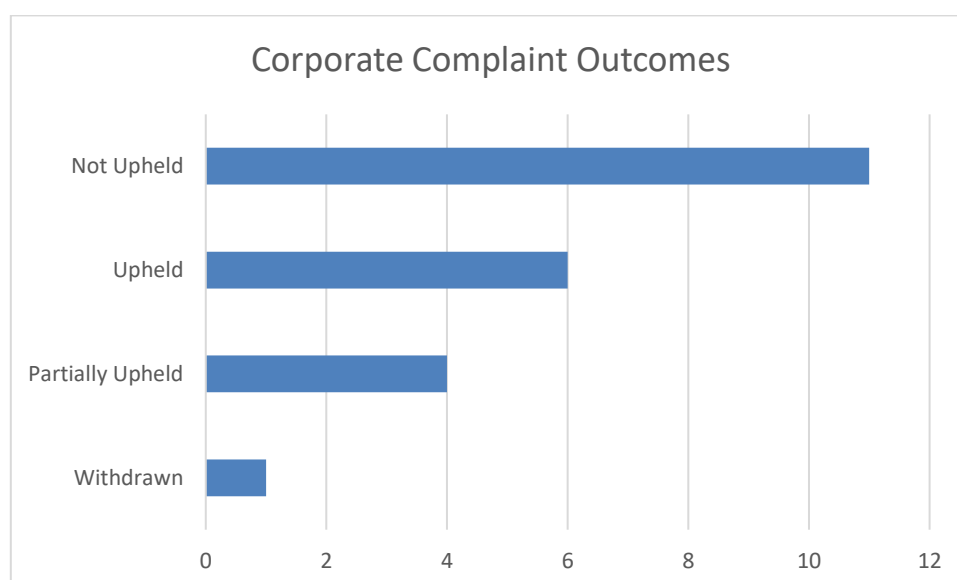
Delays in Service	Dispute decision	Financial Issues	Safeguarding/Welfare Concerns	Attitude/Behaviour of Staff	Standard of Service not Met
2	6	1	25	5	5



## 2.3 Corporate Complaint Outcomes

Of the Corporate Complaints received, eight were not upheld and explanation was given, four were partially upheld and explanation given, six were upheld and apology given, one due to lack of communication, two for delays in service and three for standard of service not met. Upheld complaints are reviewed in order to feed into the learning for the service to identify areas for improvement. Four complaint outcomes are yet to be determined

	Withdrawn	Partially Upheld	Upheld	Not Upheld
Corporate	1	4	6	11

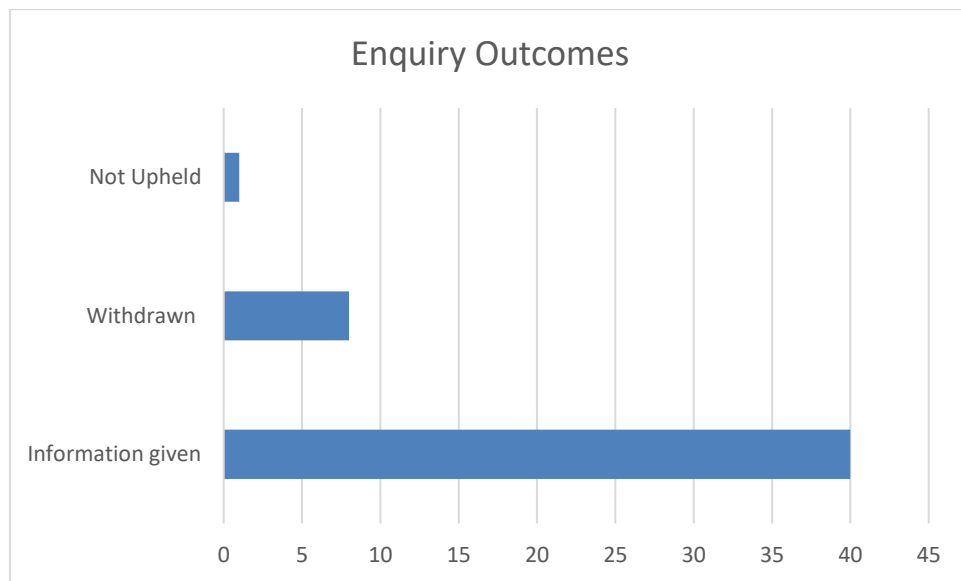


## 2.4 Enquiries

Enquiry outcomes are shown below with 40 being 'information given' to advise of the correct process, 8 were withdrawn and 1 not upheld. Half of the enquiries received were Ofsted enquiries mainly in relation to safeguarding concerns, these enquiries are sent on for the attention of the Assistant Director for Education Services, and some may result in follow-up enquiry with the school or academy.

	Information given	Withdrawn	Not Upheld

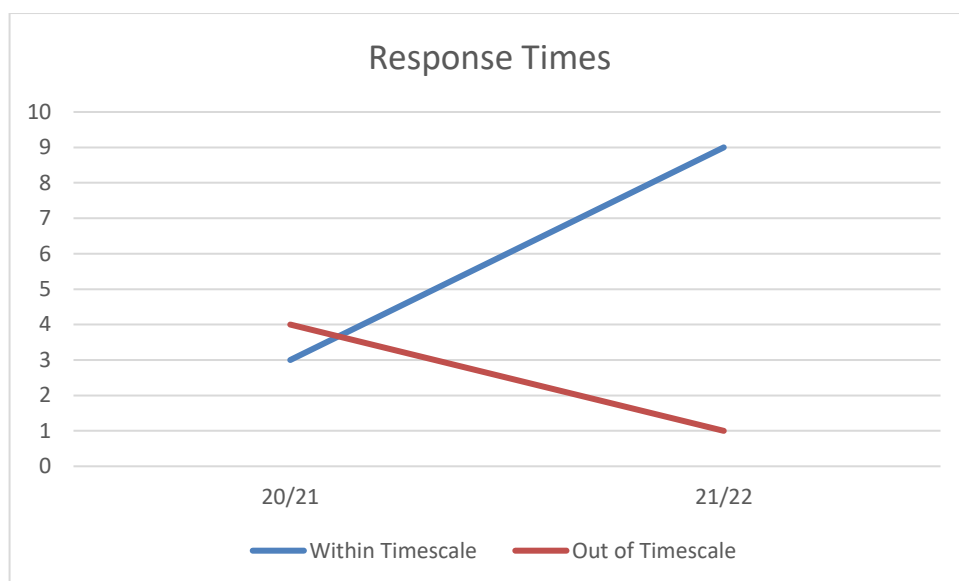
Enquiries	40	8	1
-----------	----	---	---



## 2.5 Response times

Education have improved their response times for Corporate Complaints in 2021/22, with 85% being responded to within timescale compared to 42% in 2020/21. The delayed response times in 2020/21 were likely to be a result of the start of the pandemic, which brought different priorities to the service.

	Within 15 days		Outside of timescale	
	21/22	20/21	21/22	20/21
Corporate Complaints	14	3	12	4



### 3. Members' Correspondence

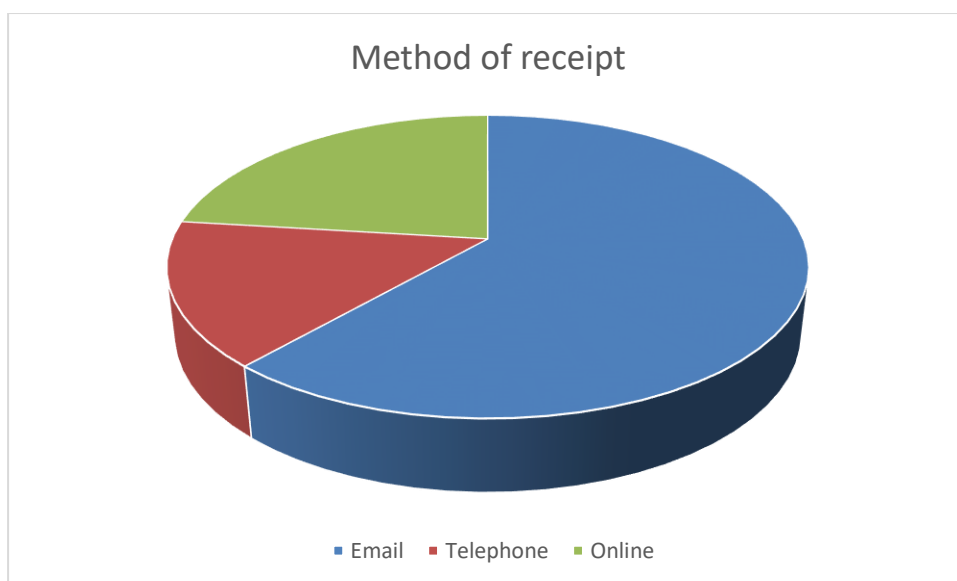
Members correspondence has increased by 69.5% to 39 in 2021/22 compared to 23 in 2020/21 with 97.4% being responded to within timescale.

	21/22	20/21
Members Correspondence (from MP's & Cllrs)	39	23

### 4. How Complaints were received

Email was the preferred method of contact for Corporate Complaints in 2021/22, as it was in 2020/21 however we have seen an encouraging increase of those coming through online.

Email	Telephone	Online
16	4	6



## 5. Compliments

There are only two compliments recorded for Education in 2021/22. One for the Quality Assurance Team : *X has given me a half day of support to help me with my development planning and self evaluation, and it was a superb session - she is extremely knowledgeable, supportive and patient, and was able to answer my (many!) questions.*

One for School Admissions Inclusion Service: *Can I just put on record my sincere thanks for everything you have done in supporting X and us in trying to find a solution to her direction offsite? I do not think you could have worked any harder or been any more compassionate and understanding.*

Education should encourage and remind staff to ensure compliments are sent to the Complaints Team for logging and recording.

## 6. Conclusion

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

The information collated for those complaints that relate to schools/academies/colleges are recorded as enquiries within this report. Although this is only a snapshot of complaints, this does provide information on particular themes arising. In 2021/22 these were predominantly around safeguarding and welfare concerns.

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



## PEOPLE OVERVIEW & SCRUTINY SUB-COMMITTEE – 6 SEPTEMBER 2022

<b>Subject Heading:</b>	Adult Social Care Annual Complaints & Compliments Report
<b>SLT Lead:</b>	Barbara Nicholls
<b>Report Author and contact details:</b>	<i>Ossy Egbaran Tel: 01708 433829</i> ossy.egbaran@havering.gov.uk
<b>Policy context:</b>	An annual report is required as part of the remit of 'The Local Authority Social Services & NHS Complaints (England) Regulations 2009 and Health and Social Care (Community Health and Standards) Act 2003.
<b>Financial summary:</b>	There are no financial implications as this report is for information purposes and is required as part of the statutory complaints regulations

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

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

### SUMMARY

The Adult Social Care Annual Complaints Report 2021-22 is attached as Appendix 1. The report outlines the complaints, enquiries, compliments and Members correspondence received during the period April 2021 – March 2022.

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

### **RECOMMENDATIONS**

1. That Members note the contents of the report with the particular challenges faced by the service during 2021-22 with the added pressures resulting from the coronavirus (COVID-19) pandemic and the continued efforts in resolving and learning from complaints.
2. That Members note the continued use of complaints as a learning tool to identify actions to improve services. The continued monitoring by the Service and the Complaints & Information Team to ensure actions are implemented to evidence the service improvements with a view to reduce similar complaints.
3. That Members note the increase in the positive feedback received by staff, during a particularly difficult period, by way of compliments received and highlighting examples of good practice.

### **REPORT DETAIL**

1. Adult Social Care complaints increased overall in 2021-22 (74) by 22% compared to 2020-21(69). Complaint data did not vary too significantly over the years possibly due to the restrictions in place during the pandemic. During January to March 2022, complaints increased by 38% compared to October to December 2021. This may have been attributed to the government's four steps to move out of lockdown, resulting in greater take up of services and access to care homes.
2. Ombudsman enquiries in 2021-22 (6) were similar to the number received in 2020-21. Of the six enquiries, there were 2 decisions for maladministration (injustice with penalty), 1 not upheld (no maladministration/service failure), 3 closed after initial enquiries (no further action). The 2 decisions returned for maladministration were regarding delays in addressing a safeguarding concern and wrongful termination of residential care arrangements.
3. Financial issues' was the highest reason for complaint during 2021-22 followed by 'Standard of service' which ranked highest in 2020-21. Where financial issues was given as the primary reason for complaint, the majority were in relation to care provided via home care or residential/nursing home, followed by discharge arrangements and provision of equipment. There were increases in the number of complaints across the frontline teams



(Adult Social Care and the Financial Assessment and Benefit Team) in 2021-22, regarding financial decisions and information. These increases also included complaints relating to Occupational Therapy (OT) around equipment/adaptations, as the OT function has been incorporated within the frontline teams. It should be noted that at the beginning of the pandemic and during the lockdown periods, frontline staff were completing the majority of assessments and reviews virtually via video or telephone calls. This was a significant change of practice at that time both for staff and clients and likely impacted upon how information was shared and received.

1. The number of complaints upheld (9) or partially upheld (16) represented 33% of the total complaints (74) responded to in 2021-22, with 31 (41%) not upheld and 17 (22%) complaints withdrawn. Of those upheld, the majority resulted in an apology or information/explanation given with the next highest resulting in a financial adjustment.
2. Learning from complaints continues to play an important part in Adult Social Care. There continues to be ongoing work with staff through team meetings, 1:1 supervisions and case audits around importance of information sharing and accurate record keeping. Recommendations from the Ombudsman has resulted in training of all front line staff in Housing processes with dedicated email launched for referrals and working with Housing on complex cases where there is a threat of homelessness. The start of the development of tighter processes around eligibility and having consistency and clarity, and the clarifying of roles for the administering of Disabled Freedom Passes and the roles of professionals within the Community Learning Disability Team in terms of decision making. This work was paused due to the pandemic, but is due to be restarted with the process finalised by August 2022.
3. Response times for complaints improved in 2021-22, with 54% of complaints responded to within 20 working days, compared to 46% in 2020-21. This is due to adult social care playing its part in the broader council response to the pandemic, in particular support to NHS shielding calls and outreach visits and managing 'business as usual' - safeguarding, urgent/crisis intervention, carer breakdown and emergency respite arrangements
4. In 2021-22, complaints received for those aged 18 to 34 and the 85 year olds and over more than doubled compared to 2020-21; 65-74 increased by 87.5%. It is noted that during 2020-21 there was a much higher number of females to males across the age ranges with the exception of the 18-24 and 65-74 age range.
5. Havering has a high representation for those of 'White British' background which is reflective of the borough population. There were significant increases in complaints from those who identified as 'Black/Black British – African' and 'Black/British – Caribbean' backgrounds which had nil returns in 2020-21. The 'Asian/Asian British-Any other Asian background';

‘Asian/Asian British-Pakistani’; ‘Mixed White & Asian’ and ‘White any other White background’ did not show any significant change.

6. There was a decrease in those recorded of ‘Catholic’ religion. The highest data continued to show that for those who identified as ‘Church of England’. Those ‘not recorded’ fell sharply possibly due to better recording and through better case file audits. There was an 80% increase in the number of those who were married in 2021-22 (17) as against (9) in 2020-21. The recording for sexual orientation still remains low due to possible sensitivities.
7. The preferred method of contact in 2021-22 continued to be by email (48%), with telephone (18%) being the next preferred method, a marginal decrease from 19% in 2020-21. Expenditure on complaints totalled £350 in 2021-22 representing time and trouble payments arising from Ombudsman recommendations.
8. Compliments decreased in 2021-22 to 52 compared to 2020-21 (71). The frontline teams i.e. Adult Community Teams and Havering Access Team received the highest number of compliments. The examples of compliments shows the positive work by Adult Social Care staff during a very difficult period.
9. Member enquiries decreased by 52% in 2021-22 (58) compared to 2020-21 (111) with 81% (47) being responded to within timeframe when compared to 70% in 2020-21.
10. Learning from complaints continues to be a focus within Adult Social Care. The Liquidlogic social care system for complaints went live in April 2021. There is still ongoing work to be done regarding reporting mechanisms.
11. The impact of the pandemic during 2021-22 has not shown the increase in complaints initially anticipated, which is likely to be due in part to the restrictions over the year. The impact may be felt in 2022-23 as restrictions are lifted and families have access to relatives and clients have greater access to services. However, the examples of the compliments received and the work and support that has been put in may lessen the impact.
12. The Local Government Ombudsman ceased to deal with complaints for a period of time during 2020-21 (between late March and the end of June 2020) linked to the pandemic. However, statutory complaints continued throughout the period. Despite this situation, the number of Ombudsman complaints received for both the current and preceding periods of this report remained about the same or normal. Learning from complaints continues to play an important part in service improvements within Adult Social Care.

## IMPLICATIONS AND RISKS

### **Financial implications and risks:**

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

Despite the number of complaints decreasing, costs to the Service of investigation of Ombudsman enquiries, and the added risk that these may increase in the future, needs to be considered.

### **Legal implications and risks:**

There are no apparent legal implications from noting of this report.

### **Human Resources implications and risks:**

There are no HR implications.

### **Equalities implications and risks:**

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

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

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

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

The most recent monitoring information has evidenced that the number of ethnic minorities accessing the complaints process is reflective of the population within Havering and therefore accessing information about our Complaints, Comments

and Compliments Policy and Procedure or the facilities available to make a complaint/compliment is available to these groups. Monitoring data shows that there has been a significant increase in complaints made by service users with physical disabilities and this has been linked to the increase in disabled freedom pass complaints, however this will need continued monitoring.

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

# **ANNUAL REPORT 2021-22**

## **ADULT SOCIAL CARE**

### **Complaints, Comments and Compliments**

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

**Prepared by: Ossy Egbaran  
Complaints & Information Team Manager**

## Contents

Item	Contents	Page No.
1	Executive Summary	3
2	Introduction	4
3	Service Context	5
4	Complaints Received	6
4.1	Ombudsman referrals	6-7
4.2	Total Number of Complaints	7
4.3	- Stages	7
4.4	- Teams	7
4.5	- Reason	8-9
4.6	- Outcome & Learning	9-11
4.7	- Response Times	11
4.8	- Monitoring Information	11-13
5	How Complainants Contacted Us	13
6	Expenditure	14
7	Compliments & Resident Satisfaction	14-15
8	Member Enquiries	16
9	Conclusion	17
10	Complaints Action Plan	18-20

## 1. Executive Summary

Adult Social Care complaints fall within the remit of the 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009' which includes a requirement to publish an annual report. This report covers the period April 2021 to March 2022.

During this period, both nationally and locally, the coronavirus (COVID-19) pandemic has had a profound and unprecedented impact on people receiving and providing social care and it continues to impact upon the service in terms of demand of new clients and the complexity of needs of those clients.

During the pandemic an increased number of individuals were admitted to hospital and consequently discharged to Adult Social Care. Nationally, discharge pathways out of hospital were updated and significantly more individuals were discharged during the period. This had significant impacts on the frontline social care teams and on commissioned providers.

What has been highlighted is the increase in the number of compliments and the type of compliments received during 2021-22, which supported the continued dedication and positive work being done by Adult Social Care staff during a particularly challenging year. There was a slight increase in Complaints during 2021-22, which may have been as many people found themselves unable to see their relatives and friends in care settings due to Covid 19, and also due to the closure of some front line services such as day centres, learning disabilities respite provision, and as face to face contact was restricted. We are now experiencing a return to more 'normal' levels with marginal increases in complaint numbers.

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

Learning from complaints is ongoing for Adult Social Care and with the implementation of complaints on the Adult Social Care system 'Liquidlogic', this should lead to more evidenced based learning leading to service improvements.

## **2. Introduction**

Local authorities have a statutory requirement for complaints, which are set out in The Care Act Statutory Guidance paragraph 3.55: Complaints and the Local Authority Social Services and National Health Service Complaints Regulations 2009. It is a requirement for the local authority Adult Social Care and Children's Services to have a system of receiving representations by, or on behalf of, users of those services. Havering Adult Social Care welcomes all feedback, whether this is a comment on improving the service, complaint on what has gone wrong, or compliment about how well a service or individual has performed.

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

### **Local resolution**

Informal - Where a complaint relates solely to a regulated service, this will be referred to the relevant agency.

Formal - Complaints will be responded to within 20 working days from the date in which points of complaint are agreed and/or relevant consent or further information received. Complaints involving an external agency will be responded to within 25 working days. Complaints requiring an independent investigation will be completed within 25-65 working days. Timescales may vary in agreement with the complainant.

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

Complainants who remain dissatisfied will have the right to progress to the Local Government Ombudsman and are advised of such in responses.

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



### **3. Service Context**

Adult Social Care is responsible for ensuring the most vulnerable adults in our community, and their carers, are provided with support to meet their assessed essential needs. Safeguarding is a priority, with a personal approach adopted with each case. The service ensures residents are provided with practical support to help them live their lives and maintain independence, dignity and control, with individual wellbeing at the heart of every decision.

The service supports and works with individuals across our communities: older adults, adults who have physical disabilities, those with sensory impairment, mental health needs and learning disabilities, as well as carers in the community. In addition, we have direct delivery of services including day opportunities for people with learning disabilities and physical disabilities.

Adult Social Care has responsibility for supporting individuals to remain well and self-sufficient for as long as possible in the community, as well as providing services to those who are vulnerable and have social care needs. For those that do not meet the eligibility criteria, we also have a duty to provide information and advice to all borough residents, and to signpost to services. The service operates a strength bases approach to frontline social care to support clients to make best use of community resources and to carry out assessments based on client assets and strengths (we call this 'Better Living'). We continue to work with and integrate with partners to help people remain well and active for as long as they are able.

The Service is further supported through brokerage of care, management of direct payments and client income and managing client finance arrangements, as well as quality and contract monitoring of provider services.

## 4. Complaints Received

### 4.1 Ombudsman referrals

In 2021-22, there were a total of 6 Ombudsman investigations regarding Adult Social Care decisions. There were 2 decisions for maladministration (injustice with penalty), 1 not upheld (no maladministration/service failure), 3 closed after initial enquiries (no further action).

The 2 decisions returned for maladministration were regarding delays in addressing a safeguarding concern and wrongful termination of residential care arrangements.

	Apr21 – Mar22	Apr20 – Mar21	Apr19 – Mar20
Maladministration (no injustice)			1
Maladministration Injustice with penalty	2	3	3
Maladministration injustice no penalty			
No maladministration after investigation			
Ombudsman discretion			
-Cases under investigation/ongoing			
-Investigation not started/discontinued			
Not upheld no maladministration/service failure	1	1	2
Closed after initial enquiries: no further action	3	1	1
Closed after initial enquiries: out of jurisdiction		1	
Premature/Informal enquiries			3
<b>Total</b>	<b>6</b>	<b>6</b>	<b>10</b>

### 4.2 Total number of complaints

In 2021-22, there were 74 statutory complaints, representing a 7% increase on 2020-21(69). The marginal increase in complaints over the last year could be attributed to the lingering aftermath of the Covid19 pandemic. We anticipate that as commissioned providers have now reopened post lockdown and as care homes open more widely to family members, we may see an increase in complaints in 2022-23 and we are preparing for this.

Total Number of Statutory Complaints		
2021--22	2020-21	2019-20
74	69	74

### 4.3 Stages

There was a marginal increase in formal complaints whilst the informal complaints showed a nominal decrease during 2021-22 from 2020-21. The last quarter showed an increase of 38% i.e. January to March 2022 (29), compared to the previous quarter i.e. October to December (21). The last quarter increase may have been impacted by the governments published roadmap out of lockdown - the four steps - which saw greater take up of services and access to care homes etc.

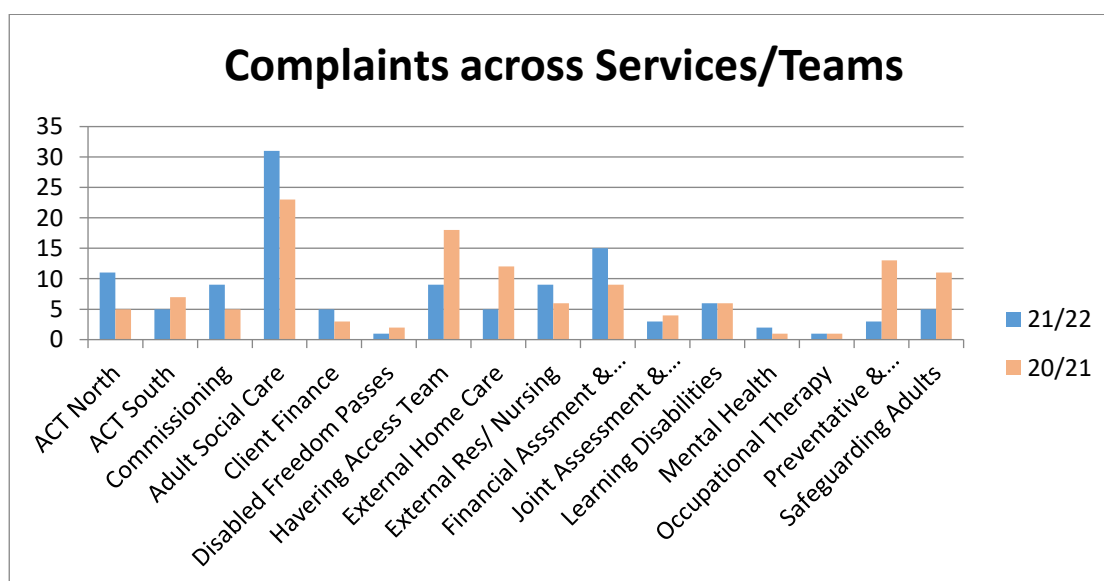
	Enquiry	Formal	Informal	Joint health and adult social care formal complaint
Apr 21 – Mar 22	60	53	21	
Apr 20 – Mar 21	53	47	22	

### 4.4 Service Areas

Frontline teams (Adult Social Care and the Financial Assessment and Benefit Team) showed an increase in the number of complaints during 2021-22 regarding financial decisions, standards of service not met or disputing information given.

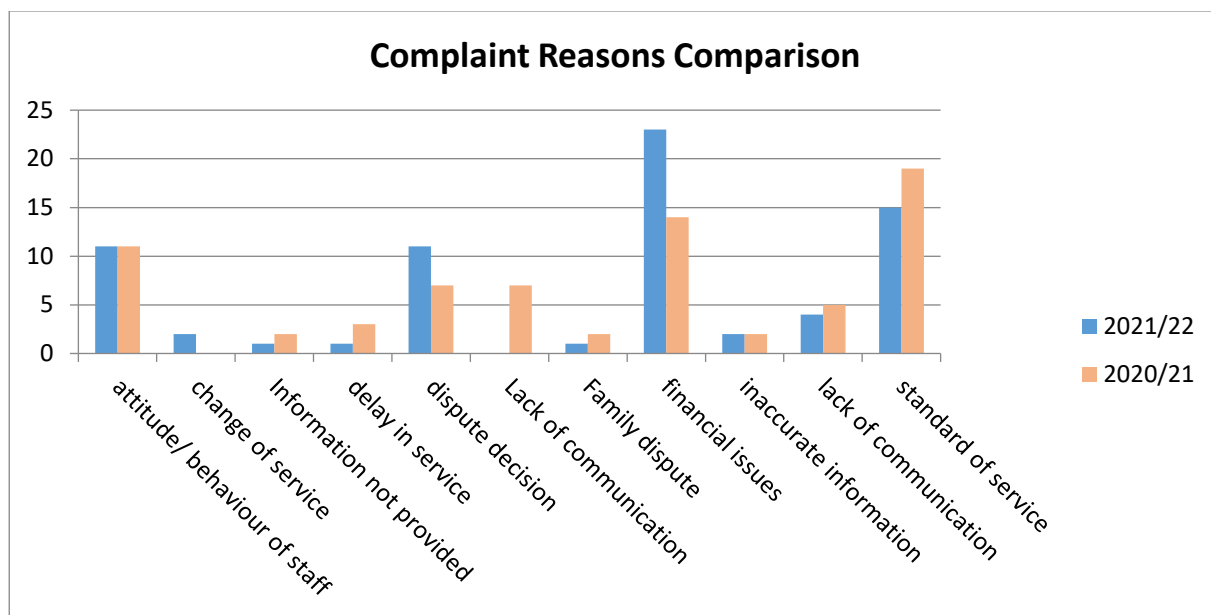
Areas such as 'external home care', 'preventative and assessment' and 'safeguarding adults' saw a decrease in complaints during 2021-22.

It is worth pointing out that the 'Adult Social Care' element referred to in the chart below relates to complaints with a social care component such as 'inadequate care provision', 'attitude of staff' and 'inadequate maintenance', that do not directly sit in any of the listed service teams, hence the broad categorisation.



## 4.5 Reasons

'Financial issues' was the highest reason for complaint during 2021-22 followed by 'Standard of service' which ranked highest in 2020-21. Where financial issues was given as the primary reason for complaint, the majority were in relation to care provided via home care or residential/nursing home, followed by discharge arrangements and provision of equipment. 'Standard of Service' was the second highest during 2021-22, and remains mainly around disputes on charges and invoices. 'Attitude/Behaviour of Staff' was the third highest with the majority of these referring to being unhappy with home carers and care provision arranged through social workers.



## 4.6 Outcomes & Learning

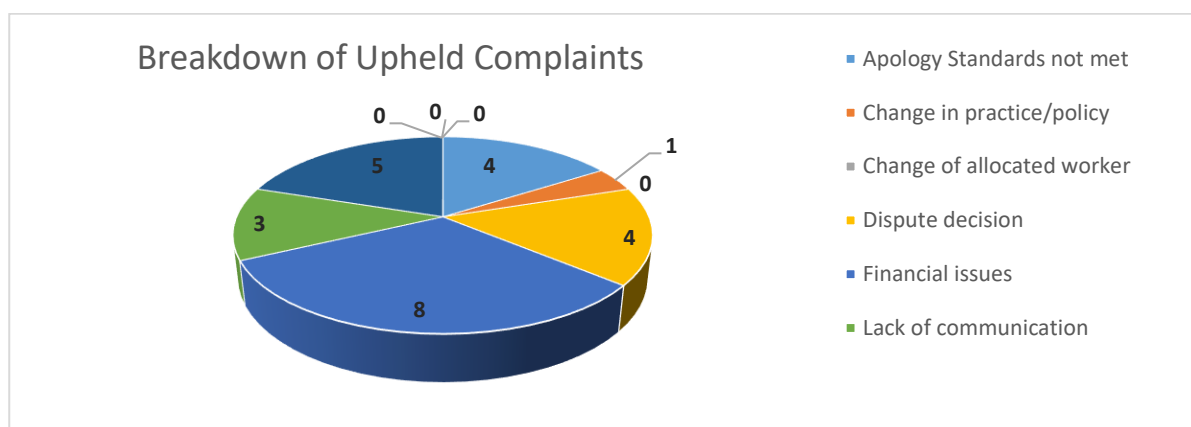
Of the 74 complaints which recorded an outcome, 33% of the complaints were partially upheld or upheld, 41% were not upheld and 22% were withdrawn. Complaints partially upheld increased slightly in 2021-22 compared to 2020-21 although there was a lower number of complaints in 2020-21.

	Upheld	Partially Upheld	Not Upheld	Complaint Withdrawn	Referred to Alternative Service – outcome unknown	Total for year
21/22	9	16	31	17	1	74
20/21	9	14	25	18	0	66

For complaints that were partially upheld or upheld, 40% resulted in an apology being given with information or an explanation required, 32% required a financial adjustment. The remaining 28% in addition to either an apology being given or information/explanation provided, resulted in either a review of practice or provision, records amended or training identified.

An increase in the number of Occupational Therapy requests for equipment, to help support people at home, also had its challenges, with a shortage of Occupational Therapists (OT) not only locally, but also nationally. These shortages were due largely as a result of delays in obtaining vital equipment from suppliers in the European Union. In order to meet this challenge in future and the difficulties of recruiting, Adult Social Care developed a four year apprenticeship programme for Occupational Therapists, utilising existing resources to help ease the pressure in future years. It is hoped that there will be better bilateral agreements between the UK and the EU to assuage some of these supply challenges.

The development of an apprenticeship for Social Workers is also being explored.



### 4.6.1 Learning from Complaints

During 2021-22, COVID-19 had ushered in unprecedented times with the priority and focus for Adult Social Care being on vulnerable residents within Havering and ensuring appropriate support was provided. With the complaint outcomes it highlighted that there

was still a need for workers to ensure that service users and family members received appropriate, relevant and accurate information. This resulted in social workers being reminded across the teams as part of team meetings, 1:1 supervision about the importance of recording decisions and when information is provided and to whom. This is also reinforced with case file audits that are conducted twice a year looking at random cases across services.

Many of the financial adjustments were in relation to homecare or respite charges. Home care agencies and residential/nursing homes also need to take on board the importance of their own record keeping. This is being progressed through communications from the Joint Commissioning Unit.

#### **4.6.2 Learning from the Ombudsman**

The Local Government Ombudsman ceased to deal with complaints for a period of time during 2020-21 (between late March and the end of June 2020) linked to the pandemic. Despite this situation, the number of Ombudsman complaints received for both the current and preceding periods of this report has remained about the same or normal

It is important to note that where Adult Social Care commission a service, the local authority will be deemed responsible for those services and the actions of the organisation. Commissioning, as part of their monitoring and quality visits inspect records and complaints of providers and will make recommendations for improvements required. Quality visits were restricted significantly during the pandemic. Through the roadmap out of lockdown, these have now been reinstated and are progressing. This is also reinforced through the Quality and Safeguarding Board meetings that take place, which covers safeguarding concerns, quality concerns, and complaints. Complaints representation at these meetings was challenging due to capacity constraints, so this was addressed with the stabilising of the team during 2020-21.

As a result of an Ombudsman's decision received in 2021-22, there were areas which required improvement in relation to being clear about how the Council brokered residential care arrangements; ensuring that it was more efficient in the issuing of correct invoices and avoiding delays in its complaint response. Another decision highlighted the need to avoid delays in conducting a safeguarding enquiry. Work began in December 2019 to look at the learning arising from this particular complaint with emphasis on ensuring that internal processes are fit for purpose and ensure that decisions are consistent and clearly explained. The complaint highlighted that there was a need to tighten up our guidance and be more specific about what we meant by eligibility, ordinary residence and inclusion on the learning disability team register. It transpired that eligibility meant different things to different departments and this had led to confusion and a poor experience for the complainant as terminology used was misleading. A flow chart was subsequently developed that sought to clarify the specific responsibilities of both Business Support Officer's administering Disabled Freedom Pass applications and the role of professionals within the Community Learning Disability team (CLDT) in terms of decision making. This work was paused due to the pandemic and is due to be restarted with the process finalised by August 2022.

Although there is already partnership working between Adult Social Care and Housing, it was highlighted that a clearer process was needed when dealing with individuals who are threatened with homelessness where it impacts on an individual with complex needs. Robust procedures should be put in place for sharing of information between Adult Social Care and Housing for those with complex needs. Training was provided by Housing to all Adult Social Care front line staff regarding housing process and as part of this Housing are to liaise with Adult Social Care on complex placements and ways to work with them. A dedicated email was re-launched for referrals in July 2021.

The link between Housing and Adult Social Care is emphasised throughout the Policy paper published in December 2021, People at the Heart of Care: adult social care reform, which quotes “making every decision about care a decision about housing.” There is a clear emphasis on further joining up health and social care with housing, to promote an individual’s overall wellbeing.

## 4.7 Response times

Response times improved for cases responded to within 20 working days in 2021-22, (54%), against 46% in 2020-21 whilst responses over 20 working days fell to 45% in 2021-22, as against 53% in 2020-21. The increased performance was a testament of the hard work of staff and the strategies put into place, particularly with regards to the implementation of new monitoring systems to record and monitor cases. Response times were impacted by Covid-19 and the impact on the service during, and as we come out of the pandemic, we endeavour to improve response times as we move forward.

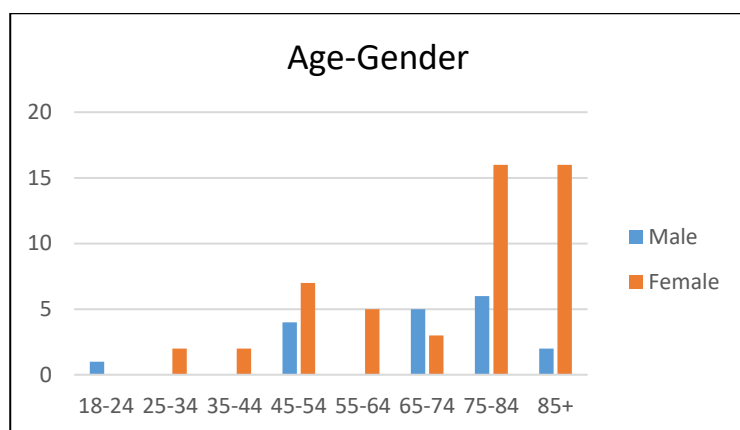
	Within 10 days	%	11-20 days	%	20+ days	%	25+ days	%	Total
Informal/ Formal	11	15	28	38	13	18	20	27	72
Adult Social Care	11	16	27	41	13	20	14	21	65
External Providers			1	14	6	85			7

## 4.8 Monitoring information

### 4.8.1 Age

During 2021-22 those aged 18 to 34 and the 85 year olds and over more than doubled compared to 2020-21; 65-74 increased by 87.5%. It is noted that during 2020-21 there was a much higher number of females to males across the age ranges with the exception of the 18-24 and 65-74 age range.

	18-24	25-34	35-44	45-54	55-64	65-74	75-84	85+
21/22	4	7	2	12	7	15	25	37
20/21	1	2	2	11	5	8	22	18



### 4.8.2 Disability

There have been increases across most of the disability categories with the exception of those requiring 'Social' and 'Visual impairment' including those who require support for 'Memory and Cognition' where there was a decrease of 31% in 2021-22 from the number recorded in 2020-21

	Access & Mobility	Hearing impairment	Learning Disability	Personal care support	Memory and Cognition	Mental Health	Social Support	Visual impairment	Not recorded
21/22	19		7	56	13	7			5
20/21	7	1	4	29	19		3	2	4

### 4.8.2 Ethnicity

As reflected in the population of Havering, 'White British' is the highest ethnicity and there was a 78% representation in this category for 2021-22 as against 75% recorded for 2020-21. There were no significant changes in the data collated for the other groups such as Asian/Asian British – Any other Asian background', 'Asian/Asian British – Pakistani' and 'Mixed White & Asian'. However, the data recorded for 'Black/Black British – African' and 'Black/Black British – Caribbean' groups witnessed marginal increases in 2021-22. Whilst underrepresented groups have not changed over the years, we are closely monitoring our resident involvement process in view of Havering's changing demographics.

	Asian / Asian British - Bangladeshi	Asian / Asian British - Indian	Asian Pakistan	Black/Black British - African	Mixed - White & Asian	Black/Black British - Caribbean	White Any other White background	White - British	Not declared
21/22	1	3	2	5	1	3		93	6
20/21	3	1	1		1		2	52	9

### 4.8.3 Religion

Those who are 'Catholic' decreased by more than half during 2021-22, whereas those who identified as Christians or Church of England faiths saw significant increases in 2021-22 as



against 2020-21. It is noted that those 'not recorded' fell by more than 50% in 2021-22. This could be attributed to a greater emphasis on case file auditing.

	Catholic	Christian	Church of England	Muslim	No Religion	Not recorded	Not stated	Other religion
21/22	1	10	23	2	3	13	13	1
20/21	4	2	17	1	3	31	10	

## Marital Status

In 2021-22, the data for this group was either higher or remained the same when compared to 2020-21. The group returned as 'Married' was 80% higher in 2021-22 than the figure recorded in 2020-21.

	Married	Not recorded	Other	Single	Unknown	Widowed
21/22	17	38	2	12	10	8
20/21	9	38	1	9	2	8

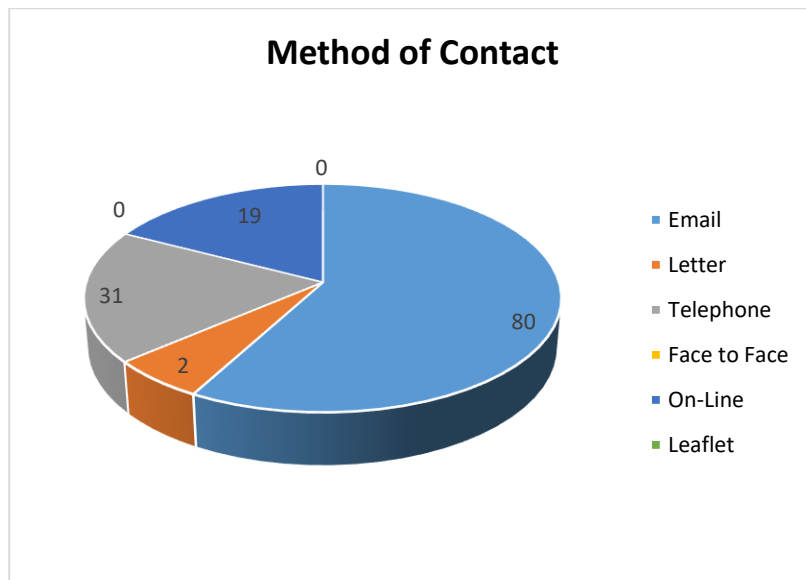
### 4.8.4 Sexual Orientation

This continues to be a category in which recording of this data could be seen as very sensitive and personal to an individual and is reflected in the high numbers that are 'not known'.

	Heterosexual	Not Known	Prefer not to say
21/22	5	72	
20/21	4	12	

## 5 How we were contacted

'Email' was the highest method of contact during 2021-22 at 48%, with telephone being the second highest method of contact at 18% representing a marginal decrease from 2020-21 (19%). Those choosing to complain using the online service decreased in 2021-22 and represented 11%. During 2020-21 an online form for Social Care complaints went live on the Havering website. Whilst acknowledging the multiple channels through which residents are able to register their complaints, we recognise the need to promote the online service as a preferred option for residents as the template provides a structured format that benefits all parties i.e. the complainant and service provider.



## 6 Expenditure

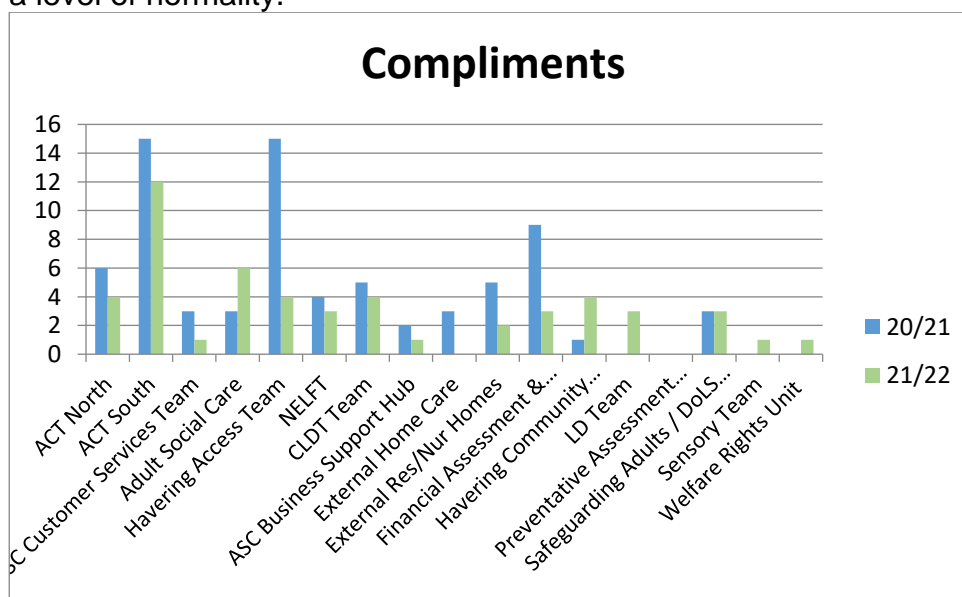
Expenditure has decreased in 2021-22 and represents time and trouble payments relating to two Ombudsman decisions in 2020-21.

	Publicity £	Payment £	Total £
Apr 2021- Mar 2022		350.00	350.00
Apr 2020- Mar 2021		850.00	850.00

## 7. Compliments and resident satisfaction

### 7.1 Compliments

The number of compliments received during 2021-22 reduced to 52 from 71 in 2020-21. A plausible reason for this could be attributed to the correlating increase in complaints arising from the covid19 pandemic. There is every indication that there will be an increase in the satisfaction levels from service users in 2022-23 as the UK is now seeing a return to a level of normality.



Some of the outstanding work of teams/staff are shown by a few examples given below:

A relative is thankful for the care given to her ailing mother - *'Your team clearly updated me on every stage of the assessment and were very person centred and thorough in their investigations. I had concerns about my mother's residential care and they were able to investigate the concerns taking into account my mother's care needs and daily routine.....They are truly wonderful people who have made such a difference to my mother's life....I am now getting daily updates from the care home. Thank you – Social Services (adults and Children)*

An expression of gratitude from service user – *'I found ...very good and very pleasant at explaining everything that she had to help me. I could not fault anything she said to me. Many thanks'. – Occupational Therapy Team*

A grateful daughter on care given to her father - *'I'd just like to say a Massive THANK YOU. I truly mean that...Dad just phoned me, he sounded so positive, so positive it made me cry..... You'll never know the weight off my shoulders thanks to your intervention' – Safeguarding*

Relative on the care package for parents - *.....I just really wanted to thank you for intervening speedily and sorting out the issue. Without you Jacky would not have budged.....You have been extremely helpful to me in trying to in turn help my Mum and Dad. I want you to know how much I appreciate your help – Carehome Placement Brokerage.*

Relative regarding welfare Check - *Thank you for coming to visit my dad recently he doesn't often respond well to meeting new people especially in his home however he really enjoyed your company. You went out of your way to build a rapport with my dad and he was very open to the support you offered as a result. ...Thanks again, we really appreciate it. – Adult Care Team (North)*

A relative in appreciation of the care provided for her terminally ill mother - *Your team clearly updated me on every stage of the assessment and were very person centred and thorough in their investigations.....They are truly wonderful people who have made such a difference to my mother's life- she is putting on weight, getting the liquid she needs and her position regularly changed. I am now getting daily updates from the care home. – Adult Care Team (South)*

## 7.2 Adult Social Care Outcomes Framework – Survey 2021/22

Due to the pandemic, the service user's survey was voluntary in 2020-21 and was consequently not undertaken in that year. The chart below shows comparative data against 2019-20. In line with the statutory guidance, it should be noted that the 'Quality of Life' outturn is not calculated as a percentage (the others all are), this is a weighted combination of a number of questions answered in the survey to come up with an outturn. The data shows a drop in virtually all of the categories when compared to 2019-20. However this comparison is more than likely skewed as we do not have comparative data for the preceding year due to the pandemic.

	21/22	19/20
% Service User who are satisfied with their quality of life	18.9	19.1
% Service User who have control over daily lives	74.2%	74.9%
% Service User who feel they have as much social contact as they like	38%	48.3%
% Service User overall satisfaction	61.8%	65.4%
% Service Users who find it easy to find information about services	65.6%	72.4%
% Service Users who feel safe	68.8%	71.7%
% Service Users who think services make them feel safe	85.8%	86.8%

## 8. Members Enquiries

The number of MP/Councillor enquiries received in 2021-22 was 58, a 52% decrease from 2020-21 (111), with 81% (47) being responded to within timeframe in 2021-22, compared to 70% in 2020-21. The majority of the enquiries centred on welfare concerns (12%), requests for equipment and facilities (18%) cost of care packages (5%) housing/social care related issues (12%) and quality of care (3%)

## 9. Conclusion

Adult Social Care continue to embrace complaints as a learning tool, and the senior management team continue to ensure that improvements are embedded in the service.

Learning from complaints will continue with improved monitoring on actions arising from complaints to improve service provision. Adult Social Care complaints went live on the Liquidlogic system at the beginning of April 2021. It is anticipated, as this matures, that this will lead to better monitoring to provide evidence based learning, through the action plan incorporated within Liquidlogic to be completed by managers and the exploration of reporting mechanisms available within Liquidlogic for this.

Complaint levels have increased marginally as we come out of the pandemic. Response times are improving, and we anticipate that this will continue to be the case as new reporting mechanisms are put in place. The impact of the pandemic is still being felt by staff, with the workforce being under extreme demand pressure.

Taking proactive measures to address the housing issues impacting on residents with complex needs may further address multiple objectives of enhancing the wellbeing of affected residents as well as reducing the number of member complaints in this regard.

## APPENDIX 1

**9. Complaints Action Plan**

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
Information about the financial assessment process and potential client contribution has not always been communicated clearly or consistently.	<ul style="list-style-type: none"> <li>Communications needed to be improved and made more consistent in all arenas, especially when people are coming out of hospital.</li> <li>Material covering the financial assessment process must be regularly reviewed and updated.</li> </ul>	<ul style="list-style-type: none"> <li>Review of all financial assessment information including stationery, leaflets, and policy.</li> <li>Ensure information available on the website is up to date.</li> <li>The Financial Assessment and Benefits Team will continue to promote the online financial assessment tool</li> <li>Streamline internal and external communication material.</li> <li>All material and policy to be updated in advance of ASC Charging Reform.</li> </ul>	<ul style="list-style-type: none"> <li>Business Management</li> </ul> HoS Caroline May	Material to be updated by December 2022.	Once material is updated it will be reviewed with the different teams involved in the financial assessment process (to include social workers and the hospital team). The hospital leaflet is to be reviewed in light of ASC Charging reform. All documents will be reviewed annually, unless legislation changes dictate that this should be done earlier.
Lack of accessible information about adult social care generally leading to complaints about level of service / incorrect information.	<ul style="list-style-type: none"> <li>The need to review ASC information to ensure it is available in the right places and is accessible, and is provided to people in timely fashion.</li> </ul>	<ul style="list-style-type: none"> <li>The locality model and dissemination of information is under review</li> <li>New arrangements at the adult social care 'front door' were implemented in February 2020 (Better Living), with strengthened information and advice provision at the first point of contact. A renewed focus to begin</li> </ul>	<ul style="list-style-type: none"> <li>Integrated Services</li> <li>Joint Commissioning Unit</li> <li>Business Management</li> </ul> HoS Annette Kinsella AD John Green HoS Caroline May	Better Living was first implemented February 2018.  Information and Advice plan – by December 2022	Primary Care Networks now established, with health and social care integrated care systems in place from July 2022, presenting opportunity to review and produce joint information with health.

## ADULT SOCIAL CARE ANNUAL REPORT 2021-22

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
		<p>in 2021/22, due to COVID-19, forcing different ways of working throughout 2020/21.</p> <ul style="list-style-type: none"> <li>• ASC Information and Advice Working Group to be used to review information available, carry out mystery shopping exercises, and information and advice plan being reviewed.</li> <li>• Development of Community Hubs (first one launched in June 2021) in and the website (<a href="https://www.haveringcommunityhub.com/">https://www.haveringcommunityhub.com/</a>) and expansion of local area coordinators.</li> </ul>			

## ADULT SOCIAL CARE ANNUAL REPORT 2021-22

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
The percentage of complaints responded to within timescales still needs to improve. It is noted that performance deteriorated significantly due to the pandemic. This needs to be rectified over the coming year.	<ul style="list-style-type: none"> <li>Response times require improvement</li> </ul>	<ul style="list-style-type: none"> <li>Complaints involving other NHS agencies – adult social care element to be responded to within 20 days. It is noted that NHS timescales for response are longer than 20 days.</li> <li>Commissioning are to support the Complaints Team in getting information from external social care providers back within timescale</li> <li>Raise the profile of Complaints and the learning opportunities presented by increased attendance at Team Meetings and presence in various forums, (i.e. staff events).</li> </ul>	<ul style="list-style-type: none"> <li>Integrated Services HoS Annette Kinsella</li> <li>Joint Commissioning Unit AD John Green</li> <li>Business Management HoS Caroline May</li> <li>Complaints and Information Ossy Egbaran</li> </ul>	By 31 March 2022	<p>There will be a quarterly report to the senior management teams on complaints performance.</p> <p>Proposed visits to Provider agencies, and/or attendance at provider forums, to discuss Complaints.</p> <p>Attendance at team meetings and specific sessions on Complaints, as well as Subject Access Requests and Freedom of Information requests.</p>
Quality and level of service received from commissioned providers continue to be affected by recruitment and retention of front line care and support staff	<ul style="list-style-type: none"> <li>Quality must be continually reviewed and proactively managed.</li> </ul>	<ul style="list-style-type: none"> <li>Proactive work with providers via Quality and Safeguarding Team work and provider forums to identify issues and support resolution, including supporting sustainability of market.</li> <li>Attendance at Provider Forums.</li> </ul>	<ul style="list-style-type: none"> <li>Joint Commissioning Unit AD John Green</li> </ul>	Provider forum attendance – throughout 2022/23	<p>Quality Team have restarted in person visits to care providers and are addressing issues in consultation and collaboration with CQC, commissioning, safeguarding and operational services.</p> <p>Provider forums were run virtually through the pandemic and this will continue.</p>
Changes in provision need to identify where there are financial implications and that	<ul style="list-style-type: none"> <li>That financial implications must be clear for service users and their financial representatives where there is a change of service</li> </ul>	<ul style="list-style-type: none"> <li>Assessments needs to be completed with individual budget information being provided to the individual</li> <li>Financial assessments need to be undertaken</li> </ul>	<ul style="list-style-type: none"> <li>Integrated Services HoS Annette Kinsella</li> <li>Business Management HoS Caroline May</li> </ul>	Process reviewed by December 2022	Working with health on ensuring the correct financial information is given to service users and families as part of review process and continues to be given/shared in hospital settings. Head of



## ADULT SOCIAL CARE ANNUAL REPORT 2021-22

Issues Identified	Lessons Learnt	Action to be taken	Department	Timescale	Review
these are communicated		following a change in provision	<ul style="list-style-type: none"> <li>Financial Assessments and Benefits Salim Ramah</li> </ul>		Integrated Services to review process periodically.
Poor Communication	<ul style="list-style-type: none"> <li>Communication between teams i.e. financial and care management must be robust so that financial implications are actioned in timely manner.</li> </ul>	<ul style="list-style-type: none"> <li>Service management to pick up with teams and raise in team meetings, 121s etc.</li> <li>Process review to be undertaken.</li> </ul>	<ul style="list-style-type: none"> <li>Integrated Services HoS Annette Kinsella</li> <li>Business Management HoS Caroline May</li> <li>Financial Assessments and Benefits Salim Ramah</li> </ul>	Process review by December 2022	This is continuously being discussed and staff reminded through 1:1s, team meetings and team briefing sessions.

This page is intentionally left blank

# People Overview & Scrutiny Sub- Committee

6 September 2022

## REPORT

**Subject Heading:**

Police Extraction and Response Times

**SLT Lead:**

Sandy Hamberger, Assistant Director of  
Policy, Performance and Community

**Report Author and contact details:**

Anthony Clements Principal Democratic  
Services Officer  
anthony.clements@onesource.co.uk

**Policy context:**

The report deals with information  
previously requested by the Sub-  
Committee.

**Financial summary:**

There is no significant financial impact of  
the report itself.

**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

The attached papers give information on Police extraction and response times for Havering.

## RECOMMENDATION

**That the Board scrutinises the information presented and decides what further action it wishes to take.**

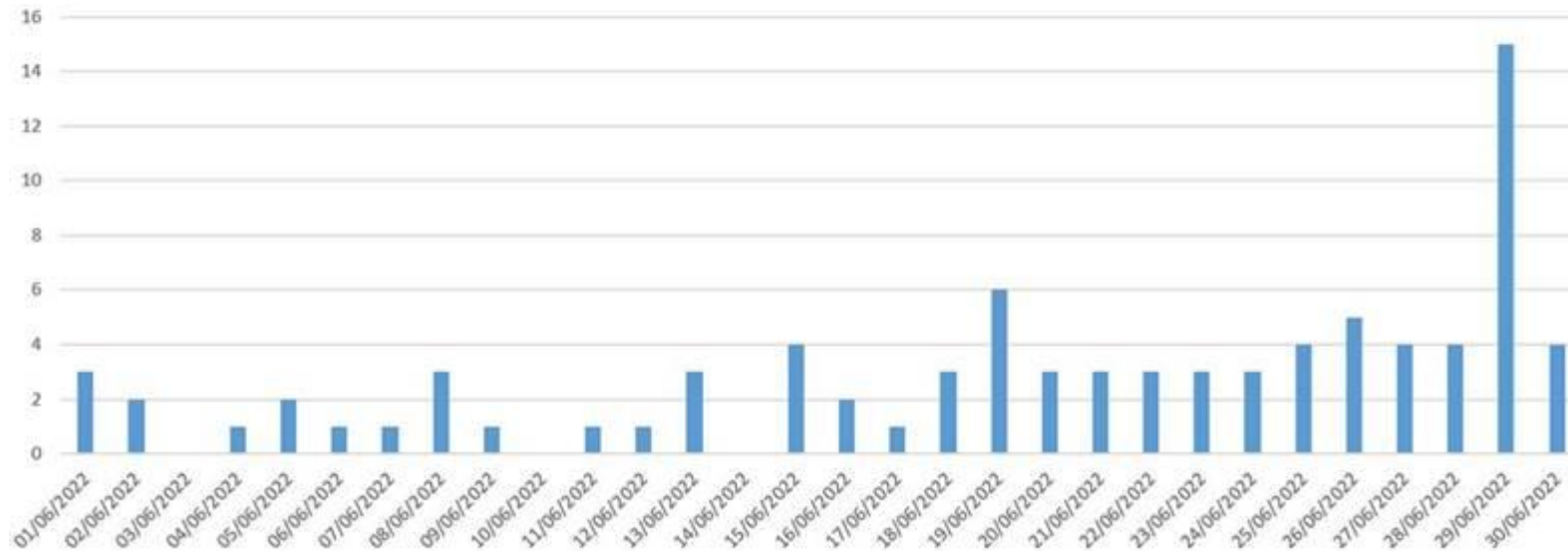
## REPORT DETAIL

Members of the Sub-Committee have previously requested information on Police response times in Havering and the number of occasions on which local officers are extracted to police events in central London or elsewhere. This information is attached and the Sub-Committee is invited to scrutinise this and agree any appropriate recommendations or follow-up action.

## People Overview and Scrutiny Sub-Committee

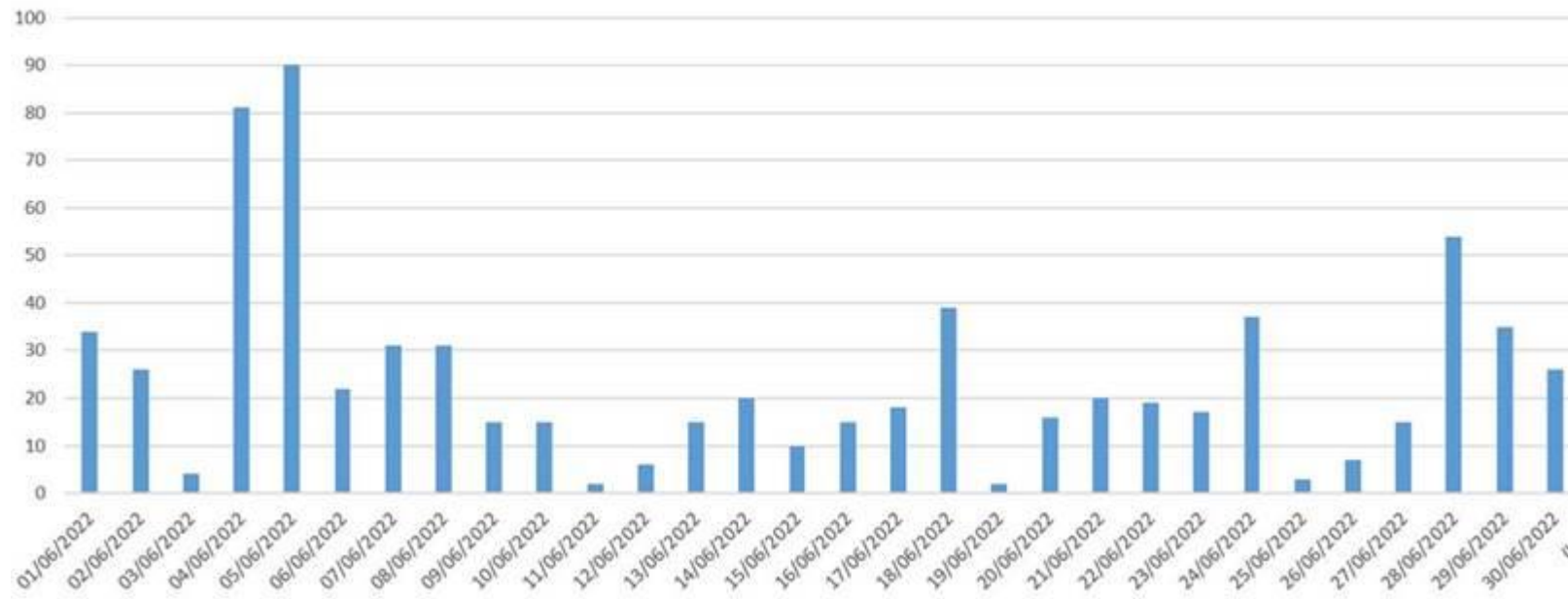
The below chart shows how many officers have been abstracted from Havering SNT during the month of June. This is where ERPT resources have fallen below minimum strength, due to central London Aid or some other reason, and the replacements have come from Havering SNT.

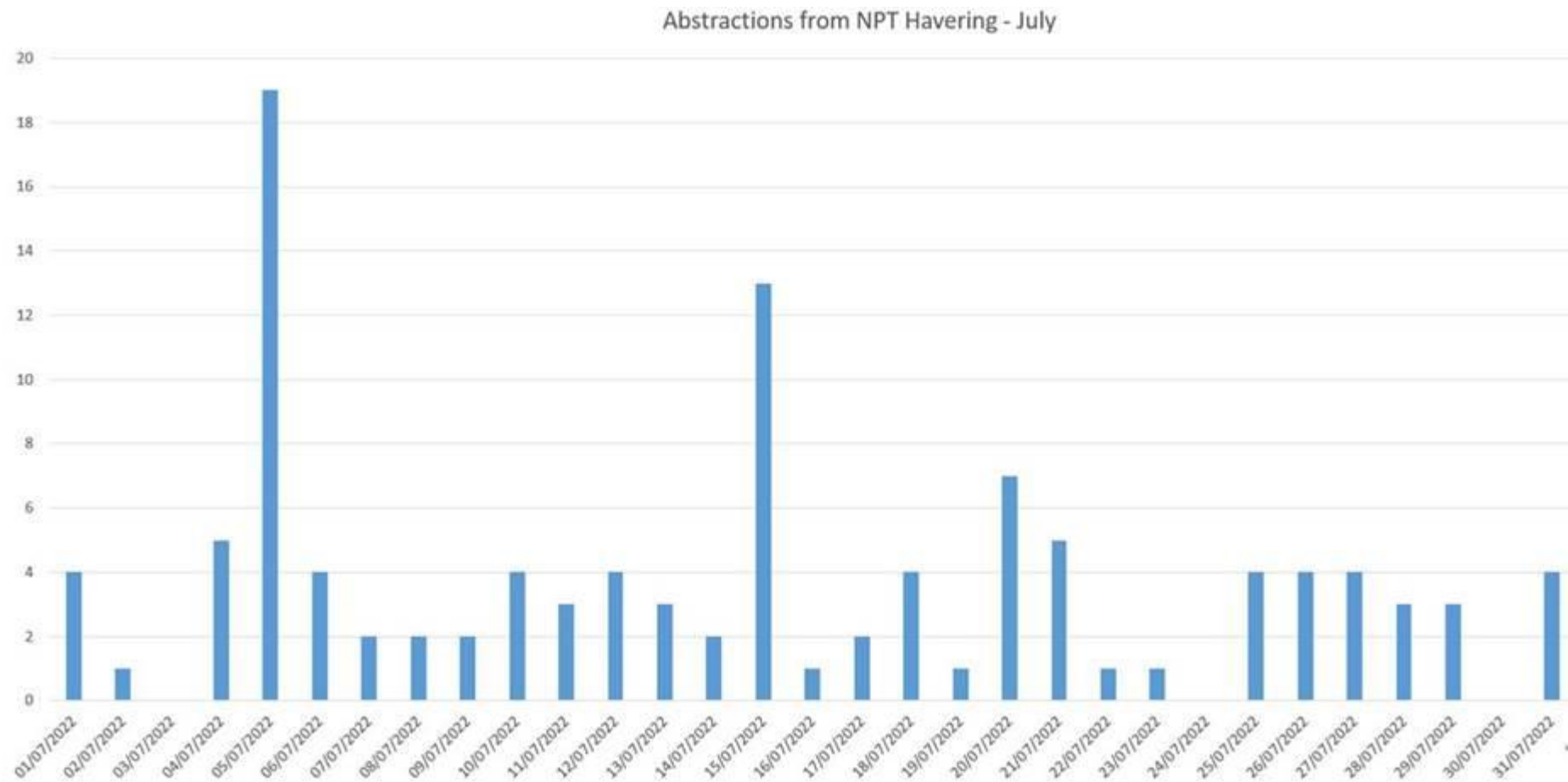
Abstractions from NPT Havering - June



The following data shows ERPT abstractions for the same period. This is BCU-wide. It cannot be meaningfully broken down to only Havering, as we resource the whole of the team then we expect Duty Officers to flex on the day between our three boroughs. The correlation between ERPT abstraction and NPT abstraction is not always apparent. This is because ERPT abstractions will be usually backfilled from other departments or other ERPTs before we get to NPT.

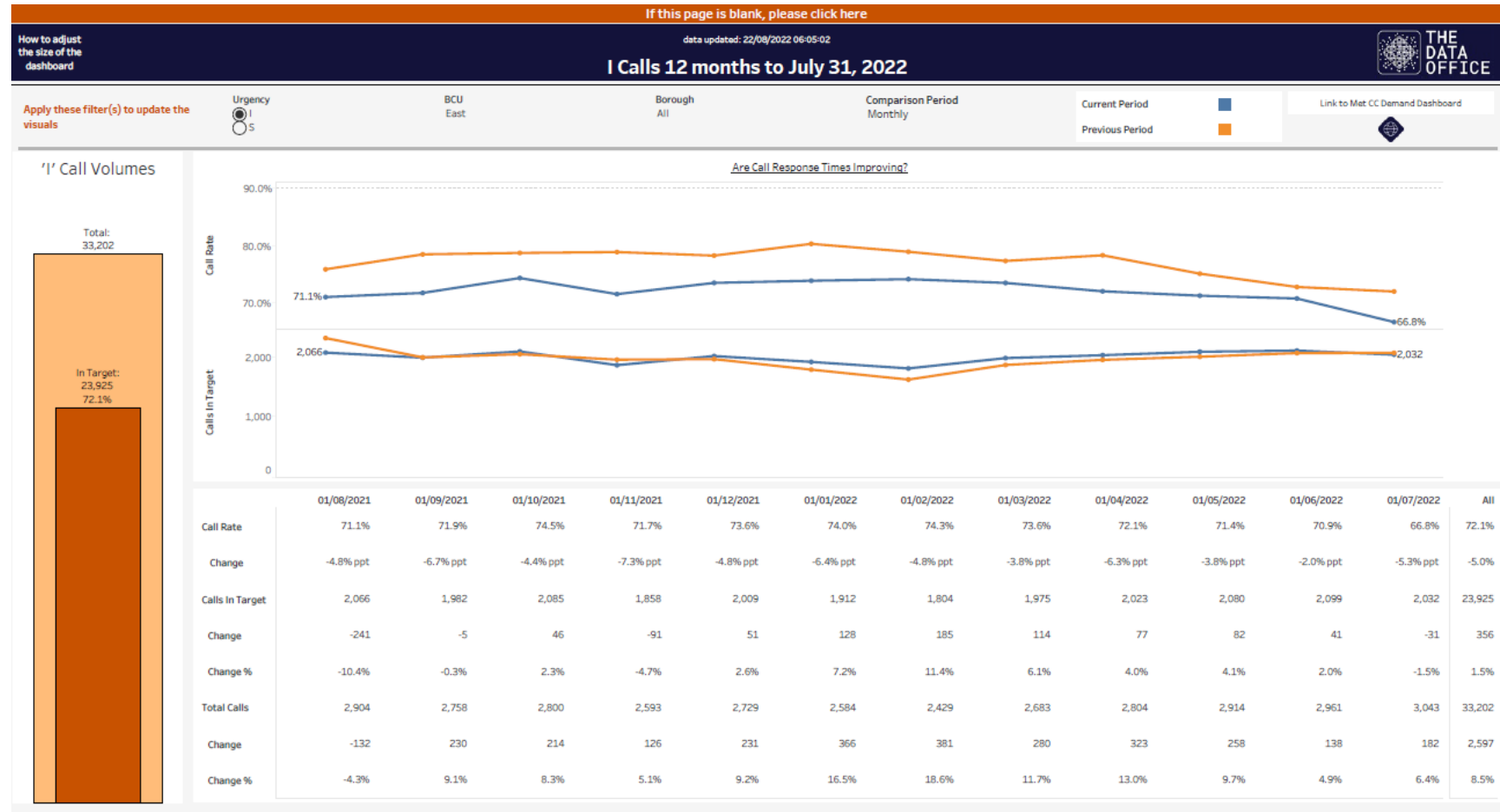
ERPT Abstractions BCU Wide - June





I CALL DATA

# EA BCU I Calls - 12 Months





## EA BCU I Calls - 12 Months Havering Monthly

